



OFFICE OF TRAINING
"One Team, One Goal, One Vision"



Georgia Department of Juvenile Justice

Secure Facilities On-Job-Training (OJT) Handbook *(For RYDCs and YDCs)*

Please DO NOT write in this handbook

Introduction

Welcome to the Georgia Department of Juvenile Justice (DJJ) and to the Facilities On-the - Job Training Handbook for the Division of Programs and Secure Campuses. Our goal is to familiarize you with administrative and policy areas that are fundamental to you in your quest to becoming an effective contributor to this Agency and our clients – the juvenile offenders we serve.

Given the importance of this material, you will be expected to demonstrate your knowledge by successfully completing an exam with 80% accuracy. As you go through the handbook, if there are any areas that remain unclear to you, please make sure that you have your supervisor clarify this information prior to taking the online exam.

Our goal is to provide a highest quality resource to prepare you to be a successful employee. However, this manual is not inclusive of all policies that you will be tested on. It is the responsibility of each employee to read and be familiar with policies and procedures for his/her job duties and responsibilities. You should review the OJT check for a list of topics to research. If you should have a problem researching policy please ask your supervisor or Field Training Officer (FTO) for assistance.

Please refer to the table of contents for a listing of topics covered in this handbook.

The facility's On-Site Training Coordinator and FTO will complete the appropriate OJT checklist from DJJ Policies 4.4 (Non-Security Staff Training Requirements) and a Training Request Form for each new staff member and forward copies to the Office of Training Regional Trainer:

Security: Located in DJJ Policy 4.2

Education: Located in DJJ Policy 4.4

Behavioral Staff: Located in DJJ Policy 4.4

Counseling Staff: Located in DJJ Policy 4.4

Food Service: Located in DJJ Policy 4.4

Health Care: Located in DJJ Policy 4.4

Non-specified: Use applicable portions of checklist located in DJJ Policy 4.4

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Department of Juvenile Justice
Mission Statement

“To protect and serve the citizens of Georgia by holding youthful offenders accountable for their actions through the delivery of services and sanctions in appropriate settings and by supporting youth in their communities to become productive and law abiding citizens.”

Department of Juvenile Justice
Vision Statement

Vision (Offer Hope and Youth Change)

DJJ will lead the nation in preparing young people in its care to develop and sustain productive lives.

Values

We strive to create and sustain an agency culture that values accountability, integrity, security, superior performance, ongoing personal growth, intellectual curiosity, innovation, teamwork, and leadership not only in our staff but also in the young people in our facilities and programs.

Core Values

Integrity – We believe DJJ staff and youth are responsible for conducting themselves with integrity and fostering a just environment in which youth can experience honesty, trust and loyalty.

Excellence - The constant state of possessing, demonstrating and utilizing the highest levels of professionalism, responsibility, values and skills.

Security - Creating a safe and secure environment within our juvenile facilities where best practice standards are maintained.

Teamwork - The cooperative and coordinated effort on part of all DJJ employees acting together as one team, to offer hope and promote positive youth change.

Facilities On-the-Job Training (OJT) Handbook

DJJ Policy #3.10, STANDARDS OF CONDUCT AND ETHICS

To earn and maintain a high level of public trust, the Department of Juvenile Justice shall conduct all activities with integrity in accordance with the highest standards of duty. Department employees shall adhere to the highest moral and ethical standards for business and personal conduct at all times. Each employee shall assume personal responsibility and accountability for his/her actions and avoid any activity or behavior that might hinder his/her ability to fulfill departmental responsibilities in a professional manner or that discredits the Department.

A. General Provisions:

1. This policy sets forth general guidelines for the standards of conduct, but does not provide an exhaustive list of all types of impermissible conduct and performance. Examples are provided to establish general principles for employees in performing their work in a professional and ethical manner. Employees who violate these standards may be subject to disciplinary action, up to and including dismissal from employment.
2. Employees shall be familiar with and comply with all DJJ policies, Commissioner's directives, and procedures of the work unit to which they are assigned.
3. Employees of the Department of Juvenile Justice will practice honesty and integrity in every aspect of dealing with supervisors, fellow employees, youth, the public, vendors, and other government authorities. Employees will not engage in any form of impropriety, placement of self-interest above public interest, partiality, prejudice, threats, favoritism and undue influence and/or the appearance of such.
4. The Department is not typically concerned with the activities of employees during non-work time. Off-duty conduct becomes a legitimate concern, however, when it affects departmental operations or reflects unfavorably on the Department or State Government. Such off-duty conduct may result in disciplinary action against the employee involved. (See DJJ 3.18, Fitness For Duty)
5. All DJJ employees will be required to read this policy and sign an acknowledgement statement during on-the-job training. (See Attachment B) The acknowledgment statement will be reviewed and electronically signed annually thereafter. The employee's supervisor will be responsible for ensuring the acknowledgement is signed initially and annually thereafter and maintained in the employees local human resources file.

B. Law, Rule, Policy, And Ethics Order Compliance:

1. The Ethics Officer, as designated by the Commissioner, will take appropriate measures to ensure that employees become familiar with applicable ethics laws and policies, including the policies set forth by the Governor's Executive Order.
2. Employees will comply with applicable state and federal laws, rules, regulations, executive orders and Department policies.
3. Any employee with any full or partial ownership of a business that conducts business with any organizational unit of the Department or if it seeks to do business with any organizational unit of the Department will comply with reporting guidelines in accordance with DJJ 3.16 Other Employment.
4. Employees will obey all laws of the State of Georgia, including traffic laws and city/county ordinances. This includes the use of safety restraining devices by the driver and all passengers, including youth under the care of the Department. Employees will not text and drive.
5. Any violations of the Department policies and/or principles outlined in the Governor's Executive Order may subject an employee to disciplinary action, up to and including dismissal from employment. The Commissioner will ensure that the Executive Order is enforced and will report all alleged violations and their disposition to the Inspector General.
6. Questions concerning interpretation of Human Resources policy will be directed to the employee's supervisor or the Office of Human Resources or Division representative. Questions concerning interpretation of other Department policies will be directed to the Office of Legal Services.
7. Employees will be subject to the Code of Ethics for Government Service as established by O.C.G.A. §45-10-1. In accordance with this code, Department of Juvenile Justice employees will:
 - a) Put loyalty to the highest moral principles and to country above loyalty to persons, party or government department;
 - b) Uphold the Constitution, laws, and legal regulations of the United States and the State of Georgia and of all governments therein and never be a party to their evasion;
 - c) Give a full day's labor for a full day's pay and give to the performance of his/her duties his/her earnest effort and best thought;

- d) Seek to find and employ more efficient and economical way of getting tasks accomplished;
 - e) Never unfairly give special favors or privileges to anyone, whether for compensation or not, and never accept, for him/herself or his/her family, favors or benefits that might be construed by reasonable persons as influencing the performance of his/her duties;
 - f) Make no promises of any kind upon the duties of office;
 - g) Engage in no business with the government, either directly or indirectly, which is inconsistent with the performance of his/her duties;
 - h) Never misuse any information coming to him/her confidentially in the performance of his/her duties or access information not required in the performance of his/her duties;
 - i) Report unethical behavior to the Ethics Officer;
 - j) Expose waste, fraud and abuse wherever discovered (See DJJ 3.25, Whistleblowers);
 - k) Uphold these principles, ever conscious that public office is a public trust.
- C. Employees will not use their position to wrongfully influence other Department employees, youth, their family members, members of the judiciary, law enforcement officials, other government agencies, or the general public.
- D. An employee will not attempt to influence the advancement, appointment, employment, promotion, or transfer of a family member to an office or position with the Department or another state agency. (See DJJ 3.26, Employment of Relatives)
- E. Financial Transactions:
1. Employees will not gamble while on duty.
 2. Employees will not engage in any financial transactions with youth or their families.
 3. Employees will not give or accept gifts, lend anything of value to or borrow anything of value from vendors.
 4. Soliciting, selling, fundraising, distribution and/or posting of advertisements, pamphlets, or similar literature or materials, including those soliciting

memberships will be prohibited on DJJ property or during DJJ sponsored activities. Distribution and posting includes activities involving the use of electronic means such as faxes and e-mail. This prohibition will not apply to state or Department sponsored activities.

5. No employee, or any person on his/her behalf, will accept directly or indirectly any gift from any person with whom the employee interacts on official state business including lobbyists and state vendors.

F. Use Of DJJ Resources:

1. Employees will use Department resources legally and properly.
2. Theft, or the unauthorized removal or possession of property belonging to the Department, fellow employees, or anyone in Department offices or facilities will be prohibited and may be subject to criminal prosecution in accordance with DJJ 22.3 Internal Investigation.
3. Offices, workstations, office furniture, and equipment (e.g., computers) are State property and are intended for work-related activities.
4. State-provided computers, email, internet access, and related tools, programs, and equipment are intended for public business. (See DJJ 6.1, Functions of the Office of Technology and Information Services)

G. Employees will fully cooperate with all internal and external investigations, regardless of the nature of the investigation. Failure to fully cooperate may subject an employee to disciplinary action up to and including dismissal from employment.

H. Employees will not tape record conversations unless such conversations are work-related and specifically approved, in advance, by the supervisor of the organizational unit. Supervisors will consult with the Ethics Officer, Office of Human Resources or Office of Legal Services prior to taping or authorizing the taping of any meeting or conversation. Employees in certain jobs, such as those involving investigations, will be authorized to tape record conversations when necessary and appropriate. Only the officials authorized to conduct hearings may tape employee grievance hearings.

I. Relationships between supervisors, employees, youth and their families will be conducted in a professional manner to avoid potential conflicts of interest, exploitation, personal bias, or significant disruption to the work unit/work environment.

1. Intimate, romantic, or sexual relationships between a manager/supervisor and a subordinate staff member, through any line of authority, will be prohibited

due to the potential for such relationship to create an actual or perceived conflict of interest.

2. Intimate, romantic, or sexual relationships between co-workers will be prohibited when such relationship adversely impacts the performance of either co-worker or the functioning of the work unit.
 3. Unprofessional behavior including, but not limited to, sexual-related conversations, inappropriate touching (including kissing, hugging, massaging, sitting on laps) racial or ethnic jokes and slurs and any other verbal or physical conduct of an offensive nature will be prohibited.
 4. Employees will be familiar with and comply with the Department's Harassment policy at all times.
- J. Employees will not, without written approval of the appropriate Deputy Commissioner or Central Office Director or designee, maintain personal associations with, engage in personal business or trade with, or engage in non-work related correspondence with, or on behalf of a youth or his/her family members.
- K. When an employee's family member comes under the control/supervision of the Department (as defined by "youth" in this policy), the employee will notify their Deputy Commissioner, Central Office Director or designee, in writing, as soon as he/she becomes aware of the situation.
- L. Employees shall not bring any contraband into any DJJ facility. Any item identified as contraband shall not be provided or made accessible to any youth transported in a Department or personal vehicle.
- M. Employees will not have personal on-going relationships with youth. Approved mentorship will be conducted in accordance with DJJ 1.7 Citizen and Volunteer.

Prohibited activities include, but are not limited to:

1. Procuring tobacco, alcohol or illegal drugs for or from youth;
2. Procuring any publications or other gifts for youth;
3. Receiving gifts or favors from youth or their relatives, friends, or acquaintances;
4. Gambling, buying, selling, trading, borrowing, giving or lending goods or money with youth;

5. Using relationships or information obtained on current or former youth to take unfair advantage of the youth or their relatives, friends, or acquaintances; and
 6. Engaging in romantic, intimate or sexual relationships, physical sexual contact or inappropriate verbal sexual contact with youth, or otherwise taking sexual advantage of youth.
- N. Employees shall not use profanity or abusive language in the presence of or toward any youth.
- O. Employees shall not use threats, intimidation, profanity, or abusive language against other employees or visitors in the workplace or at any DJJ training.
1. Fighting and/or argumentative behavior directed toward a supervisor, co-worker, or any other party while on duty or which discredits the Department will be prohibited.
 2. No employee will be allowed to carry any firearm into any Department facility or office, unless specifically authorized by the Commissioner.
- P. There may be unique or compelling circumstances warranting exceptions to or waivers from these policies in certain individual cases. Requests for exceptions must be submitted in writing to the Ethics Officer. Any approval of such requests must be documented in writing by the Commissioner.
- Q. Employees will report violations or suspected violations of this policy to the appropriate supervisor within their chain of command or the Ethics Officer.
1. Retaliation against an employee who uses the Department's reporting process to raise legitimate concerns in accordance with this policy will not be tolerated.
 2. Alleged violations of this policy will be thoroughly investigated by the appropriate office. Appropriate disciplinary actions, up to and including dismissal, will be taken as indicated by investigative findings and results, subject to review by the applicable Deputy Commissioner or Central Office Director and Ethics Officer.
 3. If appropriate, external investigative, law enforcement agencies, or the Inspector General will be notified of allegations.
- R. Employees shall report any violation or attempted violation of any law or DJJ policy that could result in a breach of the Department's security to the appropriate supervisor within their chain of command or to the Ethics Officer immediately upon becoming aware of such a violation.

Facilities On-the-Job Training (OJT) Handbook

DJJ Policy #3.13, Dress Code for Non-Uniformed Staff

- A. Department of Juvenile Justice non-uniformed employees shall present a professional appearance and maintain the highest level of personal grooming and hygiene at all times. Employees shall refrain from wearing clothing that detracts from the Department's mission and public image regardless of work setting. In general, employees shall dress in a manner that is typically acceptable in conservative business environments.
- B. Non-uniformed staff will consider the professional and conservative nature of their work environment when considering their work attire, which must reflect a positive, professional image.
- C. Employees will choose the appropriate attire (duty, business, court, alternative, or casual), subject to supervisory review, within the guidelines of this policy
- D. When in uniform, Community Service staff will comply with DJJ 3.12 Dress Code for Uniformed Staff.
- E. Duty Attire:
 - 1. Duty attire, at a minimum, will be worn when:
 - a) Conducting official business;
 - b) Attending training; or
 - c) Attending Department sponsored activities other than those described below (when business or court attire would be required).
 - 2. Examples of duty attire include:
 - a) Khaki or dark colored dress slacks/trousers or skirts/dresses (no denim material or military style trousers) (skirt/dress lengths will be no more than 2 inches above the front and back of the knee);
 - b) Button up style shirt, with or without tie, turtleneck or mock-turtleneck;
 - c) Blouse;
 - d) Collared polo or button up style shirt with the Department/Division logo embroidered over the left breast;
 - e) Sweater (cardigan, crewneck or vest);
 - f) Dress shoes, dress sandals or flats.
- F. Business Attire:
 - 1. Business attire will be worn when:
 - a) Speaking before a public gathering for the purposes of representing the Department.
 - b) Attending meetings outside of the Department or with non-DJJ staff.

2. Examples of business attire for male employees include:
 - a) Traditional suit;
 - b) Dress slacks, with or without jacket;
 - c) Long or short sleeve dress shirt with collar and tie; and
 - d) Dress shoes, with socks.

3. Examples of business attire for female employees include:
 - a) Traditional suit, with skirt or slacks;
 - b) Dress, with or without jacket or cardigan sweater. (Sleeveless dresses must be accompanied by a jacket or cardigan sweater);
 - c) Skirt or dress slacks with a blouse, sweater, and/or jacket; (skirt/dress lengths will be no more than 2 inches above the front and back of the knee) and
 - d) Dress shoes, (with or without hosiery, dress sandals, peep-toed dress shoes are allowed.

G. Court Attire:

1. Court attire will be worn when attending any judicial proceeding, hearing or meeting. All court room dress codes as specified by individual court jurisdictions will be followed.

2. Examples of court attire for male employees include:
 - a) Traditional suit
 - b) Dress slacks, with jacket
 - c) Long or short sleeve dress shirt with collar and tie and
 - d) Dress shoes , with socks

3. Examples of court attire for female employees include:
 - a) Traditional suit, with skirt or slacks (skirt/dress lengths will be no more than 2 inches above the front and back of the knee)
 - b) Dress, with or without jacket or cardigan sweater. (sleeveless dresses must be accompanied by a jacket or cardigan sweater:
 - c) Skirt or dress slacks with a blouse, sweater, and/or jacket; and
 - d) Closed toe peep-toed dress shoes, (with or without hosiery)

H. Alternative Attire:

1. Alternative attire may be worn when an employee has supervisory approval, limited contact with the general public, and participates in work-related activities that involve physical labor such as recreation supervision, training exercises, computer set-ups, etc.

2. Employees performing general work duties in the office that do not require physical labor will be required to wear duty attire.

3. Examples of alternative attire include:
 - a) Collared polo or button up style shirt with the Department/Division logo embroidered over the left breast;
 - b) Button-down or sports shirts with collars, without ties;
 - c) Sweaters;
 - d) Casual dress slacks/pants;
 - e) Denim jeans (with prior approval by the supervisor or Office of Training during training activities) for outdoor recreational events/training programs or other activities that necessitate durable non-dress apparel;
 - f) Relaxed, casual dresses or skirts (skirt/dress lengths will be no more than 2 inches above the front and back of the knee); and
 - g) Loafers, deck shoes, hiking shoes/boots with socks, flat casual shoes or dress sandals.
4. Each Division/Office will maintain a list of staff specifically authorized to wear alternative attire.

I. Casual Attire:

1. Employees may wear casual attire on Fridays throughout the Department. (Other days will not be substituted if the employee is unable to participate on Friday.)
2. Employee participation will be voluntary and secondary to the execution of the Department's mission.
3. Assigned duties and responsibilities will take priority over participation in casual day(s). Employees scheduled to attend or participate in court, meetings outside the Department or with representatives of other state agencies or the public, or other related professional activities on a designated casual day must dress in appropriate business or court attire as outlined in Business and Casual Attire sections.
4. Staff who may be called upon to represent the agency without prior notice must have business and/or court attire available in the office.
5. On casual days, employees may dress in more relaxed attire, but must still present a neat, clean, professional appearance. The employee must exercise good taste and judgment at all times. General questions concerning appropriate casual day attire will be directed to the employee's immediate supervisor.
6. Examples casual attire for male employees includes:
 - a) Polo-style shirts, with or without Department/Division logo;
 - b) Button up style shirt, with or without tie, turtleneck or mock-turtleneck;

- c) Sweaters;
 - d) Casual dress slacks/pants, excluding denim;
 - e) Loafers, deck shoes, hiking shoes/boots with socks
7. Examples of casual attire for female employees include:
- a) Polo-style shirts, with or without Department/Division logo;
 - b) Button up style shirt, with or without tie, turtleneck or mock-turtleneck;
 - c) Sweaters;
 - d) Casual dress slacks/pants, excluding denim;
 - e) Casual dresses or skirts, (skirt/dress will be no more than 2 inches above the front and back of the knee) excluding denim;
 - f) Capri and cropped pants excluding denim;
 - g) Loafers, deck shoes, hiking shoes/boots with socks
8. The Commissioner, Assistant Commissioner, Deputy Commissioner or designee may revoke casual day, in whole or in part, for work units under his/her span of control, if the level of professionalism and/or productivity decreases, or if the workplace is negatively impacted by casual day.

J. Personal Hygiene and Grooming Guidelines:

1. Hair will be clean, combed and neatly trimmed or styled. The hairstyle should be appropriate to the work setting and should not interfere with the work to be performed, create a safety hazard, or cause distractions in the work place.
2. Sideburns, moustaches, and beards will be neatly trimmed.
3. Body piercings (with the exception of earrings worn in the ear) will not be visible.
4. Under no circumstances will staff have tattoos visible that contain gang signs, gang symbols/language or foul, derogatory, or offensive language or images.
5. Employees will not have fingernails that extend more than one half inch beyond the finger tip.
6. Eyelashes must be of a natural color and length and will not contain glitter, rhinestones, or other ornamentation.
7. Employees who choose to use cosmetics and fragrances will do so conservatively so as not to create distractions in the workplace.
8. Jewelry and other accessories will be appropriate for the work setting and not create a safety hazard or cause other distractions.

- K. Shirts bearing the Department/Division logo will not be worn when:
1. Performing duties of other employment;
 2. Attending social or athletic events held off Department property that are not officially sponsored by the Department;
 3. When purchasing or transporting alcoholic beverages or other intoxicants;
 4. When consuming alcoholic beverages or other intoxicants in public establishments.
- L. Hat or caps may be worn outdoors during the course of job-related activities/work assignments. In outdoor settings, hats or caps cannot be excessively worn or ragged. Caps or hats must be worn upright on the head and not cocked or turned.
- M. In keeping with the Department's desire to present a positive, professional appearance, certain types of clothing will be unacceptable at any time, including as part of casual attire. Examples of prohibited clothing include, but are not limited to the following:
1. Jeans and other denim clothing (except as part of alternative attire worn as described above);
 2. Casual t-shirts with or without writing; (T-shirts without writing are permitted if worn with a suit ensemble or covered by a business jacket)
 3. Revealing shirts, blouses, skirts, slacks or dresses;
 4. Halter tops, tank tops, bare midriff tops, or spaghetti-strapped tops; (Modest tank tops are permitted if worn with a sweater, suit ensemble or covered by a business jacket)
 5. Extremely short skirts or dresses;
 6. Skorts (combination shorts and skirts), short shorts, jogging shorts, or gym shorts;
 7. Off-the-waist or hip-hugger pants of any type;
 8. Clothing that is stained, torn, or excessively worn or faded;
 9. Tight fitting clothing, including leggings or stirrup pants;
 10. Extremely loose-fitting (baggy) clothing;
 11. Jogging suits, wind suits, sweat pants, sweat shirts or other athletic apparel;
 12. Any clothing item or style that may be typically associated with gangs;
 13. Hats, caps, and head coverings worn indoors; and
 14. Tennis or athletic shoes, work boots, flip-flops (including Crocs-style shoes), house shoes, bedroom shoes, or shower shoes. Sturdy/protective boots may only be worn in conjunction with job-related outdoor work assignments or in times of inclement weather. (Note: Medical services staff may wear traditional white nursing shoes or solid-white leather-style athletic shoes.)

