Mountain View
Youth Development Center
1182 Dover Rd
Charleston, Maine 04422
Telephone: (207) 285-0880

Resident Handbook

Revised 05/10/13
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Mission

Department of Corrections

The mission of the Department of Corrections is to reduce the likelihood that juvenile and adult offenders will re-offend by providing practices, programs and services which are evidenced based and which hold the offenders accountable.

Division of Juvenile Services

To promote public safety by ensuring that juvenile offenders are provided with education, treatment, and other services that teach skills and competencies; strengthen pro-social behaviors and require accountability to victims and communities.

Juvenile Facilities

The mission of the Juvenile Facilities is to provide treatment and services within a safe, secure environment that enables youth to develop pro-social skills and competencies thereby promoting public safety by reducing the likelihood of re-offending.

Directions to the Mountain View Youth Development Center

From the North:
Via – Town of Dover Foxcroft take Route 15 South out of Dover Foxcroft, travel approximately 11 miles until you get to a very large hill. MVYDC is on the right-hand side.

From the South:
Via – I-95 – Take Broadway Exit – Route 15 North towards Charleston – travel approximately 20 miles. DO NOT TAKE SIGNS TOWARD CHARLESTON. Stay on Route 15 we are on the left hand side when you get to a very large hill.

From Newport:
Via – I-95 - Follow Routes 7/11 into Corinna approx. 15 minutes. In Corinna veer right toward Exeter Route 43, continue on Route 43 until you reach Corinth. At flashing light take a left, stay on Route 15 DO NOT TAKE SIGNS TO CHARLESTON. We are on the left hand side of a very large hill.

Introduction

The Mountain View Youth Development Center provides short and long-term secure custody to juveniles from Northern and Eastern Maine held under provisions of the Maine Statutes. We are dedicated to helping each resident develop the skills and judgment that will allow them to be successful and make a positive contribution to society. We intend to provide programs and services that will promote each resident’s growth toward mature thinking and decision making, realistic understandings of themselves and others, and the knowledge and competence to deal well with problems and challenges encountered in daily life.

It is our intention to provide a comprehensive treatment program in a structured, safe and supportive environment. Objectives of the treatment program will include: assisting residents to accept responsibility for behavior, helping residents develop pro-social skills, increase residents’ self-awareness, enhance residents’ ability to empathize with victims, enabling residents to employ more adaptive thinking patterns and utilizing effective problem solving strategies. The overall program goal for the residents is to develop more adaptive life skills and to increase the likelihood that they use these skills in their personal lives, both within and outside the facility.
We will provide living conditions that are safe, sanitary, and humane, and will work to prevent residents from doing harm to themselves or others. While we have to place certain restrictions on activities, we will provide each resident with opportunities to achieve success.

Message from the Commissioner
Date: May 19, 2008
Resident safety concerning the Prevention of Sexual Abuse

It is important that each and every resident is safe from sexual abuse from other residents and/or staff. To that end, the Maine Department of Corrections has a zero tolerance policy for sexual abuse. This handout is an addendum to the resident handbook that you received upon admission to the facility. After reading this material, please place it with your handbook as a resource. This guide will give you information as to what you can do to reduce the chance of being sexually assaulted, how to report a sexual assault, and what the facility’s response to such a report will be. Again, sexual abuse from any source will not be tolerated at any Departmental facility.

It is the policy of the Maine Department of Corrections that staff-on-resident, resident-on-resident and resident-on-staff sexual abuse will not be tolerated – all sexual conduct, including sexual contact, is against the Department’s rules. All allegations of sexual abuse or sexual threats will be thoroughly investigated. Furthermore, any sexual predator will be disciplined and/or prosecuted.

Departmental policy 15.3, states that any resident sexual contact is Major Misconduct.

Departmental Policy 6.11, Sexual Misconduct (PREA and Maine Statutes), provides definitions and Maine Criminal Statute references.

NOTE: It is not sexual contact or touching when an employee is doing a physical search or medical staff is doing a medical examination according to approved Departmental policies and/or procedures.

There can legally never be a consensual relationship between residents and staff.

You have the right to be safe from sexual abuse. While you are incarcerated, no one has the right to pressure you to engage in sexual acts. You do not have to tolerate sexual abuse or pressure to engage in unwanted sexual behaviors regardless of your age, size, race, ethnicity, or sexual orientation. You have the right to be safe from unwanted sexual advances and acts.

