



# Compliance Monitoring Report

Settlement Agreement Between the United States and the South  
Carolina Department of Juvenile Justice

October 2022

# Monitoring Team

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# Introduction

On April 13, 2022, the United States Department of Justice (DOJ) and the South Carolina Department of Juvenile Justice (DJJ) entered into a settlement agreement<sup>1</sup> to resolve all issues associated with an investigation at Broad River Road Complex (BRRC or Facility)<sup>2</sup> to assess whether DJJ failed to protect youth from physical abuse by other youth and by staff and whether DJJ subjected youth to prolonged solitary confinement. The agreement aims to “remedy the alleged constitutional violations identified by DOJ” and to ensure that “the conditions in the Facility support the rights of youth confined there, encourage rehabilitation, and improve the likelihood that youth will succeed upon release.”

As part of the settlement agreement, DJJ agreed to hire a subject matter expert (SME)<sup>3</sup> to provide technical assistance to DJJ. Susan Burke,<sup>4</sup> the SME, was hired in July 2022. Joining Ms. Burke on the monitoring team are Valerie Boykin<sup>5</sup> and Mike Butkovich.<sup>6</sup> The SME must also submit a biannual report assessing the department’s compliance with the agreement and offer recommendations, if any, to facilitate compliance. This report utilizes “monitoring team” to refer to the three individuals listed herein.

**THIS FIRST MONITORING REPORT  
ASSESSES COMPLIANCE AS OF  
OCTOBER 3, 2022.**

**ANY PROGRESS OR ACTIVITIES SINCE  
THIS DATE WILL BE NOTED IN THE  
NEXT MONITORING REPORT.**

The settlement agreement terms are listed verbatim in the report. The numbering corresponds to the agreement’s paragraph numbers. When a target completion timeframe is described in the agreement, the month and year are shown in brackets for the reader’s ease.

This first monitoring report assesses compliance as of October 3, 2022. The next monitoring report will note any progress or activities since this date. This report contains various gaps due to the limited time the SME and monitoring team have had to assess and evaluate compliance. If an item is not rated, the monitoring team does not have sufficient information to rate it. In these instances, monitoring will be conducted as described. If any progress was made on a requirement, it is noted.

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<sup>1</sup> The agreement can be found at <https://www.justice.gov/opa/press-release/file/1494671/download>.

<sup>2</sup> BRRC is a 270-bed youth correctional facility located in Columbia, South Carolina. The facility is currently operating 136 beds.

<sup>3</sup> Defined in the agreement as “an individual with expertise in juvenile corrections.”

<sup>4</sup> Ms. Burke was the director of the Utah Division of Juvenile Justice Services from 2011 to 2018. She retired from the state of Utah after having served in various positions, including Asst. Juvenile Court Administrator and Juvenile Justice Specialist.

<sup>5</sup> Ms. Boykin retired from the Virginia Department of Juvenile Justice in February 2022 after serving as the director from 2019 to 2022. She also served in various administrative positions for the Norfolk Court Services Unit and was the Deputy Administrator for the Washington, DC, Youth Services Administration.

<sup>6</sup> Mr. Butkovich retired in May 2022 from the Utah Division of Juvenile Justice Services. He spent 32 years with the division in various positions, including youth corrections counselor, case manager, supervisor, and program director for the Office of Secure Care.

For this report, the team requested and reviewed current DJJ policies and forms documents covering eight categories on nearly 90 topics, completed a facility site visit, conducted in-person and virtual interviews, attended various meetings, reviewed and responded to emails, and analyzed DJJ-provided documents. Due to the limited time available to the monitoring team to complete this first report, the team did not examine foundation documents such as incident reports, isolation records, unit logs, investigation reports, videos, and other data and materials. As a result, the team applied a “not rated” label to most provisions. To be clear, DJJ has been cooperative in providing the monitoring team with information and access proactively and when requested. DJJ has also been transparent in describing areas for improvement and is open to hearing recommendations from the monitoring team. These efforts have helped facilitate trust and an open dialogue among the parties.

# Compliance Ratings

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## Ratings

**Substantial Compliance** means that the department has achieved compliance with the material components of the provision. Substantial compliance also means that the department has met the goals of the provision. Substantial Compliance indicates that there are approved relevant policies and procedures which, when implemented, are sufficient to achieve compliance; trained staff responsible for implementation; staff and resources to implement the required reform; and consistent implementation during most of the monitoring period. Non-compliance with mere technicalities, or temporary failure to comply during a period of otherwise sustained compliance, will not constitute failure to maintain substantial compliance. At the same time, temporary compliance during a period of sustained non-compliance will not constitute substantial compliance.

The substantial compliance rating is given only when the required reforms address all the issues discussed in the provision and when solid implementation of the reforms has been consistently demonstrated through reliable data, observations, and reports from staff and youth for most of the monitoring period.

**Partial Compliance** indicates that compliance has been achieved on some of the components of a provision, but not on all components. It indicates that there are approved relevant policies and procedures which, when implemented, are sufficient to achieve compliance; trained staff responsible for implementation; and staff and resources to implement the requirements of the provision. Partial compliance indicates that while progress has been made toward implementing the procedures described by policy, performance has been inconsistent throughout the monitoring period and additional work is needed to ensure that procedures are sufficiently comprehensive to translate policy into practice and accomplish the outcome envisioned by the provision. Partial compliance is appropriate if policies may need minor revisions for compliance with the Settlement Agreement provided other requirements of this section are applicable.

**Non-Compliance** indicates that most or all the components of the provision have not yet been met. Examples include provisions where policies still need to be overhauled, most staff may need to be trained, procedures may not have been developed, documentation may not be in place or consistently provided, and there has been no determination that the procedures accomplish the outcome envisioned by the provision.

**Terminated** means the Department has achieved substantial compliance with all of the provisions within a substantive section under Roman numeral III in the settlement agreement for at least one year. It also means that DJJ has filed a motion to terminate a particular substantive section with the Court, which the Court has granted.

**Not Rated** means the monitoring team did not have sufficient information to rate the item. The deadline has not passed yet. If any progress was made on a requirement, it is noted.



# Compliance Rating Summary

| Parag. No.                             | Compliance Provision                             | Compliance Status  |
|--|--|--------------------|
| <b>PROTECTION FROM HARM</b>            |  |                    |
| <b>General Provisions</b>              |  |                    |
| 28                                     | General Provisions                               | Not Rated          |
| <b>Staffing</b>                        |  |                    |
| 29                                     | Staffing Study Consultant                        | Not Rated          |
| 30                                     | Staffing Study Consultant Selection              | Not Rated          |
| 31                                     | Staffing Study Factors                           | Not Rated          |
| 32                                     | Staffing Changes                                 | Not Rated          |
| <b>Physical Plant</b>                  |  |                    |
| 33                                     | Physical Plant                                   | Partial Compliance |
| 34                                     | Surveillance Tools Timeline                      | Partial Compliance |
| 35                                     | Surveillance Tools Timeline Review               | Partial Compliance |
| 36                                     | Surveillance Installation                        | Not Rated          |
| 37                                     | Video Retention                                  | Not Rated          |
| <b>Rehabilitative Programming</b>      |  |                    |
| 38                                     | Rehabilitative Programming                       | Not Rated          |
| 39                                     | Rehabilitative Programming Mix                   | Not Rated          |
| <b>Approach to Behavior Management</b> |  |                    |
| 40                                     | Approach to Behavior Management                  | Not Rated          |
| 41                                     | Positive Behavior Management Tools               | Not Rated          |
| 42                                     | Consistently Implement Behavior Management Tools | Not Rated          |
| 43                                     | De-escalation Strategies and Graduated Responses | Not Rated          |
| 44                                     | On-Site Coaches                                  | Not Rated          |
| <b>Use of Force</b>                    |  |                    |
| 45                                     | Use of Force                                     | Not Rated          |
| 46                                     | Implement Revised Policies and Procedures        | Not Rated          |
| 47                                     | Limit Use of Force                               | Not Rated          |
| 48                                     | Reasonable Efforts                               | Not Rated          |
| 49                                     | Use of Force for the Minimum Amount of Time      | Not Rated          |
| 50                                     | Prohibition on Use of Force                      | Not Rated          |
| 51                                     | Only Trained Staff May Use Approved Techniques   | Not Rated          |
| 52                                     | Use of Force Documentation                       | Not Rated          |
| 53                                     | Medical Evaluation Following Use of Force        | Not Rated          |

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| 54   | Medical Evaluation Procedures                               | Not Rated |
| 55   | Medical Evaluation Refusal Procedures                       | Not Rated |
| <b>Investigations of Physical Harm to Youth from Other Youth, Executive or Unnecessary Use of Physical Force, or Improper Use of Isolation</b> |   |           |
| 56   | Draft New Investigation Policies, Procedures, and Practices | Not Rated |
| 57   | Implement Revised Investigation Policies and Procedures     | Not Rated |
| 58   | Initial Review of Uses of Force                             | Not Rated |
| 59   | Investigation Procedures                                    | Not Rated |
| 60   | Staff Review of Incidents                                   | Not Rated |
| 61   | Permissible Contact Following an Allegation                 | Not Rated |
| 62   | Video Request Following an Incident                         | Not Rated |
| 63   | Retention Schedule  | Not Rated |
| 64   | Investigations Without Video                                | Not Rated |
| 65   | Action Following a Finding of Staff Misconduct              | Not Rated |
| 66   | Investigations When a Youth Withdraws an Allegation         | Not Rated |
| <b>ISOLATION</b>   |   |           |
| <b>Use of Isolation</b>  |   |           |
| 67   | Use of Isolation  | Not Rated |
| 68   | Revised Isolation Policies and Procedures                   | Not Rated |
| 69   | Reasons for Isolation                                       | Not Rated |
| 70   | Prohibitions on Isolation                                   | Not Rated |
| 71   | Less Restrictive Techniques Requirement                     | Not Rated |
| 72   | Notification of Isolation                                   | Not Rated |
| <b>Documentation of Isolation</b>  |   |           |
| 73   | Documentation Requirements                                  | Not Rated |
| <b>Duration of Isolation</b>   |   |           |
| 74   | Duration of Isolation                                       | Not Rated |
| 75   | Intervention While in Isolation                             | Not Rated |
| 76   | Isolation Time Limit  | Not Rated |
| 77   | Role of Qualified Mental Health Professional                | Not Rated |
| 78   | Extension Requirements                                      | Not Rated |
| 79   | Reporting Requirements                                      | Not Rated |
| 80   | Removal from Isolation                                      | Not Rated |
| <b>Multidisciplinary Team to Review Isolation Placement</b>  |   |           |
| 81   | Multidisciplinary Team                                      | Not Rated |
| 82   | Multidisciplinary Team Procedures                           | Not Rated |
| 83   | Multidisciplinary Team Reviews                              | Not Rated |

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|---|---|-----------|
| 84  | Review of Youth Isolated Two or More Times                    | Not Rated |
| <b>Development of Appropriate Space for Isolation</b> |   |           |
| 85  | Plans for Using Alternative Safe Spaces for Isolating Youth   | Not Rated |
| 86  | Alternative Safe Spaces for Isolating Youth Timeline Approval | Not Rated |
| <b>Conditions and Services While in Isolation</b>     |   |           |
| 87  | Isolation Conditions  | Not Rated |
| 88  | Educational Services While in Isolation                       | Not Rated |
| <b>Housing Vulnerable Youth</b>                       |   |           |
| 89  | Revised Housing Classification Policies                       | Not Rated |
| 90  | Admission Screening Protocols                                 | Not Rated |
| 91  | Specialized Housing for Vulnerable Youth                      | Not Rated |
| 92  | Access to Services  | Not Rated |
| <b>Youth on Suicide Watch</b>                         |   |           |
| 93  | Prohibition on Isolation                                      | Not Rated |
| 94  | DMH Amended Agreement   | Not Rated |
| <b>TRAINING</b>                                       |   |           |
| <b>General Provisions</b>                             |   |           |
| 95  | Training Curriculum Review                                    | Not Rated |
| <b>Behavior Management</b>                            |   |           |
| 96  | Competency-Based Staff Training                               | Not Rated |
| 97  | Staff Retraining Procedures                                   | Not Rated |
| <b>Use of Physical Force</b>                          |   |           |
| 98  | Staff Training on Updated Use of Physical Force Policy        | Not Rated |
| 99  | Retraining Within 90 Days                                     | Not Rated |
| <b>Investigation</b>                                  |   |           |
| 100   | Investigations Staff Training                                 | Not Rated |
| <b>QUALITY ASSURANCE</b>                              |   |           |
| <b>General Provisions</b>                             |   |           |
| 101   | Quality Assurance System                                      | Not Rated |
| 102   | Monthly Data Review   | Not Rated |
| 103   | Data Element Requirements                                     | Not Rated |
| 104   | Sample Data Review  | Not Rated |
| 105   | Other Data Review Recommendations                             | Not Rated |
| 106   | Quality Improvement Committee                                 | Not Rated |

# PROTECTION FROM HARM

## General Provisions

The general provisions requirements of the settlement agreement ensure that youth have safe living conditions. This provision covers staffing, surveillance, structured programming, a positive behavior management system, and limiting the use of force and restraints. If the department met all the provisions identified here, most other specific conditions would also be met.

### 28. GENERAL PROVISIONS

DJJ shall, at all times, provide youth at BRRRC with safe living conditions by: ensuring that there is sufficient staffing to implement the provisions of this agreement; using surveillance tools to prevent violence and promote accountability; providing structured programming designed to engage youth in rehabilitative activities; implementing positive behavior supports to encourage appropriate behavior; instituting clear, consistent, appropriate consequences for negative behaviors; and limiting uses of force and restraints to incidents where the youth poses a serious and immediate danger and after other efforts to de-escalate the youth's behavior have failed.

Compliance Rating

Not Rated

|   |   |
|---|---|
| <p><b>Description of Monitoring Process</b></p> | <p>The monitoring team visited the BRRRC facility on September 7-9, 2022, conducted in-person and virtual interviews with BRRRC staff and youth, and reviewed emails and documents provided by DJJ's Director of Settlement Compliance. DJJ's <i>Initial Implementation Plan</i> was also reviewed.</p>   |
| <p><b>Findings &amp; Analysis</b></p>           | <p>The monitoring team reviewed each of the general provisions and notes its observations below. The team intends to request supporting data and documentation to assess a compliance rating.</p> <p><u>Sufficient Staffing</u></p> <p>Per DJJ's <i>Initial Implementation Plan</i>, the department does not consistently meet the staff-to-youth 1:8 waking hours ratio on all pods on all shifts. Site visit observations and interviews with youth and BRRRC staff confirmed that staffing is insufficient to ensure a safe environment. Every person interviewed at the facility (adult and youth) expressed concerns about their safety, citing the lack of staff as the primary factor. DJJ has hired a recruiting firm, offered incentives and bonuses, and contracted for security staff to fill vacancies. They also funded a staffing study, but the results were of little use</p> |

since the study was calculated based on an 8-hour work shift rather than DJJ's 12-hour work shift. DJJ is currently seeking a consultant to conduct a new study.

#### Surveillance Tools

DJJ has been actively adding camera coverage throughout BRRC. Per DJJ's *Camera Surveillance Project*, in areas where cameras were identified as essential, DJJ has been installing cameras to the extent that equipment, a power source, and network access are available. The project's estimated budget is over \$3.8 million. During the site visit, the monitoring team identified several new areas where video surveillance is recommended to meet this requirement. See item 33 for further details.

During the site visit, the monitoring team was briefed on camera surveillance operations and observed staff in their monitoring functions. The team did not review camera footage, Event Reporting System reports, investigation reports, or other documents to determine the extent to which DJJ utilizes surveillance to prevent violence and promote accountability. That review is pending.

#### Structured Programming

Per the monitoring team's analysis of items 38 and 39, structured programming was not offered in a manner that would engage youth in rehabilitative activities. The team observed DJJ social work staff attempting to provide group programming in the unit. Youth were disengaged and distracted. Interviews with youth and staff confirmed that structured programming was lacking. Per DJJ's *Initial Implementation Plan*, the department plans to create a facility calendar of daily activities when there is sufficient staff to oversee and manage the activities.

#### Positive Behavior Supports

In addition to security staff, DJJ has specialized staff responsible for encouraging appropriate behavior. These staff include social workers, clinicians, psychologists, behavior interventionists, and activity coordinators. Interviews with staff indicated that it is currently difficult to perform their job functions due lack of order and structure at the facility, creating feelings of unease and concerns about personal safety. Youth reported a distrust of security staff and frustration about not being able to have their basic need for safety met. Specialized staff stated that youth seemed to look to them only as a means for making a phone call to their family rather than as an opportunity to work on case plan goals and treatment needs.

DJJ's current incentive program involves issuing youth "checks" they exchange for snacks, décor, games, and other items in the incentive hall. Staff did not appear to give checks based on a behavior matrix. A youth's past negative behaviors can be dismissed by turning in checks to staff. Youth

remarked that this option meant they could misbehave and then easily "pay their way" out of trouble since checks were easy to come by. Some staff said their coworkers were overly generous with checks because they feared youth and wanted to earn their favor.