- N. When an employee is in doubt about attire, he/she should consult his/her immediate supervisor.
- O. An employee who fails to comply with dress code guidelines may be subject to disciplinary action. The employee will be counseled on the policy violation and, if necessary, sent home to dress appropriately for the workplace. If an employee is sent home due to his/her failure to comply with the dress code, the time absent from work may be accounted for as follows:
 - P. The employee may be allowed to make up the time lost from work, provided that all time is made up during the same work period that the time was lost;
 - Q. The employee, with supervisory approval, may charge the absence to accrued annual leave, personal leave or, if applicable, Fair Labor Standards Act Compensatory Time; or the employee may be placed on leave without pay if none of these options are available.
 - R. Exceptions to the dress code policy for medical or religious reasons may be addressed in accordance with DJJ 3.21, Americans with Disabilities and 3.20, Non-Discrimination in the Workplace.

This policy establishes dress code guidelines, but does not attempt to address every potential issue. Supervisors will be responsible for enforcing the dress code policy. Questions concerning dress code will be directed to the Director of Human Resources or his/her designee.

On the Job Training (OJT) Handbook

DJJ Policy #3.12, Dress Code for Uniformed Staff

- A. Department of Juvenile Justice uniformed staffs shall present a professional, businesslike image and maintain the highest level of personal grooming and hygiene at all times. Uniformed staffs shall wear a Department-issued uniform while performing official duties of the Department.
- B. Department employees will not wear any non-issued items of clothing when in uniform, except for undergarments and socks. Department employees will not allow non-employees to wear any article of the Department-issued uniform or its accessories.
 - 1. Department employees will not purchase, transport or consume alcoholic beverages while in uniform.
 - 2. Uniform staff will tuck uniform shirts inside the trousers. Staff may wear a white t-shirt underneath. Staff will not roll up or under, the sleeves of the uniform unless working on a detail where damage could occur to the sleeves or it would be dangerous.
 - 3. Uniform staff will wear trousers at the waist. Staff will fasten all pockets with fasteners. Employees will be responsible for having the trousers hemmed. Trousers will be uncuffed and unbloused with a small break at the toe. Staff will wear trousers with the belt issued.
 - 4. Uniformed staff will wear collar rank insignia (JCO1, JCO2, Lt. Captain, etc.) name tag, badge, and epaulets (FTO, BMU, etc.) These items will be issued by DJJ department as a part of the uniform basic issue when applicable.
 - a) The collar rank will be centered on both collars. The center line of the insignia will be 1 inch from the collar point and will bisect the points of the collar.
 - b) The name tag is worn 1/8 inch above the and parallel to the edge of the right breast pocket.
 - c) The badge will be worn on the left breast side of the shirt in the designated stitching.
 - d) Specialized recognition epaulets will be fastened on the shoulder to the shoulder strap.
 - 5. Uniforms must be clean, unwrinkled, appropriately fitted, and in good repair.
 - 6. Uniformed staff will wear appropriate foundations and/or undergarments while on duty.

7. Uniform staff will be responsible for providing their own footwear in accordance with the standards set forth in this policy. All footwear shall have non-scuff soles and heels. Shoes will be clean, buff-shined (if appropriate), and in good repair at all times.
 - a) JCOs will wear solid black, plain shined or cap-toed leather-style shoes, boots or athletic shoes, with a standard black sole. (Cloth or canvas shoes are prohibited.) Any insignia or other marking on the shoe must be black. Black, calf length socks will be worn with black shoes.
 - b) Maintenance staff will wear black or brown, leather-style low quarter shoes or boots with black or brown socks.
8. Department-issued caps may only be worn outside. Caps will be worn in a forward direction and will not be tipped forward, backward, or to either side (other caps will not be worn.) In cold weather, staff may wear a solid black knit cap and/or solid black gloves while outside.
10. An employee must carry in a visible manner and at all times his or her DJJ-issued photo ID. An employee will wear issued badges in accordance with DJJ 3.41 Issuance of Badges.
11. Sunglasses, if worn, will be professional in appearance and may not be worn indoors. Fad styles (e.g., multi-colored and mirrored lenses) will be prohibited.
12. JCO's will be issued safety equipment such as latex gloves, electronic monitoring system data strips.
13. JCO's will be expected to report for duty with a working watch.
14. Uniformed staffs will wear the department-issued uniform to all off-site meetings or trainings.

C. Personal Hygiene and Grooming Guidelines:

1. Uniformed staff will practice the highest level of personal hygiene and cleanliness.
2. Officers may wear braids and cornrows as long as the braided style is conservative, the braids and cornrows lie snugly on the head, and any hair-holding devices comply with this policy.
3. Hairstyles for Males:
 - a) Hairstyles for male officers shall not fall over the eyebrows or extend below the bottom of the uniform shirt collar.

- b) The length and bulk of the hair may not be excessive or present a ragged, unkempt, or extreme appearance.
4. Hairstyles for Females:
- a) Hairstyles for female officers shall not fall over the eyebrows or extend below the bottom of the uniform shirt collar.
 - b) Hair that falls below the bottom of the uniform collar, to include braids, will be neatly secured, so that there is no free-hanging hair.
 - i. The use of booby pins or metal clasps are not allowed
 - c) Hairstyles that are lopsided distinctly unbalanced are prohibited. Wigs, extensions, hairpieces, or weaves must comply with the grooming policies set forth in this policy, and maintain the appearance of the employee's natural hair.
5. Sideburns, if worn, will be neatly trimmed with the base and clean-shaven in a horizontal line not extending below the bottom of the earlobe. Sideburns may not be flared.
6. Mustaches, if worn, will be neatly trimmed and will not extend beyond the corner of the mouth, either vertically or horizontally. Handlebar mustaches, goatees and beards are not authorized.
7. Officers shall be clean-shaven while on duty and are restricted from growing a beard of any description. Medical exceptions will be dealt with by the Director on an individual basis. If medically indicated, a beard will be clipper close daily. Medical exceptions will be renewed annually.
8. Uniformed staff, with the exception of food service staff, may wear nail polish that is in keeping with the conservative, professional image of the Department and does not create any health or safety concerns. Fingernails will not have designs or ornament embedded in them (i.e. rhinestones, etc.) JCOs, nursing staff, and food service staff will not have fingernails that extend beyond the fingertips and will not wear artificial nails.
9. Cosmetics, if worn, will be understated and blend in with the natural color of the skin.
10. Eyelashes must be of a natural color and length and will not contain glitter, rhinestones, or other ornamentation.
11. Uniform staff must lightly apply fragrances, scented body lotions, oils and similar products. Use of such products must not create a distraction in the workplace

12. Jewelry, if worn, will be conservative and will not create a safety hazard or distraction in the workplace. Uniformed staff

- a) Uniform staff may wear only:
 - i. One watch
 - ii. Two rings
 - iii. Necklace, if they are not visible
 - iv. Medical alert bracelets

b) Uniformed staff will not wear earrings.

13 Body piercings will not be visible while on duty.

14. Uniformed employees will make every effort to ensure that tattoos are not visible while in uniform. Under no circumstances will uniformed staff have tattoos visible that contain gang signs, symbols or language of foul derogatory or offensive language or images.

15. All supervisors will ensure that staffs adhere to personal hygiene and grooming standards are adhered to in accordance with this policy. The facility Director may utilize his/her judgment in the interpretation and enforcement of hygiene and grooming standards, within limits of the policy.

D. Food service staff

1. Food service staff will wear the traditional black checkered trousers/white logoed chef top, black apron and black toque.
2. Food service staff will not wear rings or watches.
3. Food service staff will not wear nail polish
4. Food service staff will not wear false eye lashes.
5. Food service staff may wear white or black leather-style shoes. (Staff may not wear Cloth or canvas shoes.) Socks or stockings will match the color of the shoes.
6. Food service staff will wear hairnets when preparing or serving food.
7. Uniforms must be neat, clean, and unwrinkled

E. Nursing staff have the following special rules:

1. Nursing staff may wear street clothes or a uniform (including scrubs)

2. Nurses who choose to wear street clothes will be required to comply with DJJ 3.37, Dress Code for Non-Uniformed Staff. Nurses should wear a white lab coat over street clothes.
3. Nurses who choose to wear uniforms may wear traditional nursing uniforms or scrubs. Nurses will be responsible for obtaining uniforms at their own expense.
 - a) Uniforms must be neat, clean and unwrinkled; nursing staff that choose to wear a V- Neck scrub top must wear a white crewneck t – shirt underneath the scrub top.
 - b) Nurses who choose to wear a uniform may wear traditional white nursing uniform shoes or solid white leather-style athletic shoes. (Nurses may not wear cloth, canvas and Crocs-style shoes.) Nurses will wear white socks or stockings, as appropriate, with white shoes
4. Nursing staff may wear regular clothes or nursing uniforms, including scrubs, to training.
5. Any person who is licensed as a Registered Nurse will identify that he/she is so by displaying either the title “Registered Professional Nurse” or “Registered Nurse” or the abbreviation “RN” on a name tag or other similar form of identification when providing direct patient care.
6. Any person who is licensed a Practical Nurse will identify that he/she is so by displaying either the title “Licensed Practical Nurse” or the abbreviation “LPN” on a name tag or other similar form of identification when providing direct patient care.

F. Offices of Investigation staff have the following special rules

1. Office of Investigation staff will wear uniforms as indicated by the Director of Investigations based upon the assignment. When in uniform, staff will adhere to this policy.
2. When not in uniform, Office of Investigation staff must comply with DJJ 3.13, Dress Code for Non-Uniformed Staff.

G. Recreation staff will comply with the following guidelines

1. Clothing should not be torn, excessively worn, shabby, or dirty.

2. All clothing should fit properly (i.e. not be too tight or loose or baggy that undergarments or skin are visible when moving around or bending) and shirts must be tucked in at all times.
3. Collared polo shirt with the Department/Division logo embroidered over the left breast (will be provided by DJJ).
4. Khaki or dark color cargo shorts 1 inch above the knee or longer.
5. Khaki pants, solid colored referee pants, khaki or solid color Coaches slacks (no elastic waist or draw string shorts are permitted).
6. Capris are permitted for female staff. (Spandex material or form fitting clothing is not permitted).
7. Department issued ID badge to be worn at all times.
8. Clean, dark, solid color, closed toe athletic or walking shoes and socks must be worn at a; times (No excessively large brand or logos permitted).
9. During cold weather staffs are permitted to wear long-sleeves under the required staff shirt to allow department logo and ID to be visible at all times.

H. S.E.R.T. and S.M.R.T staff has special rules outlined within policies DJJ 8.32 SERT and DJJ 8.35 SMRT

I. Intensive Treatment Unit (ITU) staffs have the following rules

1. ITU staffs will wear Department-issued uniforms while performing work duties.
2. The ITU uniform will consist of department-issued:
 - a) Tactical pants
 - b) Green polo shirt
 - c) Black boots
 - d) Duty belt
3. Uniform must be neat, clean, unwrinkled and in good repair.
4. Staff will not wear the metal collar rank name tag or badge.
 - a) The polo shirt will have a badge embroidered signifying rank.

J. Uniform Issuance

1. Each facility Director will designate a Uniform Coordinator for that facility. The facility Director will submit the name, e-mail address and phone number of the Uniform Coordinator to the Department Warehouse.

2. The Uniform Coordinator will use the Uniform Action Form (Attachment A) to order uniforms. The Coordinator will submit the form to the Department Warehouse along with a Uniform Sizing Sheet (Attachment B). The coordinator will submit the Made-to-Measure Sizing Form (Attachment C) for employees who require non-standard size forms. (Employee may report to Department Warehouse for sizing and uniform pick-up, after scheduling an appointment with the Warehouse Manager.)
3. Employees are responsible for keeping the uniform neat and clean.
4. New employees will receive uniforms as listed below bases on the style of uniform designated for the facility.

	Trousers	Shirt	Belt	Jacket	Cap	Raincoat
JCOs, Lieutenants and Captains	5 pair	5	1 (black)	1 ultra-light, black 1 bomber, black	1	1
SMRT Team	5 K / 5 Blk. pair	5/5	1	1 ultra-light black 1 bomber, black	2	1
SERT Team	5 K/ 5 Blk. pair	5/5	1	1 ultra-light, black 1 bomber, black	2	1
Investigations	5 pair	5 pair				
Food Service	5 pair (black)	5 (white blouse)	1 (black)	1 ultra-light, black 1 bomber, black	0	1
Maintenance & Housekeeping	5 pair	5 short sleeve, 5 long sleeve	1	1	1	1

5. When an employee receives a uniform, the employee must sign the Uniform Action Form (Attachment A), which will indicate the cost of each item issued. The original, signed form will be retained by the facility. The Uniform Coordinator will send a copy of the form to the Department Warehouse.
6. The Uniform Coordinator will only request replacement uniforms that have become excessively worn or no longer fit. Replacement uniforms will be issues on a direst exchange basis form available used uniform stock.
7. The Department Warehouse will maintain a record of all uniform issues by employee name and employee number.

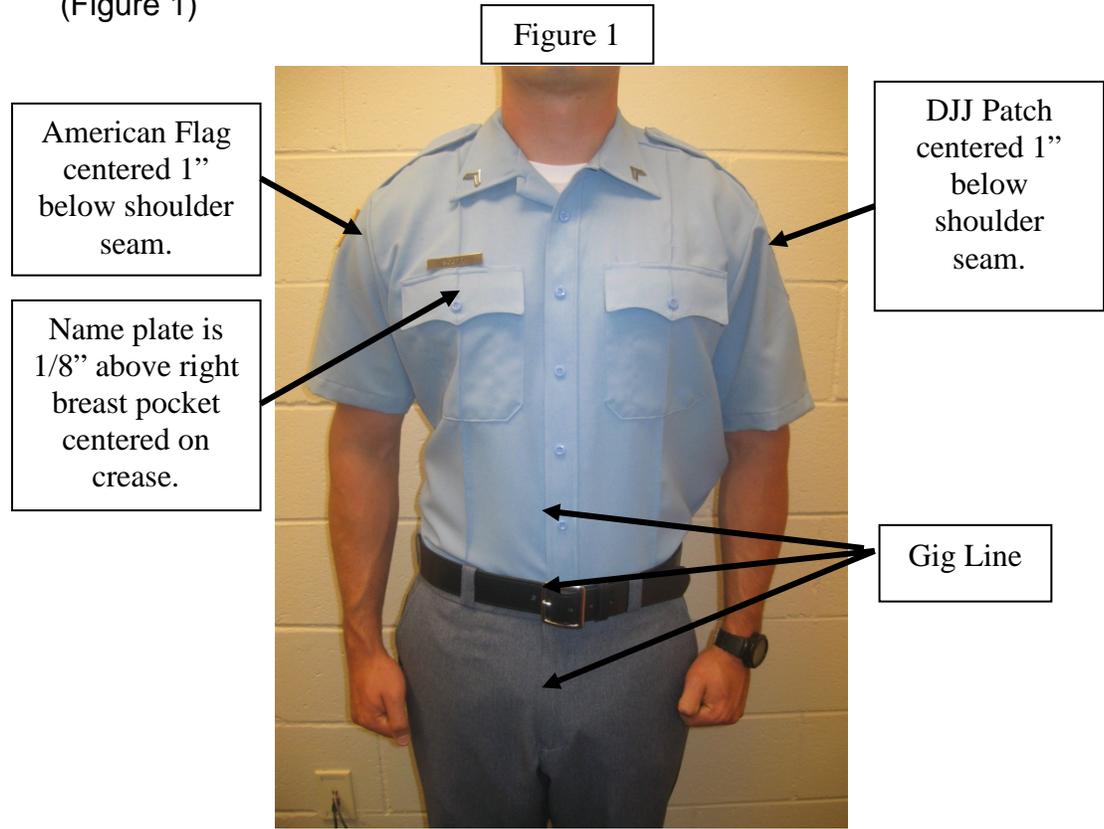
- K. Employees will immediately report the loss, theft, or damage of any uniform item to his/her immediate supervisor who will report it to the Uniform Coordinator. The Uniform Coordinator will submit the Uniform Action Form (Attachment A) to the Department Warehouse to order replacement uniforms.
- L. Employees will pay for lost items or uniforms that are damaged outside the line of duty.
- M. Employees must return all uniforms and equipment prior to terminating employment with the Department. Employees that are terminated by the Department must return all uniforms and equipment within 5 business days.
 - 1. Employees who fail to return all issued uniforms are responsible for the cost indicated on the uniform Action Form for all missing uniform items. The Office of Human Resources may deduct the cost of the uniform from the employee's final paycheck or terminal leave pay. The Uniform Coordinator will notify the local human resources representative if uniform items are not returned. The local human resource representative will notify the Office of Human Resources Payroll Manager of the amount to deduct from the employee's paycheck.
 - 2. The Uniform Coordinator will return departing employee's uniforms to the Department Warehouse as soon as possible. The Uniform Coordinator will not re-issue the departing employee's uniforms to another person.
- O. Supervisory staff will enforce the dress code for uniformed staff. If an employee violates this policy, the supervisor will inform the employee of the violation and instruct the employee on how to resolve the violation. If necessary, the employee will be instructed to return home to dress appropriately before returning to the work site.
 - 1. If a supervisor sends an employee home to change clothing to meet the correct dress standard, time absent from work may be handled through one of the following actions subject to supervisory approval:
 - a) The employee may be allowed to make up the time lost from work provided that the time must be made up within the seven-day work period;
 - b) The supervisor may place the employee on leave without pay for the period of absence.
 - 2. Employees who is repeatedly sent home for inappropriate dress is subject to disciplinary action up to and including dismissal.

- P. An employee may request an exception to this policy due to health and/or religious reasons. The Facility Director will review and decide requests for exceptions in consultation with the Office of Legal Services. Exceptions will be reviewed annually.
1. If an employee seeks an exemption for health reasons, the employee must provide appropriate documentation for his/her health care provider. The Director will place this documentation in the employee's medical record, which is maintained separately from the employee's personnel record.
 2. If an employee seeks an exception for religious reasons, the employee must provide sufficient information for the Director to make a decision.
 3. If the facility Director approves a deviation from the standard uniform clothing, the alternate garments will be in the same color scheme as the standard uniform and the employee's will pay for the alternate garments.
 4. The Director will annually review all uniform and grooming exceptions to determine if the exceptions remain appropriate.

On the Job Training (OJT) Handbook

Wearing of the Juvenile Correctional Officer Uniform

1. Uniforms shall be worn in a military fashion (gig line, all buttoned, proper fitted, etc.). Uniforms shall be pressed and clean. When any part of the uniform is worn, the complete uniform must be worn. (Figure 1)



2. Trousers and shirt pockets are to be fastened. Pens shall be placed in the badge side breast pocket in the space provided and they must be standard office size and length. Pocket items shall be kept to a minimum and carried in the pants back pocket or tucked in the socks and covered by the pants leg.
3. The wearing of long-sleeve or short-sleeve shirts is a year-round option. The tie will only be worn with the long-sleeve shirt. Sergeants, Lieutenants, and Captains are required to wear the tie whenever the long-sleeve shirt is worn. The tie is optional with the long-sleeve shirt for Juvenile Correctional Officers. (JCO I) The short-sleeve shirt will be worn with the collar open. Juvenile Correctional Officers wearing

the long-sleeve shirt without the tie will wear the collar open. The dress uniform is mandatory when participating in or attending special events. The dress uniform consists of the long-sleeve shirt and tie. Staff will not roll up or under the sleeves of the uniform, unless working on a detail where damage could occur to the sleeves or it would be dangerous.

4. Trousers shall be worn at the waist. The cuff should be a military cut. The rear hem should be even with the top of the heel. The front hem should have a fourth (1/4) of an inch break at the top of the shoe. The hem should be no more than one and a half (1 1/2) inches in depth. (Figure 2) Employees are responsible for having their trousers hemmed.

Figure 2



5. The issued jacket, lightweight pullover windbreaker and military style sweater with epaulets and issued raincoat are the only outer garments authorized for wear with the uniform. Captains and Lieutenants shall wear rank insignia on the epaulets of the jacket, windbreaker and sweater. (See Adornment of the Uniform section.) When outer garment is worn it must be zipped or buttoned at least three quarters of the way up.

6. Rank insignias shall be worn on the collar of the uniform shirt. Chevrons on the sleeves are not authorized. Metallic insignia shall be highly polished. (See Adornment of the Uniform section.) (Figures 5 – 8)
7. Jewelry, if worn, must be conservative and must not create a safety hazard or distraction in the workplace. Juvenile Correctional Officers, Sergeants, Lieutenants and Captains may wear only: One watch; Two rings; Necklaces, if they are not visible; and Medical alert bracelets. Uniformed staff will not wear earrings. Body piercings will not be visible while in uniform.
8. Uniformed staff will not wear earrings.
9. Sunglasses, if worn, will be professional in appearance and may not be worn indoors. Fad styles (e.g., multi-colored and mirrored lenses) will be prohibited.

10. Hairstyles:

Hairstyles will be appropriate to the work setting. The hair shall be neatly groomed. More specific guidelines for hairstyles may be required of employees in select jobs.

Unnatural hair colors, spray-on color, glitter, and other similar substances in the hair, to include writing, are prohibited.

The hairstyle shall not fall over the eyebrows.