ABOUT YOUR SAFETY: If you feel that someone is pressuring you or sexually harassing you, staff are available to help you deal with this problem. If you are being pressured or threatened for sex, you should report this to staff. You should feel free to discuss your concerns about sexual abuse, or implied or threatened sexual abuse with any staff member. If you are in an emergency situation, approach any staff member.

You may also report physical/sexual abuse or a major safety concern through the facility Hotline: 285-0840. This is a free call. Please remember this Hotline is not meant to circumvent the Appeal or Grievance process. It is not for complaints. If you have an urgent need or wish to make a report of the above confidentially, you may use the Hotline number. Misuse of this number will be addressed and could result in discipline.

AVOIDING SEXUAL ABUSE
Here are some things you can do to protect yourself against sexual abuse.

1) Carry yourself in a confident manner at all times. Do not permit your emotions (fear/anxiety) to be obvious to others.
2) Do not accept gifts or favors from others. Most gifts or favors come with strings attached to them.
3) Do not accept an offer from another resident to be your protector.
4) Find a staff member with whom you feel comfortable discussing your fears and concerns.
5) Be alert! Do not use contraband substances such as drugs or alcohol: these can weaken your ability to stay alert and make good judgments.
6) Be direct and firm if others ask you to do something you don’t want to do. Do not give mixed messages to other residents regarding your wishes for sexual activity.

7) Stay in assigned areas of the facility.

8) Choose your associates wisely. Look for people who are involved in positive activities such as counseling programs, etc. and keep yourself involved in positive activities.

9) Trust your instincts. If you sense that a situation may be dangerous, it probably is. If you fear for your safety, report your concerns to staff.

What to do if you are assaulted. If you become a victim of sexual abuse, you should report it immediately to staff, who will offer you immediate protection from the assailant and will refer you for a medical examination and clinical assessment. Assistance will be provided regardless of whether or not you name the responsible resident or staff members; however, specific information may make it easier for staff to help you. Even though you may want to clean up after the assault, it is important to see medical staff BEFORE you shower, wash, drink, eat, change clothing or use the bathroom. Medical staff will examine you for injuries which may or may not be readily apparent to you. They can also check you for sexually transmitted diseases and gather physical evidence of assault. The individual or individuals responsible for sexually abusing or assaulting residents can only be disciplined and/or prosecuted if the abuse is reported.

How do you report an Incident of Sexual Abuse? It is important that you tell a staff member if you have been sexually abused. You can tell any caseworker, mental health worker, chaplain, security staff member, medical practitioner, administrative staff member, investigator, or any other employee. Department staff members are instructed to keep the reported information confidential and only discuss it with the appropriate officials on a need to know basis. You also have the option of reporting the abuse or threats in writing. You may write to a member of the administrative staff, a caseworker, a mental health staff member, a chaplain, a security supervisor, a member of Central Office, the investigator, or any other employee you trust. However, any delay in reporting an incident will make investigating the incident far more difficult.

What happens when you report an incident of Sexual Abuse? Allegations of sexual abuse are first assigned to one of the Department’s investigators. Most often a law enforcement official from another department is called in to assist. The allegations will be thoroughly investigated. A report made in good faith based upon a reasonable belief that the alleged conduct did occur does not constitute lying for the purpose of disciplinary action even if investigation does not establish evidence sufficient to substantiate the allegation. No reprisals of any kind shall be taken against a resident for good faith reporting of sexual abuse or sexual threats. However, if investigation discloses that a person who knew that the information was false made the allegation intentionally or with malice, he or she may be charged by the law enforcement agency with falsely reporting an incident and/or may be subject to disciplinary action. A person is guilty of falsely reporting an incident if it is proven beyond a reasonable doubt that, knowing the information reported, conveyed or circulated to be false or baseless, he or she reports to a law enforcement officer or agency the alleged occurrence of an offense or incident which did not in fact occur.

Seek Medical Attention: If you have been sexually assaulted, you should seek medical attention immediately. Although it may be difficult, it is important that you do not shower after the assault. Showering may wash off the hair and body fluids which are critical evidence, especially with the potential use of DNA technology. Also, do not wash, destroy or discard the clothes and underwear that you had on at the time of the assault, as these items may be used to collect critical evidence. You will be checked for the presence of physical evidence. A medical professional will perform a medical examination as deemed appropriate based upon his or her professional judgment, and document the existence of physical evidence which remains after the assault. This physical evidence is crucial in corroborating that the sexual assault occurred and in identifying the assailant. The examination will be conducted privately and professionally. You should seek medical help if you have been sexually assaulted or had sexual relations with others, to determine if you have been exposed to the HIV virus or other sexually transmitted diseases. Female residents will be tested for pregnancy when appropriate.