#### Clear, Consistent, Appropriate Consequences

Staff are not following DJJ's behavior management protocols. Staff said youth misconduct is inconsistently addressed and often depends upon which youth and staff were involved. It was reported that some staff ignored negative behaviors so as not to anger youth they feared would retaliate. Some staff were reported as not proactively preventing or intervening when an incident occurs. Staff reluctance was attributed to multiple factors, including staff believing their actions would not be backed by the administration, staff not wanting to risk personal injury, and staff fear of youth.

Youth interviewed perceived staff as incapable of ensuring their safety due to the insufficient number of staff on shift. When staff applied consequences, youth often perceived the consequences as arbitrary and unfair. Youth expressed frustration and anger about the lack of consequences for disruptive youth who caused problems.

Security, school, clinical, and social work staff all acknowledged that DJJ is making efforts to reduce its reliance on isolation. However, many staff were unhappy with this change and stated they were unclear about how isolation should be used. Staff listed multiple examples of inconsistency, saying that youth may be in isolation for a few hours, a day, or longer, or not at all, for similar acts. Staff were often unaware of when a youth would return from isolation and were frequently surprised to see the youth in the pod or school following an assault. These perceptions may be fueled by rumors rather than first-hand knowledge about an incident, but they reflect staff's confusion about facility consequences. The monitoring team heard from staff across all job functions that isolation is necessary and should be used more frequently to maintain facility order and safety. They advised that reducing reliance on isolation should only be considered after staffing levels increase and a new behavior management system is in place. Staff could not identify another alternative to isolation.

#### Limiting Use of Force and Restraints

DJJ is currently revising its use of force policy. The monitoring team did not examine data to determine whether the use of force and restraints are limited to incidents where the youth poses a serious and immediate danger and after other efforts to de-escalate the youth's behavior have failed. The monitoring team will conduct a data review before the next monitoring report. The team, however, learned through youth and staff interviews that staff are reluctant to use force because they worried about disciplinary

|  |   |
|--|---|
|  | action, losing their job, being injured, or having youth retaliate. When an incident required staff to call for assistance from public safety, the use of force and restraints were reported as the expected response. DJJ does employ Behavior Interventionists (BI) whose role is to help de-escalate situations. However, most BIs have been redeployed to a security staff role to address staff shortages. |
| <b>Recommendations to Achieve Compliance</b> | This report offers some preliminary recommendations in several areas. A more comprehensive list of recommendations is expected to be compiled in future monitoring reports.   |

## SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*
- *South Carolina Department of Juvenile Justice (DJJ) Facility Staffing Assessments, CJA, October 21, 2021.*
- *Camera Surveillance Project: Camera Coverage Report, submitted by DJJ to the DOJ and SME on July 13, 2022.*
- Documents provided by DJJ on August 23, 2022.
- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.
- Virtual staff interviews conducted September-October 2022.
- Various emails and documents provided by the Director of Settlement Compliance.

# Staffing

## 29. STAFFING STUDY CONSULTANT

DJJ will hire a consultant to conduct a staffing study within nine months [January 2023] of the effective date. The staffing study will determine the appropriate staffing levels and patterns to implement the terms of this agreement, including adequately supervising youth in the male living units.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team reviewed the <i>South Carolina Department of Juvenile Justice (DJJ) Facility Staffing Assessment</i> completed on October 21, 2021.   |           |
| <b>Findings &amp; Analysis</b>               | Recognizing the need to analyze its current staffing structure, DJJ selected and hired a consultant before the terms of the settlement agreement were finalized. Unfortunately, the study failed to meet DJJ's needs in many areas. The analysis contained recommendations for staffing the facility at design capacity (270 beds), operational capacity (168 beds), and current operational capacity (136 beds). While a bed staffing analysis is appropriate, the staffing figures did not translate well to current operations of "between 40 and 65 youth." The analysis also offered staffing numbers based on 8-hour shifts rather than DJJ's 12-hour shifts. |           |
| <b>Recommendations to Achieve Compliance</b> | The monitoring team is aware that DJJ is working with the DOJ to select a consultant to complete a new staffing study. A timely selection will facilitate the study's completion within the required timeframe.   |           |

### SOURCES

- *South Carolina Department of Juvenile Justice (DJJ) Facility Staffing Assessments*, CJJA, October 21, 2021.



### 30. STAFFING STUDY CONSULTANT SELECTION

The DJJ and the DOJ will jointly select the consultant who conducts the staffing study.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The SME was copied on email communications between DJJ and the DOJ about potential consultants.   |           |
| <b>Findings &amp; Analysis</b>               | Recognizing the need to analyze its current staffing structure, DJJ selected and hired a consultant before the terms of the settlement agreement were finalized. Unfortunately, the study failed to meet DJJ's needs in many areas. DJJ began the process of commissioning a new study. As of October 3, 2022, DJJ and the DOJ had reviewed several candidates and a final selection was pending. |           |
| <b>Recommendations to Achieve Compliance</b> | The timely selection of a consultant will facilitate the staffing study's completion within the required timeframe.   |           |

#### SOURCES

- Various emails between the DOJ and the Director of Settlement Compliance.


### 31. STAFFING STUDY FACTORS

The staffing study will consider factors including:

- i. The classification and risk profiles of youth at BRRC;
- ii. The physical configuration and function of spaces;
- iii. When and where incidents reported in BRRC’s incident management system most frequently occur at BRRC; and
- iv. The routine availability of staff, including supervising officers, and DJJ public safety officers to respond to incidents.

Compliance Rating

Not Rated

| Description of Monitoring Process | The monitoring team reviewed the <i>South Carolina Department of Juvenile Justice (DJJ) Facility Staffing Assessment</i> completed on October 21, 2021.  |                        |                 |               |    |                        |    |                               |   |
|-----------------------------------|--|------------------------|-----------------|---------------|----|------------------------|----|-------------------------------|---|
| Findings & Analysis               | <p>Recognizing the need to analyze its current staffing structure, DJJ selected and hired a consultant before the terms of the settlement agreement were finalized. At the time of the contract, it was not known that the study needed to include an independent analysis of youth classification and risk profiles, the physical configuration and function of spaces, when and where reported incidents most frequently occur, and the routine availability of staff to respond to incidents. A DJJ consultant conducted this analysis instead. The consultant relied on DJJ documents and data, some of which were lacking as noted below.</p> <p><u>Classification and Risk Profiles</u></p> <p>The report categorized youth<sup>7</sup> by the following “risk and custody levels”: high (67 percent), medium (28 percent), or low (5 percent). The report did not define these categories or explain the methodology used to classify youth in this manner.</p>  <table border="1" data-bbox="548 1470 1404 1654"> <thead> <tr> <th>Risk and Custody Level</th> <th>Number of Youth</th> </tr> </thead> <tbody> <tr> <td>High (secure)</td> <td>36</td> </tr> <tr> <td>Medium (discretionary)</td> <td>15</td> </tr> <tr> <td>Low (de-institutionalization)</td> <td>3</td> </tr> </tbody> </table> <p><i>Figure 1: From Page 8 of the Report</i></p> | Risk and Custody Level | Number of Youth | High (secure) | 36 | Medium (discretionary) | 15 | Low (de-institutionalization) | 3 |
| Risk and Custody Level            | Number of Youth  |                        |                 |               |    |                        |    |                               |   |
| High (secure)                     | 36   |                        |                 |               |    |                        |    |                               |   |
| Medium (discretionary)            | 15   |                        |                 |               |    |                        |    |                               |   |
| Low (de-institutionalization)     | 3  |                        |                 |               |    |                        |    |                               |   |

<sup>7</sup> The classification analysis was based on a snapshot of 54 youth (6 girls and 48 boys) on March 9, 2022.

|   |  |
|---|--|
|   | <p>The report offered an analysis of BRRC’s population while also stating that data to augment these analyses were missing or unreliable.</p> <p><u>Physical Configuration and Function of Spaces</u></p> <p>The report describes the physical configuration of the facility and the housing units. The limitations of the physical plant create many challenges for DJJ, and the report discusses these challenges, recent modifications made to address problems, and plans to improve conditions. While this section offers good detail, an independent analysis may have uncovered additional areas of concern or different solutions.</p> <p><u>Where and When Incidents Most Frequently Occur</u></p> <p>DJJ reports that “BRRC struggles with data and tracking of trends....” and relies primarily on anecdotal information. The report states that “it is difficult to assess” trends because youth were moved frequently. The previous facility administrator opined that incidents tended to occur within the general population and the courtyards between pods. Until DJJ corrects this data deficiency it will be difficult for them to determine how to prioritize responses.</p> <p><u>Routine Availability of Staff to Respond to Incidents</u></p> <p>The report describes the current staffing structure and the ability to call upon transportation team staff, public safety officers, behavior interventionists, and recreational staff. The procedure for calling upon these staff other than the public safety officers is unclear. The report lists the department’s staffing plan goal but does not define the gap between the goal and current staffing levels.</p> |
| <p><b>Recommendations to Achieve Compliance</b></p> | <p>The monitoring team is aware that DJJ is working with the DOJ to select a consultant to complete a new staffing study. A timely selection will facilitate the study’s completion within the required timeframe. The study must include an independent analysis of the four required factors:</p> <ol style="list-style-type: none"> <li>1. The classification and risk profiles of youth at BRRC;</li> <li>2. The physical configuration and function of spaces;</li> <li>3. When and where incidents reported in BRRC’s incident management system most frequently occur at BRRC; and</li> <li>4. The routine availability of staff, including supervising officer, and DJJ public safety officers to respond to incidents.</li> </ol>   |

**SOURCES**

- *South Carolina Department of Juvenile Justice (DJJ) Facility Staffing Assessments*, CJA, October 21, 2021.
- September 22, 2022, email from the DOJ flagging that the study did not include an independent analysis of the four factors.

## 32. STAFFING CHANGES

Within 18 months [October 2023] of receiving the staffing study, DJJ will make reasonable efforts to implement changes to existing staffing to conform to the staffing patterns recommended by the staffing study.

|  | Compliance Rating  | Not Rated |
|--|--|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team reviewed the <i>South Carolina Department of Juvenile Justice (DJJ) Facility Staffing Assessment</i> completed on October 21, 2021, and DJJ's <i>Initial Implementation Plan</i> . The team also conducted a facility site visit on September 7-9, 2022.   |           |
| <b>Findings &amp; Analysis</b>               | <p>DJJ correctional staff currently work 12-hour shifts, making the staffing study submitted irrelevant for determining the gap between DJJ's current and appropriate staffing levels.</p> <p>Per DJJ's <i>Initial Implementation Plan</i>, the department is implementing multiple strategies to recruit and retain staff. These strategies have included salary increases, incentive pay, longevity bonuses, referral bonuses, and hiring a recruitment firm. The staff interviewed acknowledged the efforts being made. However, all staff interviewed said the efforts have not helped improve the workplace environment. Many staff fear for their safety and are seeking employment elsewhere.</p>   |           |
| <b>Recommendations to Achieve Compliance</b> | <p>The monitoring team is aware that DJJ is working with the DOJ to select a consultant to complete a new staffing study. A timely selection will facilitate the study's completion within the required timeframe.</p> <p>Upon receipt of the staffing study, DJJ should develop a plan for implementing changes to existing staffing to conform to the staffing patterns recommended. The plan should include the steps necessary to achieve the staffing patterns, timeframes for when each step will be accomplished, the resources required, and the person(s) responsible. If the plan deviates from what is recommended, DJJ must provide rationale for why deviation is necessary and how deviation will not undermine the intent of this provision or compromise the safety and security of youth and staff.</p> |           |

### SOURCES

- *South Carolina Department of Juvenile Justice (DJJ) Facility Staffing Assessments*, CJA, October 21, 2021.

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*
- Documents provided by DJJ on August 23, 2022.
- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.
- Virtual staff interviews conducted September-October 2022.
- Various emails and documents provided by the Director of Settlement Compliance.

# Physical Plant

## 33. PHYSICAL PLANT

Within three months [July 2022] of the effective date of this Agreement, DJJ will identify areas within BRRC where there is currently no video surveillance, and where incidents have occurred in the last year, or are likely to occur.

Compliance Rating

Partial Compliance

|   |   |
|---|---|
| <p><b>Description of Monitoring Process</b></p> | <p>The monitoring team reviewed the <i>Camera Surveillance Project: Camera Coverage</i> report submitted by DJJ to the DOJ and the SME on July 13, 2022, and DJJ's <i>Initial Implementation Plan</i>. The team also conducted a facility site visit on September 7-9, 2022.</p>  |
| <p><b>Findings &amp; Analysis</b></p>           | <p>Per DJJ's <i>Camera Surveillance Project</i>, the department conducted a review of internal and external areas to determine whether cameras were necessary. In areas where cameras were identified as essential, DJJ has been installing cameras to the extent that equipment, a power source, and network access are available. The addition of new cameras throughout the campus is extensive. The project's estimated budget is over \$3.8 million.</p> <p>The DOJ and the monitoring team provided feedback and recommendations to DJJ based on a review of the report and accompanying floor plans. The DOJ and the monitoring team also pointed out that the report did not include incident data to identify areas where incidents have occurred or are likely to occur. DJJ responded that data were lacking and unreliable due to "youth moving frequently through the prior year" and the inability of the incident reporting system to produce data and trend analysis information. Until DJJ corrects this data deficiency it will be difficult for them to determine how best to focus future resources and attention.</p> <p>During the site visit the monitoring team identified several areas where video surveillance is recommended:</p> <ol style="list-style-type: none"> <li>1. The Willow Lane girl's facility will house multiple youth in the same bedroom. The physical configuration of the facility makes it difficult to properly supervise youth in these rooms without camera coverage.</li> </ol> |

|   |   |
|---|---|
|   | <ol style="list-style-type: none"> <li>2. Youth are housed in a Laurel wing that does not have camera coverage. The monitoring team is aware that DJJ did not intend to house youth in this wing, but circumstances required the use of this space. DJJ prioritized and completed the installation of cameras in Laurel A, B, and C wings shortly after the site visit.</li> <li>3. Staff indicated that many incidents occur on buses used for campus transports, yet no surveillance exists or is planned due to cost and the logistics of retrofitting and securing the cameras. DJJ intends to encourage alternatives to using the bus, such as walking when the distance is short, and the weather and circumstances allow.</li> <li>4. The gymnasium upstairs workout room behind the basketball hoops is closed off to youth. However, youth can easily bypass the gate and access the area, creating a potential safety issue.</li> </ol> <p>The monitoring team was also briefed on camera surveillance operations. A member of the monitoring team spent time at the control center observing operations. It was observed that staff were monitoring areas youth were no longer present and failing to monitor and track the youth's movements to other areas of the facility. It was also noted that small and limited monitors made it challenging to observe youth movements. The team did not review camera footage, Event Reporting System reports, investigation reports, or other documents to determine the extent to which DJJ utilizes surveillance to prevent violence and promote accountability. That review is pending.</p> |
| <p><b>Recommendations to Achieve Compliance</b></p> | <p>DJJ needs to rectify its inability to accurately identify areas where incidents occur or are likely to occur. While some of this difficulty is due to frequent movement of youth to different units making pinpointing trends a challenge, some of it is also due to the inability of staff to easily query the Event Report System to produce reports. DJJ leadership needs to be able to identify dates, times, locations, and type of incidents that are occurring at BRRRC and any trends. This information will allow them to respond more effectively and potentially prevent future problems.</p> <p>It is also recommended that DJJ add video surveillance to the following areas:</p> <ol style="list-style-type: none"> <li>1. The Willow Lane girl's facility youth bedrooms. Girls should be instructed to use the restroom to change clothing.</li> <li>2. All buses and vehicles used to transport youth.</li> <li>3. The Willow gymnasium upstairs workout room.</li> </ol> <p>It is recommended that additional computer monitors be added to the control center to support the staff's ability to monitor youth's movements throughout BRRRC. Additional monitors will allow staff to see camera feeds and detect problems more clearly. The facility would also benefit from having additional staff to monitor youth, as the number of cameras to monitor are more than the current staff can realistically manage. Adding</p>  |



|  |  |
|--|--|
|  | staff to perform this function should be prioritized behind adding staff who directly supervise youth. |
|--|--|

## SOURCES

- *Camera Surveillance Project: Camera Coverage Report*, submitted by DJJ to the DOJ and SME on July 13, 2022.
- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex*, August 12, 2022.
- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.
- Various emails and documents provided by the Director of Settlement Compliance.

## 34. SURVEILLANCE TOOLS TIMELINE PROPOSAL

Within five months [September 2022] of the effective date of this Agreement, DJJ will propose to the United States and the Subject Matter Expert a timeline for adding surveillance tools to enable: (1) effective supervision of areas without video surveillance; and (2) effective investigations of incidents occurring in areas without video surveillance. When developing this timeline, DJJ will prioritize blind spots where incidents have occurred in the last year.

