Kansas Administrative Regulations

Department of Health and Environment

Article 4.—Maternal and Child Health—Detention Centers and Secure Care Centers for Children and Youth.

28-4-355b. Behavior management.

(a) Rules.

(1) Written policies shall provide for a behavior management system that assists juveniles to develop inner control so that they can manage their own behavior in a socially acceptable manner. Procedures and practice shall provide:

(A) Expectations which are age appropriate and which allow for special abilities and limitations; and

(B) positive and negative consequences related to each expectation.

(2) Written rules of juvenile conduct shall define expected behaviors and related consequences.

(A) A rulebook containing expected behaviors, ranges of consequences and disciplinary procedures shall be given to each juvenile and youth care staff member.

(B) An acknowledgement of receipt of the rulebook shall be signed by each juvenile and kept in each juvenile's file.

(C) When a literacy or language problem prevents a juvenile from understanding the rulebook, a staff member or translator shall assist the juvenile in understanding the rules.

(D) The rulebook shall be translated into any language spoken by a significant number of persons in the jurisdiction.

(3) All staff members who have direct contact with juveniles shall be thoroughly familiar with the rules of juvenile conduct, the rationale for the rules and the intervention options available.

(b) Discipline.

(1) Discipline which is humiliating, frightening or physically harmful to the juvenile shall not be used at any time. The resident shall be protected against all forms of

neglect, exploitation or degrading forms of discipline. No juvenile shall be isolated without a youth care staff member within visual and auditory distance or confined in any dark space. Electronic monitoring or an audio communication system shall not replace the required presence of a youth care staff member.

(2) Corporal punishment shall not be used.

(3) Under no circumstances shall any juvenile be deprived of meals, clothing, sleep, medical services, exercise, correspondence, parental contact or legal assistance for disciplinary purposes. If a juvenile is in locked isolation during normal school hours, school work shall be provided to the juvenile.

(4) Under no circumstances shall any juvenile be allowed to supervise or to administer discipline to other juveniles.

(c) Isolation.

(1) Routine nighttime lock-up during sleeping hours is permitted in detention centers for the purpose of security during sleeping hours. A detention center which uses nighttime lockup shall not be required to comply with the special requirements concerning locked isolation for routine lockup of juveniles during sleeping hours. Written policies and procedures shall govern the use of routine nighttime lockup. Procedure and practice shall provide for:

(A) Direct, irregularly scheduled, physical observation of juveniles at least every 15 minutes by a youth care staff member; and

(B) written reports of periodic observation of the juveniles. The reports shall be kept on file at the center.

(2) Electronic monitoring shall not replace periodic observation of juveniles by a youth care staff member during nighttime lock-up.

(3) Locked isolation shall be permitted within a detention center only when a juvenile is out of control, continually refuses to obey reasonable and lawful requests or behaves in a way that presents a threat to self or others. Within a secure care center, locked isolation shall be permitted only when a juvenile's behavior presents a threat to self or others.

(4) Each center shall have written policies and procedures which govern the use of locked isolation. Procedures and practice shall:

(A) Permit the use of locked isolation only when all other less restrictive methods of controlling the juvenile's dangerous behavior have been attempted and have failed;

(B) require a written order by a designated staff member each time a juvenile is placed in or released from isolation;

(C) ensure that no more than one juvenile is placed in an isolation room at any one time;

(D) provide for a search of each juvenile and removal of any items that may be used to injure self or others before admission to the isolation room;

(E) ensure that each juvenile is provided appropriate clothing at all times;

(F) ensure that each juvenile in isolation is provided a mattress with linens on a clean, level surface above floor level;

(G) ensure that each juvenile receives all meals and snacks normally served and is allowed time to exercise and perform necessary bodily functions;

(H) ensure that each juvenile has prompt access to drinking water and washroom facilities;

(I) ensure that the designated staff member on duty makes appropriate entries in the case records regarding the juvenile's use of the isolation room;

(J) ensure that at least one youth care staff member is in the proximity of each juvenile in isolation at all times, with direct, physical observation at least every 15 minutes. At the time of each observation, the following shall occur:

(i) Interactive intervention shall be attempted, unless the juvenile is sleeping;

(ii) the result of the intervention shall be recorded; and

(iii) the condition of the juvenile shall be recorded;

(K) ensure constant supervision when a juvenile is considered suicidal; and

(L) provide for an assessment of the need for continued isolation at each shift change and for documentation of the reasons isolation is continued.