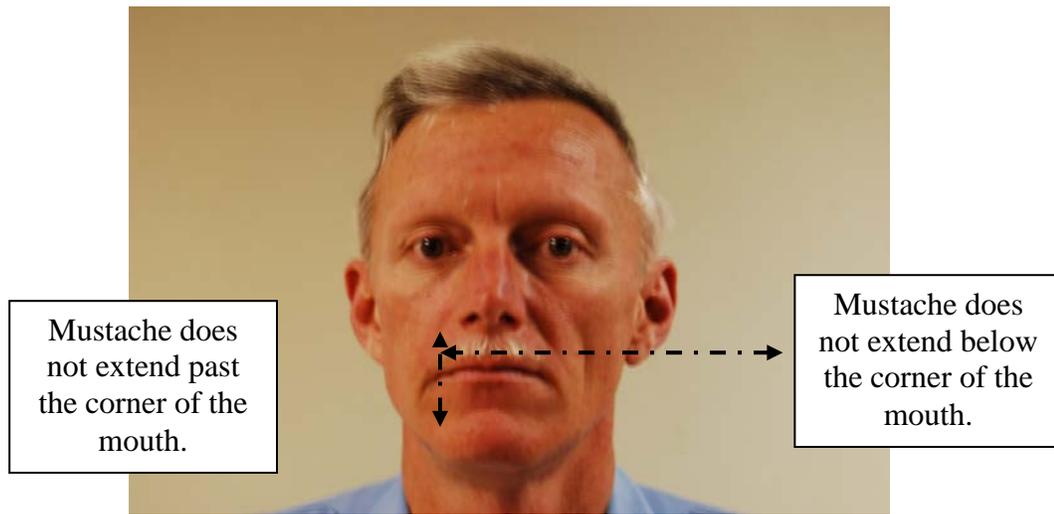
Hair that falls below the bottom of the uniform collar will be neatly and inconspicuously fastened or pinned, so that there is no free-hanging hair. Hairstyles should not extend beyond two inches from the scalp. If required to wear a hat/cap, it must sit on the head appropriately.

Hair accessories and/or ornaments will be conservative and must not be conspicuous. Hairstyles that are distinctly unbalanced are prohibited. Any wigs, extensions, hairpieces, or weaves must comply with the grooming policies set forth in this policy.

Sideburns, if worn, will be neatly trimmed with the base and clean-shaven in a horizontal line not extending below the bottom of the earlobe. Sideburns may not be flared.

11. Mustaches, if worn, will be neatly trimmed and will not extend beyond the corner of the mouth, either vertically or horizontally. Handlebar mustaches, goatees, and beards are not authorized. (Figure 3)

Figure 3



12. Officers shall be clean-shaven while on duty and are restricted from growing beards of any description. Medical exceptions will be dealt with by the Director on an individual basis. If medically indicated, a beard will be clipper close daily.
13. Uniformed staff may wear nail polish that is in keeping with the conservative, professional image of the Department and does not create any health or safety concerns. Fingernails will not have designs or ornaments embedded in them (i.e. rhinestones, etc.). Uniformed staff will not have fingernails that extend beyond the fingertip and will not wear artificial nails.
14. Cosmetics, if worn, will be understated and blend in with the natural color of the skin.
15. Eyelashes must be of a natural color and length and will not contain glitter, rhinestones, or other ornamentation.
16. Uniformed staff must lightly apply fragrances, scented body lotions, oils and similar products. Use of such products must not create a distraction in the workplace.
17. Uniformed staff will make every effort to ensure that tattoos are not visible while in uniform. Under no circumstances will uniformed staff members have tattoos visible that contain gang signs, symbols or language or foul language.

18. Supervisors will ensure that uniformed staff members adhere to personal hygiene and grooming standards in accordance with this policy
19. Shift supervisors will conduct daily uniform inspections to ensure the highest professional standards are maintained.
- a) All insignia, pins, ornaments and decals of any kind, which have not been issued by the Department, may not be worn on Department uniforms at any time.
- b) BE – KNOW – DO Epaulets are authorized for wear on the shoulder epaulets of the blue uniform shirt upon successful completion of the DJJ Sergeant’s Academy. Captains and Lieutenants will wear BE – KNOW – DO Epaulets containing gold thread and Sergeants or Juvenile Correctional Officers will wear BE – KNOW – DO Epaulets with silver thread.



Captain and Lieutenant



Sergeants/JCO II and JCO I

- c) Skill Achievement Pins such as S.E.R.T., S.M.R.T. and F.T.O. may be worn on the duty uniform upon successful completion of the certification courses. Skill Achievement Pins will be worn one (1) inch above the name plate and centered. Only one Skill Achievement Pin may be worn at a time. (Figure 4)

Figure 4

Skill Achievement and Lapel Pins (S.E.R.T., S.M.R.T., F.T.O., DJJ, Years of Service) will be worn one inch



SECURITY EMERGENCY RESPONSE TEAM
Skill Achievement Pin



SECURITY MANAGEMENT RESPONSE TEAM
Skill Achievement Pin



DJJ Lapel Pin
Skill Achievement Pin



Field Training Officer

Collar Rank Insignia Specification:

Juvenile Correctional Officer I (JCO I)

- Insignia centered on the collar, with the apex of the insignia shall be on a line with the point of the collar. (Figure 5)

The bottom corner of the emblem shall be one fourth (1/4) of an inch from the two (2) sides of the collar.

Figure 5



Sergeant / Juvenile Correctional Officer II

- Insignia centered on the collar, with the apex of the insignia shall be on a line with the point of the collar. (Figure6)

The bottom corner of the emblem shall be one fourth (1/4) of an inch from the two (2) sides of the collar.

Figure 6



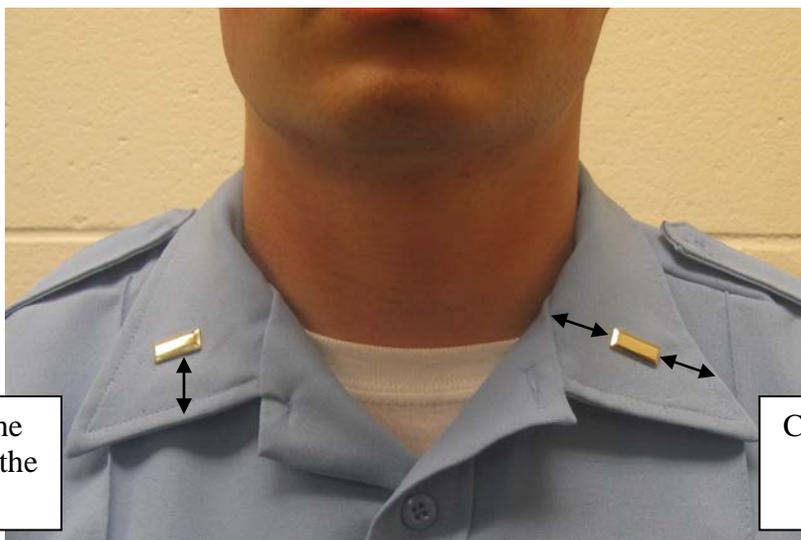
Centered on collar, insignia apex in line with collar point.

Bottom edges of Insignia 1/4 inches from collar edge

Lieutenant

- Centered on the collar with the bottom edge of the rank insignia parallel to and one (1) inch above the bottom edge of the collar. (Figure 7)

Figure 7



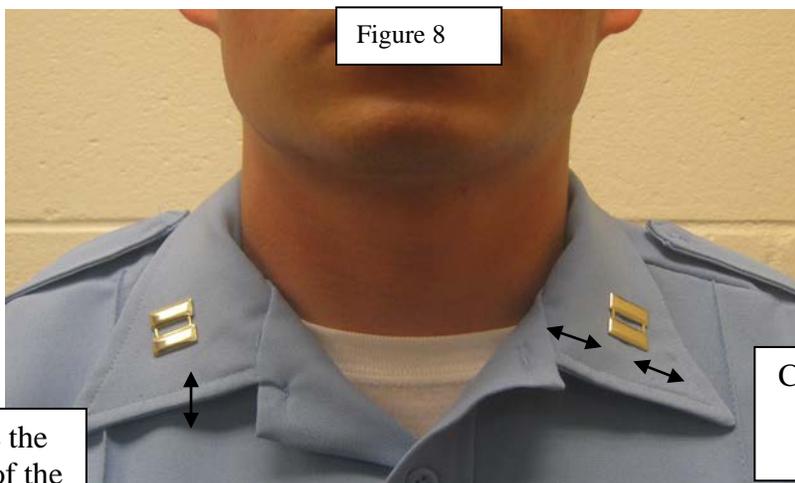
1 inch above the bottom edge of the collar.

Centered on the collar.

Captain

- Centered on the collar with the bottom edge of the rank insignia parallel to and one (1) inch above the bottom edge of the collar. (Figure 8)

Figure 8



1 inch above the bottom edge of the collar.

Centered on the collar.

On the Job Training (OJT) Handbook

DJJ Policy 3.21, Americans with Disabilities Act

The Department of Juvenile Justice shall comply with the Americans with Disabilities Amendments Act of 2008 (ADA) and other applicable laws, rules, and regulations regarding the prohibition of employment discrimination on the basis of disability. Department of Juvenile Justice employees shall not retaliate against a person who opposes or complains about prohibited conduct or participates in any way the complaint, investigation or reasonable accommodation process.

Introduction

The Americans with Disabilities Act has been instrumental in enabling individuals who are impaired to enjoy certain protections and rights. This ensures these individuals are able to lead a more “normal” life that allows them to pursue career aspirations. It also affords improved access to public and private services. Since the inception of the Act impaired individuals, when applicable, can now enjoy the benefits of enhanced communication in various formats. An act alone does not foster an “enabling” climate. Other items such as enforcement and education serve to bolster the act’s effectiveness. As a result, it is imperative for Georgia Department of Juvenile Justice employees to acclimate themselves to a myriad of information regarding this significant act and its administration. In addition, employees should familiarize themselves with the ramifications of physical impairments and the many forms of etiquette that can be used in order to display a non-demeaning posture toward physical and mentally impaired persons. Finally, department employees must have knowledge of department policy and the approach the department takes to ensure full and complete compliance with the Americans with Disability Act.

DEFINITIONS:

ADA Amendments Act: Americans with Disabilities Act Amendments Act of 2008.

Disability: A physical or mental impairment that substantially limits one or more of the major life activities of an individual; a record of such an impairment; or being regarded as having such an impairment. (Note: Individuals who are “regarded as” having a disability are not entitled to reasonable accommodation.)

Drug: A controlled substance, as defined in schedules I through V of section 202 of the Controlled Substances Act (21 U.S.C. 812).

Essential Job Function: A fundamental job duty of a position, as opposed to a marginal function of that position. The reason the position exists is to perform the “essential functions” of that position, with or without reasonable accommodation.

Illegal Use of Drugs: The use of drugs, the possession or distribution of which is unlawful under the Controlled Substances Act (21 U.S.C. 812). This does not include the use of a drug taken under supervision of a licensed health care professional, or other uses authorized by the Controlled Substances Act or other provisions of Federal law.

Major Life Activity: Major life activities include, but are not limited to, caring for one, performing manual tasks, seeing, hearing, eating, sleeping, walking, standing, lifting, bending, speaking, breathing, learning, reading, concentrating, thinking, communicating, and working. Also includes the operation of a major bodily function, including but not limited to, functions of the immune system, normal cell growth, digestive, bowel, bladder, neurological, brain, respiratory, circulatory, endocrine, and reproductive functions.

Qualified Individual with a Disability: An individual with a disability who, with or without reasonable accommodation, can perform the essential functions of the position that the individual holds or desires. This does not include an individual who is currently engaging in the illegal use of drugs, when actions are taken on the basis of such use.

Reasonable Accommodation: A modification or adjustment either in the way work is customarily done, or in the work environment, permitting an employee to continue to perform the essential functions of a job. (Note: Individuals who are “regarded as” having a disability are not entitled to reasonable accommodation.)

Undue Hardship: An action that is excessively costly, extensive, substantial, disruptive, or that would fundamentally alter the nature or operation of an employer’s business.

GENERAL PROCEDURES:

- A. The Department of Juvenile Justice will comply with the ADA Amendments Act. Refer to the Department of Justice’s ADA website for full information regarding the Act and its implications for employees and managers: www.ada.gov
- B. Each facility/office/program will post a copy of the Equal Employment Opportunity Notice (Attachment A) on the official bulletin board.
- C. Department managers and supervisors will ensure that qualification standards, tests, or selection criteria are job related and consistent with business necessity. (See DJJ 3.51, Recruitment and Selection)
- D. Confidentiality:
 1. Health information of employees and requests for accommodations will be considered confidential.

2. Managers, supervisors, and human resources staff will not provide other staff the reason for an accommodation or any other information regarding an accommodation request.

PRE-EMPLOYMENT INQUIRIES:

- A. If an applicant requests reasonable accommodations for the interview under the Americans with Disabilities Act Amendments Act, the Hiring Manager will contact the Office of Human Resources for guidance.
- B. Supervisors and managers will not make any pre-employment inquiries about the existence, nature, or severity of an applicant's disabilities prior to a conditional offer of employment.
- C. Supervisors may make pre-employment inquiries about the ability of an applicant to perform essential job functions only if the inquiry is made of all applicants.
- D. During the interview, if an applicant requests an accommodation for the position, the supervisor/manager will advise the applicant that the accommodation will be taken into consideration if he/she is selected. The supervisor/manager will consult with the Office of Human Resources about the request and before making the selection for the position.

MEDICAL EXAMINATIONS:

- A. All medical and physical examinations of prospective and current employees must be job related and consistent with business necessity.
- B. Post Offer Examinations:
 1. A medical examination may not be used to eliminate applicants for employment.
 2. A medical examination will be permissible when:
 - a) A conditional offer of employment has been made;
 - b) All entering employees are subjected to an examination regardless of disability.
 3. An offer of employment may be made contingent upon an applicant successfully passing a physical examination.
 4. All pre-employment medical and physical examinations will be administered in accordance with laws, rules, regulations, and policies governing the State's Medical and Physical Examination Program (MAPEP). (See DJJ 3.57, Medical and Physical Examination Program)

REASONABLE ACCOMMODATIONS:

A. General Procedures:

1. The Department will attempt to provide a reasonable accommodation if to do so does not interfere with the employee's ability to perform the essential functions of the position or impose undue hardship on the employee's work unit.
2. Individuals who are "regarded as" having a disability are not entitled to reasonable accommodation.

B. Requesting an Accommodation:

1. An employee must make a written request for an accommodation to the employee's immediate supervisor or the next level manager in the absence of the immediate supervisor. The employee should submit medical validation with the request.
2. The supervisor receiving the request will immediately forward the request to the Manager of the Employment Relations/EEO Section. No formal commitment to the accommodation request will be made at this time.

C. Medical Validation:

1. All requests for reasonable accommodations will require medical validation.
2. The ADA Physician's Statement (Attachment C) will serve as the medical validation and must be completed by the employee's attending physician.
3. A copy of the employee's current job description and individual performance plan (if available) will be attached to the ADA Physician's Statement to assist the physician in his/her medical evaluation of the employee's disability/medical condition in relation to the essential job functions.
4. In addition, the employee may grant permission, in writing, for the Director of Human Resources, Employment Relations/EEO Section, or appropriate personnel, to communicate directly with the physician regarding the accommodation request. To grant this permission, the employee will be required to sign the Authorization for Release of Protected Health Information (Attachment D).

D. Determination of Reasonable Accommodation:

1. A decision on the request will not be made until the Director of Human Resources and/or Employment Relations/EEO Section receives the medical validation and the information is analyzed.

2. The immediate supervisor, Assistant Commissioner, Deputy Commissioner or Central Office Director, Director of Human Resources, and Manager of the Employment Relations/EEO Section will make a determination using the Model for Analysis and Resolution of ADA Issues (Attachment B).
3. The Office of Human Resources will communicate the determination to the employee, in writing. The confirmation will be filed in the employee's health record and in the Employment Relations/EEO Section.
4. An individual with a disability will not be required to accept the accommodation.
5. The employee must perform the essential functions of his/her position, whether he/she chooses to accept the accommodation or not.

E. Temporary and Modified Work Assignments:

1. The employee may be placed in a modified work environment or given temporary duties or a modified work assignment until a decision on the reasonable accommodation can be made.
2. For the purposes of this policy, a temporary or modified work assignment will not continue after a decision has been rendered regarding the reasonable accommodation is request.
3. If the employee is unable to return to work and perform the essential functions of his/her position, family and medical leave may be authorized or other forms of authorized leave with or without pay may be considered.

F. Alternative Employment:

1. When reasonable accommodation is not possible, an employee may be offered alternative employment to any vacant position for which he/she qualifies.

ILLEGAL USE OF DRUGS AND MISUSE OF ALCOHOL:

A. The term "qualified individual with a disability" will include an individual who:

1. Has successfully completed a supervised drug rehabilitation program and is no longer engaging in the illegal use of drugs, or has otherwise been rehabilitated successfully and is no longer engaging in such use;
2. Is participating in a supervised rehabilitation program and is no longer engaging in such use; or

3. Is erroneously regarded as engaging in such use, but is not engaging in such use. (Note: Individuals who are “regarded as” having a disability are not entitled to reasonable accommodation.)
- B. An employee who uses drugs illegally or who is an alcoholic will be subject to the same qualification standards for employment, job performance and behavior standards and/or expectations, and terms and conditions of employment that other employees are subject to, even if unsatisfactory performance or behavior is related to the employee’s drug use or alcoholism.
 - C. For the purposes of this policy, a test to determine the illegal use of drugs will not be considered a medical examination.

SEPARATION FROM EMPLOYMENT DUE TO THE INABILITY TO PERFORM ESSENTIAL DUTIES:

- A. An employee may be separated from employment when:
 1. There is no reasonable accommodation that can be made without incurring an undue hardship on the organization;
 2. Additional leave options have been considered and are either determined not to be available or cannot be granted without undue hardship.
- B. Classified employees with permanent status may only be separated pursuant to State Personnel Board Rules and applicable Department policy.

COMPLAINTS

- A. Employees are encouraged to use internal procedures to address any complaint concerning the Department’s administration of the ADA Amendments Act. Complaints may be filed in accordance with the following policies, as applicable:
 1. DJJ 3.23, Classified Employee Grievance Procedure;
 2. DJJ 3.24, Unclassified Employee Grievance Procedure; and
 3. DJJ 3.22, Harassment.
- B. Employees may also file complaints directly with the Georgia Commission on Equal Opportunity (GCEO) or the Equal Employment Opportunity Commission (EEOC).

On the Job Training (OJT) Handbook

DJJ Policy 8.12 – Key Control

All secure facilities shall maintain an accountability system for keys that ensures constant control of each key. Under no circumstances will a youth be permitted to handle security or any other keys used at the facility, except those specifically issued and authorized (if any) for youth such as a personal locker key.

- A. The facility Director will designate a Key Control Officer to be responsible for the storage and inventory of all keys.
- B. The Key Control Officer will maintain a master inventory of all keys and keyboards.
 - 1. The key inventory list will include, at a minimum:
 - a) Key code number;
 - b) Door and/or room number, or lock that key operates;
 - c) Location of door, room, or lock;
 - d) Permanent issuance by position/title (if applicable);
 - e) Back-up board number;
 - f) Working board number;
 - g) Key and lock manufacturer; and
 - h) Number of keys on back-up board and working key board.
 - 2. The Key Control Officer will maintain a separate inventory of the Working Key Board, the Highly Restricted Key Board and the Back-Up Key Board. The inventory will be posted at the location of each Key Board and the Key Control Officer will maintain a copy in a central file. The inventory will include the following information, at a minimum:
 - a) Key Board hook number and/or box number;
 - b) Key code number;
 - c) Designated door/room or lock the assigned key fits; and
 - d) Number of keys on each key ring.
 - 3. The Key Control Officer will maintain a master count of all key blanks. Key blanks will be stored in a secure location determined by the Director.
 - 4. The Director must authorize all changes affecting the inventory in any way
 - 5. The key inventory will be adjusted as necessary to reflect the making of keys or other changes to the system.

6. The Key Control Officer will randomly count the number of keys on one key ring each working day. This count will be documented in the facility logbook.
7. Keys will be numbered, either by the manufacturer or by engraving, unless the size of the key makes this impossible. Identical keys will have the same number. Dissimilar keys will never have identical numbers.
8. All keys (except back-up keys) will be maintained on a metallic key ring that is tamper proof or soldered/crimped at the joint to prevent tampering, loss or removal.
9. A metal tag, showing the number of keys and the hook number, will be attached to each key ring.
10. Once per quarter, a complete audit will be conducted of the key control system. The Director will appoint someone other than the Key Control Officer to perform this function. The audit will include, at a minimum:
 - a) Inventory of keys;
 - b) Testing of locks/keys for proper function; and
 - c) Evaluation of adherence to policy and procedure.
11. A written report using the Key Control Audit (Attachment B) will be provided to the Director and Key Control Officer detailing audit findings. Corrective action will be taken as needed.
12. Each facility Director will ensure local operating procedures provide for the securing of the personal key rings of all persons entering the secure area of the facility, including visitors, staff regularly assigned to the facility and staff not regularly assigned to the facility.
13. Employees will avoid references to key numbers and other identifying information in the presence of youth. Employees will avoid dropping keys, keys will never be thrown from one person to another, and keys will not be skidded across the floor. Keys will be carried in a secure manner on the person and will never be left unattended.
14. Padlocks will be used only for chains, gates, file cabinets and chemical/tool storage lockers. Padlocks and their keys will be inscribed with a control number and accounted for in the same manner as keys as provided for in this policy.
15. No employee will possess, alter, mark, duplicate, manufacture, make impressions of keys, or add/remove keys from rings without authorization from the Director. Likewise, no employee will alter or change locking devices or doors without authorization from the Director. Any such incident will be

reported in writing to the Director. The Director will cause any such incident, or suspected incident, to be thoroughly investigated. Such actions by staff or youth may result in disciplinary action, adverse employment action and/or may be referred for criminal prosecution.

KEY BOARDS:

A. Working Key Board:

1. Regularly-issued, non-restricted keys will be assigned to the Working Key Board.
2. Every hook on the Working Key Board will be filled at all times containing either a set of keys, key chit(s), or a metal tag stamped with the working number assigned to that hook indicating that the hook is not currently assigned a key ring.
3. The Working Key board will have sufficient hooks to accommodate all key rings and keys. Each hook on the board will be assigned a number.
4. Only one key ring will be assigned to each hook on the Working Key Board.
5. The employee assigned to the control room will check the Working Key Board upon reporting for duty assuring that they account for each key ring and will log this check in the facility logbook.
6. Key chits will be used to withdraw working keys.
7. The Working Key Board will remain locked when not being used.