### Compliance Rating

### Partial Compliance

| <b>Description of Monitoring Process</b>       | The monitoring team reviewed the <i>Camera Surveillance Project: Camera Coverage Report</i> submitted by DJJ to the DOJ and the SME on July 13, 2022. Emails exchanged between DJJ and the DOJ were also reviewed.  |                       |        |                       |   |   |   |                           |                         |   |                             |                           |   |  |   |   |                          |            |   |                            |   |   |                                 |           |   |                                |           |   |
|--|---|-----------------------|--------|-----------------------|---|---|---|---------------------------|-------------------------|---|-----------------------------|---------------------------|---|--|---|---|--------------------------|------------|---|----------------------------|---|---|---------------------------------|-----------|---|--------------------------------|-----------|---|
| <b>Findings &amp; Analysis</b>                 | <p>The monitoring team reviewed the report and found that DJJ was not able to provide a timeline given that they cannot predict when supply chain issues will be resolved. The Director of Settlement Compliance estimated that installation would be completed in 6-12 months. In response to a request to prioritize camera installation, DJJ emailed the DOJ on September 12, 2022, with the following installation priority list.</p> <table border="1" data-bbox="561 1171 1468 1339"> <thead> <tr> <th>Building</th> <th>Room #</th> <th>Installation Priority</th> </tr> </thead> <tbody> <tr> <td>BW Vocational School #4010 (24 cameras)</td> <td>6a-f, 7a-c, 8a-d, 9b-d, 10a, 11b, 14c, 16, 18a-b, 19a, 21</td> <td>1</td> </tr> <tr> <td>WL Evergreen (13 cameras)</td> <td>2-8, 20, 10a-c, 10e, 35</td> <td>2</td> </tr> <tr> <td>BW Myrtle #4006 (8 cameras)</td> <td>5, 6, 7, 8, 9, 26, 27, 28</td> <td>3</td> </tr> <tr> <td>JGR Palmetto School Building #3009 (17cameras)</td> <td>2, 2a, 100, 135, 132g, 132, 127, 122a, 122b, 119, 108a, 108a, 107, hallway 12</td> <td>4</td> </tr> <tr> <td>BW Gym #4007 (3 cameras)</td> <td>1, 11, 11a</td> <td>5</td> </tr> <tr> <td>JGR CCC #3019 (15 cameras)</td> <td>1, 10, 103, 104, 123b, 123, 121, 118, 125, 124, 20, 11, 113, 111, 109</td> <td>6</td> </tr> <tr> <td>BW Driver's Ed #4015 (1 camera)</td> <td>Main area</td> <td>7</td> </tr> <tr> <td>BW Greenhouse #4011 (1 camera)</td> <td>Main area</td> <td>8</td> </tr> </tbody> </table> | Building              | Room # | Installation Priority | BW Vocational School #4010 (24 cameras) | 6a-f, 7a-c, 8a-d, 9b-d, 10a, 11b, 14c, 16, 18a-b, 19a, 21 | 1 | WL Evergreen (13 cameras) | 2-8, 20, 10a-c, 10e, 35 | 2 | BW Myrtle #4006 (8 cameras) | 5, 6, 7, 8, 9, 26, 27, 28 | 3 | JGR Palmetto School Building #3009 (17cameras) | 2, 2a, 100, 135, 132g, 132, 127, 122a, 122b, 119, 108a, 108a, 107, hallway 12 | 4 | BW Gym #4007 (3 cameras) | 1, 11, 11a | 5 | JGR CCC #3019 (15 cameras) | 1, 10, 103, 104, 123b, 123, 121, 118, 125, 124, 20, 11, 113, 111, 109 | 6 | BW Driver's Ed #4015 (1 camera) | Main area | 7 | BW Greenhouse #4011 (1 camera) | Main area | 8 |
| Building                                       | Room #  | Installation Priority |        |                       |   |   |   |                           |                         |   |                             |                           |   |  |   |   |                          |            |   |                            |   |   |                                 |           |   |                                |           |   |
| BW Vocational School #4010 (24 cameras)        | 6a-f, 7a-c, 8a-d, 9b-d, 10a, 11b, 14c, 16, 18a-b, 19a, 21   | 1                     |        |                       |   |   |   |                           |                         |   |                             |                           |   |  |   |   |                          |            |   |                            |   |   |                                 |           |   |                                |           |   |
| WL Evergreen (13 cameras)                      | 2-8, 20, 10a-c, 10e, 35   | 2                     |        |                       |   |   |   |                           |                         |   |                             |                           |   |  |   |   |                          |            |   |                            |   |   |                                 |           |   |                                |           |   |
| BW Myrtle #4006 (8 cameras)                    | 5, 6, 7, 8, 9, 26, 27, 28   | 3                     |        |                       |   |   |   |                           |                         |   |                             |                           |   |  |   |   |                          |            |   |                            |   |   |                                 |           |   |                                |           |   |
| JGR Palmetto School Building #3009 (17cameras) | 2, 2a, 100, 135, 132g, 132, 127, 122a, 122b, 119, 108a, 108a, 107, hallway 12   | 4                     |        |                       |   |   |   |                           |                         |   |                             |                           |   |  |   |   |                          |            |   |                            |   |   |                                 |           |   |                                |           |   |
| BW Gym #4007 (3 cameras)                       | 1, 11, 11a  | 5                     |        |                       |   |   |   |                           |                         |   |                             |                           |   |  |   |   |                          |            |   |                            |   |   |                                 |           |   |                                |           |   |
| JGR CCC #3019 (15 cameras)                     | 1, 10, 103, 104, 123b, 123, 121, 118, 125, 124, 20, 11, 113, 111, 109   | 6                     |        |                       |   |   |   |                           |                         |   |                             |                           |   |  |   |   |                          |            |   |                            |   |   |                                 |           |   |                                |           |   |
| BW Driver's Ed #4015 (1 camera)                | Main area   | 7                     |        |                       |   |   |   |                           |                         |   |                             |                           |   |  |   |   |                          |            |   |                            |   |   |                                 |           |   |                                |           |   |
| BW Greenhouse #4011 (1 camera)                 | Main area   | 8                     |        |                       |   |   |   |                           |                         |   |                             |                           |   |  |   |   |                          |            |   |                            |   |   |                                 |           |   |                                |           |   |
| <b>Recommendations to Achieve Compliance</b>   | When timeframes are known, DJJ should provide the DOJ and the SME of more exact timeframes, so they may offer any additional suggested revisions before the DOJ gives final approval. DJJ should also consider how they plan to address and prioritize the areas of concerns identified by the monitoring team in item 33.  |                       |        |                       |   |   |   |                           |                         |   |                             |                           |   |  |   |   |                          |            |   |                            |   |   |                                 |           |   |                                |           |   |

### SOURCES

- *Camera Surveillance Project: Camera Coverage Report*, submitted by DJJ to the DOJ and SME on July 13, 2022.
- September 12, 2022, email from DJJ to the DOJ containing a tentative installation prioritization.

## 35. SURVEILLANCE TOOLS TIMELINE REVIEW

The United States and the Subject Matter Expert will review the proposed timeline, and proposed placement of surveillance tools, and propose any revisions necessary within one month of receiving the proposal. The final timeline is subject to approval by the United States.

### Compliance Rating

### Partial Compliance

| <b>Description of Monitoring Process</b>       | The monitoring team reviewed the <i>Camera Surveillance Project: Camera Coverage Report</i> submitted by DJJ to the DOJ and the SME on July 13, 2022. Emails exchanged between DJJ and the DOJ were also reviewed.  |                       |        |                       |   |   |   |                           |                         |   |                             |                           |   |  |   |   |                          |            |   |                            |   |   |                                 |           |   |                                |           |   |
|--|---|-----------------------|--------|-----------------------|---|---|---|---------------------------|-------------------------|---|-----------------------------|---------------------------|---|--|---|---|--------------------------|------------|---|----------------------------|---|---|---------------------------------|-----------|---|--------------------------------|-----------|---|
| <b>Findings &amp; Analysis</b>                 | <p>The monitoring team and DOJ reviewed the report and provided timely feedback. The monitoring team found that DJJ was not able to provide a timeline given that they cannot predict when supply chain issues will be resolved. The Director of Settlement Compliance estimated that installation would be completed in 6-12 months. In response to a request to prioritize camera installation, DJJ emailed the DOJ on September 12, 2022, with the following installation priority list.</p> <table border="1" data-bbox="548 1144 1453 1312"> <thead> <tr> <th>Building</th> <th>Room #</th> <th>Installation Priority</th> </tr> </thead> <tbody> <tr> <td>BW Vocational School #4010 (24 cameras)</td> <td>6a-f, 7a-c, 8a-d, 9b-d, 10a, 11b, 14c, 16, 18a-b, 19a, 21</td> <td>1</td> </tr> <tr> <td>WL Evergreen (13 cameras)</td> <td>2-8, 20, 10a-c, 10e, 35</td> <td>2</td> </tr> <tr> <td>BW Myrtle #4006 (8 cameras)</td> <td>5, 6, 7, 8, 9, 26, 27, 28</td> <td>3</td> </tr> <tr> <td>JGR Palmetto School Building #3009 (17cameras)</td> <td>2, 2a, 100, 135, 132g, 132, 127, 122a, 122b, 119, 108a, 108a, 107, hallway 12</td> <td>4</td> </tr> <tr> <td>BW Gym #4007 (3 cameras)</td> <td>1, 11, 11a</td> <td>5</td> </tr> <tr> <td>JGR CCC #3019 (15 cameras)</td> <td>1, 10, 103, 104, 123b, 123, 121, 118, 125, 124, 20, 11, 113, 111, 109</td> <td>6</td> </tr> <tr> <td>BW Driver's Ed #4015 (1 camera)</td> <td>Main area</td> <td>7</td> </tr> <tr> <td>BW Greenhouse #4011 (1 camera)</td> <td>Main area</td> <td>8</td> </tr> </tbody> </table> | Building              | Room # | Installation Priority | BW Vocational School #4010 (24 cameras) | 6a-f, 7a-c, 8a-d, 9b-d, 10a, 11b, 14c, 16, 18a-b, 19a, 21 | 1 | WL Evergreen (13 cameras) | 2-8, 20, 10a-c, 10e, 35 | 2 | BW Myrtle #4006 (8 cameras) | 5, 6, 7, 8, 9, 26, 27, 28 | 3 | JGR Palmetto School Building #3009 (17cameras) | 2, 2a, 100, 135, 132g, 132, 127, 122a, 122b, 119, 108a, 108a, 107, hallway 12 | 4 | BW Gym #4007 (3 cameras) | 1, 11, 11a | 5 | JGR CCC #3019 (15 cameras) | 1, 10, 103, 104, 123b, 123, 121, 118, 125, 124, 20, 11, 113, 111, 109 | 6 | BW Driver's Ed #4015 (1 camera) | Main area | 7 | BW Greenhouse #4011 (1 camera) | Main area | 8 |
| Building                                       | Room #  | Installation Priority |        |                       |   |   |   |                           |                         |   |                             |                           |   |  |   |   |                          |            |   |                            |   |   |                                 |           |   |                                |           |   |
| BW Vocational School #4010 (24 cameras)        | 6a-f, 7a-c, 8a-d, 9b-d, 10a, 11b, 14c, 16, 18a-b, 19a, 21   | 1                     |        |                       |   |   |   |                           |                         |   |                             |                           |   |  |   |   |                          |            |   |                            |   |   |                                 |           |   |                                |           |   |
| WL Evergreen (13 cameras)                      | 2-8, 20, 10a-c, 10e, 35   | 2                     |        |                       |   |   |   |                           |                         |   |                             |                           |   |  |   |   |                          |            |   |                            |   |   |                                 |           |   |                                |           |   |
| BW Myrtle #4006 (8 cameras)                    | 5, 6, 7, 8, 9, 26, 27, 28   | 3                     |        |                       |   |   |   |                           |                         |   |                             |                           |   |  |   |   |                          |            |   |                            |   |   |                                 |           |   |                                |           |   |
| JGR Palmetto School Building #3009 (17cameras) | 2, 2a, 100, 135, 132g, 132, 127, 122a, 122b, 119, 108a, 108a, 107, hallway 12   | 4                     |        |                       |   |   |   |                           |                         |   |                             |                           |   |  |   |   |                          |            |   |                            |   |   |                                 |           |   |                                |           |   |
| BW Gym #4007 (3 cameras)                       | 1, 11, 11a  | 5                     |        |                       |   |   |   |                           |                         |   |                             |                           |   |  |   |   |                          |            |   |                            |   |   |                                 |           |   |                                |           |   |
| JGR CCC #3019 (15 cameras)                     | 1, 10, 103, 104, 123b, 123, 121, 118, 125, 124, 20, 11, 113, 111, 109   | 6                     |        |                       |   |   |   |                           |                         |   |                             |                           |   |  |   |   |                          |            |   |                            |   |   |                                 |           |   |                                |           |   |
| BW Driver's Ed #4015 (1 camera)                | Main area   | 7                     |        |                       |   |   |   |                           |                         |   |                             |                           |   |  |   |   |                          |            |   |                            |   |   |                                 |           |   |                                |           |   |
| BW Greenhouse #4011 (1 camera)                 | Main area   | 8                     |        |                       |   |   |   |                           |                         |   |                             |                           |   |  |   |   |                          |            |   |                            |   |   |                                 |           |   |                                |           |   |
| <b>Recommendations to Achieve Compliance</b>   | When timeframes are known, DJJ should provide the DOJ and the SME of more exact timeframes, so they may offer any additional suggested revisions before the DOJ gives final approval. DJJ should also consider how they plan to address and prioritize the areas of concerns identified by the monitoring team in item 33.  |                       |        |                       |   |   |   |                           |                         |   |                             |                           |   |  |   |   |                          |            |   |                            |   |   |                                 |           |   |                                |           |   |

### SOURCES

- *Camera Surveillance Project: Camera Coverage Report*, submitted by DJJ to the DOJ and SME on July 13, 2022.
- September 12, 2022, email from DJJ to the DOJ containing a tentative installation prioritization.

## 36. SURVEILLANCE INSTALLATION

Once approved by the US, DJJ will add surveillance according to the approved timeline.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | Once a timeline is approved, the monitoring team will verify that surveillance was added according to the timeline.   |           |
| <b>Findings &amp; Analysis</b>               | DJJ is not able to provide an exact timeline given that they cannot predict when supply chain issues will be resolved. The Director of Settlement Compliance estimated that installation would be completed in 6-12 months. DJJ has a history of emailing the DOJ and SME when updates are known. |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ should continue to provide updates to the DOJ and the SME on camera installation and timelines.   |           |

### SOURCES

- Not applicable.

## 37. VIDEO RETENTION

DJJ will retain all video surveillance for a sufficient period to ensure it is available for investigations, regular oversight, and quality assurance reviews.

Compliance Rating

Not Rated

|   |   |
|---|---|
| <p><b>Description of Monitoring Process</b></p> | <p>The monitoring team conducted a BRRC site visit September 7-9, 2022, interviewed BRRC staff, and reviewed emails and documents provided by the Director of Settlement Compliance. During the site visit, the Inspector General, Division of Investigative Services, presented an overview of the camera system. The monitoring team also reviewed DJJ's <i>Initial Implementation Plan</i>.</p>  |
| <p><b>Findings &amp; Analysis</b></p>           | <p>Per DJJ's <i>Initial Implementation Plan</i>, the department updated its investigations and video surveillance policy and procedures. A Camera Surveillance policy is currently under revision. In response to the monitoring team's questions about recording and access, DJJ provided a document labeled H3: Cameras and Recording. This document states that surveillance cameras are programmed to record 24 hours a day with a 45-day retention schedule for all routine footage. Footage for an investigation can be exported on a disc and retained for a minimum of 7 years. The monitoring team did not review data, logs, or other documents to verify this practice.</p> <p>The following individuals have access to recordings.</p> <p><b>Access I: Full access (live, review, export)</b></p> <ul style="list-style-type: none"> <li>• Inspector General Team <ul style="list-style-type: none"> <li>-Investigators</li> <li>-Gang coordinators</li> <li>-Camera surveillance operators</li> <li>-Management review (review, export)</li> <li>-Inspector General leadership</li> </ul> </li> </ul> <p><b>Access II: Limited access (live, review)</b></p> <ul style="list-style-type: none"> <li>• Inspector General Team <ul style="list-style-type: none"> <li>-Dispatch – live (all), review 48 hours</li> </ul> </li> </ul> |

|   |  |
|---|--|
|   | <ul style="list-style-type: none"> <li>• Institutional Services Team <ul style="list-style-type: none"> <li>-ISD leadership</li> <li>-Facility Administrator (facility specific)</li> <li>-Assistant Facility Administrator (facility specific)</li> </ul> </li> <li>• Public Safety <ul style="list-style-type: none"> <li>-Chief – live (all), review 48 hours</li> <li>-Sergeant – live (all), review 48 hours</li> </ul> </li> <li>• Director</li> <li>• [Director of Settlement Compliance] (BRRC only)</li> </ul> <p><b>Access III: Restricted access (live only)</b></p> <ul style="list-style-type: none"> <li>• Control Room Operators (stationed dorm only)</li> </ul> |
| <p><b>Recommendations to Achieve Compliance</b></p> | <p>When the Camera Surveillance policy draft is ready for review, DJJ needs to submit it to the DOJ and SME for review and timely feedback. The policy should clearly describe how the department will retain video for a sufficient period to ensure it is available for investigations, regular oversight, and quality assurance reviews. DJJ must also consistently implement that policy during the compliance period.</p>   |

## SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*
- Documents provided by DJJ on August 23, 2022.
  - Standard Operating Procedure #58 Control Room Officer.
  - H3: Cameras and Recordings, dated August 15, 2022.
- September 7-9, 2022, facility site visit.
- September 7, 2022, presentation on camera operations by the Inspector General, Division of Investigative Services.
- Staff and youth interviews conducted on September 7-9, 2022.
- Various emails and documents provided by the Director of Settlement Compliance.