(4) If a juvenile is in locked disciplinary isolation before routine nighttime lock-up occurs, the hours of nighttime lock-up shall be counted as time in locked disciplinary isolation for that juvenile.

(5) A juvenile shall not remain in isolation for more than 24 hours without written approval of the director or the director's designee who is not involved in the incident.

(A) The director or designated staff member who is not involved in the incident shall visit with each isolated juvenile at least once within each eight-hour period after the first 24 hours.

(B) Written approval of the director or director's designee shall be required for each eight hour period isolation is extended, beyond the first 24 hours.

(6) Isolation shall not exceed 48 hours for any offense unless the juvenile continues to behave in a way that presents a threat to self or others.

(7) If a juvenile requires more than 48 hours of consecutive isolation or more than 72 cumulative hours of isolation within any seven day period, or is placed on suicide watch, an emergency staffing shall be held to discuss the appropriateness of the juvenile's continued placement at the center and to develop an emergency plan for the juvenile.

(A) Participants in the emergency staffing shall include:

(i) the juvenile if behavior permits;

(ii) the director or the director's designee;

(iii) a physician, clinical psychologist, or clinical social worker who has assessed the juvenile; and

(iv) appropriate staff members.

(B) The placing agent or representative and the juvenile's parents or legal guardian shall be notified of the emergency staffing and invited to participate. Documentation of notifications shall be kept on file at the center.

(C) The results of the emergency staffing shall be recorded and maintained on file at the center.

(8) All youth care staff and program personnel shall be informed at all times of the current status of each resident in isolation.

(d) Restraint. Each center shall have written policies and procedures which govern the use of restraint.

(1) Procedure and practice shall:

(A) Limit the use of physical restraint to instances of justifiable self-defense, protection of the juvenile or others, protection of property or prevention of escape;

(B) permit the use of physical restraint only when all other less restrictive methods of controlling the juvenile's dangerous behavior were either attempted and failed or diagnostically eliminated;

(C) prohibit the use of physical restraint as punishment.

(D) ensure that mechanical restraints are used within the secure parameters of the center only when required to move a juvenile to locked isolation. The use of mechanical restraints shall not exceed 30 minutes in duration;

(E) ensure that chemical agents are not used by center personnel; and

(F) provide that psychotropic medications are not used for disciplinary reasons. Psychotropic medications shall be administered only when medically necessary, upon order of the juvenile's physician.

(2) A center which uses any form of restraint shall develop and ensure the practice of a comprehensive written policy on the use of each restraint. The policy shall identify:

(A) The forms of restraint in use at the center, clearly demonstrating that each specified form of restraint is required to appropriately serve juveniles;

(B) specific criteria for the use of each form of restraint;

(C) the staff members authorized to approve the use of each form of restraint;

(D) the staff members authorized and qualified to administer or apply each form of restraint;

(E) the approved procedures for application or administration of each form of restraint;

(F) the procedures for monitoring any juvenile placed in each form of restraint;

(G) any limitations on the use of each form of restraint, including time limitations;

(H) the procedures for immediate, continual review of restraint placements for each form of restraint, except passive physical restraint; and

(I) procedures for comprehensive recordkeeping on all incidents of the use of restraint, including incidents of passive physical restraint where it is used in conjunction with or leads to the use of any other form of restraint.

(3) If a juvenile requires the use of mechanical restraints more than four times in any 30 day period, an emergency staffing shall be held to discuss the appropriateness of the

juvenile's continued placement at the center and to develop an emergency plan for the juvenile.

(A) Participants in this emergency staffing shall include:

(i) the juvenile if behavior permits;

(ii) the director or the director's designee;

(iii) a physician, clinical psychologist or clinical social worker who has assessed the juvenile; and

(iv) appropriate staff members.

(B) The placing agent or representative and the juvenile's parents or legal guardian shall be notified of the emergency staffing and invited to participate. Documentation of notifications shall be kept on file at the center.

(C) The results of the emergency staffing shall be recorded and maintained on file at the center.

(4) Any juvenile or staff member injured in an incident involving the use of physical restraint shall receive immediate medical examination and treatment.

(Authorized by and implementing K.S.A. 65-508; effective Aug. 23, 1993.)

***** Authenticated Kansas Administrative Regulation *****