B. Highly Restricted Keys:

1. The following keys will be maintained as highly restricted keys:
 - a) Sub-master keys;
 - b) Master keys;
 - c) Keys to the location of the location of the Back-Up Key Board;
 - d) Keys to the Back-Up Key Board;
 - e) Keys to the personal property storage room/area;
 - f) Keys to active and inactive records storage areas;
 - g) Keys to medication storage/administration areas;
 - h) Keys to the medical clinic;
 - i) Keys to tool and chemical storage areas;
 - j) Keys to food service areas; and
 - k) Keys to vocational education areas.

2. Key chits will be used to issue highly restricted keys.
3. In addition to key chit exchange, highly restricted keys must be signed in and out by the staff receiving the key using the Highly Restricted Key Log (Attachment C).
4. Each Highly Restricted Key set must be stored in a separate, locked individual storage box. The front of the box will be designed so that the control room operator can see the keys or chit.
5. Staff authorized to be issued highly restricted keys must be issued an access key to the box on a 24-hour basis. Each facility must develop procedures that provide for how highly restricted keys are routinely accessed, the completion of a Special Incident Report if the box is accessed by unauthorized person(s), and emergency access to highly restricted keys.

C. Back-Up Key Board:

1. The Back-up Key Board will be maintained in a secure location determined by the Director.
2. The key to the location of the Back-Up Key Board and the key to open the Back-Up Key Board will be on a Highly Restricted Key Set. The Key Control Officer will be issued an access key to the Highly Restricted Key Set on a 24-hour basis.
3. The Back-up Key Board will be arranged so that a hook is designated for each facility key.
4. Duplicate keys to the same lock will be displayed on the same hook. Excess duplicate keys that cannot be displayed on the same hook will be stored in a secure locked cabinet with an inventory posted at the location.
5. Replacement keys will be drawn from Back-up Key Board for replacement on the working/highly restricted key rings as needed by the Key Control Officer.

LOST, MISPLACED AND DAMAGED KEYS AND LOCKS:

- A. The Director must approve all key making, duplication or change of any key, door or lock.
 1. Requests for changes, duplication, or additional keys or locks will be made in writing to the Key Control Officer using the Request for Keys (Attachment D). The Key Control Officer will review the request and forward it with his/her recommendations to the Director for approval.

B. Lost / Misplaced Keys:

1. The Key Control Officer will monitor the facility logbook and any incident reports on a daily basis and correct any unresolved deficiencies regarding key control.
2. A verbal report of any lost or misplaced key or key ring will be made to the employee's supervisor immediately, stating when loss or misplacement was discovered, circumstances surrounding that loss or misplacement, and specifically identifying the key/key ring. The staff member discovering a missing key will complete a Special Incident Report in accordance with DJJ 8.5, Special Incident and Child Abuse Reporting in Secure Facilities.
3. When keys are lost or misplaced, including personal key rings, local operating procedures will establish precautions to be taken to preclude use of the key(s) for unauthorized access or escape from the facility. The Director will determine if locks should be changed.
4. An employee who misplaces a key through negligence or carelessness will be subject to disciplinary action, up to and including dismissal. (See DJJ 3.80, Employee Accountability and Discipline)
5. In the event an employee inadvertently carries a key home, he/she will be contacted and required to return it immediately or at the discretion of the Director or designee.

C. Damaged Keys, Key Rings, and Locks:

1. A verbal report of any damaged or broken key, key ring, or lock will be made to the employee's supervisor immediately, stating when the damage was discovered, known circumstances surrounding the damage, and specifically identifying the damaged item (key, key ring, or lock). The Request for Key/Lock Change and Maintenance Form will be completed before the end of the shift and submitted to the shift supervisor.
2. Force will not be used to operate locks. If the lock does not function easily, it will be immediately reported and repaired.

KEY ISSUANCE:

A. Key Assignment:

1. Keys will be issued to the staff based on position and level of responsibility.

2. Staffs who work in Annex buildings outside the secure perimeter will not be allowed to take keys providing access inside the facility, outside the secure perimeter.
 3. No key set utilized inside the facility will contain a master key.
- B. When receiving a key ring, the employee will check the key ring to ensure that it has the number of keys indicated, and that no keys appear to be damaged.
- C. Chits:
1. Each employee will be provided metal key chits stamped with his/her name or assigned number. These chits will be used as receipts for all keys drawn.
 2. A list of all employees' names and their assigned number will be maintained by the key control officer and at the location where keys are issued.
 3. Individuals who have forgotten or lost their chit must be issued a temporary administrative white chit (Attachment E, Request for Replacement of Lost Chit). Use of an administrative white chit requires approval of the employee's supervisor and will be returned at the end of the work day. Administrative white chits will not be issued for longer than one work day. A log will be maintained of administrative chits that are issued (Attachment F, Administrative/White Chit Log).
- D. Key Exchange at Shift Change:
1. For Highly Restricted Key sets, all key exchanges will take place at the control room. Highly Restricted Key sets will be accounted for with only one chit at any given time.
 2. Incoming staff will receive keys in exchange for their chit, which will be placed on the key hook to indicate to whom the keys were issued. When a shift ends, outgoing staff will report to the control room to return their key sets for placement on the numbered hook and retrieve their chit.
 3. If the incoming shift relieves a security post, the key exchange may take place at the post. The key chits must also be exchanged at the control room (i.e., the incoming staff member's key chit must be placed on the key hook and the outgoing staff member must retrieve his/her key chit). The incoming staff member may give the outgoing staff member his/her chit to be placed on the key hook when the outgoing staff member retrieves his/her chit.
- E. Perimeter Entrance/Exit Keys:

1. Perimeter entrance/exit key ring will be a highly restricted key set that will be chit in and out for each perimeter check, if applicable.
2. Upon completion of the perimeter check the perimeter entrance/exit keys will be immediately returned to the control room and checked in.
3. Sally port doors operated by the control room will only be accessed via the electronic control panel. No staff will utilize keys to unlock these doors.
4. No key set utilized within the facility will contain keys with access to perimeter entrance/exits.

F. Fire (Fresh Air) Doors

1. No key set will contain keys that access that lead outside the perimeter gate (an exit door that leads outside and is not contained inside the perimeter fence).
2. The Facility Director will designate staff that is authorized to have access to perimeter gate keys.

G. Emergency Keys:

1. Keys necessary to facilitate emergency evacuation from the facility will be included on emergency key rings maintained in the control center area. These keys will be issued by control room staff in an emergency. They will be stored separately from working keys and highly restricted keys.
2. Emergency key sets must contain all keys necessary for complete evacuation of the facility. (If multiple rings are used, the rings must be attached in some way. Exceptions to this requirement must be approved in writing by the Deputy Commissioner of Secure Facilities).
3. Each individual emergency key will be marked for identification by color-codes. Fire door keys (i.e., exit doors) will be marked by red color-coding and the corresponding locks will be marked to match the respective keys.
4. Each facility door will be numbered.
5. At the location of each lock, there will be two-inch, color-coded circle. The emergency key that opens that particular lock will be coded with the same color as the circle on the lock. Fire doors will be color-coded with the color red and must match the respective key.
6. Emergency keys will be used during emergency drills, and documented using Attachment E, Drill Report see DJJ Policy 8.40 Emergency Management (A

Special Incident report is not necessary for pulling emergency keys during a drill) as applicable. Malfunctions will be reported and corrected immediately.

7. The Key Control Officer will test emergency keys quarterly to ensure proper function (Attachment H, Quarterly Emergency Key Inspection). Necessary repairs will be made immediately. This will be documented in writing and provided to the Director.
8. All staff, but particularly security staff, will have a thorough understanding of the use of emergency keys to facilitate evacuation in an emergency. As part of initial on-the-job training, the emergency key system will be thoroughly reviewed and staff will be required to demonstrate working knowledge of the use of emergency keys.

H. Off-Site Emergency Keys:

1. An identical set of emergency keys will be maintained in a secure location away from, but near, the facility (e.g., another DJJ facility, local law enforcement facility, fire station, etc.).
2. The secure location will be provided a locked box for the storage of the facility's emergency keys.
3. The keys will enable complete access to the facility in the event of an emergency.
4. The Director and senior official of the assisting location will develop a written agreement outlining who has access to these keys and under what circumstances they may be drawn. The Director will identify specific staff members who are aware of the location of these keys and how to access them.
5. When emergency key sets change, the off-site emergency key ring will also be updated.

Key Control Best Practice Standards:

Keys left on a desk or hanging in a lock in the door are an invitation for trouble. Upon receiving keys, ask yourself, "How many keys do I have and what doors will they open? You would be astonished to find out that if you were to ask the youth around you the same question, they would know.

Unattended keys cause a major breakdown in security. Keys must never be left unattended or unsecured. Remember, each time you leave your office or work area, lock your door and place your keys in a secure area such as a pocket or purse.

Also know how many keys you should have on the key ring and what doors they open. Any alterations of your keys should be brought to security's attention immediately. Don't discuss your keys with anyone in a manner that can be overheard by youth, and conceal your keys as much as reasonable. Any information about keys is valuable to any youth population that may be planning unauthorized activities.

Other basic guidelines for key control include:

- a) Never allow residents to handle keys.
- b) Always inventory keys under your control.
- c) Know proper ways to handle your keys and information about your keys.
- d) Follow proper check out procedures.
- e) Always carry keys securely and concealed from view of youth.
- f) Never leave keys unattended in vehicle ignitions or in padlocks or doors.
Always lock the padlock on the stabilized object while you are in the area that the padlock secures.
- g) Avoid referring to key and lock or door locations so that youth can overhear you.
- h) Avoid dropping keys as keys are made of soft material and will bend or break easily.
- i) Never throw or skid keys to give to another person. Hand carry and give to them in person.
- j) Use the right key! Several keys appear to look the same at a distance, but all are cut differently. Use of the wrong key will not only damage the key, but also the lock.
- k) Never force a lock. If the key will not work, first check to be sure you have the right key. If you are using the right key and still cannot unlock the door, report it to control center immediately.
- l) Never take any keys out of the facility. A good habit to get into is to pat shake yourself down prior to leaving the facility. If you do take keys home, call as soon as you discover it and advise your facility. Then return the keys immediately.

- m) Follow proper key checkout and check-in procedures at your facility.
- n) A verbal report of any damaged key, key ring, or lock will be made to the employee's supervisor immediately, stating when the damage was discovered, known circumstances surrounding the damage, and specifically identifying the damaged item (key, key ring, or lock).
- o) Broken keys will be immediately reported to the supervisor and a Special Incident Report completed. When the Special Incident Report is reviewed by the Shift Supervisor, the Shift Supervisor will notify the Key Control Officer of the damaged key.
- p) Chits are the items that you exchange for keys. Chits are critical items. Secure them and report any missing or lost chits immediately.
- q) If you have to unlock a door/gate to enter, lock it back when you are through.

On the Job Training (OJT) Handbook

DJJ Policy 7.30 Tool Control

Facility tools shall be managed and controlled to ensure accountability and prevent misuse. Staff shall ensure that tools are used for the purpose intended and that the user (including youth) is instructed in the proper use of the tool/material. Staff shall provide supervision when youth use tools.

- A. The facility Director will designate a staff member as Tool Control Officer to audit tool inventories, mark tools for identification purposes, and monitor the security of tools. Overall responsibility for tools will rest with the facility Director and the work area supervisors.
- B. The Tool Control Officer, in corporation with the work area supervisors, will establish inventories for each work area within the facility. Work area supervisors will maintain and account for all tools/culinary equipment/medical equipment/cleaning equipment in their work areas.
- C. Each facility will establish check in/out systems for tools, medical equipment and culinary equipment.
- D. Cleaning equipment will be accounted for at all times and secured when not in use. When not in use, cleaning equipment will not be accessible to the youth.
- E. Once per quarter, a complete audit will be conducted of the tool, cleaning equipment, medical equipment and culinary equipment control systems. The Director will appoint someone other than the Tool Control Officer or work area supervisor to perform this function. A report of the audit will be submitted to the Tool Control Officer, work area supervisor and facility Director.
- F. The Tool Control Officer will maintain all reports and audits related to tool/culinary equipment/medical equipment control and present the documentation for audit/inspection as requested.
- G. Outside workers or personnel, including contract workers, who bring tools into the facility, will submit a written inventory of all tools, toolboxes, and related equipment prior to admittance inside the secure area of the facility. An employee will escort these workers while in the facility and will confirm that no tools are left behind, activities are confined to the authorized area, and work is performed with proper security and safety precautions.

TOOL CONTROL

- A. All tools require oversight by the Tool Control Officer. At a minimum, all tools that can cause death or serious injury will be secured. (For the purposes of this

policy, medical equipment and culinary equipment will not be considered tools. Medical equipment and culinary equipment will be inventoried, stored and secured in accordance with Sections V and VI of the policy.

1. All ladders will be inventoried by size and type, numbered, and will have work area assignments printed on them. Ladders will be chained in a secure storage area or chained to fencing outside of the secure perimeter when not in use. Six-foot ladders may be chained onto the tool board or other accessible location for frequent use
 2. Emery wheels and portable grinders will be secured under lock when not in use. All emery wheels will be locked when not in use.
 3. The Tool Control Officer will maintain a current inventory of all tools.
 4. Only the required amount of tools will be maintained in each work area. Tools in excess of daily needs will be transferred to the Tool Control Officer, who will store the tool in a safe and secure manner prior to disposal or reassignment.
 5. All tools so adaptable will be displayed on shadow boards. Only one tool will be displayed on each shadow. The shadow boards will be locked in a secure room or enclosed in a heavy wire enclosure, which will be locked. The Tool Control Officer will maintain and inventory with each shadow board.
 6. At the beginning of each shift, the area supervisor will document on the Tool and Equipment Accountability Log the presence of all inventoried tools.
 7. Each work area supervisor will submit a Weekly Tool Report (Attachment A) to the Tool Control Officer.
 8. The Tool Control Officer will take possession of all tools received in the facility prior to use and/or placement in the inventory.
- B. The Tool Control Officer will complete a Tool Receiving Log (Attachment B) for each work area where the received tools are to be assigned and maintain a copy of the report in the tool control file. Copies of the Tool Receiving Log will be forwarded to the work area supervisor to be filed in the work area.
1. Tools will be permanently marked for identification purposes with a work area ID and then a sequential number. Very small or fragile tools may be exempt from marking.
- C. All tools will be securely stored within the assigned work area. Only designated facility staff will have access to tool areas. Unsupervised youth will not be permitted to work in, or be allowed access to, areas used for the storage of tools.

- D. All tools in a vehicle will be kept in a secure, locked location when not in use.
- E. Each work area supervisor will be responsible for the issuing of all tools in the work area.
 - 1. A chit system will be used for all tools on a shadow board.
 - 2. For tools not on a shadow board, all tools will be accounted for in a permanent daily log. The log will indicate date, name of employee who is checking out the tool, description of the tool, quantity, time checked out, time checked in, and signature of the individual issuing the tool.
 - 3. For vocational classes, tools may be issued to youth without a chit. These tools will be inventoried at the end of each class period.

LOST TOOLS (ALL TOOLS)

- A. Any tool discovered lost/missing will be verbally reported immediately to the Facility Director, Tool Control Officer, and work area supervisor. The Lost Tool Report form (Attachment D) will be submitted to the Tool Control Officer within two hours or the end of the shift, whichever occurs first. (In the absence of the Tool Control Officer, the report will be submitted to his/her supervisor.)
 - 1. The Tool Control Officer will maintain a copy of the Lost Tool Report in the tool control file.
 - 2. Any youth and/or staff member(s) who had access to the tool will be held at that location until a thorough search has been made. The Director or designee will make a determination about the security measures to be taken after a tool is lost.
 - 3. When a tool is found, the tool will be forwarded to the Tool Control Officer, written notice to the work area supervisor where the tool was assigned. The Tool Control Officer will check the tool against the file of Lost Tool Reports. If the tool has already been replaced, the found tool will be placed in secure storage or, if unserviceable, destroyed. Destruction of a found tool will be documented on the Lost Tool Report.

MEDICAL EQUIPMENT CONTROL

- A. The Tool Control Officer and work area supervisor will each maintain a current copy of the medical equipment inventory. For disposable one-time use items (e.g., needles), the work area supervisor will maintain a current copy of the inventory.

- B. Only the required amount of medical equipment will be maintained in the work area. Permanent medical equipment in excess of daily needs will be transferred to the Tool Control Officer, who will store the item(s) in a safe and secure manner prior to disposal or reassignment. For disposable one-time use items (e.g., needles), the work area supervisor will maintain the excess inventory in a secure location.
- C. Only the minimum number of disposable medical equipment (syringes and needles) for operation of the health services unit will be maintained for daily use. A daily perpetual inventory of all needles and syringes will be maintained by health care staff. Reserve stocks of needles and syringes will be inventoried and secured in a locked area by health care staff. Inventories will remain on file for 12 months.
- D. At the beginning of each shift, the area supervisor will document on the Tool and Equipment Accountability Log the presence of all inventoried tools.
- E. Each work area supervisor will submit a Weekly Tool Report (Attachment A) to the Tool Control Officer.
- F. The work area supervisor will complete a Tool Receiving Log (Attachment B) for permanent and disposable medical equipment received. The Tool Receiving Log will be maintained in the work area and a copy forwarded to the Tool Control Officer.
 - 1. When possible, permanent medical equipment will be permanently marked by the Tool Control Officer or identification purposes with a work area ID and then a sequential number. Very small or fragile tools may be exempt from marking.
- G. All medical equipment will be securely stored within the assigned work area. Only designated facility staff will have access to medical equipment areas. Unsupervised youth will not be permitted to work in, or be allowed access to, areas used for the storage of medical equipment.
- H. Medical equipment not adaptable to shadow boards will be stored in locked drawers, cabinets, or chests, or secured in an area designated for medical equipment. The work area supervisor will maintain an inventory where this equipment is stored.
- I. The work area supervisor will be responsible for the issuing of all medical equipment in the work area.
 - 1. A chit system will be used for all equipment on a shadow board.
 - 2. Equipment not on a shadow board will be accounted for in a permanent daily log. The log will indicate date, name of employee who is checking out the

equipment, description of the equipment, quantity, time checked out, time checked in, and signature of the individual issuing the equipment.

- J. Any equipment discovered lost/missing will be verbally reported immediately to the Facility Director, Tool Control Officer, and work area supervisor. The Lost Tool Report form (Attachment D) will be submitted to the Tool Control Officer within two hours or the end of the shift, whichever occurs first. (In the absence of the Tool Control Officer, the report will be submitted to his/her supervisor).
- K. Medical equipment and supplies of a hazardous nature will be maintained in a locked storage area or container.
 - 1. The work area supervisor will submit a Weekly Tool Report to the Tool Control Officer.
 - 2. Medical equipment will be checked during the quarterly tool audit.
 - 3. Only authorized persons will have access to medical equipment and supplies.
 - 4. Used needles will be placed in a secured, biohazard sharps container until properly disposed of in order to keep them out of the possession of youth. The biohazard container will be the type that hands cannot enter the top of the contained.

Culinary Tool Control

- A. Eating utensils (spores) issued to youth will be accounted for with each meal.
- B. The Tool Control Officer and work area supervisor will each maintain a current copy of the culinary equipment inventory.
 - 1. Only the required amount of culinary equipment will be maintained in the work area.
 - 2. The work area supervisor will submit a Weekly Tool Report (Attachment A) to the Tool Control Officer.
- C. The Tool Control Officer will complete a Tool Receiving Log (Attachment B) when culinary equipment is received and maintain a copy of the report in the tool control file. Copies of the Tool Receiving Report will be forwarded to the work area supervisor to be filed in the work area.
- D. When possible, culinary equipment will be permanently marked for identification purposes with a work area ID and then a sequential number. Very small or fragile items may be exempt from marking.

- E. All culinary equipment will be securely stored within the assigned work area. Only designated facility staff will have access to culinary equipment areas. Unsupervised youth will not be permitted to work in, or be allowed access to, areas used for the
- F. All culinary equipment so adaptable will be displayed on shadow boards. Only one item will be displayed on each shadow. The shadow boards will be locked in a secure room or enclosed in a heavy wire enclosure, which will be locked. The Tool Control Officer will maintain an inventory with each shadow board.
- G. Culinary equipment not adaptable to shadow boards will be stored in locked drawers, cabinets, or chests, and secured in a designated tool area. The Tool Control Officer will maintain an inventory where this equipment is stored.
- H. When culinary equipment is removed from permanent inventory and not replaced, the Tool Control Officer will immediately remove the corresponding shadow from the shadow board, if applicable.
- I. All sharps will be accounted for in a permanent daily log or via chit system.
- J. All cooking utensils will be accounted for at the end of each meal and will be documented on the Culinary Equipment Tracking Form (Attachment E).
- K. Any culinary equipment discovered lost/missing will be verbally reported immediately to the Facility Director, Tool Control Officer, and work area supervisor. The Lost Tool Report form (Attachment D) will be submitted to the Tool Control Officer within two hours or the end of the shift, whichever occurs first. (In the absence of the Tool Control Officer, the report will be submitted to his/her supervisor).
- L. A complete inventory will be maintained with one copy to be conspicuously displayed in the storage cabinet, one copy with the Food Service Supervisor, and one copy with the Tool Control officer. The inventory will be checked at each shift change. The employee performing the inventory will initial on the permanent log indicating all knives and tools are accounted for.
- M. At the beginning of each shift, the area supervisor will document the presence of all inventoried tools on the Tool and Equipment Accountability Log.
- N. Only authorized employees will have access to the storage cabinet.
- O. Extra sharps (slicer blades, knives, etc.) will be placed in secure storage elsewhere within the facility where youth do not have access.

On the Job Training (OJT) Handbook
DJJ Policy 7.31 Control of Hazardous Materials

Facility hazardous materials shall be managed and controlled to ensure accountability and prevent misuse.

Staff shall ensure that hazardous materials are used for the purpose intended and that the user (including youth) is instructed in the proper use of the tool/material. Staff shall provide supervision when youth use tools. Employees and youth shall receive training regarding hazardous materials, including the use of Material Safety Data Sheets.