# Rehabilitative Programming

## 38. REHABILITATIVE PROGRAMMING

DJJ will provide adequate, structured rehabilitative programming, from the end of the school day until youth go to bed and on weekends, to reduce the likelihood of youth-on-youth violence.

Compliance Rating

Not Rated

|   |  |
|---|--|
| <p><b>Description of Monitoring Process</b></p> | <p>The monitoring team conducted a BRRC site visit September 7-9, 2022, interviewed BRRC staff and youth, and reviewed emails and documents provided by the Director of Settlement Compliance. The monitoring team also reviewed DJJ's <i>Initial Implementation Plan</i>.</p>   |
| <p><b>Findings &amp; Analysis</b></p>           | <p>Per DJJ's <i>Initial Implementation Plan</i>, the facility offers multiple opportunities for youth to be engaged in rehabilitative programming. These activities include work, clinical groups, behavior interventionists, recreation, special events, and other leisure activities. The department's facility calendar and daily schedules are not posted. The Director of Settlement Compliance indicated that they are available and undergoing improvements. The monitoring team did not review these documents.</p> <p>During the facility site visit, it was observed that despite not having a daily schedule posted, staff appeared to have a general understanding of what activities were to take place. For example, social work staff were scheduled to conduct groups in the units several times a week after school. Correctional staff were observed transporting youth to the gym for their recreation time. Clinical staff meet with youth weekly. Food was delivered to the units. And youth were scheduled to attend school. Even so, a general sense of disorder was observed on campus and in the units. The monitoring team observed several instances when youth were "out of place" and unsupervised around campus. Staff and parents reported that it is not unusual for a youth to refuse to attend school. School staff indicated that some youth see school time as an opportunity to "go after" other youth. Security staff and youth both confirmed that incidents frequently occur at school. No data were reviewed to verify these statements.</p> <p>In the living units, youth were observed horseplaying while staff sat and watched. Youth attending groups were disengaged and distracted by other</p> |

|   |  |
|---|--|
|   | <p>youth or activities in neighboring units. Unit security staff were primarily sitting and observing youth rather than being engaged.</p> <p>Youth and staff interviewed described the facility as lacking order and being chaotic most times. They described feeling uneasy and unsafe. Attempts to offer structured rehabilitative programming after school was generally viewed by those delivering it and those receiving it as a failure. Youth were not interested in programming after a full day of school. They were restless and easily distracted. They were also required to attend programming as a unit, even if the topic did not apply to their assessed criminogenic needs.</p> <p>Youth and staff reported excessive idle time, especially on weekends. Staff reported that boredom often led to incidents between youth. Even though staff were aware of this problem, they expressed an inability to address it because of “lack of staff.”</p>   |
| <p><b>Recommendations to Achieve Compliance</b></p> | <p>A facility calendar and daily schedule should be posted for all youth and staff. The schedule should include daily structured rehabilitative programming for youth and be coordinated with the youth’s individual behavioral and treatment plans. The rehabilitative programming should consist of an approximate mix of physical, recreational, and leisure activities. The programs should support positive behavior, engage youth in constructive physical activity, and address general health and mental health needs. The daily schedule must also be consistently implemented for most of the compliance period.</p> <p>DJJ should consider providing skills-based group programming outside living units so youth are less distracted and more likely to be engaged. It is recommended that security staff be present during skills-based groups and participate to the extent that their participation does not detract from their duties. This involvement will enable security staff to reinforce the information youth learn and engage in skill practice at opportune times.</p> <p>DJJ must also ensure sufficient staffing levels so youth may realize the full benefits of programming.</p> |

## SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*
- Documents provided by DJJ on August 23, 2022.
  - July-August Weekly Incentive 5-week calendar
  - August 2022 BRRC Incentive Calendar
  - August 2022 BRRC Recreational Calendar
  - All Day School Schedule



- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.
- Virtual staff and parent interviews conducted during September-October 2022.
- Various emails and documents provided by the Director of Settlement Compliance.

### 39. REHABILITATIVE PROGRAMMING MIX

Rehabilitative programming will include an appropriate mix of physical, recreational, and leisure activities. The programming will be designed to support positive behavior, engage youth in constructive physical activity, address general health and mental health needs, and be coordinated with youth's individual behavioral and treatment plans.

Compliance Rating

Not Rated

|   |  |
|---|--|
| <p><b>Description of Monitoring Process</b></p> | <p>The monitoring team conducted a BRRC site visit September 7-9, 2022, interviewed BRRC staff and youth, and reviewed emails and documents provided by the Director of Settlement Compliance. The monitoring team also reviewed DJJ's <i>Initial Implementation Plan</i>.</p>   |
| <p><b>Findings &amp; Analysis</b></p>           | <p>During the site visit, the monitoring team observed efforts to provide rehabilitative programming. The extent to which an appropriate mix of rehabilitative programming is provided requires more evaluation. Staff social workers and clinical team members are responsible for delivering individualized and group treatment services. Staff interviewed indicated that when working one-on-one with a youth they feel the youth is responsive and willing to learn new skills and ways of thinking. However, once the youth returned to their unit, those lessons were soon forgotten as they became more concerned about personal safety.</p> <p>Social worker staff stated they could not successfully deliver group programming in the units because youth were distracted and tired after a long school day. The monitoring team observe two group programs and noted that youth were walking around, lying down, talking to others, and generally not engaged. Staff shared that youth who wanted to participate in any programming were intimidated and discouraged by other youth from doing so. Staff also stated they did not feel safe in the units.</p> <p>Youth interviewed stated that while they wanted to engage in rehabilitative services, it was not a priority for them. Their safety trumped everything. Youth indicated they had trouble sleeping because they feared victimization. Youth also said they did not trust staff to intervene because staff were either unaware of their surroundings or were fearful of the youth. As a result, youth believed they needed to be vigilant to protect themselves from harm. At least one youth stated that he purposefully misbehaved so he would be placed in isolation and away from youth who he feared would attack him. He had been seriously injured in a previous attack.</p> |

|   |   |
|---|---|
|   | <p>Multiple staff (not just social workers) stated that a full day of school was too much for the youth and contributed to behavioral problems. However, when youth attended school for half a day, it was reported that there was too much idle time. Youth were bored and engaged in horseplay or other behaviors that led to problems and incidents. No data were examined to determine if half or full school days contributed to fewer or more incidents.</p>  |
| <p><b>Recommendations to Achieve Compliance</b></p> | <p>A facility calendar and daily schedule should be posted for all youth and staff. The schedule should include daily structured rehabilitative programming for youth and be coordinated with the youth’s individual behavioral and treatment plans. The rehabilitative programming should consist of an approximate mix of physical, recreational, and leisure activities. The programs should support positive behavior, engage youth in constructive physical activity, and address general health and mental health needs. The daily schedule must also be consistently implemented for most of the compliance period.</p> <p>DJJ should consider providing skills-based group programming outside living units so youth are less distracted and more likely to be engaged. It is recommended that security staff be present during skills-based groups and participate to the extent that their participation does not detract from their duties. This involvement will enable security staff to reinforce the information youth learn and engage in skill practice at opportune times.</p> <p>DJJ must also ensure sufficient staffing levels so youth may realize the full benefits of programming.</p> <p>The daily schedule should also be consistently implemented.</p> <p>Additionally, it is recommended that DJJ track the number of hours of evidence-based treatment services youth receive on their individual criminogenic needs. The dosage hours completed should be monitored and shared with the youth, their family, and the parole board so progress can be measured and corrective action taken if necessary to ensure youth are receiving the services needed.</p> |

## SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*
- Documents provided by DJJ on August 23, 2022.
  - BRRRC Blank Stats Form
  - Youth Programming Dosage Logs
  - August 2022 BRRRC Incentive Calendar
  - August 2022 BRRRC Recreational Calendar

- Weekly Incentive August 22
  - Initial Supervision and Service Plan
  - Updated Supervision and Service Plan
- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.
- Virtual staff and parent interviews conducted during September-October 2022.
- Various emails and documents provided by the Director of Settlement Compliance.

# Approach to Behavior Management

## 40. APPROACH TO BEHAVIOR MANAGEMENT

Within six months [October 2022] of the effective date, DJJ will retain consultants to assist in establishing a positive behavior management program and provide BRRRC staff with regular on-site coaching for at least two years. In seeking out consultants, DJJ will prioritize individuals who have experience in implementing behavior management systems while reducing uses of force and lessening the unnecessary use of isolation. DJJ and the DOJ will jointly select the consultants.

|  | Compliance Rating  | Not Rated |
|--|--|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team will review the consultant contract for compliance with this requirement.  |           |
| <b>Findings &amp; Analysis</b>               | The monitoring team is aware that DJJ is negotiating with a consulting firm regarding a new behavior management system for BRRRC. A proposal and staff resumes have been reviewed. Additional resumes have been submitted for consideration by DJJ and the DOJ to ensure that the selected staff are individuals who have successfully implemented behavior management systems that reduced the use of force and lessened the use of isolation. There is no finalized contract as of this October 3, 2022, review. |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall continue its efforts to secure a contract with a qualified consultant to deliver and train staff on a new behavior management system. The consultant should have experience using effective behavior management to reduce use of force and isolation.  |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*
- Various emails and documents provided by the Director of Settlement Compliance.

## 41. POSITIVE BEHAVIOR MANAGEMENT TOOLS

Within twelve months [April 2023] of the effective date, DJJ will establish positive behavior management tools to encourage compliance with facility rules by providing positive incentives, including both short- and long-term incentives. These tools shall be reviewed and approved by the Subject Matter Expert.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team will review the new behavior management tools for compliance with this requirement.   |           |
| <b>Findings &amp; Analysis</b>               | The monitoring team is aware that DJJ is negotiating with a consulting firm regarding a new behavior management system for BRRC. A proposal and staff resumes have been reviewed. Additional resumes have been submitted for consideration by DJJ and the DOJ to ensure that the selected staff are individuals who have successfully implemented behavior management systems that reduced the use of force and lessened the use of isolation. There is no finalized contract as of this October 3, 2022, review. |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall continue its efforts to secure a contract with a qualified consultant to deliver and train staff on a new behavior management system.   |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*
- Various emails and documents provided by the Director of Settlement Compliance.

## 42. CONSISTENTLY IMPLEMENT BEHAVIOR MANAGEMENT TOOLS

DJJ will consistently implement the established positive behavior management tools to reduce youth-on-youth violence.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team will review that DJJ consistently implements the established positive behavior management tools to reduce youth-on-youth violence.  |           |
| <b>Findings &amp; Analysis</b>               | The monitoring team is aware that DJJ is negotiating with a consulting firm regarding a new behavior management system for BRRC. A proposal and staff resumes have been reviewed. Additional resumes have been submitted for consideration by DJJ and the DOJ to ensure that the selected staff are individuals who have successfully implemented behavior management systems that reduced the use of force and lessened the use of isolation. There is no finalized contract as of this October 3, 2022, review. |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ must select a new behavior management system and move forward with implementing it. Implementation must include appropriate staff training and monitoring for consistency and fidelity in applying the system. All staff providing direct care coverage should be trained on de-escalation. Addressing staffing shortages is needed.  |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*
- Various emails and documents provided by the Director of Settlement Compliance.

## 43. DE-ESCALATION STRATEGIES AND GRADUATED RESPONSES

DJJ will provide staff with de-escalation strategies and a graduated array of responses and sanctions, other than use of physical force or isolation, to employ when positive behavior management tools are unsuccessful.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b> | The monitoring team reviewed current policies and procedures, conducted a facility site visit on September 7-9, 2022, and interviewed BRRC staff and youth to learn about de-escalation strategies and graduated responses.   |           |
| <b>Findings &amp; Analysis</b>           | <p>Per DJJ's <i>Initial Implementation Plan</i> and interviews with staff, the department is implementing the Safe Crisis Management (SCM) de-escalation and restraint training. All security staff and teachers are required to complete the de-escalation portion of the training. Only the restraint portion will be mandatory for security staff. The goal is to have all staff trained by December 2022. Some security staff and teachers interviewed stated they completed the training, although training attendance records were not reviewed to confirm these statements.</p> <p>Policy 924, Youth Behavior Management, describes an array of responses; however, they are not applied consistently according to interviewed staff and youth. The monitoring team did not review any data, reports, or video to assess whether this perception was accurate. DJJ plans to hire a consultant to assist with implementing a new system. There have been reports of youth-on-youth violence. The monitoring team did not review data to assess the magnitude of the problem.</p> <p>Staff also reported significant staff shortages, which often leave one staff providing coverage on the units. The monitoring team is aware that DJJ is requiring all staff to be trained on de-escalation strategies to respond to situations and reduce conflict. Some staff, such as the Behavior Intervention (BI) Specialists, have already completed the training. However, the BI staff indicated during interviews that they are often assigned to provide unit security coverage and cannot respond to crises. The BIs also no longer provide case management to youth with frequent behavior problems.</p> |           |
| <b>Recommendations to Achieve</b>        | DJJ should ensure that all staff assigned to direct care coverage complete and demonstrate competency in the required de-escalation/crisis response training as planned. DJJ should also develop or revise and implement a  |           |



|                   |   |
|-------------------|---|
| <b>Compliance</b> | comprehensive system of graduated responses. DJJ should continue its efforts to improve staffing coverage to allow BIs to resume their intended role. |
|-------------------|---|

## SOURCES

- Documents provided by DJJ on August 23, 2022.
  - Reclaim Document Folder
  - Policy 924, Youth Behavior Management
  - 924A, Exhibit Youth Progressive Discipline Chart
  - 924B, Youth Positive Behavior Report
  - 924C, Youth Negative Behavior
  - 924D, Behavior System Log
  - 924E, Calming Room Log
  - 924F, Attachment Calming Room Checklist
  - Phases Incentive Matrix
- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.
- Virtual staff and parent interviews conducted during September-October 2022.
- Various emails and documents provided by the Director of Settlement Compliance.

## 44. ON-SITE COACHES

DJJ and the behavior management consultants will identify DJJ staff members who are consistently able to successfully de-escalate youth conflicts and implement appropriate discipline. These staff members will serve as on-site coaches for colleagues and mentors on the use of behavior management.

|  | Compliance Rating  | Not Rated |
|--|--|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team will review DJJ's compliance with this requirement once the behavior management consultants are retained and the program implemented.  |           |
| <b>Findings &amp; Analysis</b>               | The monitoring team is aware that DJJ is negotiating with a behavior management consultant for technical assistance. There is no finalized contract as of this October 3, 2022, review.  |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ should finalize the selection of a new behavior management consultant and provide the monitoring team with a list of identified DJJS staff members who are consistently able to successfully de-escalate youth conflicts and implement appropriate discipline. These staff members will serve as on-site coaches for colleagues and mentors on the use of behavior management. DJJ should consider developing guidelines describing staff's roles and responsibility associated with coaching and mentoring. |           |

### SOURCES

- Not applicable.

# Use of Force

## 45. USE OF FORCE

Within nine months [January 2023] of the effective date, DJJ, with the help of consultants, will revise its policies and procedures governing use of force and restraints, and provide the revised policies and procedures to the Subject Matter Expert and the United States for approval. The United States and the Subject Matter Expert will review the proposed policies and procedures and propose any revisions necessary within one month [February 2023] of receiving the proposal.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team will document receipt of any revised DJJ policies and procedures governing the use of force and restraints, and document proposed revisions. The monitoring team also reviewed DJJ's <i>Initial Implementation Plan</i> . |           |
| <b>Findings &amp; Analysis</b>               | This element cannot be measured at this time as no new policies and procedures have been submitted. DJJ is currently working on revisions to the policy.  |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit to the DOJ and the SME revised Use of Force policies and procedures by January 2023.   |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*

## 46. IMPLEMENT REVISED POLICIES AND PROCEDURES

Within 18 months [October 2023] of the effective date, DJJ will implement the revised use of force policies and procedures.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team will document that DJJ implemented the revised use of force policies and procedures within the required time frame.         |           |
| <b>Findings &amp; Analysis</b>               | This element cannot be measured at this time as no new policies and procedures have been submitted.   |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit to the DOJ and the SME revised Use of Force policies and procedures by January 2023 and implement the changes by October 2023. |           |

### SOURCES

- Not applicable.

## 47. LIMIT USES OF FORCE

Staff will limit uses of force or restraints to exceptional situations where a youth is currently physically violent and poses an immediate danger to self or others.

|  | Compliance Rating  | Not Rated |
|--|--|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team reviewed department policies and procedures, conducted a BRRC site visit September 7-9, 2022, conducted in-person interviews with staff and youth at BRRC, conducted virtual interviews with BRRC staff, and reviewed emails and documents provided by the Director of Settlement Compliance. The monitoring team also reviewed DJJ's <i>Initial Implementation Plan</i> . The monitoring team will request and analyze data on use of force and restraints to determine compliance. |           |
| <b>Findings &amp; Analysis</b>               | The monitoring did not review incident reports or data to determine whether use of force was limited to exceptional situations where a youth is currently physically violent and poses an immediate danger to self or others. This review will occur following a data request. Interviews with staff and youth indicated that public safety officers are called to intervene in most incidents. However, the monitoring team did not review data to determine whether these reports were accurate.       |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ will provide direction via policy and procedure and document that staff limit the use of force or restraints to only those incidents that pose an immediate danger to self or others. DJJ and the monitoring team shall work together to agree on the content and format of data needed to measure whether staff are following the policy. If data does not exist, DJJ will identify how they will begin to collect and document this data.  |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex*, August 12, 2022.
- Documents provided by DJJ on August 23, 2022.
  - 310, Mechanical Restraints
- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.
- Virtual staff interviews conducted during September 2022.

## 48. REASONABLE EFFORTS

Prior to using force or restraints, staff will make reasonable efforts to attempt and to exhaust a graduated set of interventions that avoid or minimize the use of force.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team reviewed department policies and procedures, conducted a BRRC site visit September 7-9, 2022, interviewed staff and youth at BRRC, and conducted virtual interviews with BRRC staff. The monitoring team also reviewed DJJ's <i>Initial Implementation Plan</i> . The monitoring team will request and analyze data on the use of force and restraints to determine compliance.   |           |
| <b>Findings &amp; Analysis</b>               | It was noted during interviews with a number of staff that the Behavior Intervention Specialists, who would typically respond to deescalate situations, are currently unable to fulfill that role as they have been assigned to fill staff ratios. It is also reported by some interviewed youth and staff that security staff and public safety officers do not utilize de-escalation techniques. The monitoring team did not review data, incident reports, or video footage to determine whether staff are deploying reasonable efforts to avoid or minimize the use of force. |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ needs to implement a new behavior management program and train all staff in new techniques to control behavior and de-escalate situations. DJJ and the monitoring team shall work together to agree on the content and format of data needed to measure whether staff are successfully utilizing interventions other than force to respond to and resolve incidents. If data does not exist, DJJ will identify how they will begin to collect and document this data.   |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex*, August 12, 2022.
- Documents provided by DJJ on August 23, 2022.
  - 310, Mechanical Restraints
- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.

- Virtual staff interviews conducted during September 2022.

## 49. USE FORCE FOR THE MINIMUM AMOUNT OF TIME

In situations where uses of force or restraints are necessary, staff will use force for the minimum amount of time necessary to stabilize the situation. As soon as the youth regains self-control and the immediate situation is safe for the youth and others, staff will temper their use of force and stop using restraints with respect to the youth involved.

|  | Compliance Rating  | Not Rated |
|--|--|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team reviewed department policies and procedures, conducted a BRRC site visit September 7-9, 2022, interviewed staff and youth at BRRC, and conducted virtual interviews with BRRC staff. The monitoring team also reviewed DJJ's <i>Initial Implementation Plan</i> .  |           |
| <b>Findings &amp; Analysis</b>               | The monitoring team did not have data or incident reports to determine whether staff use force for the minimum amount of time necessary to stabilize the situation.  |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ needs to implement a new behavior management program and train all staff in new techniques to control behavior and de-escalate situations. DJJ and the monitoring team shall work together to agree on the content and format of data needed to measure whether staff's use of force was for the minimum amount of time necessary to stabilize a situation. If data does not exist, DJJ will identify how they will begin to collect and document this data. |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex*, August 12, 2022.
- Documents provided by DJJ on August 23, 2022.
  - 310, Mechanical Restraints
- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.
- Virtual staff interviews conducted during September 2022.



## 50. PROHIBITION ON USE OF FORCE

Staff will not use force or restraints as punishment or in retaliation for disobedience or the youth's failure to follow a verbal command.

|  | Compliance Rating  | Not Rated |
|--|--|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team reviewed department policies and procedures, conducted a BRRC site visit September 7-9, 2022, interviewed staff and youth at BRRC, and conducted virtual interviews with BRRC staff. The monitoring team also reviewed DJJ's <i>Initial Implementation Plan</i> .  |           |
| <b>Findings &amp; Analysis</b>               | The monitoring team did not have data or incident reports to determine whether staff use force as punishment or retaliation.   |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ needs to implement a new behavior management program and train all staff in new techniques to control behavior and de-escalate situations. DJJ and the monitoring team shall work together to agree on the content and format of data needed to measure whether staff used force or restraints as punishment or retaliation for disobedience or the youth's failure to follow a verbal command. If data does not exist, DJJ will identify how they will begin to collect and document this data. |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex*, August 12, 2022.
- Documents provided by DJJ on August 23, 2022.
  - 310, Mechanical Restraints
- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.
- Virtual staff interviews conducted during September 2022.

## 51. ONLY TRAINED STAFF MAY USE APPROVED TECHNIQUES

Only staff specifically trained in the application of force are permitted to use such techniques and trained staff may only use techniques approved by policy and consistent with training.

|  | Compliance Rating  | Not Rated |
|--|--|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team reviewed department policies and procedures, conducted a BRRC site visit September 7-9, 2022, interviewed staff and youth at BRRC, and conducted virtual interviews with BRRC staff. The monitoring team also reviewed DJJ's <i>Initial Implementation Plan</i> .  |           |
| <b>Findings &amp; Analysis</b>               | DJJ policy 310, Mechanical Restraints, limits these techniques to trained staff. The monitoring team did not review data, incident reports, or video footage to determine whether trained or untrained staff are using techniques approved by policy and consistent with training.   |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ and the monitoring team shall work together to agree on the content and format of data needed to measure whether trained or untrained staff used force during an incident and whether the use of force was consistent with policy and training. If data does not exist, DJJ will identify how they will begin to collect and document this data. |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex*, August 12, 2022.
- Documents provided by DJJ on August 23, 2022.
  - 310, Mechanical Restraint
- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.
- Virtual staff interviews conducted during September 2022.

## 52. USE OF FORCE DOCUMENTATION

DJJ will ensure that staff promptly document and report all uses of force and restraints, to include:

- i. A description of the youth action that created a serious and immediate danger to self or others necessitating the use of force or restraint;
- ii. A description of verbal directives and graduated interventions that were attempted to avoid or minimize the use of force or restraints; and
- iii. The type of force or restraint used, including naming the specific techniques on which officers are trained, and for how long it was used.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team reviewed department policies and procedures, conducted a BRRC site visit September 7-9, 2022, interviewed staff and youth at BRRC, and conducted virtual interviews with BRRC staff. The monitoring team also reviewed DJJ's <i>Initial Implementation Plan</i> .   |           |
| <b>Findings &amp; Analysis</b>               | <p>DJJ policy 326, Reporting Events, requires staff to document "significant events, serious incidents, accidents, and other significant information" involving youth, staff, and others. DJJ maintains an Event Reporting System (ERS) to track incidents.</p> <p>The monitoring team did not review data or incident reports to determine whether staff documented use of force and restraints as required.</p> |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ and the monitoring team shall work together to agree on the content and format of data needed to measure whether staff promptly document and report all uses of force and restraints and with the level of detail specified in this provision. If data does not exist, DJJ will identify how they will begin to collect and document this data.   |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex*, August 12, 2022.
- Documents provided by DJJ on August 23, 2022.
  - 326, Reporting Events
  - 326A, Attachment SCDJJ Required Event Reporting
  - 326A, SCDJJ Required Event Reporting

- 326B, Corrective Action Form
- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.

## 53. MEDICAL EVALUATION FOLLOWING USE OF FORCE

After an instance of use of force or restraint, DJJ will ensure that youth are evaluated promptly by a qualified medical professional or transported to a medical emergency facility promptly, unless the youth refuses a medical evaluation. Except in an exceptional circumstance, the youth should be transported to the qualified medical professional by a staff member who was not involved in the use of force or restraint.

**Compliance Rating**

**Not Rated**

|   |   |
|---|---|
| <p><b>Description of Monitoring Process</b></p>     | <p>The monitoring team reviewed department policies and procedures, conducted a BRRC site visit September 7-9, 2022, interviewed staff and youth at BRRC, and conducted virtual interviews with BRRC staff. The monitoring team also reviewed DJJ's <i>Initial Implementation Plan</i>.</p>   |
| <p><b>Findings &amp; Analysis</b></p>               | <p>DJJ policy 310, Mechanical Restraint, requires a medical assessment to be conducted after the use of force. The policy also states, "The person responsible for transporting the youth to medical has to be someone who was not involved in the Use of Force."</p> <p>DJJ policy 604, Youth Refusal of Medical Care, requires that the youth's refusal be documented using form 604A, Refusal of Medical Care. The completed form is filed in the youth's health record, with a copy sent to the youth's social worker. The monitoring team is aware that DJJ is updating this policy.</p> <p>The monitoring team did not review data or incident reports to determine whether youth were medically assessed following a use of force incident, how many youth refused an assessment, and who transported the youth.</p> |
| <p><b>Recommendations to Achieve Compliance</b></p> | <p>DJJ and the monitoring team shall work together to agree on the content and format of data needed to measure whether youth are medically assessed following a use of force incident, how many youth refused an assessment, and whether the staff person transporting the youth was involved in the use of force. If data does not exist, DJJ will identify how they will begin to collect and document this data.</p>  |

## SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*
- Documents provided by DJJ on August 23, 2022.
  - 604, Youth Refusal of Medical Care
  - 604A, Refusal of Medical Care
- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.
- Virtual staff interviews conducted during September 2022.

## 54. MEDICAL EVALUATION PROCEDURES

The qualified medical professional will examine and question the youth involved in the use of force or restraint outside the hearing of other staff or youth. If, in the course of the youth's examination, a qualified medical professional suspects the inappropriate use of force or restraints, the qualified medical professional will immediately take all appropriate steps to document the matter in the youth's medical record and complete an incident report.

Compliance Rating

Not Rated

|  |   |
|--|---|
| <b>Description of Monitoring Process</b>     | The monitoring team reviewed department policies and procedures, conducted a BRRC site visit September 7-9, 2022, interviewed staff and youth at BRRC, and conducted virtual interviews with BRRC staff.  |
| <b>Findings &amp; Analysis</b>               | The monitoring team did review data or incident reports to determine the number of instances in which a qualified medical professional suspected and documented inappropriate use of force or restraints. The monitoring team is aware that DJJ is updating policy 604, Youth Refusal of Medical Care.  |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit to the monitoring team the policy requiring qualified medical professionals to document suspected inappropriate use of force. If such a policy does not exist, DJJ shall develop and submit the policy for review. DJJ and the monitoring team shall work together to agree on the content and format of data needed to measure the number of instances in which qualified medical professional suspected and documented inappropriate use of force or restraint. If data does not exist, DJJ will identify how they will begin to collect and document this data. |

### SOURCES

- Documents provided by DJJ on August 23, 2022.
  - 604, Youth Refusal of Medical Care
  - 604A, Refusal of Medical Care
- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.
- Virtual staff interviews conducted during September 2022.

## 55. MEDICAL EVALUATION REFUSAL PROCEDURES

If a youth refuses a medical evaluation immediately after the use of force or restraint, staff will document the refusal and report it to the qualified medical professional. Within 12 hours of the use of force or restraint, the qualified medical professional will contact the youth to offer to conduct an evaluation. If the youth consents, or if injuries are visible without conducting an exam, the qualified medical professional will document any injuries. If the youth again refuses and no injuries are visible, the qualified medical professional will document the youth's refusal and any reasons the youth provides for the refusal.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team reviewed department policies and procedures, conducted a BRRC site visit September 7-9, 2022, interviewed staff and youth at BRRC, and conducted virtual interviews with BRRC staff.  |           |
| <b>Findings &amp; Analysis</b>               | <p>DJJ Policy 310, Mechanical Restraints requires a youth to be seen “as soon as possible for medical assessment” after using mechanical restraints. However, the policy does not address what action must be taken if a youth refuses.</p> <p>DJJ policy 604, Youth Refusal of Medical Care, requires that the youth's refusal be documented using form 604A, Refusal of Medical Care. The completed form is filed in the youth's health record, with a copy sent to the youth's social worker.</p> <p>The monitoring team did not review data or incident reports to determine compliance with this requirement. The monitoring team is aware that DJJ is updating policy 604, Youth Refusal of Medical Care.</p> |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit to the monitoring team the policy or procedure reflecting this requirement. If such a policy or procedure does not exist, DJJ shall develop and submit the policy or procedure for review. DJJ and the monitoring team shall work together to agree on the content and format of data needed to measure whether qualified medical professionals are following the procedures outlined in this provision. If data does not exist, DJJ will identify how they will begin to collect and document this data.  |           |



**SOURCES**

- Documents provided by DJJ on August 23, 2022.
  - 310, Mechanical Restraints
  - 604, Youth Refusal of Medical Care
  - 604A, Refusal of Medical Care
- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.
- Virtual staff interviews conducted during September 2022.

# Investigations of Physical Harm to Youth from Other Youth, Excessive or Unnecessary Use of Physical Force, or Improper Use of Isolation

## 56. DRAFT NEW INVESTIGATION POLICIES, PROCEDURES, & PRACTICES

Within nine months [January 2023] of the effective date, DJJ, with assistance from the Subject Matter Expert, will draft modifications to policies, procedures, and practices concerning investigations of physical harm to youth from other youth, excessive or unnecessary use of physical force, or improper use of isolation. DJJ will provide the revised policies and procedures to the United States and the Subject Matter Expert for approval. The United States and the Subject Matter Expert will review the proposed policies and procedures and propose any revisions necessary within one month [February 2023] of receiving the proposal.

Compliance Rating

Not Rated

|  |   |
|--|---|
| <b>Description of Monitoring Process</b>     | The monitoring team reviewed department policies and procedures, conducted a BRRC site visit September 7-9, 2022, interviewed staff and youth at BRRC, and conducted virtual interviews with BRRC staff. The monitoring team also reviewed DJJ's <i>Initial Implementation Plan</i> . |
| <b>Findings &amp; Analysis</b>               | Per DJJ's <i>Initial Implementation Plan</i> , the department is revising its investigations policies and practices.  |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit the proposed policies and procedures to the DOJ and the monitoring team by January 2023.   |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex*, August 12, 2022.

- Documents provided by DJJ on August 23, 2022.
  - 326, Reporting Events
  - 326A, Attachment SCDJJ Required Event Reporting
  - 326A, SCDJJ Required Event Reporting
  - 326B, Corrective Action Form
- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.
- Virtual staff interviews conducted during September 2022.

## 57. IMPLEMENT REVISED INVESTIGATION POLICIES AND PROCEDURES

Within 18 months [October 2023] of the effective date, DJJ will implement the revised investigation policies and procedures.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team will confirm DJJ's implementation of the revised investigation policies and procedures once they are adopted.   |           |
| <b>Findings &amp; Analysis</b>               | Per DJJ's <i>Initial Implementation Plan</i> , the department is revising its investigations policies and practices.  |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit the proposed policies and procedures to the DOJ and the monitoring team by January 2023. Once approved, DJJ must begin implementing the new policy by October 2023. DJJ must consistently implement the new policy thereafter during the compliance rating period. |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*

## 58. INITIAL REVIEW OF INCIDENTS

DJJ will ensure that all uses of force or restraint, allegations of physical harm to youth from other youth, or the improper use of isolation receive an initial review, including review of the incident report, use of force report, and video, if applicable. DJJ will track every use of force or restraint, allegation of youth-on-youth harm, or the improper use of isolation incident that receives an initial review, the outcome of that review, and the basis for that determination.

|  | Compliance Rating  | Not Rated |
|--|--|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team reviewed department policies and procedures, conducted a BRRC site visit September 7-9, 2022, interviewed staff and youth at BRRC, and conducted virtual interviews with BRRC staff. The monitoring team also reviewed DJJ's <i>Initial Implementation Plan</i> .  |           |
| <b>Findings &amp; Analysis</b>               | DJJ Policy 326, Reporting Events, requires staff to document "significant events, serious incidents, accidents, and other significant information" involving youth, staff, and others. Per DJJ's <i>Initial Implementation Plan</i> , investigation policies are being revised.  |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit to the monitoring team policy or procedure to determine compliance with this requirement. DJJ and the monitoring team shall work together to agree on the content and format of data needed to determine compliance with this requirement. If data does not exist, DJJ will identify how they will begin to collect and document this data. |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex*, August 12, 2022.
- Documents provided by DJJ on August 23, 2022.
  - 326, Reporting Events
  - 326A, Attachment SCDJJ Required Event Reporting
  - 326A, SCDJJ Required Event Reporting
  - 326B, Corrective Action Form
- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.

## 59. INVESTIGATION PROCEDURES

All incidents where:

(1) a youth or someone on the youth's behalf files a grievance or an informal complaint of youth-on-youth physical harm from fights or assaults, uses of force or restraint, or the improper use of isolation; or (2) where the initial review described above indicates conduct may be in violation of criminal law (excluding Assault and Battery 3rd degree involving a youth perpetrator) or agency policy will be fully investigated by trained investigators with no involvement or personal interest in the underlying event. A full investigation conducted by a DJJ investigator will be completed within ten business days of the investigator receiving the allegation for investigation. The policies may permit an extension of no more than ten additional business days to complete an investigation where the investigator documents the need for such an extension to complete the steps below. A full investigation must include, but may not be limited to:

- i. Interviews with the alleged victim, the alleged perpetrator, all officers present during the incident, and any other witnesses;
- ii. Review of any documentation that exists, including the incident report, youth's grievance, if applicable, use of force report, and witness statements;
- iii. Review of a video of the incident, if one exists; and
- iv. A written report documenting the investigation and the conclusion(s).