Hazardous Materials:

Those substances, which fall into one of three categories:

- Flammable and combustible (i.e. gasoline, kerosene, motor oil) substances
- Toxic (poisonous, i.e. ammonia, bleach, antifreeze) substances
- Caustic (i.e. lye, caustic soda, tannic acid) substances

Material Safety Data Sheet: The Document prepared by manufacturers that contains the chemical name and common name of the hazardous material, the hazards or other risk in the use of the hazardous material (i.e., fire, explosion, reactivity, acute/chronic health effects, and primary route of entry and symptoms of over exposure), safety precautions in the use of or exposure to the hazardous material, emergency treatment in the case of over-exposure, emergency procedures for spills, fire, disposal and first aid, the year and month the information was compiled and the name, address, and phone number of the manufacturer.

- A. Hazardous materials will be used only for the purpose intended by the manufacturer and will be disposed of according to the manufacturer's directions.
- B. The facility Director will designate an employee as the Chemical Control Officer who will:
 - 61 Ensure proper storage,
 - 62 Monitor inventories,
 - 63 Ensure proper supervision and use,
 - 64 Ensure the presence of material safety data sheets and signs,
 - 65 Assist in the instruction regarding use of hazardous materials; and
 - 66 Maintain required records.
- C. Once per quarter, a complete audit will be conducted of the chemical control system (see Attachment A) by someone other than the Hazardous Materials Control Officer. A report will be submitted to the Chemical Control Officer and facility Director.
- D. All facilities/programs will maintain Material Safety Data Sheets (MSDS) for all

hazardous substances maintained or used. This information will be readily accessible to all personnel and youth who may come into contact with hazardous materials.

1. All personnel will be instructed as to the location of the MSDS information and their right to know about the substances utilized or maintained.
 2. Guidance regarding the safe storage and use of materials found in the MSDS will be followed.
- E. Hazardous materials, excluding those used for routine cleaning of the facility, will be stored outside of the facility. When possible, storage area will be located separate from and 50 feet away from buildings housing staff and youth.
- F. All flammable and combustible liquids will be stored in approved containers and locked cabinets. The smallest amount necessary for operation will be maintained.
1. Storage areas will be locked with access restricted to staff or youth under staff supervision.
 2. Signs will be posted stating that flammable materials are stored in the building and that no smoking is allowed.
 3. Flammable liquids will not be used for cleaning, unless designed for cleaning. Gasoline will never be used for cleaning purposes.
 4. Cutting and welding devices and attachments are considered one unit and will be stored as a unit.
- G. Toxic and caustic materials will be stored in secured areas and restricted to staff access. Quantities of such materials will be limited to the smallest amount necessary for operation.
- H. Youth will never be allowed to use antifreeze, lye, poisons, pesticides, undiluted caustic materials, or undiluted toxic materials.
- I. Accurate written perpetual inventories will be maintained of all hazardous materials indicating the amount present and the amount drawn. The smallest amount necessary will be issued or drawn. Staff will issue hazardous materials.
- J. Staff will constantly supervise youth performing routine cleaning, maintenance or facility clean up.
- K. Gasoline-propelled lawn mowers and other small engines will be stored in a secure place when not in use. Supervisors of small engines repair shops will

issue gasoline needed to operate engines only during periods of instruction or repair.

- L. Gasoline in bulk storage will be maintained in a secure area outside of the living units. Small quantities of gasoline will be dispensed, stored, and carried only in containers approved for this purpose by the National Fire Protection Association. Containers will be red and the word "gasoline" painted clearly and legibly on the sides. Youth will not dispense gasoline.
- M. Gasoline pumps will remain locked when not in use.

Your physician may request any and all information regarding the chemicals that you work with so that they may be able to provide you with optimum healthcare.

On the Job Training (OJT) Handbook

DJJ Policy 11.30, Infection Control

Introduction

Department of Juvenile Justice staffs shall utilize standard precautions when engaging in activities involving the potential for exposure to blood or body fluids.

DEFINITIONS:

Ectoparasites: Lice or scabies

Exposure: Specific contact of the eye, mouth, mucous membranes, non- intact skin or contact in a manner other than through the digestive system with blood or other potentially infectious materials.

Methicillin Resistant Staphylococcus Aureus (MRSA): Bacteria generally found on the skin or in the nose that have become resistant to broad spectrum antibiotics and, therefore, are difficult to treat.

Pediculosis: Infestation of the hairy parts of the body or clothing with lice those results in severe itching. Transmission may occur during direct contact with the individual.

Personal Protective Equipment (PPE): Equipment designed to protect from serious injuries or illnesses resulting from contact with blood or other body fluids by creating a barrier between the person and the blood/body fluid.

Scabies: A highly contagious skin disease caused by a parasite that burrows under the skin. Scabies is spread through close physical contact. The most common symptom is a rash that looks like tiny bumps or blisters that form a line and itches intensely.

Spill Kit: A standard kit used to contain blood and other body fluids that include, at a minimum: Solidifier, gloves, scoop, antiseptic wipes disposable gown, mask/face shield, and red biohazard bag.

Standard Precautions: Universal infection control guidelines designed to protect staff and youth from exposure to blood borne and other contagious/infectious diseases spread by assuming that all blood/body fluids, excretions and secretions are potentially infectious.

General Infection Control:

- A. Employees and youth shall receive training related to activities with exposure potential, precautions to be taken, and the use of personal protective equipment prior to engaging in these tasks or activities. Medical staff will provide education to youth about Hepatitis A, B, C, and Human Papillomavirus (HPV) within 7 days of admission
- B. All staff in secure facilities will be required to submit to tuberculin skin testing during on-the-job training and annually thereafter.
- C. Each facility/program will provide personal protective equipment (PPE) readily available and appropriate to the task for staff performing tasks with exposure potential. At a minimum, the following PPE will be available at each facility/program/office:
 - 1. Latex gloves; (non-latex gloves will be used as needed for staff and youth with latex allergies)
 - 2. Goggles;
 - 3. Gowns/Aprons (impervious or fluid-resistant)
 - 4. Face Shields
 - 5. Eye wash flush/station
 - 6. Biohazard spill kit (control room, classroom, dining hall, multi-purpose room, etc.)
 - 7. Mouth to mouth resuscitation masks
 - 8. Body shield
- D. Employees and youth shall use personal protective equipment, as necessary, when it could be reasonably anticipated, as the result of job duties, to be exposed to blood or bodily fluids.
- E. Gowns or aprons, goggles and face shields will be used when a procedure is likely to cause blood or other body fluids to splash, spray, or splatter.
- F. Gowns, aprons, goggles and face shields will be worn once and discarded. Staff will immediately wash their hands after removal. When cleaning spilled blood or body fluids, the employee must wear gloves. Spilled blood and other body fluids will be contained with paper towels. After removal of the spilled blood or other body fluids, the area will be cleaned thoroughly with a 10% bleach solution. Paper towels and other items used to clean the area will be discarded in a Red Biohazard plastic trash liner.
- G. The employee and youth will wash his/her hands with soap and water or an antiseptic hand washing agent after removing the gloves and anytime there is exposure to blood or body fluids, excretions or secretions.

- H. Employees must wear gloves when:
1. Collecting blood or body fluid specimens;
 2. Coming into contact with blood, body fluids, excretions or secretions
 3. Performing invasive procedures;
 4. Performing direct patient care, including first aid;
 5. Handling soiled linens;
 6. Cleaning up blood or body fluids; and Cleaning soiled supplies and equipment.
- I. Employees will wash their hands thoroughly with an antiseptic hand washing agent after the removal of gloves and anytime there is exposure to blood or body fluids. Gloves will be used for the prevention of contact with blood, body fluids, mucous membranes, and non- intact skin.
- J. Each DJJ work site will have hand sanitizer that is readily available for all staff in common areas
- K. If a staff member is exposed to blood or other potentially infectious materials, he/she will follow the Exposure Protocol (Attachment A). The exposed staff member will be referred to community physician for follow-up in accordance with DJJ 3.27 Workers Compensation (See Attachment A, Exposure Protocol). Medical services will request the sources of the exposure to submit to HIV, Hepatitis B and C testing.
- L. Employees who have their clothing saturated with blood or other body fluids will remove that clothing as soon as possible. Employee will be instructed to launder the clothing separate for their other clothing. Employees will be allowed time to shower and change clothes.
- M. If a youth is exposed to blood or other potentially infectious materials, he/she will be referred to the on-site health care staff for immediate first aid, if necessary. The area will be thoroughly washed with soap and water. (In the absence of on-site health care staff, a staff member trained in first aid will perform first aid.) The facility physician will be contacted for orders regarding follow-up. Safety needles and syringes will be used for all injections. Needles will never be recapped, bent or broken after use. Needles and other sharps will be disposed of intact in designated, puncture-resistant containers. Puncture resistant containers will be secured in a manner to prevent youth access to contaminated sharps.
- N. All disposable, non-sharp infectious waste will be disposed of in a red trash bag marked for biohazard waste. The red bags will be securely stored pending pickup by a biohazard waste disposal vendor.
- O. Soiled laundry will be bagged prior to being transported and will be handled as little as possible. Personal protective equipment will be used when collecting and handling soiled laundry, linen and clothing. Clean laundry will be handled,

processed, and transported separate from soiled laundry. Neither clean nor will dirty laundry, linen, and clothing be placed on the floor.

VANS USED FOR TRANSPORTATION OF YOUTH:

- A. Each van used to transport youth will be equipped with the following infection control equipment:
 1. Biohazard spill kit
 2. Spray disinfectant
 3. Hand sanitizer
 4. Disposable emesis bag
 5. Spit sock hood
 6. Non-latex (vinyl) gloves
 7. Mouth to mouth resuscitation masks
 8. Eye flush

The Transportation Officer/Juvenile Correctional Officer will spray seats with disinfectant at the end of the transportation day.

Youth with any respiratory-borne illness will be required to wear the Spit Sock Hood (see DJJ 8.31, Attachment B) during transportation.

Medical Services staff will be required to clear all youth for transport. If any youth being transported has an infectious or communicable disease, the health care staff will notify the transportation officer using the Notification of an Infectious Disease Form (Attachment D). The transporting officer will be responsible for taking the necessary precautions outlined on the form.

Youth with fever, contagious rashes or open, contagious wounds will not be transported.

Youth with active tuberculosis require medical clearance from the DJJ Medical Director prior to any transport. The DJJ Medical Director will provide instructions about the necessary precautions.

Restraints will be cleaned after each use. Metal cuffs will be wiped or sprayed with a disinfectant cleaner and rinsed with water. Care will be taken to not saturate the cuffs and to protect the locking mechanism. Leather restraints will be wiped with a disinfectant cleaner, rinsed with water and then wiped dry. The restraint will be allowed to air dry at least 30 minutes and then wiped with glycerin or castile soap (leather cleaner and conditioner) and dried.

On the Job Training (OJT) Handbook

DJJ Policy 5.2, Case Records

POLICY: The Department of Juvenile Justice shall maintain an individual case record for each youth. The Department shall manage case records to safeguard the confidential and privileged nature of the information. All case management services shall be documented in the case record in a timely, accurate and consistent manner. Case records shall be secured in a designated, locked location.

DEFINITIONS:

Case Record: An organized compilation of written or electronic (i.e., Juvenile Tracking System, emails, etc.) documents, reports, evaluations, notes, contacts, summaries, and other information pertaining to the provision/coordination of or referral for necessary services. Case records are those that are created and maintained by the Department of Juvenile Justice.

Confidential/Privileged Information: Information, which is subject to specific limitations on disclosure. Such information must be specifically labeled, handled, and stored in such a way as to guard against accidental disclosure.

Disclosure: To communicate, transmit, or in any way convey information to any individual or organization in written, verbal, or other form. Sharing of records between separate DJJ units is not to be considered as disclosure when the information is necessary in the legitimate performance of assigned duties.

PROCEDURES:

- A. Each facility Director will designate a Records Custodian and alternate staff person who will assist with the records processes for the work unit. The Records Coordinator will coordinate all activities surrounding case records including, but not limited to: storage, safekeeping, access, use and disclosure (see DJJ 5.1 Records Management).
- B. Every youth will have an individual case record that includes information pertaining to the provision/coordination of or referral for necessary services. No duplicate records (i.e., “dummy files”) will be allowed.
- C. Health information will be maintained separately from case records by the designated health authority in accordance with DJJ 5.5, Health Records. Counseling staff will have access to the health record.
- D. In secure facilities, education information will be maintained separately from case records by the education department. (See DJJ 5.4, Education Records) In field operations, education information will be maintained in the case record.

- E. Case records will be organized according to the established DJJ Case Records Format. The record will be clearly marked on the outside with the youth's last name, first name, DJJ identification number, and "CONFIDENTIAL."
- F. Facility/program/office Directors will establish local procedures to safeguard the confidentiality of case records. At minimum, case records will be secured in a locked storage area in a designated location not accessible to youth, but easily accessible to staff responsible for case management.
- G. DJJ staff will use only official Department forms.
- H. All documents will be filed within 5 business days after the service is rendered.
- I. Information entered into the Juvenile Tracking System (JTS) will be considered part of the youth's case record. This information will not be printed and stored in the paper case record, unless specifically required by policy (i.e. signature is required by youth and/or parent/guardian). If a JTS document is printed for signature, the signed document must be scanned into JTS. The printed document will be destroyed in accordance with DJJ 5.1 Records Management.

TRANSFERS, RELEASES AND TERMINATIONS

- A. When a youth transfers from one DJJ facility to another, the original case record will be transferred at the same time. Duplicates will not be made (see DJJ 17.10, Transfer between Secure Facilities).
 - 1. The entire case record will be placed in a sealed envelope labeled "CONFIDENTIAL." The youth's name and destination will be marked on the outside of the envelope.
 - 2. The record will be forwarded intact (i.e., will not be removed from the folder or placed in a different folder.)
 - 3. When youth are released/terminated, the facility/program/office will retain the case record as inactive. The record may be maintained in its original folder or sealed in an envelope as long as it remains organized according to the DJJ Case Records Format.
 - 4. Inactive records will be retained and destroyed in accordance with DJJ 5.1, Records Management.
 - 5. Case records of youth who have had previous involvement with the Department will be reactivated.

CASE NOTES AND PROGRESS NOTES

- A. Facility case management activities will be documented in the JTS Facility Program Module.
 - 1. Progress notes will reflect the actual service being provided and should be linked to the Service Plan objectives.
 - 2. Progress notes will present objective information that does not reflect the personal bias of the writer.
 - 3. Progress notes for groups and individual counseling sessions will be documented in BIRP (**B**ehavior, **I**ntervention, **R**esponse, **and P**lan) format. Communication notes may be written to document administrative type meetings.
 - 4. Progress notes will be entered into JTS within 24 hours of the contact or service rendered.
 - 5. Confidential health information will not be entered into the progress notes.

DISCLOSURE OF CASE RECORDS:

- A. Disclosure of Youth's Case Records
 - 1. The case records of youth are privileged and are not public records.
 - 2. Case records will only be disclosed pursuant to; a signed Authorization for Release of Information Form a valid subpoena or court order.
 - 3. The case records of youth will only be disclosed to the youth (if 18 years of age or older) or parent/guardian, with a signed Authorization for Release of Information.
 - 4. The signed Authorization for Release of Information form will be immediately faxed to the Office of Legal Services to determine what records will be disclosed. (The only exception is requests for information from DJJ staff or for treatment and/or placement purposes.)
 - 5. When a subpoena or court order is received for youth's records, the subpoena or court order will immediately be forwarded to the Office of Legal Services. The Office of Legal Services will determine what records will be disclosed according to law.

6. Other requests for disclosures not listed above will be referred to the Office of Legal Services. The Office of Legal Services will determine what records can be disclosed pursuant to law.

B. Disclosure Of Information Without Consent

1. Case records may be disclosed to the Georgia Department of Human Resources pursuant to the Memorandum of Understanding.
2. Confidential information about a youth may be disclosed without written consent to correctional agencies when a proper request has come through the Interstate Compact on Juveniles.
3. When a subpoena or court order is received for youth's records, the subpoena or court order will immediately be forwarded to the Office of Legal Services. The Office of Legal Services will determine what records will be disclosed according to law.
4. Other requests for disclosures not listed above will be referred to the Office of Legal Services. The Office of Legal Services will determine what records can be disclosed pursuant to law.

- C. Confidential information about a youth may be shared within the Department without written consent to employees of the Department who request the information demonstrating their need for the information in the performance of their regular duties.

- D. Health records will be released only in accordance with DJJ 5.6, Use/Disclosure of Health Information.

- E. When a youth convicted of a felony offense in a Superior Court is released from confinement or custody of the Department, the Department will provide written notice, including the delinquent or designated felony act committed, to the superintendent of the school system in which the youth was enrolled or, if the information is known, the school in which the youth was enrolled or plans to be enrolled. The community case manager/facility Director will provide the written notice on the Notice of Release from Confinement/Custody Memo.

- F. Case records will be retained and destroyed in accordance with the established retention schedules. Case records will not be "sealed." Requests to seal a case record will be referred to the juvenile court. Judicial orders for the sealing of a case record will be forwarded to the Office of Legal Services.

On the Job Training (OJT) Handbook

DJJ Policy 15.1 Basic Rights and Responsibilities of Youth (Bullying)

All youth in the custody of the Department of Juvenile Justice shall be afforded rights that are clearly defined, including the right to be free from harassment and unlawful discrimination. All youth in the custody of the Department of Juvenile Justice shall be given responsibilities that are clearly defined, including the responsibility to refrain from harassing and unlawfully discriminating behavior. All youth shall be informed of their rights and responsibilities upon entry into the facility or program. The basic rights of youth enumerated in this policy shall not be diminished or denied for disciplinary reasons.

DEFINITIONS:

Bullying: Badgering, intimidating, coercing, threatening, extorting others, or instigating an altercation between others;

PROCEDURES:

- A. The Basic Treatment Standards (Attachment A) and Basic Responsibilities of Youth (Attachment B) will be posted in areas easily accessible to youth. This information will also be in the facility's student handbook.
- B. Any youth who feels that he/she has been or is being subject to unfair treatment, harassment, unlawful discrimination, or bullying may file a grievance with the facility's Grievance Officer in accordance with DJJ 15.2, Grievance Process. All youth will receive information regarding the grievance process during orientation and in the facility's student handbook, which includes the right to appeal any decision of the Grievance Officer to the facility Director or to file a complaint directly with the Director of Legal Services.
- C. Any youth who has knowledge of another youth being subject to unfair treatment, harassment, unlawful discrimination, or bullying should promptly report the matter to a staff member who will file a Disciplinary Report and/or Special Incident Report.
- D. Staff will not participate in, encourage, or permit the unlawful discrimination, harassment or bullying of any youth by other youth or staff.
 1. All unlawful discrimination, harassment and bullying of youth by other youth will be reported on a Disciplinary Report in accordance with DJJ 16.5, Disciplinary Reports and Hearings. All Disciplinary Reports will be investigated as part of due process, unless the Disciplinary Report is dismissed for any reason. Any guilty findings will result in a disciplinary sanction against the youth.

2. All unlawful discrimination, harassment and bullying of youth by staff will be reported on a Special Incident Report as employee misconduct in accordance with DJJ 8.5, Special Incident and Child Abuse Reporting in Secure Facilities. All employee misconduct related to unlawful discrimination, harassment and bullying of youth by staff will be reviewed by the facility Director and/or investigated.
 3. Staff who participate in or permit the unlawful discrimination, harassment or bullying of youth will be subject to disciplinary action up to and including termination.
- E. Staff will ensure that youth are afforded all of the rights outlined in this policy. Staff will report when youth are not afforded their rights.
1. Staff will file a Disciplinary Report whenever one youth violates the rights of another. (See DJJ 16.5, Disciplinary Reports and Hearings) All Disciplinary Reports will be investigated as part of due process, unless the Disciplinary Report is dismissed for any reason.
 2. Staff will file the Special Incident Report coded employee misconduct whenever another staff violates the rights of a youth. (See DJJ 8.5, Special Incident and Child Abuse Reporting in Secure Facilities) All employee misconduct related to violation of the rights of youth by staff will be reviewed by the facility Director and/or investigated.
 3. Staff who participate in or permit youth or staff to violate the rights of youth will be subject to disciplinary action up to and including termination.
- F. Youth, staff and the general public may report unlawful discrimination, harassment, bullying, or a violation of a youth's rights to the Director of Legal Services in writing to 3408 Covington Highway, Decatur, Georgia 30032.
- G. All youth in secure facilities and residential programs will be treated in accordance with the following standards:
1. To be free of unlawful discrimination because of race, religion, color, sex, age, national origin, or disability, pregnancy, childbirth, or related medical conditions;
 2. To be free of harassment because of race, religion, color, sex, gender, sexual orientation, age, national origin, or disability, pregnancy, childbirth, or related medical conditions;
 3. To be free from bullying;

4. To send and receive mail; (See DJJ 15.6, Access to Mail) To make and receive telephone calls; (See DJJ 15.7, Access to Telephone) To receive visitors; (See DJJ 15.5, Youth Visitation)
5. To have contact with attorneys and other authorized legal representatives; (See DJJ 15.3, Youth Access to Court and Counsel)
6. To have freedom in personal grooming and dress, except when it would conflict with facility requirements for safety, security, identification, or hygiene;
7. To file a grievance; (See DJJ 15.2, Grievance Process)
8. To be treated respectfully, impartially and fairly and to be addressed by name in a dignified, conversational form;
9. To be informed of the rules, procedures and schedules of the facility within 24 hours of admission; (See DJJ 17.2, Youth and Parent Orientation)
10. To be free from corporal punishment, physical abuse, assault, personal injury, or disease; ;
11. To be free from interference with the normal bodily functions of eating, sleeping or bathroom functions by any person;
12. To be free from mental or verbal abuse, intimidation, threats, humiliation, or property damage; To be free from sexual abuse;
13. To practice his/her faith and to participate in religious services and religious counseling on a voluntary basis; (See DJJ 18.4, Religious Programming)
14. To vote (by absentee ballot) if 18 years of age or older; (To register, the youth must contact the Registrar of Voters in the county where he/she resided before confinement.) To review his/her case record while in a facility or community residential placement;
15. To freedom of expression, as long as it does not interfere with the rights of others or the safety and security of the facility/program;
16. To due process in disciplinary proceedings; (See DJJ 16.5, Disciplinary Reports and Hearings)
17. To equal access to programs and services in facilities based on the youth's RYDC or YDC placement or equivalent services among different facilities; and

18. To maintain his/her physical, mental and emotional health by exercising on a daily basis. (See DJJ 18.3, Recreation Programming)

H. All youth in secure facilities and residential programs, will have the following basic responsibilities:

1. To obey all federal and state laws at all times;
2. To respect peers and staff by obeying all legal and reasonable staff requests;
3. To refrain from bullying and harassment through the use of verbal abuse, ethnic slurs, slander, and/or obscene gestures;
4. To follow the rules, procedures, schedules, and directions of staff while in the facility/program. Youth shall treat staff members and other youth with respect and shall not engage in activity that is designed to be disruptive to the living environment;
5. To clean and maintain their living quarters and other general areas of the facility. Youth are expected not to damage public or privately owned property located within the facility;
6. To ask for mental health, medical and dental care when needed;
7. To maintain his/her clothes, body, and hair in a manner consistent with the facility requirements for safety, security, identification, and hygiene;
8. To refrain from infringing upon the rights of other youth and/or staff;
9. To obey all orders of the court, to remain in placement and to participate fully, to the best of their ability, to achieve the goals identified in the Service Plan;
10. To promote the physical safety, sexual integrity, and personal security of others through the use of self-discipline;
11. To refrain from personal and/or intimate relationships with staff or other youth;
12. To refrain from possessing contraband and to discourage others from possessing contraband;
13. To personally refrain from and discourage others from possessing or transmitting any kind of weapon or object which could be used as a weapon;
14. To personally refrain from and discourage others from possessing, using, buying, selling, or otherwise providing or having alcohol, tobacco, narcotics,

or other illegal drugs, or from abusing any other substance as an intoxicant or stimulant; and

15. To practice and encourage honesty in all interactions.

Now that you have reviewed Department of Juvenile Justice policy concerning bullying, let's take a look at what is bullying and the impact it has on the youth that we serve. Bullying is negative behavior that requires an imbalance of control or power. Bullying is a worldwide problem that affects every person, family, school, business, facility and community regardless of age, gender, race, religion or socio-economic status. Bullying is not only a "school" issue; it is a broader community matter. The effects of bullying can last a lifetime. It is often repeated over time. In addition, bullying has economic costs associated with decreased productivity, lost man-hours, workplace aggression, harassment and intimidation. Bullies work toward controlling the other person's thoughts and or actions. In a United States national study with youth in grades six through tenth almost five million students were involved in some form of bullying during the current school year. Bullying is an exceptionally complex issue to deal with as adults but especially difficult for children. Therefore, it is important to know when to step in and help reduce bullying from taking place. Department of Juvenile Justice (DJJ) staff can improve the facility environments and communities we serve with positive intervention techniques.