Compliance Rating

Not Rated

|   |   |
|---|---|
| <p><b>Description of Monitoring Process</b></p> | <p>The monitoring team reviewed department policies and procedures, conducted a BRRC site visit September 7-9, 2022, interviewed staff and youth at BRRC, and conducted virtual interviews with BRRC staff. The monitoring team also reviewed DJJ's <i>Initial Implementation Plan</i>.</p>   |
| <p><b>Findings &amp; Analysis</b></p>           | <p>DJJ Policy 328, Investigations, describes how investigations for administrative and criminal matters will be conducted. The policy requires that each report be thoroughly investigated and documented. Statistical information will also be maintained for review and reference. Each report will be entered into the Event Report System.</p> <p>The policy does not attach a time frame for when an investigation must be completed, except for all Prison Rape Elimination Act investigations which must be completed within 45 days. The policy is not prescriptive in identifying what must be included in a full investigation, but it does describe the general steps that must be taken to conduct and complete an investigation. Per DJJ's <i>Initial Implementation Plan</i>, investigation policies are being revised.</p> <p>The youth grievance policy is also being revised. The current policy, 920, Youth Grievance Process, indicates that a grievance or allegation detailing</p> |

|  |  |
|--|--|
|  | threatened or imminent harm to a youth will be considered an emergency grievance.  |
| <b>Recommendations to Achieve Compliance</b> | DJJ’s revised policy must reflect the requirements of this provision. DJJ shall submit to the monitoring team the revised policy to determine compliance with this requirement. DJJ must consistently implement the revised policy and procedures. |

## SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*
- Documents provided by DJJ on August 23, 2022.
  - 328, Investigations
  - 328A, Administrative
  - 328B, Request for Extension
  - 920, Youth Grievance Process
  - 920A, Youth Allegation Grievance Appeal.
- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.
- Virtual staff interviews conducted during September 2022.

## 60. STAFF REVIEW OF INCIDENTS

If the initial review of a use of force or restraint does not result in a full investigation, the investigator will send all documentation, including the incident report, use of force report, and video, if available, to the impacted Deputy Director(s). The impacted Deputy Director(s) will ensure that the employee's Senior Manager reviews the documentation and video, if available, to evaluate proper techniques and de-escalation efforts. Upon this review, the Senior Manager will provide staff feedback as appropriate to reinforce or correct staff.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team reviewed department policies and procedures, conducted a BRRC site visit September 7-9, 2022, interviewed staff and youth at BRRC, and conducted virtual interviews with BRRC staff. The monitoring team also reviewed DJJ's <i>Initial Implementation Plan</i> .   |           |
| <b>Findings &amp; Analysis</b>               | DJJ Policy 328, Investigations, describes how incidents shall be classified and assigned based on the nature and severity of the incident. "Events may be assigned to the Criminal Investigations Section, Management Review Section, Appropriate Deputy Director for Management Handling, Juvenile and Family Relations Department, or externally to the appropriate law enforcement agency." The policy does not include guidance or criteria to determine when a full investigation is required. The policy does not describe how incidents not requiring a full investigation will be forwarded to staff to handle and use as an opportunity to provide staff feedback. Per DJJ's <i>Initial Implementation Plan</i> , investigations policies and procedures are being revised |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ's revised policy must reflect the requirements of this provision. DJJ shall submit to the monitoring team the revised policy to determine compliance with this requirement. DJJ must consistently implement the revised policy and procedures.  |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex*, August 12, 2022.
- Documents provided by DJJ on August 23, 2022.
  - 328, Investigations



- 328A, Administrative
  - 328B, Request for Extension
- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.
- Virtual staff interviews conducted during September 2022.

## 61. PERMISSIBLE CONTACT FOLLOWING AN ALLEGATION

After an allegation as indicated above is made, DJJ will make a prompt determination about the level of permissible contact between the youth and the alleged perpetrator during the investigation period, in light of the nature of the allegation and the safety of all youth.

|  | Compliance Rating  | Not Rated |
|--|--|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team reviewed department policies and procedures, conducted a BRRC site visit September 7-9, 2022, interviewed staff and youth at BRRC, and conducted virtual interviews with BRRC staff. The monitoring team also reviewed DJJ's <i>Initial Implementation Plan</i> .  |           |
| <b>Findings &amp; Analysis</b>               | Per DJJ's <i>Initial Implementation Plan</i> , it is the responsibility of the Facility Administrator to "work collaboratively with the Inspector General's Office to stay informed of the status of the investigation to ensure staff separation orders can lapse or in effect." Per DJJ's <i>Initial Implementation Plan</i> , investigations policies and procedures are being revised. |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ's revised policy must reflect the requirements of this provision. DJJ shall submit to the monitoring team the revised policy to determine compliance with this requirement. DJJ must consistently implement the revised policy and procedures.   |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex*, August 12, 2022.
- Documents provided by DJJ on August 23, 2022.
  - 328, Investigations
  - 328A, Administrative
  - 328B, Request for Extension
- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.
- Virtual staff interviews conducted during September 2022.

## 62. VIDEO REQUEST FOLLOWING AN ALLEGATION

DJJ will ensure that a video of the incident, if one exists, is requested within three days of receiving the allegation.

|  | Compliance Rating  | Not Rated |
|--|--|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team reviewed department policies and procedures, conducted a BRRRC site visit September 7-9, 2022, interviewed staff and youth at BRRRC, and conducted virtual interviews with BRRRC staff. The monitoring team also reviewed DJJ's <i>Initial Implementation Plan</i> .                                   |           |
| <b>Findings &amp; Analysis</b>               | Per DJJ's <i>Initial Implementation Plan</i> , investigations policies and procedures are being revised. There is a plan to have videos bookmarked within three calendar days upon receiving an allegation. Bookmarking saves the video and bookmarks are good for 30 to 45 days. This practice is not currently in place. |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit the revised policy or procedures that address this requirement to the monitoring team. DJJ must consistently implement the revised policy and procedures.   |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex*, August 12, 2022.
- Documents provided by DJJ on August 23, 2022.
  - 328, Investigations
  - 328A, Administrative
  - 328B, Request for Extension
- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.
- Virtual staff interviews conducted during September 2022.

## 63. RETENTION SCHEDULE

DJJ will retain all investigation documents, including video and interview notes, for at least one year.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team reviewed department policies and procedures, conducted a BRRC site visit September 7-9, 2022, interviewed staff and youth at BRRC, and conducted virtual interviews with BRRC staff.                            |           |
| <b>Findings &amp; Analysis</b>               | Per DJJ's <i>Initial Implementation Plan</i> , investigations policies and procedures are being revised. Current policy 328, Investigations, states that "Investigative records will be maintained for 7 years and then destroyed." |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit the revised policy or procedures that address this requirement to the monitoring team. DJJ must consistently implement the revised policy and procedures.  |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex*, August 12, 2022.
- Documents provided by DJJ on August 23, 2022.
  - 328, Investigations
  - 328A, Administrative
  - 328B, Request for Extension
- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.
- Virtual staff interviews conducted during September 2022.

## 64. INVESTIGATIONS WITHOUT VIDEO

If the incident requires a full investigation as described in paragraph 59, the investigation must be completed even where no video exists of the incident.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team reviewed department policies and procedures, conducted a BRRC site visit September 7-9, 2022, interviewed staff and youth at BRRC, and conducted virtual interviews with BRRC staff.  |           |
| <b>Findings &amp; Analysis</b>               | The monitoring team was unable to identify policies or procedures that address this requirement. Per DJJ's <i>Initial Implementation Plan</i> , investigations policies and procedures are being revised. |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit the revised policy or procedures that address this requirement to the monitoring team. DJJ must consistently implement the revised policy and procedures.                                |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex*, August 12, 2022.
- Documents provided by DJJ on August 23, 2022.
  - 328, Investigations
  - 328A, Administrative
  - 328B, Request for Extension
- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.  
Virtual staff interviews conducted during September 2022.

## 65. ACTION FOLLOWING A FINDING OF STAFF MISCONDUCT

DJJ will take prompt and appropriate corrective and disciplinary measures in response to a finding of staff misconduct arising from the inappropriate use of isolation, the excessive or unnecessary use of physical force, or a failure to protect youth from physical harm by other youth.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team reviewed department policies and procedures, conducted a BRRC site visit September 7-9, 2022, interviewed staff and youth at BRRC, and conducted virtual interviews with BRRC staff. The monitoring team also reviewed DJJ's <i>Initial Implementation Plan</i> .   |           |
| <b>Findings &amp; Analysis</b>               | DJJ Policy 328, Investigations, describes management action required pending the outcome of an investigation. The policy requires that any corrective action taken by management must be submitted within 15 business days to the Inspector General utilizing 326B, Corrective Action Report. The monitoring team did not review data to verify that "prompt and appropriate corrective and disciplinary measures" were taken in response to a finding of staff misconduct.                                       |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ and the monitoring team shall work together to agree on the content and format of data needed to measure whether prompt and appropriate corrective and disciplinary measures were taken in response to a finding of staff misconduct arising from the inappropriate use of isolation, the excessive or unnecessary use of physical force, or a failure to protect a youth from physical harm by other youth. If data does not exist, DJJ will identify how they will begin to collect and document this data. |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*
- Documents provided by DJJ on August 23, 2022.
  - 328, Investigations
  - 328A, Administrative
  - 328B, Request for Extension

- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.
- Virtual staff interviews conducted during September 2022.

## 66. INVESTIGATIONS WHEN A YOUTH WITHDRAWS AN ALLEGATION

In cases where a youth withdraws an allegation, states a desire not to prosecute a criminal matter, declines to be interviewed about an allegation, or refuses to write a statement, this will not be used as the sole reason to terminate an investigation. The investigation will also include an effort to determine the reasons for the withdrawal or refusal.

### Compliance Rating

Not Rated

|  |   |
|--|---|
| <b>Description of Monitoring Process</b>     | The monitoring team reviewed department policies and procedures, conducted a BRRC site visit September 7-9, 2022. The monitoring team also reviewed DJJ's <i>Initial Implementation Plan</i> .  |
| <b>Findings &amp; Analysis</b>               | DJJ Policy 328, Investigations, does not address how investigations are handled when a youth withdraws an allegation or refuses to cooperate. Per DJJ's <i>Initial Implementation Plan</i> , investigations policies and procedures are being revised.                |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit to the monitoring team the revised policy or procedures that address this requirement. If a policy or procedure does not exist, DJJ will develop and submit the policy or procedure. DJJ must also consistently implement this policy or procedures. |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex*, August 12, 2022.
- Documents provided by DJJ on August 23, 2022.
  - 328, Investigations
  - 328A, Administrative
  - 328B, Request for Extension
- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.
- Virtual staff interviews conducted during September 2022.



# Isolation

## 67. USE OF ISOLATION

Within nine months [January 2023] of the effective date, DJJ, with assistance of consultants, will revise its isolation policies and procedures to be consistent with the principles set forth in paragraphs 68–94. DJJ will provide the revised policies and procedures to the United States and the Subject Matter Expert for approval. The United States and the Subject Matter Expert will review the proposed policies and procedures and propose any revisions necessary within one month [February 2023] of receiving the proposal.

Compliance Rating

Not Rated

|  |   |
|--|---|
| <b>Description of Monitoring Process</b>     | The monitoring team reviewed department policies and procedures, conducted a BRRC site visit September 7-9, 2022, interviewed staff and youth at BRRC, and conducted virtual interviews with BRRC staff. The monitoring team also reviewed DJJ's <i>Initial Implementation Plan</i> . |
| <b>Findings &amp; Analysis</b>               | This element cannot be measured at this time as no new policies and procedures have been submitted. Per DJJ's <i>Initial Implementation Plan</i> , the policies and procedures are being revised.   |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit to the DOJ and the monitoring team revised isolation policies and procedures by January 2023.  |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*

## 68. REVISED ISOLATION POLICIES AND PROCEDURES

Within 18 months [October 2023] of the effective date, DJJ will implement its revised isolation policies and procedures.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team will document that DJJ implemented the revised isolation policies and procedures within the required time frame.  |           |
| <b>Findings &amp; Analysis</b>               | This element cannot be measured at this time as no new policies and procedures have been submitted. Per DJJ's <i>Initial Implementation Plan</i> , the policies and procedures are being revised.     |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit to the DOJ and the monitoring team revised isolation policies and procedures by January 2023 and implement the changes by October 2023. DJJ must consistently implement the changes. |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*

## 69. REASONS FOR ISOLATION

Youth will only be isolated when the youth poses a serious and immediate danger to self or others and staff has made reasonable efforts to attempt and exhaust de-escalation strategies.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team will document that DJJ isolates youth per the new policy.   |           |
| <b>Findings &amp; Analysis</b>               | This element cannot be measured at this time as no new policies and procedures have been submitted. Per DJJ's <i>Initial Implementation Plan</i> , the policies and procedures are being revised.                           |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit to the DOJ and the monitoring team revised isolation policies and procedures by January 2023 and implement the changes by October 2023. DJJ must consistently implement the revised policy and procedures. |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*

## 70. PROHIBITIONS ON ISOLATION

Once DJJ revises its policies and procedures in accord with the schedule set out in this section, staff will not use isolation for discipline, punishment, retaliation, protective custody, suicide intervention, as a temporary living unit for youth who are awaiting transfer to other facilities, or any reason other than as a response to behavior that poses a serious and immediate danger to self or others.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team will review data and incident reports to document that DJJ is following its new isolation policy once it is implemented.  |           |
| <b>Findings &amp; Analysis</b>               | This element cannot be measured at this time as no new policies and procedures have been implemented.   |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit to the DOJ and the monitoring team revised isolation policies and procedures by January 2023 and implement the changes by October 2023. DJJ must consistently implement the revised policy and procedures. |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*

## 71. LESS RESTRICTIVE TECHNIQUES REQUIREMENT

Prior to using isolation, staff will utilize less restrictive techniques, such as talking with the youth to de-escalate the situation, removing the youth from other youths with whom he is in conflict, and placing the youth in another housing unit if safe to do so. Only after less restrictive techniques have failed may the facility use isolation.

Compliance Rating

Not Rated

|  |   |
|--|---|
| <b>Description of Monitoring Process</b>     | The monitoring team will review data and incident reports to document that DJJ is following its new isolation policy once it is implemented.  |
| <b>Findings &amp; Analysis</b>               | This element cannot be measured at this time as no new policies and procedures have been implemented. Per DJJ's <i>Initial Implementation Plan</i> , the policies and procedures are being revised.                         |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit to the DOJ and the monitoring team revised isolation policies and procedures by January 2023 and implement the changes by October 2023. DJJ must consistently implement the revised policy and procedures. |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*

## 72. NOTIFICATION OF ISOLATION

Whenever a youth is isolated, the staff will immediately notify the Facility Administrator or the Assistant Facility Administrator.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team will review data and incident reports to document that DJJ is following its new isolation policy once it is implemented.  |           |
| <b>Findings &amp; Analysis</b>               | This element cannot be measured at this time as no new policies and procedures have been implemented.   |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit to the DOJ and the monitoring team revised isolation policies and procedures by January 2023 and implement the changes by October 2023. DJJ must consistently implement the revised policy and procedures. |           |

### SOURCES

- Not applicable.

# Documentation of Isolation

## 73. DOCUMENTATION REQUIREMENTS

DJJ will ensure that documentation of isolation identifies with specificity what youth action created a serious and immediate danger to self or others necessitating the use of isolation, and what less restrictive techniques an officer used prior to using isolation.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team will review data and incident reports to document that DJJ is following its new isolation policy once it is implemented.  |           |
| <b>Findings &amp; Analysis</b>               | This element cannot be measured at this time as no new policies and procedures have been implemented.   |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit to the DOJ and the monitoring team revised isolation policies and procedures by January 2023 and implement the changes by October 2023. DJJ must consistently implement the revised policy and procedures. |           |

### SOURCES

- Not applicable.

# Duration of Isolation

## 74. DURATION OF ISOLATION

Youth will be in isolation only for the time necessary for the youth to regain self-control such that they no longer pose a serious and immediate danger. As soon as the youth's behavior ceases to pose a serious and immediate danger to self or others, or once the multidisciplinary team designates an alternative living unit/placement for the youth, whichever is sooner, staff will promptly return the youth to the general population or other appropriate living unit/placement.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team will review data and incident reports to document that DJJ is following its new isolation policy once it is implemented.  |           |
| <b>Findings &amp; Analysis</b>               | This element cannot be measured at this time as no new policies and procedures have been implemented.   |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit to the DOJ and the monitoring team revised isolation policies and procedures by January 2023 and implement the changes by October 2023. DJJ must consistently implement the revised policy and procedures. |           |

### SOURCES

- Not applicable.



## 75. INTERVENTION WHILE IN ISOLATION

During the time that a youth is in isolation, staff will provide intervention and observation. The goal of the intervention is to de-escalate the youth's behavior so that they can rejoin the general population as soon as possible.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team will review data and incident reports to document that DJJ is following its new isolation policy once it is implemented.  |           |
| <b>Findings &amp; Analysis</b>               | This element cannot be measured at this time as no new policies and procedures have been implemented.   |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit to the DOJ and the monitoring team revised isolation policies and procedures by January 2023 and implement the changes by October 2023. DJJ must consistently implement the revised policy and procedures. |           |

### SOURCES

- Not applicable.

## 76. ISOLATION TIME LIMIT

Youth will not remain in isolation for longer than four hours, except when approved by security leadership in the chain of command from Assistant Facility Administrator to Deputy Director.

**Compliance Rating**

**Not Rated**

|  |   |
|--|---|
| <b>Description of Monitoring Process</b>     | The monitoring team will review data and incident reports to document that DJJ is following its new isolation policy once it is implemented.  |
| <b>Findings &amp; Analysis</b>               | This element cannot be measured at this time as no new policies and procedures have been implemented.   |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit to the DOJ and the monitoring team revised isolation policies and procedures by January 2023 and implement the changes by October 2023. DJJ must consistently implement the revised policy and procedures. |

### SOURCES

- Not applicable.

## 77. ROLE OF QUALIFIED MENTAL HEALTH PROFESSIONAL

Within the first 24 hours of isolation, and every day thereafter, a qualified mental health professional must examine the youth in-person and document whether:

- i. The youth poses a serious and immediate danger to self or others;
- ii. The continued use of isolation will be detrimental to the youth's current mental health; and
- iii. Less restrictive measures may help to eliminate the serious and immediate danger to the youth or others.

Compliance Rating

Not Rated

|  |   |
|--|---|
| <b>Description of Monitoring Process</b>     | The monitoring team will review data and incident reports to document that DJJ is following its new isolation policy once it is implemented.  |
| <b>Findings &amp; Analysis</b>               | This element cannot be measured at this time as no new policies and procedures have been implemented.   |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit to the DOJ and the monitoring team revised isolation policies and procedures by January 2023 and implement the changes by October 2023. DJJ must consistently implement the revised policy and procedures. |

### SOURCES

- Not applicable.

## 78. EXTENSION REQUIREMENTS

Prior to extending isolation beyond four hours, and every day thereafter, the Assistant Facility Administrator, Facility Administrator, or other security leadership in the chain of command up to Deputy Director must visit the youth in-person, review any completed findings of the Qualified Mental Health Professional, talk to relevant staff, and document whether:

- i. Staff used less restrictive measures prior to using isolation and the effectiveness of those measures; and
- ii. The youth poses a serious and immediate danger to self or others.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team will review data and incident reports to document that DJJ is following its new isolation policy once it is implemented.  |           |
| <b>Findings &amp; Analysis</b>               | This element cannot be measured at this time as no new policies and procedures have been implemented.   |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit to the DOJ and the monitoring team revised isolation policies and procedures by January 2023 and implement the changes by October 2023. DJJ must consistently implement the revised policy and procedures. |           |

### SOURCES

- Not applicable.

## 79. REPORTING REQUIREMENTS

The conclusions from paragraphs 77–78 must be reported to the Deputy Director or Assistant Deputy Director (or equivalent title within the security leadership chain of command) within the first four hours, and every day thereafter, and approval must be granted to continue isolating the youth.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team will review data and incident reports to document that DJJ is following its new isolation policy once it is implemented.  |           |
| <b>Findings &amp; Analysis</b>               | This element cannot be measured at this time as no new policies and procedures have been implemented.   |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit to the DOJ and the monitoring team revised isolation policies and procedures by January 2023 and implement the changes by October 2023. DJJ must consistently implement the revised policy and procedures. |           |

### SOURCES

- Not applicable.

## 80. REMOVAL FROM ISOLATION

If, after reviewing the documentation, anyone in security leadership in the chain of command from Assistant Facility Administrator to Deputy Director determines that the youth is no longer a serious and immediate danger to self or others, the youth will be immediately removed from isolation and returned to the general population or other appropriate living unit/placement.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team will review data and incident reports to document that DJJ is following its new isolation policy once it is implemented.  |           |
| <b>Findings &amp; Analysis</b>               | This element cannot be measured at this time as no new policies and procedures have been implemented.   |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit to the DOJ and the monitoring team revised isolation policies and procedures by January 2023 and implement the changes by October 2023. DJJ must consistently implement the revised policy and procedures. |           |

### SOURCES

- Not applicable.

# Multidisciplinary Team to Review Isolation Placement

## 81. MULTIDISCIPLINARY TEAM

Within eighteen months [October 2023] of the effective date, BRRRC will develop a multidisciplinary team to review placements of youth in isolation.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team will review data and incident reports to document that DJJ is following its new isolation policy once it is implemented.  |           |
| <b>Findings &amp; Analysis</b>               | This element cannot be measured at this time as no new policies and procedures have been implemented.   |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit to the DOJ and the monitoring team revised isolation policies and procedures by January 2023 and implement the changes by October 2023. DJJ must consistently implement the revised policy and procedures. |           |

### SOURCES

- Not applicable.

## 82. MULTIDISCIPLINARY TEAM PROCEDURES

The multidisciplinary team will meet within 48 hours of a youth's placement in isolation to discuss and document:

- i. Whether the youth remains a serious and immediate danger to self or others. If not, the youth will be immediately returned to the general population or other appropriate living unit/placement;
- ii. What services the youth received in the general population, including education and mental health treatment;
- iii. How the youth will continue to receive needed services while in isolation;
- iv. An individualized plan designed to facilitate the youth's return to the general population or to an alternative location (such as alternative housing units or mental health treatment facilities);
  - a. The individualized plan will be created in consultation with the youth's family members, when possible; and
  - b. The plan will include an anticipated timeline for implementation and the youth's return to the general population.
- v. If the multidisciplinary team believes that a youth may be appropriate to be transferred to a mental health treatment facility, the team will immediately refer the youth to the SMI Special Needs Coordinator for further assessment.

Compliance Rating

Not Rated

|  |   |
|--|---|
| <b>Description of Monitoring Process</b>     | The monitoring team will review data and incident reports to document that DJJ is following its new isolation policy once it is implemented.  |
| <b>Findings &amp; Analysis</b>               | This element cannot be measured at this time as no new policies and procedures have been implemented.   |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit to the DOJ and the monitoring team revised isolation policies and procedures by January 2023 and implement the changes by October 2023. DJJ must consistently implement the revised policy and procedures. |

### SOURCES

- Not applicable.



### 83. MULTIDISCIPLINARY TEAM REVIEWS

The multidisciplinary team will continue to meet every three days while any youth is in isolation to discuss and document:

- i. Whether the youth remains a serious and immediate danger to self or others. If not, the youth will be immediately returned to the general population or other appropriate living unit/placement;
- ii. Implementation of the individualized plan; and
- iii. Any necessary modifications to the individualized plan the multidisciplinary team developed at its previous meeting.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team will review data and incident reports to document that DJJ is following its new isolation policy once it is implemented.  |           |
| <b>Findings &amp; Analysis</b>               | This element cannot be measured at this time as no new policies and procedures have been implemented.   |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit to the DOJ and the monitoring team revised isolation policies and procedures by January 2023 and implement the changes by October 2023. DJJ must consistently implement the revised policy and procedures. |           |

#### SOURCES

- Not applicable.

## 84. REVIEW OF YOUTH ISOLATED

The youth's unit team, which includes representatives from the security and mental health departments, will meet monthly to review youth who have been isolated two or more times in the past month or for one stay of more than four hours in the past month. The team will discuss and document:

- i. Whether the youth's mental health and behavioral needs can be met in the facility and, if not, whether a recommendation to the SMI Special Needs Coordinator is appropriate; and
- ii. Interventions that have been attempted to improve the youth's behavior, the success of those measures, and any additional or alternative interventions available to address the youth's needs.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team will review data and incident reports to document that DJJ is following its new isolation policy once it is implemented.  |           |
| <b>Findings &amp; Analysis</b>               | This element cannot be measured at this time as no new policies and procedures have been implemented.   |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit to the DOJ and the monitoring team revised isolation policies and procedures by January 2023 and implement the changes by October 2023. DJJ must consistently implement the revised policy and procedures. |           |

### SOURCES

- Not applicable.

## Development of Appropriate Space for Isolation

### 85. PLAN FOR USING ALTERNATIVE SAFE SPACES FOR ISOLATING YOUTH

Within 6 months [October 2022] of the effective date, DJJ will propose to the United States and the Subject Matter Expert a timeline to cease using the Laurel Building for youth in isolation and a plan to utilize alternative, safe spaces for isolating youth whose behavior poses a serious and immediate danger to self or others.

|  | Compliance Rating  | Not Rated |
|--|--|-----------|
| <b>Description of Monitoring Process</b> | The monitoring team conducted a BRRC site visit September 7-9, 2022, interviewed staff and youth at BRRC, and conducted virtual interviews with BRRC staff. The monitoring team also reviewed DJJ's <i>Initial Implementation Plan</i> .   |           |
| <b>Findings &amp; Analysis</b>           | <p>Per DJJ's <i>Initial Implementation Plan</i>, the department anticipates they "can realistically cease using Laurel entirely for isolation by February 2024, earlier if possible." DJJ plans to add doors to the four boys' unit pod rooms to meet this timeline. Currently, youth sleeping rooms do not have doors except for rooms in the Myrtle building. The plan is for eight of the ten rooms to be youth sleeping rooms. The remaining two rooms will be used for isolation if needed. The monitoring team is aware that the department is currently working with a vendor to begin installing doors. It is anticipated that this project will take more than a year to complete.</p> <p>DJJ's plan to continue to use Laurel for isolation until February 2024 is unacceptable. DJJ's current isolation practices and conditions subject youth to austere conditions. While the facility has been freshly painted inside, the mechanics and operation of the isolation units are deplorable. Youth in isolation reported problems with toilets and sinks not working correctly or dispensing dirty water. They also said they were not always released from their rooms for a daily shower or large muscle exercise. Youth shared that they were required to exercise in their room while staff led them through exercises or dance moves outside the door. The monitoring team observed this practice. Youth residing in Laurel are subject to days or weeks of forced</p> |           |

|   |   |
|---|---|
|   | <p>idleness. Youth said they either rarely or never went to the outdoor recreation area attached to the building. One youth exclaimed that he had not seen sunlight for many days. Few reported receiving any type of schoolwork. The monitoring team did not review documentation or video to confirm the accuracy of the youth’s statements. Staff did state that limited staffing prohibited frequent use of the recreation area.</p> <p>Social worker and clinical staff reported having to talk to youth through the door, making it difficult to assess needs or properly offer services, treatment, or support. Youth indicated that they sometimes were able to leave their room to make a phone call.</p> <p>Staffing issues were cited as why youth could not access services, exercise outdoors, and engage in programming. The monitoring team observed one security staff present and responsible for conducting room checks, which were documented on a separate piece of paper and then transcribed later on the room check form. This practice makes the data subject to inaccuracies. While the monitoring team understands the department’s staffing challenges, the team also observed many staff on campus who could be called upon to assist with security functions on a time-limited basis. Even calling upon staff to serve a one- or two-hour shift in the unit could improve conditions for youth and reduce the negative impact of isolation on their physical and social development and mental health.</p> <p>During the facility tour, staff informed the monitoring team that Laurel is also being used to house new intake youth. The monitoring team is aware that DJJ desires to make this practice temporary while they work to improve their intake procedures. BRRRC used to operate an intake unit with sleeping rooms, but that area has been converted to storage space with the sleeping room doors removed. It is recommended that DJJ explore whether this unit could be reinstated as an alternative safe space for youth. While the area would require reinstalling doors and other possible measures, the timelines associated with this effort may be less than those for new construction.</p> <p>DJJ could also explore how to use the timeout rooms in each pod. According to staff, these rooms were initially designed to provide short-term confinement but were discontinued due to not meeting Prison Rape Elimination Act (PREA) requirements. The department is encouraged to revisit the PREA restriction to identify how to retrofit the rooms to allow them to be used for their original purpose. Exploring these interim solutions and working to find other solutions could shorten the timeline to cease using the Laurel Building.</p> |
| <p><b>Recommendations to Achieve Compliance</b></p> | <p>DJJ needs to establish a more aggressive timeline to cease using the Laurel Building for isolating youth. A target date of February 2024 means that youth will be subject to the harsh conditions of Laurel for another 16 months. That timeframe does not seem reasonable, given that the monitoring team identified at least two other alternatives. DJJ should</p>  |

|  |   |
|--|---|
|  | <p>explore these and other options to determine whether the timeline can be shortened. The monitoring team also knows that DJJ plans to designate rooms in each pod for temporary isolation as part of the construction plan to add doors to sleeping rooms. These rooms could come online before February 2024. In preparation, DJJ should be actively working on policies and procedures for using these rooms.</p> |
|--|---|

## SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*
- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.
- Virtual staff interviews conducted during September 2022.
- Various emails and documents provided by the Director of Settlement Compliance.

## 86. ALTERNATIVE SAFE SPACES FOR ISOLATING YOUTH TIMELINE APPROVAL

The United States and the Subject Matter Expert will review the proposed timeline and plan and propose any revisions necessary within one month of receiving the proposal. The final timeline is subject to approval by the United States.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team reviewed the proposed timeline in the <i>Initial Implementation Plan</i> .      |           |
| <b>Findings &amp; Analysis</b>               | The DOJ and the SME provided feedback to DJJ on their implementation plan. DJJ provided a response. |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ provided a timeline within its Implementation Plan, which is under review.                      |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*

# Conditions and Services While in Isolation

## 87. ISOLATION CONDITIONS

Youth in isolation will receive access to sunlight, working showers and bathrooms, mattresses, and food that is the same quality and quantity as offered to the general population.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team conducted a BRRC site visit September 7-9, 2022, interviewed staff and youth at BRRC, and conducted virtual interviews with BRRC staff. The monitoring team also reviewed DJJ's <i>Initial Implementation Plan</i> .  |           |
| <b>Findings &amp; Analysis</b>               | <p>Per DJJ's <i>Initial Implementation Plan</i>, the department states they comply with this requirement. The monitoring team disagrees.</p> <p>During the facility site visit on September 7-9, the monitoring team visited the Laurel Building on two occasions. The team interviewed youth and observed operations. Youth reported not being released from their rooms daily for a shower or large muscle exercise. More than one youth reported never having been in the outside exercise yard. Windows in each unit were observed as being painted over, reducing or eliminating natural sunlight. Youth said their toilet did not always work or the water from their sink was dirty. Staff explained that staffing levels were the reason why youth may not have a daily shower or access to the outdoor exercise yard. The monitoring team did not review documentation, logs, or video footage to verify youth and staff statements.</p> |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ must immediately improve isolation conditions to ensure that youth have daily access to sunlight in the outdoor exercise yard (weather permitting) or outside their rooms, daily showers, and working bathrooms and sinks in their room. DJJ should also replace the painted over windows in youth sleeping rooms.  |           |

**SOURCES**

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*
- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.



## 88. EDUCATIONAL SERVICES WHILE IN ISOLATION

Within the first school day after a youth is placed in isolation, DJJ will provide meaningful education services delivered by a teacher certified by the State or an associate teacher working under the supervision of a teacher certified by the State. If the youth has not regained enough self-control to receive in-person educational services, representatives from the multidisciplinary team should meet to discuss temporary alternatives to in-person education.

Compliance Rating

Not Rated

|  |  |
|--|--|
| <b>Description of Monitoring Process</b>     | The monitoring team conducted a BRRRC site visit September 7-9, 2022, interviewed staff and youth at BRRRC, and conducted virtual interviews with BRRRC staff. The monitoring team also reviewed DJJ's <i>Initial Implementation Plan</i> .  |
| <b>Findings &amp; Analysis</b>               | Per DJJ's <i>Initial Implementation Plan</i> , the department states they included this provision in their draft Isolation of Youth policy 323. This provision is not currently in place.  |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit the draft Isolation of Youth policy to the monitoring team once it is completed. Once approved, DJJ must consistently implement the policy. Until the policy is approved, DJJ must implement interim plans to offer youth meaningful educational services while in isolation. |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex*, August 12, 2022.
- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.

# Housing Vulnerable Youth

## 89. REVISED HOUSING CLASSIFICATION POLICIES

Within nine months [January 2023] of the effective date, DJJ will review and revise its housing classification policies for youth who are identified as vulnerable to victimization to ensure youths' reasonable safety.

Compliance Rating

Not Rated

|  |   |
|--|---|
| <b>Description of Monitoring Process</b>     | The monitoring team will review DJJ's revised policy to ensure it appropriately identifies youth who are vulnerable to victimization.   |
| <b>Findings &amp; Analysis</b>               | This element cannot be measured at this time as no new policies and procedures have been implemented. Per DJJ's <i>Initial implementation Plan</i> , the department is working on a draft policy. |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall revise its housing classification policies for youth who are identified as vulnerable to victimization by January 2023. DJJ must consistently implement the policy once adopted.        |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*

## 90. ADMISSION SCREENING PROTOCOLS

DJJ will revise its admissions screening protocols to identify youth who are vulnerable to victimization by other youth in the facility.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team will review DJJ’s revised admissions screening protocols to ensure it appropriately identifies youth who are vulnerable to victimization by other youth in the facility.      |           |
| <b>Findings &amp; Analysis</b>               | This element cannot be measured at this time as no new policies and procedures have been implemented. Per DJJ’s <i>Initial implementation Plan</i> , the department is working on a draft policy. |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall revise its admission screening protocols to identify youth vulnerable to victimization by January 2023. DJJ must consistently implement the protocols once adopted.                     |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*

## 91. SPECIALIZED HOUSING FOR VULNERABLE YOUTH

Youth who are not screened as vulnerable to victimization upon admission to BRRC, but later become vulnerable to violence from other youth will be considered for placement in specialized housing. Prior to placing a youth under this provision, the facility will consider other measures and options for ensuring safety.