Recognizing the characteristics of bullies is important to comprehend behaviors and attitudes to intervene in reducing bullying. It is important staffs are aware of the signals that suggest a child may be a bully. Some of the common characteristics include:

- Need power and control
- Lack empathy.
- Antisocial
- Defiant
- Confident
- High self-esteem
- Impulsive

Individuals that bully many times live in homes that lack supervision and where physical punishment is used to discipline. The educational drop-out rates and substance abuse issues increase greatly for individuals that are bullies. In addition, bullies that consistently bully throughout their youth are more likely to be violent and have criminal records as adults. These individuals are normally:

- Involved in physical altercations frequently
- Vandalize property
- Steal Property
- Drinks alcohol
- Smoke
- Absent from school/work

Now that we have identified the characteristics of bullies, we will look at the individuals that are harmed by this behavior. The victims of bullies are normally individuals that are unnoticed in society. These individuals may be at a higher risk of being a victim and can lead to future physical, emotional, psychological and financially issues.

Race, religion, sexuality, social and economic background are all difficult topics to discuss with adults. However, it is even more difficult to discuss with children. Nevertheless, it is a necessary conversation because many individuals are being bullied based on their diverse cultural differences. A person's race may be targeted by bullies because it is something they can easily see and verbally assault based on skin color, hair textures other distinguishing features.

In addition, religious minorities comprise a large number of individuals bullied. Bullying leads these victims to question their faith and feel ashamed of their religion. Individuals that are economic disadvantaged many times find themselves bullied because they do not have the newest clothes or live in certain section of town. These factors are many times impossible or difficult to change therefore leaving victims feeling helpless. The newest group of individuals being bullied is sexual minorities. Youth that identify as gay lesbian, bisexual and transgendered have a higher probability of being bullied. Some additional characteristics of victims include:

- Anxious
- Insecure
- Cautious
- Low self-esteem
- Seldom defending themselves
- Retaliate when confronted by bully

Everyone has to take part to stop bullying. As staff it is important to identify the characteristics of bullies and victims to provide the most effective way to intervene and reduce bullying. However, to effectively define bullying you must know the different ways bullies bully their victims and cause harm. There are many forms of bullying we will take a look at five of the most common that directly affect schools, detention centers and communities served by DJJ.

1. Physical Bullying

Physical bullying can be distinguished visually. This type of abuse involves physical contact with the individual. Examples include:

- Kicking
- Hitting
- Biting
- Tripping
- Pulling Hair
- Stealing property

2. Verbal Bullying

Verbal bullying involves speaking to a person or about a person in an unkind or hurtful way. The saying that “sticks and stones may break my bone but words never will” is not true when it comes to verbal bullying. Many victims are verbally harmed from words that individuals use Examples include:

- Sarcasm
- Teasing
- Put-downs
- Name-calling
- Phone-calls
- Spreading Rumors.

3. Emotional Bullying

Emotional bullying involves behaviors that upset or exclude a person. This form of bullying happens repeatedly. Many individuals that are emotional bullied continue to maintain powerful memories of the bullying incidents throughout their lives.

- Social Alienation
- Threatening Gestures
- Dirty Looks
- Intimidation
- Embarrassment
- Humiliation
- Graffiti

4. Sexual Bullying

Sexual bullying singles out a person because of gender and demonstrates unwarranted or unwelcome sexual behavior.

- Sexual gestures
- Unwanted physical contact
- Abusive sexual comments
- Sexting

Is a new form of sexually bullying consisting of sharing nude or partially nude photos via text messaging. This form has become such a problem in the schools that students are now being charged with child pornography.

- Jokes
- Pictures
- Forced Sexual Behaviors
- Elevator eyes

5. Cyber Bullying

Cyber Bullying involves the use of technology to intentional bully. Cyber bullying is the newest form of bullying and it is causing significant problems. This form of bullying can reach a large group of individuals extremely fast. Many times bullies that use Cyber-Bullies are attempting to damage the victim's reputation.

- Offense text messaging
- Emails
- Social Networks
- Creating websites
- Blogs
- Instant messages
- Chat Room

Facts

- A. Bullying is associated with a range of physical, mental, educational and relationship problems.
- B. The majority of people will engage in some form of bullying and experience some form of victimization.
- C. Bullying is a broader social problem that often happens outside of schools, on the street, at shopping centers, the local pool, and summer camp.
- D. Encouraging people who are victimized to fight back, in fact, may make the bullying interaction worse.
- E. Unfortunately, bullying does occur within families.

F. Bullying is a learned behavior and behaviors can be changed.

DJJ staff, education personnel and communities members work with all different genders. However males and females bully differently. As stakeholders, it is imperative that we understand the differently strategies males and females use to bully their victims.

A. Male bullies are often physical bigger and stronger than the victims. Males target both genders and they do not discriminate. Males engage in direct bullying methods such as:

1. Hitting
2. Kicking
3. Spitting
4. Verbal Bullying
5. Name-calling
6. Teasing
7. Threaten Violence

B. Female bullies normally go unnoticed and bully other females. Female bullies work in groups with others to bully one individual. Many of times, these bullies have had a past relationship with the victim. Females work to plan and implement the next encounter with the victim. Females normally use emotional bullying. They attempt to harm others reputation. Females utilize indirect bullying strategies such as:

1. Spreading rumors
2. Socially isolating
3. Publicly humiliating
4. Gossiping

Many times these tactics used by females are observed as spiteful but normal individual social contacts.

C. Bullying impacts victims in several major ways many people may not understand the impact if they have not personally been a victim of bullying. However, victims experience Emotional Physically, Psychologically, Financially impacts we will discuss each of these impacts separately. Let's take look at how victims are impacted.

1. **Emotional**
 - Hopelessness
 - Depressed
 - Suicidal Feeling

- Shame
- Powerlessness
- Confused

2 **Physical**

- Headaches
- Stomachaches
- Fatigue
- Loss of appetites
- Absent from work or school
- Bruises
- Scars
- Self-Mutilation

3. **Psychological**

- Depressed
- Social Isolation
- Inability to Sleep
- Paranoia of others
- Intimidation by others

4. **Financial**

- Inability to work
- Medical Cost
- Legal fees

Successful bullying intervention techniques require three elements including education, preparation, research and teamwork. When adults do not intervene, bullies think there is not harm done to the victims. While victims feel they deserve the bullying since no adults intervene. Let's take a look at some of the intervention techniques we as DJJ staff can take to reduce the effects of bullying:

A. Collaboration between all stakeholders.

To effectively reduce and end bullying it is important for all DJJ staff, educational personnel and communities to buy in to the intervention techniques. It is extremely necessary for everyone to work together to intervene when bullying is encountered.

B. Confidential reporting system.

Facilities, schools, and community intake offices should have a confidential reporting system that protects the identity of those individuals that report bullying. It is important for individuals to feel safe when providing information about bullying.

C. Establish policies related to bullying behavior.

It is important that staff hold all individuals accountable to the policies. In addition, the policies should be clearly posted for all individuals to see.

D. Creating an environment, that discourages bullying.

Bullying creates a climate of fear and disrespect for everyone involved therefore it is important for adults to create an environment where students feel they can speak out against bullying without being the bullies next target.

E. Take immediate action when bullying behavior is observed.

All staff should be able to intervene effectively on the spot when bullying is observed.

F. Make a referral

If you notice bullying behaviors, make a referral to the appropriate personnel; such as caseworkers or counselors to ensure victims and bullies have been dealt with appropriately.

G. Follow up with a person who has been bullied.

Due to the impact of bullying on victims, it is important for adults to follow up with individuals to ensure they are healing. The victim needs to know that you are a resource for them and available to assist with the healing process. In addition, notify all need to know staff such as other caseworker, teachers, and counselors of the situation to ensure incident does not happen again.

H. Avoid additional harm by lending too much support in public.

Many individuals are concerned about what other people knows. Staff should provide their encouraging words and gestures in private.

I. Do not force a meeting between the victim and the bully.

Forcing a meeting can cause victims further harm; if staff does not intervene, bullies and victims will carry on the behavior and believe in the power of bullying, rather than intervention.

Bullying is a learned, destructive but controllable behavior. Therefore, it is important to have a clear understanding of intervention techniques to reduce bullying in the schools, detention centers and communities.

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Prison Rape Elimination Act (PREA)

This legislation is known as the 2003 Prison Rape Elimination Act (PREA) Public Law 108-79.

Despite the lowest youth crime rates in 20 years, hundreds of young people are locked away every year in the nation's 591 secure detention centers. The impact of this can be devastating. "Within all facilities, both adult and juvenile, the rates of substantiated incidents of sexual violence were highest in juvenile facilities. One youth in 200 or at a rate of 5.15 per 1,000 youth either participated in or was a victim of a substantiate incident of sexual violence while in custody in a state-operated juvenile facility in 2004.

Some offenders contract HIV as a result of prison rape, for them, the consequences of the assault may be deadly. Other offenders are killed or seriously injured during the violent physical attacks that sometimes accompany rape and/or sexual assault. But all offenders who are raped or sexually assaulted suffer psychological and emotional harm. Although invisible, the psychological and emotional effects of prison rape are serious and enduring.

Victims of prison rape and sexual assault commonly report nightmares, deep depression, shame, loss of self-esteem, self-hatred, and considering or attempting suicide. Some of them also describe a marked increase in anger and a tendency toward violence. One rape or sexual assault is too many.

As employees of the Department of Juvenile Justice, we are charged with providing a safe environment for both youth and staff. This issue of sexual assault is both a real issue and a human issue. The goal of the Department of Juvenile Justice is to do no harm and to ensure they return to their communities as productive and law abiding citizens. PREA raises the standard and shines a spotlight on the issue in terms of its importance regarding youth on youth or staff on youth sexual assault.

The Prison Rape Elimination Act applies to all federal, state and private prisons, jails, police lock-ups, tribal correctional facilities, immigration correctional facilities and community correctional settings such as residential, parole and probation. PREA includes adult and juvenile facilities.

Let's review several major components of the 2003 Prison Rape Elimination Act (PREA) Public Law 108-79.

- A. Section 3 of PREA establishes a zero-tolerance standard for the incidence of inmate sexual assault and rape;**

1. Makes the prevention of inmate sexual assault and rape a top priority in each corrections facility;
2. Develops/implements national standards for the detection, prevention, and punishment of prison rape;
3. Improves availability of data collection of the incidence of inmate sexual assault and rape;
4. Standardizes the definitions used for data collection;
5. Increases accountability of corrections officials who fail to detect, prevent, reduce and punish prison rape; and protects the Eighth Amendment rights of federal, state, and local inmates.

B. Section 4 of PREA directs the Bureau of Justice Statistics to carry out, annually, a comprehensive statistical review and analysis of the incidence and effects of prison rape and requires:

1. The review and analysis to be based on a sample of not less than ten percent of all Federal, State, and county prisons, and a representative sample of municipal prisons, that includes at least one prison from each State;
2. Federal, State, or local officials or facility administrators that receive a request from the Bureau to participate in the national survey and provide access to any inmates under their legal custody.

C. Section 5 of PREA establishes within the National Institute of Corrections (NIC) a national clearinghouse for the provision of information, assistance, and training to Federal, State, and local authorities for the prevention, investigation, and punishment of prison rape.

D. Section 6 of PREA directs the Attorney General to make grants to assist States in ensuring that budgetary circumstances do not compromise efforts to protect inmates and to safeguard the communities to which inmates return. Authorizes appropriations for FY 2004 through 2010, with a limitation.

E. Section 7 of PREA establishes the National Prison Rape Elimination Commission to:

1. Study the impact of prison rape on Federal, State, and local governments and on communities and social institutions; and
2. Report recommended national standards for enhancing the detection, prevention, reduction, and punishment of prison rape.

F. Section 8 of PREA law directs the Attorney General, within one year after receiving such report, to publish a final rule adopting national standards. Provides for a five percent reduction of any amount of grant funds for prison that a State would otherwise receive for a fiscal year, unless the chief executive of the State submits to the Attorney General:

1. A certification that the State has adopted, and is in full compliance with, the national standards; or
2. An assurance that not less than five percent of such amount shall be used only to enable the State to adopt and achieve full compliance with such standards, so as to ensure that such certification may be submitted in future years. Requires the Attorney General to publish an annual report listing each grantee that is not in compliance with the standards.

G. Section 9 of PREA prohibits the receipts of Federal grants by penal facility accreditation organizations that fail to adopt accreditation standards for the detection, prevention, reduction, and punishment of prison rape.

H. Section 10 of PREA Defines sexual assault and rape to include:

1. The carnal knowledge, oral sodomy, sexual assault with an object, or sexual fondling of a person not forcible or against the person's will, where the victim is incapable of giving consent because of his or her youth or his or her temporary or permanent mental or physical incapacity; or the carnal knowledge, oral sodomy, exploitation of the fear or threat of physical violence or bodily injury.
2. Additionally, PREA applies across the board to both public and private facilities as well as to all adult and juvenile facilities.

Key Points of the Prison Rape Elimination Act

- ▶ PREA covers both inmate-on-inmate and staff-on-inmate sexual abuse.
- ▶ Be aware the PREA addresses any sexual acts among staff or inmates.
- ▶ One of the primary purposes of the law is to collect data on incidences of sexual abuse. Under the law, prison rape is defined broadly it's not only about rape nor is it limited to prisons.
- ▶ While PREA shines the light on the issues of sexual abuse, corrections has always had obligation under the US Constitution to prevent the sexual abuse of persons in custody. The 4th, 5th, 8th, and 14th amendments each have implications for our profession.

- ▶ Sexual abuse is considered cruel and unusual punishment which falls under the 8th amendment.
- ▶ **PREA has a variety of implications for those who work in corrections, including:**
 - ✓ A zero tolerance policy
 - ✓ Mandatory reporting of all incidents of sexual abuse
 - ✓ Meeting federal standards for preventing, detecting, investigating, and prosecuting sexual abuse in custody, and
 - ✓ Increase accountability for correctional agencies and staff who fail to prevent, detect, respond to, and help eliminate sexual assault.

Prison Rape Elimination Act Terminology:

- ✓ Carnal Knowledge” means contact between the penis and the vulva or the penis and the anus, including penetration of any sort, however slight.
- ✓ “Sexual Abuse “is used to describe a broad range of sexual activity including non-physical sexual behavior, such as harassment. It also conveys sexual activities with varying degrees of coercion and aggression.
- ✓ “Sexual Assault” is used to emphasize violent sexual behavior (rape).
- ✓ Gender Nonconforming means a person whose appearance or manner does not conform to traditional societal gender expectations.
- ✓ Intersex means a person who’s sexual or reproductive anatomy or chromosomal pattern does not seem to fit typical definitions of male or female. Intersex medical conditions are sometimes referred to as disorders of sex development.
- ✓ Transgender means a person whose gender identity (i.e., internal sense of feeling male or female) is different from the person’s assigned sex at birth.

Georgia Law - O.C.G.A. 19-7-5 Title 19 Domestic Relations; Chapter 7 Parent and Child Relationship Generally:

- ✓ The purpose of this code section is to provide for the protection of children whose health and welfare are adversely affected and further threatened by the conduct of those responsible for their care and protection

- ✓ It is intended that the mandatory reporting of such cases will cause the protective services of the state to be brought to bear on the situation in an effort to prevent further abuses, to protect and enhance the welfare of these children.

Georgia Legal Definition of Child Molestation

- Child Molestation: When he or she does any immoral or indecent act to or in the presence of or with any child under the age of 16 years with the intent to arouse or satisfy the sexual desires of either the child or the person.
- Aggravated Child Molestation: A person commits the offense of aggravated child molestation when such person commits an offense of child molestation which act physically injures the child or involves an act of sodomy.

Juveniles and House Bill 1059: Sex Offenses

- Legislators reluctantly recognized that some teenagers engage in pre-marital sexual activity.
- Wanted to make clear that HB 1059 DOES NOT condone/encourage teenage or pre-marital sex.
- HB 1059 expands existing “Romeo and Juliet” clauses to ensure that teenagers who engage in “Mutually agreed upon” sexual activity do not become felons.

Juveniles and HB 1059: Romeo and Juliet Clause

- The Romeo and Juliet clause applies to five crimes:
 - ✓ Sodomy
 - ✓ Statutory Rape
 - ✓ Child Molestation
 - ✓ Aggravated Child Molestation, and
 - ✓ Enticing a Child for Indecent Purposes

Romeo and Juliet Clause Explained

- For the crimes of sodomy, and aggravated child molestation (where the only aggravating factor is sodomy).
 - ✓ If the victim is at least 13, but under 16, the defendant is under 18 and there is no more than a 4 year age difference.

- ✓ The punishment will be for a misdemeanor.
- For the crimes of statutory rape, child molestation, and enticing a child for indecent purposes
 - ✓ If the victim is at least 14, but under 16, the defendant is under 18 and there is no more than a 4 year age difference.
 - ✓ Then the punishment will be for a misdemeanor.

Georgia Law - O.C.G.A. 16-6-5.1 Title 16 Crimes and Offenses; Chapter 6 Sexual Offenses:

A person who has supervisory or disciplinary authority over another individual commits sexual assault when that person:

- Is an employee or agent of any probation or parole office and engages in sexual contact with such other individual who the actor knew or should have known is a probationer or parolee under the supervision of the same probation or parole office;
- Is an employee or agent of a correctional facility, juvenile detention facility, facility providing services to a person with a disability, as such term is defined in code Section 37-1-1, or a facility providing child welfare and youth services, who engages in sexual contact with such other individual who the actor knew or should have known is in the custody of such facility.

Georgia Law - O.C.G.A. 16-6-5 Title 16 Crimes and Offenses; Chapter 6 Sexual Offenses (Enticing a child for indecent purposes)

- ✓ A person commits the offense of enticing a child for indecent purposes when he or she solicits, entices, or take any child under the age of 16years to any place whatsoever for the purpose of child molestation or indecent acts.
- ✓ A person convicted of the offense of enticing a child for indecent purposes shall be punished by imprisonment for not less than ten nor more than 30 years.
- ✓ If the victim is at least 14 but less than 16 years of age and the person convicted of enticing a child for indecent purposes is 18 years of age or younger and is no more than four years older than the victim, such person shall be guilty of a misdemeanor.

Georgia Law - O.C.G. A 16-6-3 Title 16 Crimes and Offenses; Chapter 6 Sexual Offenses (Statutory Rape)

- ✓ A person commits the offense of statutory rape when he or she engages in sexual intercourse with any person under the age of 16 years and not his or her spouse, provided that no conviction shall be had for this offense on the unsupported testimony of the victim.
- ✓ A person convicted of the offense of statutory rape shall be punished by imprisonment for not less than one nor more than 20 years; provided that if the person so convicted is 21 years of age or older, such person shall be punished by imprisonment for not less than ten nor more than 20 years.

Georgia Law - O.C.G.A. 16-6-1 Title 16 Crimes and Offenses; Chapter 6 Sexual Offenses (Rape)

- A person commits the offense of rape when he has carnal knowledge of:
 - A female forcibly and against her will or a female who is less than ten years of age.
- Carnal Knowledge in rape occurs when there is any penetration of the female sex organ by the male sex organ.
- A person convicted of the offense of rape shall be punished by death, by imprisonment for life without parole, by imprisonment for life, or by a split sentence that is a term of imprisonment for not less than 25 years and not exceeding life imprisonment, followed by probation for life.