Compliance Rating

Not Rated

|  |   |
|--|---|
| <b>Description of Monitoring Process</b>     | The monitoring team will review DJJ’s practices for identifying youth who become vulnerable to victimization by other youth in the facility.  |
| <b>Findings &amp; Analysis</b>               | This element cannot be measured at this time as no new policies and procedures have been implemented. Per DJJ’s <i>Initial implementation Plan</i> , the department is working on a draft policy. |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall develop a policy or procedures for identifying youth who become vulnerable to victimization. DJJ must consistently implement the policy once adopted.                                   |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex*, August 12, 2022.

## 92. ACCESS TO SERVICES

Youth in specialized housing will have access to all services, including education, recreation, and mental health services to the same extent as youth in the general population.

|  | Compliance Rating  | Not Rated |
|--|--|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team will verify that youth in specialized housing have equitable access to the identified services.  |           |
| <b>Findings &amp; Analysis</b>               | This element cannot be measured at this time as no new policies and procedures have been implemented. Per DJJ's <i>Initial implementation Plan</i> , the department is working on a draft policy.  |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall develop a policy or procedures for ensuring youth have access to all services, including education, recreation, and mental health services to the same extent as youth in the general population. DJJ must consistently implement the policy once adopted. |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*

# Youth On Suicide Watch

## 93. PROHIBITION ON ISOLATION

The facility will ensure that youth who are suicidal are not placed in isolation.

Compliance Rating

Not Rated

|  |   |
|--|---|
| <b>Description of Monitoring Process</b>     | The monitoring team will review that DJJ will ensure that youth who are suicidal are not placed in isolation.   |
| <b>Findings &amp; Analysis</b>               | Per DJJ's <i>Initial implementation Plan</i> , the department is adding this requirement to the Isolation of Youth policy 323 and the Mental Health Emergency and Crisis Intervention policy 911. |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall submit the proposed policies to the DOJ and monitoring team for review. Once approved, DJJ must consistently implement the new policy.  |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex*, August 12, 2022.
- September 7-9, 2022, facility site visit.
- Staff and youth interviews conducted on September 7-9, 2022.

## 94. DMH AMENDED AGREEMENT

Within six months [October 2023] of the effective date, DJJ will make reasonable efforts to amend their Agreement with the Department of Mental Health for the Identification and Transfer of DJJ Committed Juveniles Who Have a Serious Mental Illness to ensure that:

- i. The Department of Mental Health identifies placements for youth with serious mental illness to ensure that youth with serious mental illness are transferred to DMH custody within 30 days of their identification as a youth with a serious mental illness; and
- ii. Youth who are suicidal are promptly considered for placement out of DJJ and into DMH custody.

Compliance Rating

Not Rated

|  |   |
|--|---|
| <b>Description of Monitoring Process</b>     | The monitoring team conducted a BRRRC site visit September 7-9, 2022, interviewed staff and youth at BRRRC, and conducted virtual interviews with BRRRC staff. The monitoring team also reviewed DJJ's <i>Initial Implementation Plan</i> . |
| <b>Findings &amp; Analysis</b>               | Per DJJ's <i>Initial Implementation Plan</i> , DJJ is still negotiating with the Department of Mental Health (DMH) on a new agreement.  |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall continue to make reasonable efforts to amend the Agreement with DMH.  |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*
- Various emails and documents provided by the Director of Settlement Compliance.

# TRAINING

## General Provisions

### 95. TRAINING CURRICULUM REVIEW

Within twelve months [April 2023] of the effective date, the Subject Matter Expert will review DJJ's current training curriculum and assist DJJ to develop a training curriculum that complies with the requirements of paragraphs 96-100.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team will conduct a review of DJJ's current training curriculum and assist DJJ to develop a training curriculum that complies with the requirements of paragraphs 96-100.  |           |
| <b>Findings &amp; Analysis</b>               | Per DJJ's <i>Initial Implementation Plan</i> , all training materials and curricula were filed in a secure file and available for review. DJJ commits to work collaboratively with the SME to revise and improve training. The department is also expanding its training staff. |           |
| <b>Recommendations to Achieve Compliance</b> | The monitoring team will coordinate with DJJ a training review and revision schedule in accordance with the April 2023 deadline.  |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*
- Virtual staff interviews conducted during September 2022.
- Various emails and documents provided by the Director of Settlement Compliance.



# Behavior Management

## 96. COMPETENCY-BASED STAFF TRAINING

Within 18 months [October 2023] of the effective date, and annually thereafter, all security staff and teaching staff will receive competency-based training in non-physical, verbal interventions to de-escalate potential aggression from youth. This training will include conflict management, crisis intervention, and appropriate communication with youth.

Compliance Rating

Not Rated

|  |  |
|--|--|
| <b>Description of Monitoring Process</b>     | The monitoring team will conduct a review of DJJ's training records to confirm compliance with this requirement.   |
| <b>Findings &amp; Analysis</b>               | Per DJJ's <i>Initial Implementation Plan</i> and staff interviews, the department is implementing the Safe Crisis Management (SCM) de-escalation and restraint training. All security staff and teachers are required to complete the de-escalation portion of the training. The restraint portion will be mandatory for security staff. Interviews with teachers confirmed completion of the training, although training attendance records were not reviewed to verify these statements. Some security staff have completed the training, and the goal is to have all staff trained by December 2022. Again, training attendance records were not reviewed for confirmation. |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall train all security and teaching staff on SCM by October 2023. DJJ and the monitoring team shall work together to agree on the content and format of data needed to document training completion and whether the training content met the requirements of this provision.   |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*
- Virtual staff interviews conducted during September 2022.

## 97. STAFF RETRAINING PROCEDURES

If an investigation or review of an incident reveals that staff did not use appropriate de-escalation, the staff member will be retrained within 90 days. If an investigation or review of an incident reveals that a staff member who has been retrained continues to fail to use appropriate de-escalation, DJJ will address the staff member's failure through discipline.

|  | Compliance Rating  | Not Rated |
|--|--|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team will review the updated policy when it is completed as well as training and incident records to ensure staff are retrained per the policy.   |           |
| <b>Findings &amp; Analysis</b>               | Per DJJ's <i>Initial Implementation Plan</i> , "this requirement will be added to policy in 2022."   |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall provide the monitoring team with the revised policy when it is completed. DJJ and the monitoring team shall work together to agree on the content and format of data needed to document that identified staff who did not use appropriate de-escalation are retrained within 90 days and how DJJ will address through disciplinary action a staff member's continued failure to use appropriate de-escalation. |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*
- Virtual staff interviews conducted during September 2022.

## Use Of Physical Force

### 98. STAFF TRAINING ON UPDATED USE OF PHYSICAL FORCE POLICY

Within 18 months [October 2023] of the effective date, and annually thereafter, all security staff will receive training on the updated Use of Physical Force policy, including training in conflict resolution, management of assaultive behavior, and approved uses of force that minimize the risk of injury to youth and staff. All training shall include each staff member's demonstration of the approved techniques and require that staff meet the minimum standards for competency established by the method.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team will review the training curricula and training attendance records to verify compliance with this requirement.  |           |
| <b>Findings &amp; Analysis</b>               | Per DJJ's <i>Initial Implementation Plan</i> , training on Safe Crisis Management began in April 2022. The goal is to have all staff trained by December 2022. The Use of Physical Force policy is currently being revised.                             |           |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall revise the Use of Force policy and train all staff initially and annually on the required elements to include demonstrated minimal competence with the skills. DJJ shall retain and provide training attendance records to verify compliance. |           |

#### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex*, August 12, 2022.
- Virtual staff interviews conducted during September 2022.

## 99. RETRAINING WITHIN 90 DAYS

If an investigation or review of an incident reveals that staff used inappropriate or excessive force, the staff member will be retrained within 90 days and will be prohibited from using force until demonstrating proficiency in the proper technique(s). The retraining and competency demonstration must be documented prior to such staff using force again.

Compliance Rating

Not Rated

|  |   |
|--|---|
| <b>Description of Monitoring Process</b>     | The monitoring team will review the updated policy when it is completed as well as training and incident records to ensure staff are retrained per the policy.  |
| <b>Findings &amp; Analysis</b>               | Per DJJ's <i>Initial Implementation Plan</i> , "this requirement will be added to policy in 2022."  |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall provide the monitoring team with the revised policy when it is completed. DJJ and the monitoring team shall work together to agree on the content and format of data needed to document that identified staff who used inappropriate force are retrained within 90 days and how their proficiency in the proper technique(s) is assessed. |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*
- Virtual staff interviews conducted during September 2022.

# Investigation

## 100. INVESTIGATIONS STAFF TRAINING

Within 18 months [October 2023] of the effective date, and annually thereafter, DJJ will train all investigations staff, including supervisory investigative staff, in the prompt, thorough, and independent investigation of allegations of youth on youth physical harm, inappropriate use of force, and inappropriate use of isolation. DJJ will train the facility administrator and other facility security supervisory staff in the investigation process and the importance of thorough documentation of incidents and video retention.

Compliance Rating

Not Rated

|  |  |
|--|--|
| <b>Description of Monitoring Process</b>     | The monitoring team will review training records to determine compliance with this requirement.  |
| <b>Findings &amp; Analysis</b>               | Per DJJ's <i>Initial Implementation Plan</i> , in June 2022 all investigators attended a virtual training on criminal and administrative investigations. Two officers were also enrolled in the detective school as part of the South Carolina Criminal Justice Academy. The monitoring team did not review training records to confirm attendance at these training. The team also did not review the agenda or curriculum outline to determine the relevancy of these courses. |
| <b>Recommendations to Achieve Compliance</b> | DJJ and the monitoring team shall work together to agree on the content and format of data needed to document that all investigation staff meet the training requirements of this provision.   |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex*, August 12, 2022.

# QUALITY ASSURANCE

## General Provisions

### 101. QUALITY ASSURANCE SYSTEM

Within 24 months [April 2024] of the effective date, DJJ must develop a quality assurance system that identifies trends and corrects deficiencies with regard to safety and security and the use of isolation at BRRC in a timely manner.

Compliance Rating

Not Rated

|  |  |
|--|--|
| <b>Description of Monitoring Process</b>     | The monitoring team will review DJJ's quality assurance system to determine compliance with this requirement.  |
| <b>Findings &amp; Analysis</b>               | Per DJJ's <i>Initial Implementation Plan</i> , quality assurance "will receive limited time and attention as BRRC has other earlier priorities and deadlines."   |
| <b>Recommendations to Achieve Compliance</b> | The monitoring team acknowledges the need to prioritize activities under this agreement. The team advises DJJ to begin work on this requirement soon. The lack of data undermines the department's ability to make informed decisions. Data will also aid them in assessing progress toward meeting many of the settlement agreement's provisions. Putting such a system in place is a complex task and one that will take time. |

#### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*

## 102. MONTHLY DATA REVIEW

On a monthly basis, DJJ will collect, review, and analyze data and information sufficient to assess and identify trends in youth-on-youth physical harm, inappropriate use of force, and inappropriate use of isolation.

|  | Compliance Rating  | Not Rated |
|--|--|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team will review DJJ’s monthly data collection reports to determine compliance with this requirement.   |           |
| <b>Findings &amp; Analysis</b>               | Per DJJ’s <i>Initial Implementation Plan</i> , quality assurance “will receive limited time and attention as BRRC has other earlier priorities and deadlines.”   |           |
| <b>Recommendations to Achieve Compliance</b> | The monitoring team acknowledges the need to prioritize activities under this agreement. The team advises DJJ to begin work on this requirement soon. The lack of data undermines the department’s ability to make informed decisions. Data will also aid them in assessing progress toward meeting many of the settlement agreement’s provisions. |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex*, August 12, 2022.

## 103. DATA ELEMENT REQUIREMENTS

On a monthly basis, DJJ will collect, review, and analyze data and information sufficient to assess and identify trends in youth-on-youth physical harm, inappropriate use of force, and inappropriate use of isolation.

- i. The number of incidents involving youth-on-youth physical violence;
- ii. The number of incidents involving youth injuries related to assaults/fights or use of force or restraints;
- iii. The number of incidents involving use of force;
- iv. The number of incidents involving restraints;
- v. Injuries to youth related to assaults/fights or use of force or restraints, including the type of injury, the source of the injury, and the severity;
- vi. The positive behavior incentives used at BRRC during the preceding month;
- vii. The consequences imposed on youth for negative behaviors in the preceding month;
- viii. The consequences imposed on staff for improper uses of force or restraints;
- ix. The number of grievances filed alleging harm to youth from youth-on-youth physical altercations, inappropriate use of force, or inappropriate use of isolation;
- x. The number of full investigations as outlined above completed within ten business days;
- xi. The number of full investigations as outlined above completed in more than ten business days;
- xii. The number of open investigations;
- xiii. The number of youth placed in isolation;
- xiv. The number of youth who remained in isolation over four hours;
- xv. The number of youth who remained in isolation over three days;
- xvi. The individual lengths of stay for youth placed in isolation; and
- xvii. The overall average length of stay of all youth placed in isolation.

### Compliance Rating

### Not Rated

|  |   |
|--|---|
| <b>Description of Monitoring Process</b>     | The monitoring team will review DJJ's monthly data collection reports to determine compliance with this requirement.  |
| <b>Findings &amp; Analysis</b>               | Per DJJ's <i>Initial Implementation Plan</i> , quality assurance "will receive limited time and attention as BRRC has other earlier priorities and deadlines."  |
| <b>Recommendations to Achieve Compliance</b> | The monitoring team acknowledges the need to prioritize activities under this agreement. The team advises DJJ to begin work on this requirement soon to identify how each required data element will be collected, reported, and analyzed. The lack of data undermines the department's ability to make informed decisions. Data will also aid them in assessing progress toward meeting many of the settlement agreement's provisions. |



**SOURCES**

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*

## 104. SAMPLE DATA REVIEW

On a monthly basis, DJJ will review a sample of incident reports, isolation justification and continuation documents, and investigations. The review and subsequent recommendations will be documented.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team will review DJJ’s monthly data collection reports and documented recommendations to determine compliance with this requirement.   |           |
| <b>Findings &amp; Analysis</b>               | Per DJJ’s <i>Initial Implementation Plan</i> , quality assurance “will receive limited time and attention as BRRC has other earlier priorities and deadlines.”  |           |
| <b>Recommendations to Achieve Compliance</b> | The monitoring team acknowledges the need to prioritize activities under this agreement. The team advises DJJ to begin work on this requirement soon to identify the review process. The lack of data undermines the department’s ability to make informed decisions. Data will also aid them in assessing progress toward meeting many of the settlement agreement’s provisions. |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*

## 105. OTHER DATA REVIEW RECOMMENDATIONS

The Subject Matter Expert may recommend to DJJ additional information related to youth-on-youth physical altercations, use of force, or isolation that DJJ will consider for collection, review, and analysis on a regular basis.

|  | Compliance Rating   | Not Rated |
|--|---|-----------|
| <b>Description of Monitoring Process</b>     | The monitoring team will review DJJ’s monthly data collection reports and assess whether additional information is required to determine compliance with this requirement. If additional information is useful, the SME will make the recommendation to DJJ.  |           |
| <b>Findings &amp; Analysis</b>               | Per DJJ’s <i>Initial Implementation Plan</i> , quality assurance “will receive limited time and attention as BRRC has other earlier priorities and deadlines.”  |           |
| <b>Recommendations to Achieve Compliance</b> | The monitoring teams acknowledges the need to prioritize activities under this agreement. The team advises DJJ to begin work on developing and implementing a quality assurance system. Once the system is in place and data are identified, the monitoring team will review the system and offer, if applicable, any recommendations for strengthening the system. |           |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex*, August 12, 2022.

## 106. QUALITY IMPROVEMENT COMMITTEE

DJJ will develop and implement within 24 months [April 2024] of the effective date a Quality Improvement Committee that will:

- i. Review and analyze the data collected pursuant to paragraphs 103-105;
- ii. Identify trends and interventions,
- iii. Make recommendations for further investigation of identified trends and for corrective action, including system changes;
- iv. Monitor implementation of recommendations and corrective actions; and
- v. Develop systems to alert administrators to patterns of behavior or allegations that may indicate safety concerns, staff training deficiencies, or persistent policy violations.

Compliance Rating

Not Rated

|  |   |
|--|---|
| <b>Description of Monitoring Process</b>     | The monitoring team will review the membership, charge, and activities of the Quality Improvement Committee once it is formed and active to determine compliance with this requirement. |
| <b>Findings &amp; Analysis</b>               | Per DJJ's <i>Initial Implementation Plan</i> , quality assurance "will receive limited time and attention as BRRC has other earlier priorities and deadlines."                          |
| <b>Recommendations to Achieve Compliance</b> | DJJ shall take the necessary steps in the future to ensure that a Quality Improvement Committee is active by April 2024 and tasked to complete the activities to meet this requirement. |

### SOURCES

- *Initial Implementation Plan: South Carolina Department of Juvenile Justice, Broad River Road Complex, August 12, 2022.*