Georgia Law - O.C.G.A. 16-6-22.2 Title 16 Crimes and Offenses; Chapter 6 Sexual Offenses (Aggravated Sexual Battery)

- Term “foreign object” means any article or instrument other than the sexual organ of a person.
- A person commits aggravated sexual battery when he or she intentionally penetrates with a foreign object the sexual organ or anus of another person without the consent of that person.
- A person convicted of the aggravated sexual battery shall be punished by imprisonment for life or by a split sentence that is a term of imprisonment for not less than 25 years and not exceeding life imprisonment, followed by probation for life.

Georgia Law - O.C.G.A 16-6-22.1 Title 16 Crimes and Offenses; Chapter 6 Sexual Offenses (Sexual Battery)

- Term “intimate parts” means the primary genital area, anus, groin, inner thighs, or buttocks of a male or female and the breasts of a female.
- A person commits the offense of sexual battery when he or she intentionally makes physical contact with the intimate parts of the body of another person without the consent of that person.
- A person convicted of the offense of sexual battery against any child under the age 16 years shall be guilty of a felony and, upon conviction, shall be punished by imprisonment for not less than one nor more than five years.

PREA National Standards

- The final version of the PREA National Standards was release on May 17, 2012. The agency has one year to comply with all standards.
- During the three-year period starting in July 2013, and during each three-year period thereafter, the agency shall ensure that each facility operated by or in contract with DJJ is audited at least once.
- During each one-year period starting on July 2013, the agency ensures that at least one-third of all facilities operated by or in contract with the agency are audited.
- The audit summary shall indicate, among other things, the number of provisions the facility has achieved at each grade level.
- Audit reports shall describe the methodology, sampling sizes, and basis for the auditor’s conclusions with regard to each standard provision for each audited facility, and shall include recommendations for any required corrective action.
- The agency shall ensure that the auditor’s final report is published on the agency’s website if it has one, or is otherwise made readily available to the public.
- PREA consists of 11 categories and 42 national standards.

First Responder Duties:

1. These guidelines have been developed by correctional experts and are recommended practices. They are not meant to replace Georgia’s laws; rather, they were created to reflect the law and to speak to the realities of the correctional environment.

2. Due to the nature of sexual abuse, you may be responding to a victim who has experienced extreme physical and psychological trauma. It is absolutely crucial that you treat the victim with respect.

The following Ten (10) guidelines are to be applied when initially responding to a sexual assault incident.

1. Ensure Safety:

- The first thing you'll need to do when responding to a sexual assault in progress is to ensure that you can safely take action. The potential of additional violence occurring as a result of the sexual assault is possible, especially in male facilities.
- So, it's important to ensure the safety of other staff and residents. This means that you and other available staff will need to separate the residents' victim and perpetrator as quickly as possible.
- In addition, if it is immediately apparent that someone else has taken part in or witnessed the assault, you may need to separate that individual as well.
- Since every situation will be different, you'll need to use good judgment when figuring out exactly how best to ensure everyone's safety.
- You need to ask the victim the following:

Are you injured?

Do you need medical attention?

Do you believe that you or someone else is in immediate danger?

- Emergency medical and mental health attention for the victim must be the first priority of the staff.

2. Stabilize the Situation:

- Staff will always stabilize the situation for the safety of everyone in the facility.
- Staff will control the situation; make sure that no one is tampering with the scene or with any evidence. Take control of resident movement, immediately notify a supervisor, secure or lock up the crime scene, do not allow any fluids to be cleaned up, and adhere to PREA policy.

- Staff will keep the victim in your custody, especially if it's a recent incident. And remember to keep the victim, alleged perpetrator, and any witnesses separate to prevent them from collaborating on the details of the incident or pressuring the victim to change his or her story.

3. Secure the Scene:

- Both the victim's and the perpetrator's bodies should be treated as crime scenes. Their clothing, bedding, and other personal objects may be considered part of the crime scene and should be secured for the investigator.
- If you're responding to an assault that was recent, you'll need to do your best to ensure that the victim and perpetrator involved don't compromise the evidenced by:
 - Showering,
 - Using the toilet.
 - Douching,
 - Eating or Drinking,
 - Do not let them change or launder their clothing or bedding.
- Medical experts dealing with sexual assault consider "recent" to mean up to 72 hours from the time of the assault. This is relevant to the collection of medical evidence.
- Collecting clothing and other physical evidence from a suspected staff typically won't be your responsibility, you should still safeguard any items found at the scene or given to you by the victim.
- If the first staff responder is a non-direct care staff member, he or she is required to instruct the victim not to take any actions that could destroy physical evidence and then notify direct care staff.

4. Observe Closely:

- The responding staff is not the investigator, but your initial observations of the crime scene can be very helpful. The following are some questions you should contemplate:
 - Are there multiple crime scenes?
 - Is anything out of place in those areas?
 - Are there any objects of note such as clothing or bedding?
 - Are their suspicious items on the floor?
 - Are there puddles or stains?

- Is there a handprint?
 - What time is it?
 - Are the lights on or off in the area?
 - Are there any obviously missing objects?
- In addition to the area where the incident took place, it's useful to observe the pathways leading to and from that space.
 - Essentially, the staff job is to observe, record, and secure the scene so that the investigator can collect available evidence. In fact, exceeding this task may compromise the investigation and make you liable to criminal or civil charges.
 - A Staff will also need to take note of the victim's appearance and demeanor. Because people respond differently to trauma, it's important to withhold judgment about what happened. Instead, you should observe the facts in anticipation of communicating them to the investigator.
 - Take note of the behavior of those involved. Can you accurately paraphrase what was told to you? Can you describe the physical appearance of those involved?
 - It is essential that you check with your supervisor and consult the policy to be clear about what's expected of you as an initial responder.

5. Obtain Only the Basic Information:

- Your contact with the victim should be limited to obtaining only the most basic information. You will need to know only what happened:
 - Who was involved?
 - Where the incident occurred,
 - When the incident took place, and
 - Location of the assault.

You are not the investigator. You are only trying to gain the primary facts. The investigator should be the first person to hear the victim's entire story. It can actually damage a case if the victim or others tell their stories multiple times to various people.

6. Instruct the Victim:

- After obtaining that information, instruct the victim about the next steps. The first thing you can tell the victim is that you'll need to report the assault but only on a need-to-know basis.

- Inform the victim that, when you do report it, the investigator will come to interview those involved. You can be reassuring by remaining calm and professional as you explain to the victim that you will do everything in your power to make sure the situation will be handled appropriately, and that he or she will be kept safe.

7. Communicate the Incident:

- Staff needs to communicate the incident according to policy 8.5, Special Incident Reporting, which requires you to immediately verbally report to your supervisor followed by a written SIR report.
- The SIR is kept safe and confidential. Always maintain confidentiality, and speak of the incident to the appropriate authorities on a need-to-know basis.
- If you feel reporting to your supervisor will compromise the integrity of the report, report the incident to the next level supervisor or through the Intel TIP on the DJJ website.

8. Document:

- The importance of documentation can't be overstated. In order to protect yourself, fully document known details of the incident as soon as possible after securing the scene. Information that is added at a later time may not have the same level of credibility during legal proceedings.
- Like other incident reports, remember that your opinion, assumptions, or guesses are not to be included. Document only what you can see and only what you are told.
- Your report should reflect the language that the victim used. **Document the victim's exact words with quotes.**
- From the time you respond to the incident, document all that you've observed including the names and exactly what was said during interactions related to the incident.
- You should also document who else was at the scene even if you did not speak with them. If the victim is seen by medical, mental health, or other staff, document their names, job titles, and contact information for your report.

9. Professional Boundaries:

Staff needs to respect the professional boundaries in order to respond effectively to an incident of sexual assault. You should never do anything that could compromise the treatment of the victim. This includes overprotecting the victim, or confusing respect and compassion with inappropriate emotional involvement.

10. Confidentially:

- Adhering to confidentiality is of the utmost importance. Any additional talk, gossip, joking, or inappropriate remarks could put you or others at serious risk during the investigation and/or trial.
- Be sure to check policy or ask your supervisor if you are not sure about the details regarding state laws, county, or facility. As a general rule, be prepared to answer for any additional interactions in which you have discussed details of the case.

Developing and Maintaining a Reporting Culture within DJJ

We want the facility culture to change to a **“reporting culture”**. A reporting culture maintains that the resident has a right to be free from sexual abuse and sexual harassment. It also maintains that residents and employees have a right to be free from retaliation for reporting sexual abuse and sexual harassment.

The facility goal is to prevent sexual abuse from happening. A reporting culture is best promoted when a resident or staff feels confident that a report will be taken seriously and investigated objectively and thoroughly.

The Code of Silence promotes the following negative behaviors:

- ▶ Protection of self and co-workers
- ▶ Non-cooperation with management and investigators
- ▶ Staff will risk discipline and even termination rather than violate this powerful norm
- ▶ Culture imposes penalties on staff who break the code of silence

After responding to a sexual assault, it is common to ask, “Was there something I could have done differently?” or “Is there anything I can do to prevent an assault in the future?”

- ▶ One thing we can do is to increase awareness of our facility’s culture, which includes residents, staff, volunteers, contractors, and visitors.

- ▶ When we observe our environment carefully, we take notice of certain red flags.
- ▶ These warning indicators may signify that a sexual incident has taken place or may take place soon.

Resident-on-Resident Perpetrator Red Flags:

- ▶ Older residents giving lots of attention to younger or weaker residents
- ▶ Bragging about “getting someone”
- ▶ Extra goods, but no points of card
- ▶ Perceived as intimidating by others
- ▶ History of past violence

Staff may suspect something illegal is taking place because of red flags you recognize in the environment. These include:

- Fears or tensions among residents,
- ▶ Rumors that surface,
- ▶ Anonymous “kites” or letters,
- ▶ A constant avoidance of a certain job or area,
- ▶ Excessive point purchases,
- Changes of grouping with the living unit

The Georgia Department of Juvenile Justice does not allow any form of consensual sexual activities between youth and staff, contractors, volunteers, and interns. This includes youth-on-youth abuse.

- ▶ All sexual behavior is prohibited while the youth are under the jurisdiction/custody of the Department of Juvenile Justice (DJJ).
- If residents engage in consensual sex, staff will use the facility DR process.

Red Flags that an employee may be having an inappropriate relationship with a resident

- ▶ Resident knows personal information about staff
- ▶ Isolation from other residents
- ▶ Resident has letters or photos of staff
- Staff granting special request or showing favoritism
- ▶ Resident grapevine, resident snitches, resident/staff rumors
- ▶ Staff in the facility during off hours
- Staff overly concerned about a resident
- ▶ Staff having sole involvement with a particular resident
- ▶ Indispensable residents: Only one who can do this job
- ▶ Staff intercepting resident disciplinary infractions or editing infractions
- ▶ Resident improving his/her appearance, dress, make-up, hair
- ▶ Staff cannot account for time
- ▶ Staff's family involved with a resident's family
- ▶ Increase in contraband in an area
- ▶ Staff working in a secluded area with youth
- ▶ Staff taking youth out of cell at unusual times

Red flags will assist you in preventing sexual assaults and promoting a reporting culture. While recognizing red flags is helpful to your awareness, be careful not to over-interpret what might be an innocent situation.

None of us want to become "sex cops" or to create a "gotcha" culture. But as professionals, we do want an environment with zero tolerance for sexual abuse and staff sexual misconduct, and we do want a reporting culture.

What the facility can do to promote a “Reporting Culture”

Recognizing red flags and having a positive reporting culture are key, in preventing sexual abuse. There are prevention strategies for which facility management is responsible:

- ▶ Enforcing policies,
- ▶ The agency establishing an objective investigation process, and
- ▶ Ensuring that staff completes all training courses.

Residents have a right to be free from sexual abuse:

- ▶ Staff and youth must maintain appropriate sexual boundaries.
- ▶ Any sexual contact between staff and youth is against DJJ policy and is a felony under Georgia law. DJJ has a zero tolerance policy regarding sexual abuse and misconduct.
- ▶ Staff and youth are required to report incidents of sexual abuse and any retaliation for reporting sexual abuse.

Facility Reporting:

All Facilities are required to use DJJ Policy 8.5, Special Incident and Child Abuse Reporting in Secure Facilities as the official written reporting of any type of sexual abuse and harassment.

How Youth Can Report Sexual Abuse in a Facility:

The Facilities will provide multiple easy, private, and secure internal ways for youth to report sexual abuse, retaliation by other youth or staff for reporting sexual abuse, and staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse.

Residents may report sexual abuse or seek relief against retaliation by:

- Completing a Help Request Form
- Using the grievance process
- Dropping a note in the Director’s Box
- Telling a counselor, Youth Probation or Parole Officer, Medical or Mental

Health Staff, Director or Assistant Director, Parent or Guardian, Chaplain or Minister, or any adult that they trust;

Staff and Agency Reporting Duties:

DJJ Policy 11.16, Health and Medical Services require the following:

- The alleged sexual assault will be reported to the local Department of Family and Children's Services in accordance with DJJ 8.5, Special Incident and Child Abuse Reporting in Secure Facilities.

DJJ Policy 8.5, Special Incident and Child Abuse Reporting in Secure Facilities require the following:

- ▶ Verbal Reporting: The staff members filing the Special Incident Report (SIR) (Attachment A) will immediately provide a verbal report of the incident to his/her immediate supervisor. The supervisor's name and the time of notification will be recorded on the SIR.
- ▶ The immediate supervisor will immediately provide a verbal report to the Director or designee.
- ▶ The Director will then provide immediate telephone notification through the chain of command to the Deputy Commissioner.
- ▶ Facility Director will report all allegations of child abuse, sexual abuse/exploitation and neglect of youth under the age of 18 that occurred off of DJJ property to the local Department of Facility and Children's Services.
- ▶ Allegations of child abuse, sexual abuse/exploitation, neglect, youth on youth sexual act, or youth on youth abusive sexual contact of youth over the age of 18 will be reported to the Office of Investigations.
- ▶ The Office of Investigations will investigate or cause to be investigated Special Incident Reports with allegations of abuse, sexual abuse/exploitation, neglect, or youth on youth sexual act in private facilities/programs or jails in which DJJ youth are held under contractual or other agreements.
- ▶ Contracts with private facilities will include a provision that requires the reporting of all incidents/Suspicious of abuse, sexual abuse/exploitation, neglect, and youth on youth sexual acts to the local Department of Family and Children's Services, Office of Investigations, and respective Deputy Commissioner.
- ▶ Contracts with private facilities will include a provision for investigations by the Office of Investigations in the event of allegations of abuse, sexual abuse/exploitation, neglect, or youth on youth sexual act.

- ▶ Directors and their supervisors will take immediate steps to ensure that youth alleging abuse, sexual abuse/exploitation, neglect, or youth on youth sexual act not victims of any form of retaliation.
- ▶ Subject to mandatory reporting laws, any information related to sexual victimization or abusiveness that occurred in a facility shall be strictly limited to medical and mental health practitioners and other staff, as required by agency policies, Federal, State, or local law; to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments.
- ▶ If a youth discloses prior sexual victimization or abusiveness during a medical or mental health intake screening, the staff reports the abuse according to DJJ Policy 8.5, Special Incident Reporting.

Agency Protection against Retaliation:

- ▶ *DJJ Policy 8.5, Special Incident and Child Abuse reporting requires the following:*
 - Directors and their supervisors will take immediate steps to ensure that youth alleging abuse, sexual abuse/exploitation, neglect, or youth on youth sexual act are not victims of any form of retaliation.
- ▶ *DJJ Policy 12.22, Special Management Planning requires the following:*
 - Youth at risk of sexual victimization receives a Special Management Plan in accordance with DJJ Policy 12.22, Special Management Planning. Special Management Plans are used when there is credible evidence that the youth is at risk of attack, retaliation or other danger in the general population.
- ▶ *DJJ Policy 11.16, Sexual Assault requires the following:*
 - Upon youth return from the emergency room, a new Custody and Housing Assessment will be completed in accordance with DJJ Policy 17.3, Custody and Housing Assessment.
 - Removal of alleged staff or youth abusers from contact with victims, and emotional support services for youth or staff that fear retaliation for reporting sexual abuse or cooperation with investigations. The facility will use the “No Contact Status” as required in policy 8.5, Special Incident Reporting and Special Management Plan as part of its protection measures.

- The facility protects all youth and staff who report sexual abuse or cooperate with sexual abuse investigations from retaliation by other youth or staff. The facility will employ multiple protection measures, including housing changes, Special Management Plans or transfers for youth victims or abusers.

Barriers to Reporting:

▶ Reasons why residents do not report sexual abuse:

- Residents reporting sexual abuse may consider being a snitch within the lock-up culture.
- Residents fear retaliation and may believe the system cannot keep them safe.
- The compliance will not be investigated.
- The lock-up code of silence prevents sexual abuse from being reported.

This means that facilities need to create safe reporting environments for both staff and residents.

▶ *Reasons why staff do not report sexual abuse:*

- Staff feel the need to stick together and support one another
- Staff reporting sexual abuse may consider being a snitch by other staff members
- Staff has a bond that submits to a code of silence and the code of silence may trump common sense, cross legal boundaries, and creates a barrier to reporting.
- Good staff sometimes elects to do nothing about a report of misconduct or assault in their facility because they have concerns for the safety of those involved.
- They may be concerned that nothing will be done.

Strategies for Changing Towards a Reporting Culture:

- ▶ Educate staff
 - For managers: there is liability
 - For supervisors and line staff: it's a security/public safety issue
 - It is part of professionalism
- ▶ Make it clear that you take it seriously
 - Zero tolerance must mean zero tolerance
 - Consequence: Something has to happen to someone
- ▶ Model the behavior
 - The culture will not tolerate hypocrisy
- ▶ Provide a safe environment for the discussion of concerns and questions without fear of embarrassment or retaliation
- ▶ Ensure that practices match policy and procedure; and
- ▶ Model ethical behavior and insist that all managers and supervisors do the same.
- ▶ Train and support first line supervisors in their efforts to supervise employees, and recognize red flags.
- ▶ Ensure that there are open dialogues specific to the issue, using regular employee meetings, regular discussions and sharing of information and concerns, and any other format that will keep employees talking about the issue.

Effectively communicating with a victim of sexual abuse or misconduct in the facility:

Remember the importance of treating a victim with respect; we are going to talk about how you can create trust with a victim of sexual abuse. When you communicate effectively with the victim of an abuse, you will set the tone for a safe, professional, honest, and legal investigation. When residents trust the process, the entire facility will be much safer for everyone.

In order to effectively communicate, it is important that we first review several definitions.

Gender Identity refers to a person's internally felt sense of his or her own gender (sex), without regard to physical traits present at birth. Gender identity can match, or not match, a person's physical characteristics.

Lesbian is someone with a female gender identity and female anatomy that is sexually attracted to other women.

Gay is someone with a male gender identity and male anatomy that is sexually attracted to other men.

Bisexual is either someone with a female gender identity and female anatomy who is sexually attracted to both men and women, or someone with a male gender identity and male anatomy that is sexually attracted to both men and women.

Transgender describes a person whose internal gender identity it is at odds with his or her anatomy. They feel as if they were "born in the wrong body." Transgender persons may seek hormone treatments or sex reassignment surgery to match their internal gender identity.

Transgender people may either be a "trans-man" (a person changing from female to male physical characteristics) or a "trans-woman" (a person changing from male to female physical characteristics).

Transgender people may have a sexual orientation that is straight, bisexual, gay, or lesbian relative to their internal gender identity.

Intersex – describes a person with both sexual genitals. Intersex people develop before birth with a genetic disorder of sex representation. No intersex person has a complete set of both male and female organs. Intersex persons may have either a male or a female gender identity, and their sexual orientation may be straight, bisexual, gay, or lesbian relative to their gender identity.

Setting the Tone for Effective Communication Requires:

1. Establishing Rapport

To ensure accurate reporting, the victim has to feel comfortable with the staff. In some cases, the victim will choose someone with whom he or she already feels comfortable, but in other cases, the victim may simply speak with the first available staff. It becomes staff's job to establish a rapport with the victim.

Staff can accomplish this in several ways:

- Stay calm and professional.
- Affirm that you take this issue very seriously.

- Never laugh at, make fun of, or otherwise minimize the experience.
- Do not act shocked by what you're hearing (This may be difficult).

Reporting credibly means not making assumptions about the victim. For example: staff cannot assume that a victim consented just because the staff has known him or her to consent in the past.

Also do not make assumptions because of the victim's sexual orientation, gender, race, religion, disability, or because a staff is involved.

If, at a later date, an investigation concludes it was a false allegation, or was not substantiated, you will never be reprimanded for acting responsibly.

2. Keep the Interaction Private

If a victim comes to staff to report an incident of sexual abuse, use good judgment. Find a way to keep the interaction private. This may mean stepping away from the commotion. Or, it may mean finding a way to allow the resident to speak with you privately.

This will help the resident feel comfortable reporting without fear of someone overhearing or noticing that he or she has approached a staff.

If staff works in a facility that houses residents of the opposite gender, you want to include staff of the opposite gender.

3. Consider Your Nonverbal Responses

When a victim reports to staff, be as approachable and non-threatening as possible. Your body language can be as strong as your choice of words.

Folding your arms, for example, may communicate that you are closed to what the victim has to tell you; standing over the person can be intimidating; or even just shifting in your seat repeatedly shows that you might be distracted.

Staff needs to consider the tone of their voice and eye contact. Think about how you respond when someone you are confiding in keeps eye contact with you and uses a calm and supportive tone of voice.

These are the qualities of being an active listener and can help restore a sense of control and order for the victim.

4. Re-assure the Victim

There are many concerns that victims tend to have when they report a sexual abuse. They may fear retaliation from residents or staff, sexually transmitted diseases and illnesses, or pregnancy.

They may fear that no one will take their report seriously; sometimes this fear is based on their own or other residents' past experiences.

As a staff member, you have the opportunity to re-assure the victim you are committed to making sure procedures are followed no matter how they had been treated in the past.

5. Explain Your Role

Before the victim can say too much, you will need to explain your role. As a staff member, you are there to get the most basic information to pass on to the investigator.

You will need to tell the victim that you have to report the incident – the person may be under the impression that his or her words are confidential. As you explain this, be supportive and as helpful as you can.

If a victim is distraught and unable to focus, pushing the resident to give information may make him or her want to withdraw. Remain calm, and be patient.

If you feel you need assistance, contact your supervisor, a mental health staff, or another staff member who ideally has a good rapport with the victim.

Staff also want to be careful not to use judgmental words or phrases such as, "look at the way you are dressing," or "didn't you realize that you would have to pay up eventually?"

Do the best you can to keep the report focused on the very few facts that you need to obtain.

Assure the victim once again that he or she will have the opportunity to speak at length with the investigator.

Inform the resident that the appropriate medical and mental health services are available, either within the facility or through external resources.

It is important to be aware of the words you use when communicating with a victim of sexual abuse:

This means using language and avoiding phrases that downplay or dismiss the victim's trauma.

As you communicate with the victim:

- Avoid using facility jargon.
- Do not correct the victim if he or she chooses to use curse words, phrases such as "punked" or other slang terms.
- Be sure that your language is professional and focused at all times.

A common mistake of staff is to say:

- "I know how you feel," or
- "I understand what you are going through."

Those phrases are not helpful because they tend to downplay the victim's experience.

Helpful phrases might be:

- "I'm sorry this happened to you, or
- "I know this might be difficult to talk about."

It's essential that staff acknowledge that the victim has endured a uniquely traumatic ordeal.

If the allegation involves a staff, be sure not to act surprised or say,

- "But he or she is a good staff person."
- "Nor should you say, "you better be telling the truth because this is going to ruin their career."

Be neutral, listen to the allegations, and document the incident as it's told to you.

Communication with Limited English Proficient (LEP), Deaf, or Disabled

- DJJ Policy 15.10, Language Assistance Services requires the following:
 - That "accommodations will be made in accordance with DJJ 15.10, Language Assistance Services to ensure that youth who are limited English proficient (LEP), deaf, or disabled are able to report sexual abuse

to staff directly, through interpretive technology, or through non-youth interpreters.

- ▶ DJJ Policy 13.23, Student Assessment requires the followings:
 - All youth admitted to a secure facility will receive an Initial Education Screening (Attachment A) within 2 hours of admission by a trained Intake Officer/Juvenile Correctional Officer.
 - The Initial Education Screening form will be completed in the Juvenile Tracking System, printed, and forwarded to the education department the same day. The Initial Education Screening will also be entered into the Juvenile Tracking System (JTS).
 - Youth who cannot communicate in the English language or are legally blind or deaf or have any other impairment that may preclude their understanding will have the orientation conducted in a manner that they can understand.

Dynamics of Sexual Abuse in Juvenile Facilities:

Staff must remember that every assault case is unique and that any resident can be a victim.

Whether or not the perpetrator is a resident or staff person, the situation may or may not be consistent with your assumptions.

Withholding your personal judgment is important when responding to a sexual abuse incident.

1. Male on Male Sexual Assault:

The residents may feel disempowered, and as a result, they may try to gain control over other male residents.

One of the ways residents may try to dominate others and assert their superiority is through sexual aggression.

Males who become victims may generally have some of the following characteristics:

- They were convicted of non-violent crimes
- They are often first-time offenders and unfamiliar with the lock up culture
- They're not particularly street-wise.
- They are often young, smaller in stature,

- Sometimes possess feminine characteristics,
- They also may have a mental or physical disability.

Potential victims often do not understand the very basic tenets of lock up life, which generally makes them easy targets. For example, they may be approached early on and offered some store goods such as candy. When these gifts are accepted, sexual favors may soon be required as payment.

Because of their non-violent crimes, these residents may be perceived to be less manly than those who have committed violent offenses.

2. Why Engage in Sexual Activity in a Juvenile Facility:

Some of the reasons residents engage in sexual activity include:

- Pleasure
- Love
- To Trade or Barter
- Expression of Self
- The Thrill of breaking the Rules
- Social Dominance and Control,
- The Promise of Protection
- Because they are forced into sex either physically or by imminent threat.

While these reasons can motivate men and women, the dynamics play out very differently.

3. Sexual Dynamics in a Female Facility:

Sexual dynamics in female facilities are less about aggression and more about the relational context of females' lives – but that's not to say sexual coercion doesn't exist in facilities housing females.

The nature of female sexual behavior, however, is different than male sexual behavior. Females tend to be more focused on relationships both in facilities as well as in society at large.

Three predominant dynamics among incarcerated females:

- The creation of a "facility family"
- Females who want a one-on-one relationship
- Females who form close friendships with deep attachments

A “facility family” is a situation where each female takes on a different role such as husband, wife, mother, father, and child. These families can be sexual or non-sexual any may be long lasting or short lived.

The most common is a mother/father structure with a child- the child being a young, female resident/inmate who needs protection and caring.

In a one-on-one dynamic, some female will say that they are only “gay for the stay”. Some of these relationships are long lasting but more often than not they become problematic and end quickly.

In the coupling dynamic, the relationships rarely includes violent sexual abuse, but there are situations where females feel pressured into sex and feel physical threatened.

For many females in facilities and prison, their childhood sexual abuse led them into a pattern of continued involvement in abusive relationships as a victim.

Because of their past sexual history and physical and emotional abuse, many offenders, both males and females, may have what’s called Post Traumatic Stress Disorder or PTSD due to their past victimization

4. The Dynamics of Staff Sexual Misconduct:

The vast majority of us do our jobs with pride, and we would never think of crossing over the professional boundaries with residents.

However, some staff do cross the line and become sexually engaged with residents. This can be through:

- Physical touching,
- The use of an object,
- Using sexual language,
- Sexual writings,
- Displaying certain physical behaviors,
- Sexual pressuring,
- Harassment, or
- Any act of a nature

Beware that all states have passed laws prohibiting staff sexual misconduct with residents or inmates.

It can be particularly difficult for everyone when staff is accused of sexual misconduct. As staff we are responsible for the safety and security of the residents.

This creates a natural imbalance of power given that staff is responsible for the day-to-day management and control of the facility.

We can't under estimate the fact that residents depend on us for their daily needs while incarcerated-arranging visits, medical, work and program assignments, and cross the line and abuse their roles; they have betrayed the basic tenets of our profession and broken the law.

Staff responsibilities include recognizing appropriate interactions between residents.

They also include knowing where to draw the line with your interactions, both physically and emotionally. In other words, staff needs to maintain their professional boundaries at all times.

We know that staff sexual misconduct happens for various reasons:

- Feel a need to exploit their power.
- Fallen in love.
- Sympathize with or wants to protect residents.
- Feel isolated from their peers and begin to identify more with the residents.
- Staff is feeling too much stress in their lives and end up finding someone that makes them feel special and needed.

It is important for staff to recognize that residents are also motivated by various reasons to engage in sexual behavior with staff. They are:

- Protection
- Love
- Favors
- To get back at the administration, or
- To get a staff in trouble.

Despite a resident's motivation, it's always the responsibility of the staff to set the professional boundaries, keeping the roles clear between staff and the resident they supervise.

The results of engaging in staff sexual misconduct:

- Staff members can be criminally prosecuted
- Agency leadership may be civilly liable
- Safety and security of the facility and the community are put in jeopardy.

5. Outside Victim Advocates:

The agency will obtain a Memorandum of Agreement (MOA) with the Children's Advocacy Centers of Georgia to provide forensic interviews/evaluations, and victim advocacy services for residents while in a secure facility and the services will follow the victim when he/she transfers to another facility or release.

The MOA will also ensure the agreements to post local numbers and addresses (available in the facilities) of Advocacy Centers.

6. Circumstances and Gender Influences

Males:

- ▶ Guard information
- ▶ Protective of innermost thoughts and feelings
- ▶ Reluctant to ask for help
- ▶ Aggressive, competitive, less emotional
- ▶ Conceal vulnerability

Females:

- ▶ Relating and sharing are important
- ▶ Rapport building, bonding, intimacy, closeness
- ▶ Caretakers, Empathizers
- ▶ Inclined to ask for help
- ▶ More willing to expose vulnerability

7. Histories of Abuse – Males:

- ▶ More than half of male offenders had been abused by parents or guardians
- ▶ Males indicated being mistreated mostly as children
- ▶ Males more likely than females to be abused in childhood by someone outside of the family
- ▶ Males may question sexual identity and sexual preference more than females as a result of the abuse
- ▶ Males are less likely to report abuse or seek help
- ▶ Literature suggests there is a connection between sexual/physical victimization and aggressive and self-destructive behavior
- ▶ Males defend against feelings associated with victimization (loss of control, shame, stigma) by being in a constant state of anger, rage
- ▶ The experience of sexual victimization may be even more stigmatizing for males than it is for females because these victimization experiences fall so far outside of the proscribed male gender role

- ▶ Many male survivors feel that they should have been able to stop the assault.

8. Implications of Prior Abuse – Males:

- ▶ Males often feel intense shame and embarrassment as a result of sexual victimization
- ▶ Males feel as though they are unheard as sexual abuse victims and may require reassurance that their claims are taken seriously
- ▶ Interviewer may need to solicit details
- ▶ Avoid interpreting the male victim's calmness or composure as evidence that a sexual assault did or did not occur
- ▶ Be careful not to appear condescending or patronizing

9. Histories of Abuse – Females:

- ▶ The majority of female offenders report prior sexual abuse which appears to be an instigator of delinquency, addiction and criminality
- ▶ Abuse begins in childhood and continues into adulthood.
- ▶ Female offenders reported that they were most often abused by intimates or family members. Almost 91% knew their abuser, 40% of abuse was at the hands of a family member, and 27.2% of abuse at the hands of a parent or guardian. Sixty-one percent of abuse was by an intimate.
- ▶ Females are more at risk for unhealthy relationships (characterized by abuse, exploitation) with authority figures, particularly males

10. Female Delinquents and Sexual Abuse:

An estimated 70% have a history of sex abuse

In some detention centers, the incidence of girls who have been abused is closer to 90%

11. Effects of Sexual Abuse on Females:

- ▶ Lessened self-esteem
- ▶ Inability to trust
- ▶ Academic failure
- ▶ Eating disorders
- ▶ Self-harm
- ▶ Running away
- ▶ Substance abuse
- ▶ Defensive and reactive violence

12. Implications of Prior Sexual Abuse – Females:

- ▶ Females may have greater difficulty adjusting to coercive, restrictive environments
- ▶ Vulnerable due to past histories of abuse, particularly by figures in authority
- ▶ May have concern about how the investigation may impact or interrupt familial relationships
- ▶ Fear of retaliation
- ▶ Potential for pregnancy

13. Profile of Victimization:

According to research male and female victims may show many signs of victimization. Below are just a few that have been identified:

Male:

“Victim” pattern in lifestyle and relationship choices

Low self-esteem

Mistrust

Emotional pain

Distorted view of normalcy

Poor ability to set personal boundaries

Self- Destructive Behavioral Patterns such as addiction and promiscuity

Mental Illness (PTSD and Depression)

Female:

Distorted view of self, relationships & reality

Negative Schemas about the Self (Feelings of inferiority and worthlessness, Guilt and Shame)

Negative Schemas about others (Poor basic trust, Feelings of mistrust, betrayal, fear, “Use or be used”)

Powerlessness (Lack of self-efficacy and More susceptible to re-victimization)

14. Victim and Witness Reaction to Trauma:

When an individual witnesses or is victimized by violence, they experience the symptoms of trauma. Over time, as people work through their feelings, they learn to move through the trauma and are once again able to focus on their lives and interests.

If a victim or witness needs more than you are able to provide, seek professional assistance. Please contact your mental health, medical or DJJ Victim Advocate for assistance.

The following are expected reactions of trauma. Individuals may experience different reactions at different times. Remember: most of these reactions will diminish over time and are completely NORMAL.

- Shock, disbelief, numbness
- Anxiety, panicky feelings, hyper vigilance, exaggerated startle response
- Having intrusive thoughts, flashbacks, or unwanted memories of the event
- Loss of sense of security and safety
- Feeling detached from others
- Loss of interest in previously enjoyable activities
- Withdrawal from family and friends
- Clinging to family and friends
- Anger, irritability, being argumentative
- Blaming themselves for the tragedy
- Nightmares, difficulty falling or staying asleep, sleeping more than usual
- Changes in appetite
- Feeling like emotions are out of control
- Regression: behaviors exhibited at an earlier age, i.e. sleeping with lights on
- Difficulty concentrating
- Deep sadness or depression
- Physical complaints such as headache, stomachache, muscle tension and nausea

The Department of Juvenile Justice Policy Regarding the Prison Rape Elimination Act:

The Department of Juvenile Justice has zero tolerance towards all forms of sexual abuse and sexual harassment and will take appropriate actions to reduce the risk of all forms of sexual abuse within Department of Juvenile Justice facilities and community programs.

The Georgia Department of Juvenile Justice strictly prohibits any forms of consensual sexual activities between youth and youth, staff, contractors, volunteers, interns. Such conduct is subject to administrative disciplinary sanctions and may result in criminal prosecution.

PREA Policy Definitions:

- ▶ **PREA Coordinator:** A full-time position that has the responsibilities of developing, implementing, and overseeing the agency's compliance with the PREA standards.
- ▶ **Prison Rape Elimination Act (PREA):** A United States federal law that supports the elimination, reduction and prevention of sexual assault and rape within corrections systems. It applies to all federal, state, and local prisons,

juvenile facilities, jails, police lock-ups, private facilities and community settings such as residential facilities.

- ▶ **PREA Standards:** Guidelines established by the United States Department of Justice to ensure compliance of the prevention, detection, response, monitor, and eradication of sexual abuse and harassment.
- ▶ **Facility or Community Program PREA Contact:** An individual assigned the responsibility of assisting the facility or community program with PREA planning, self-assessment, and serving as the facility or community program liaison with the agency PREA coordinator.
- ▶ **Sexual Assault Response Team (S.A.R.T.):** A facility management team that consists of members from security, medical, mental health, the case manager, investigations, victim advocate services and the PREA Contact that is responsible for coordinating responses, reporting, and follow-up to Special Incidents of youth sexual abuse within the facility. The PREA Contact is the S.A.R.T. leader.
- ▶ **Gender Identity:** A person's internal sense of being male or female, regardless of the person's gender at birth.

Prevention Planning:

Clear and Unobstructed View In secure facilities:

Facilities/Programs/Offices owned, operated, or contracted will maintain a clear and unobstructed view into offices, classrooms or any room/location where a youth and staff may interact.

- ▶ Windows and doors will be free of posters, blinds, paper, etc.
- ▶ Locations that are primarily used for administrative (non-youth) purposes may have blinds; however, the blinds must be up anytime youth are in the location.
- ▶ Blinds may remain in the medical examination rooms. When a youth is not being examined, the blinds must be up.
- ▶ With the exception of medical examination rooms, areas that have solid doors will be open at all times in which youth and staff are both in the room.
- ▶ Blind spots will be identified and managed by repositioning officers or Closed Circuit Television (CCTV) on internal and external grounds, or by other appropriate means.
- ▶ All hidden or secluded areas (such as janitor closets, blind spots) where covert sexual behavior may occur are to be monitored and/or secured at all times.
- ▶ The highly restricted keys are sign-in and out at all times as required by DJJ Policy 8.12, Key Control.

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

Hire or Promoted Staff

- ▶ Facilities/Programs/Offices owned, operated, or contracted will not hire or promote anyone who has been found guilty of sexual abuse.
- ▶ Background investigations will be completed in accordance with DJJ Policy 3.52.
- ▶ The agency shall conduct criminal background record checks at least every five years of current employees and contractors who are assigned a DJJ Locator Card or have in place a system for otherwise capturing such information for current employees.
- ▶ Add to new hire acknowledgment statement as well as the new ethics online training and volunteer/intern acknowledgment.
- ▶ All staff members who engage in sexual abuse and/or misconduct with a youth are subject to disciplinary action, up to and/or including termination, and may be denied access to all Georgia Juvenile Justice facilities/programs/offices.
- ▶ The Office of Investigations will report all terminations for violations of agency sexual abuse policies to appropriate law enforcement agencies.
- ▶ Staff who engages in sexual abuse and/or misconduct with a youth may be charged with a felony punishable by imprisonment of 0 to 50 years.
- ▶ All cases will be referred to the local District Attorney's office for prosecution.

Outside Intervention:

Directors will ensure residents are provided with contact information and access to outside victim advocates for emotional support services related to sexual abuse.

The facility shall enable reasonable communication between residents and these organizations and agencies, in as confidential a manner as possible.

Intake:

Within 24 hours of the youth's arrival at the facility and periodically throughout a resident's confinement, the facility staff will obtain and use information about each youth's personal history and behavior to reduce the risk of sexual abuse by or upon a youth.

The assessment information may be obtained from the following assessments and/or screening instruments:

- Medical screenings;
- Mental health screenings; and
- Case management orientation

Youth in a secure facility will be housed based on his/her custody and housing assessment. Custody and housing assignments will not be based solely on the youth's sexual orientation or gender identity.

All youth victims and youth perpetrators of incidents of sexual abuse will receive a Behavioral Health Evaluation in accordance with DJJ 8.25, Sexual Assaults.

Training:

All staff, including private facility staff, must complete refresher training every two years.

The facility shall ensure that all volunteers and contractors who have contact with residents complete PREA training modules.

The facility shall maintain documentation confirming staff, volunteer and contractor training.

The Director will ensure that PREA posters and other reading materials are visible and readily available to all staff

Shift briefings and staff meetings will be used to randomly discuss PREA.

Youth Education:

During the intake process, residents will receive information explaining the agency's zero tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment.

Within 72 hours of intake, residents will receive education on their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents.

The facility will maintain documentation of resident participation in these education sessions.

Medical and Mental Health:

If a youth discloses prior sexual victimization or abusiveness during a medical or mental health intake screening or assessment, the staff will report the abuse according to DJJ Policy 8.5, Special Incident and Child Abuse Reporting. For youth over the age of 18, medical and mental health staff shall obtain informed consent from the youth prior to reporting the abuse.

Victims of sexual abuse will have timely, unimpeded access to emergency medical treatment and crisis intervention services.

The facility will offer ongoing medical and mental health evaluations and treatment to all youth who have been victimized by sexual abuse consistent with the community level of care.

The evaluation and treatment of sexual abuse victims will include appropriate follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody.

Detection and Response – Facility and Youth Reporting:

Facilities/Programs/Offices owned, operated, or contracted will:

Use Special Incident Reports as the official written reporting process for any type of sexual abuse and harassment.

Each facility will provide multiple internal ways for youth to report sexual abuse, retaliation by other youth or staff for reporting sexual abuse, and staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse that are easily understood, private, and secure.

Residents may report sexual abuse or seek relief against retaliation by:

- Completing a Help Request Form;
- Using the grievance process;
- Dropping a note in the Director's Box,
- Telling a counselor, community case manager, medical or mental health staff, Director or Assistant Director, Parent/Guardian, Chaplain or Minister, or any trusted adult.

Secure Facility First Responder Duties:

The first direct care staff member to respond to the report is required to:

- Separate the alleged victim and abuser;

- Preserve and protect any crime scene until appropriate steps can be taken to collect evidence;
- Request that the alleged victim not take any actions that could destroy physical evidence, including washing, brushing teeth, changing clothes, urinating, defecating, drinking, or eating;
- If the first staff responder is a non-direct care staff member, he or she is required to instruct the victim not to take any actions that could destroy physical evidence and then immediately notify direct care staff.
- Youth who are alleged victims of sexual abuse will be treated in a sensitive and non-judgmental manner.

Facility Protection Duties:

- The facility will take appropriate steps to protect all youth and staffs that report sexual abuse or cooperate with sexual abuse investigations from retaliation by other youth or staff.
- The facility will employ multiple protection measures, including custody and housing changes, Special Management Plans, “No Contact Status”, or transfers for youth victims or abusers.

Sexual Assault Response Team (SART)

Each secure facility will treat all instances of sexual abuse as critical incidents to be examined by the Sexual Assault Response Team (SART). SART will provide integrated and immediate response following all sexual assaults and required treatment.

At least one member of the SART team will report to the facility upon notification of a critical incident.

SART will coordinate first response activities concerning sexual abuse of youth and staff sexual misconduct with youth. The SART will evaluate each incident of sexual abuse to:

- Ensure that the victim receives the required treatment;
- Assess potential causes of the incident or allegation
- Identify any physical barriers that may have enabled the abuse
- Identify inadequacy of staffing levels during different shifts;
- Conduct an assessment of technology, policy, or training, to better prevent, detect, and/or respond to incidents of sexual abuse.
- Ensure all identified corrective actions are documented on the Sexual Assault Response Team Guide.

Investigations:

The Office of Investigations will investigate all allegations of sexual abuse, including third-party and anonymous reports. The Office of Investigations must follow the procedures established in DJJ investigation policies when investigating all reports or allegations of sexual abuse.

The Office of Investigations will refer youth for criminal prosecution when appropriate.

Interventions and Disciplinary Actions for Youth:

Youth will receive appropriate interventions if they engage in youth on youth sexual abuse.

Pre-adjudicated youth will not be placed in a sexually harmful behaviors treatment program. (See DJJ 16.5, Disciplinary Reports and Hearings)

Monitoring:

The secure facility PREA Contact will complete an annual self-assessment at the facility as guided by the PREA Coordinator.

District Directors will monitor all Community Residential Program Contractors, Community/Court Service Offices and Placements for PREA compliance.

The Statewide PREA Coordinator will monitor security facilities to determine compliance with the national PREA standards.

The PREA Coordinator will work on behalf of the agency to recommend qualified auditors to conduct an independent audit of Georgia Department of Juvenile Justice secure facilities every three years.

Closing

This completes the materials for the OJT handbook. Thank you for participating in this training experience. Our goal is to ensure you received the best foundation for a successful transition into your daily job duties. We urge you to review key areas of information and seek clarification from your supervisor or Field Training Officer for areas that are unclear ***prior to taking the online test.***

Good luck in your career with the Georgia Department of Juvenile Justice.