Confidentiality: Information concerning the identity of a resident victim reporting a sexual assault or abuse, and the facts of the report itself, shall be limited to those who have a need to know in order to make decisions concerning the resident victim’s welfare. If a case is forwarded for prosecution, certain information may have to be shared during the court proceedings.

Counseling Programs for Victims of Sexual Abuse: If you have been the victim of sexual abuse by staff or residents, you will be referred for counseling and/or advice from a mental health clinician and/or a chaplain. Crisis counseling, coping
skills, suicide prevention and mental health counseling are all available to you. Often, people may need help to recover from the emotional effects of sexual abuse. If you are a victim of a sexual abuse while in a Departmental facility, or if you were victimized in the past, professional staff are available to provide treatment.

In summary, the Department of Corrections has a zero tolerance policy for sexual abuse. Accordingly, all allegations of sexual abuse or sexual threats will be thoroughly investigated. Any victim of sexual abuse will be treated in a sensitive manner with due consideration to the effects of sexual abuse. Furthermore, any perpetrator of a sexual abuse incident will be dealt with severely through discipline and/or prosecution to the fullest extent permitted by law.

**Housing and Treatment Information**

All male residents committed to the Mountain View Youth Development Center will be assigned to a housing unit and will go through a 30 day assessment/orientation phase. Unit staff will provide a detailed orientation about the purpose, rules, policies, and procedures of the facility, and of the Unit. Residents will also be oriented to the school program, work programs, recreational opportunities, the Phase and Level System, Cognitive Behavioral groups, the Daily Behavior Card, and other information, as appropriate. Female residents will be housed on the Female Unit and will be oriented to the facility by staff of the Female Unit.

Residents will be assigned a Coach who will meet with them one-to-one on a weekly basis. The Coach will assist residents in meeting their treatment goals and provide them with assistance and feedback regarding their progress. The Coach will also help residents to learn what is expected of them here. The unit Social Worker will contact family members to provide orientation information, particularly as it relates to communication and visitation issues.

While in Assessment/Orientation, each resident will receive a comprehensive assessment that includes medical, educational, religious, psychological, social, and substance abuse. Female residents will receive the same comprehensive assessments on the Female Unit.

Information will be sought from each resident, the family, the Juvenile Community Corrections Officer, schools, and other community service providers. Assessments will address each resident’s history, behaviors, attitudes, strengths, needs, risks and goals.

Within 14 days of a resident’s commitment to the facility or 7 days after transferring from another facility, the resident will have an Initial Classification where the resident will be informed of his/her Assessment Plan. Parents and legal guardians will be invited to participate.

Upon completion of the assessments, a Case Plan will be developed that includes the resident’s strengths, limitations, needs, goals and responsibilities, including staff responsibilities. Recommendations will be made for future treatment, activities, supervision, services, and placement, as well. Unit Treatment Team meetings will review progress at least monthly.

A Classification Conference will be held within 30 days of a resident’s commitment to the facility. The Assessment/Orientation Unit staff will present the Case Plan for final approval. This meeting will determine each resident’s custody level and housing unit. Parents, legal guardians, and the Juvenile Community Corrections Officer are invited to attend. Unit staff will assist each resident to transition to new housing assignments, whenever they occur. (All female residents will be housed on the Female Unit for the duration of their stay and will be provided, in addition to regular programming, gender sensitive programs and services that will best meet the needs of Females.)

Our intent is to integrate each resident back to the community, when appropriate, by using what they have learned through the program to be successful. As part of this reintegration process, residents will be able to earn day Passes and weekend Leaves.
To the Resident

You are at this facility because either your past behavior or the seriousness of your current offense, has determined that there is no other appropriate placement. While this may now be traumatic, you are at a crossroad where you have a chance to start over. Your future is in your hands. The choices you make from now on will determine that future. It is our sincerest hope that you will make the right choices and progress through the system without difficulty. The staff are here to assist you along the way.

This booklet has been prepared to help you understand the operations of the Mountain View Youth Development Center. It should also help you to understand what is expected of you during your stay here. Read it carefully and ask questions if anything is unclear.

The Rules and Regulations contained in this booklet do not cover all situations that may arise, rather serve as a basic guide. These Rules and Regulations are subject to change and changes will be posted inside the facility.

All information regarding your conduct/progress here at the facility will be forwarded, as appropriate, to the Courts/Juvenile Community Corrections Officers/Schools/DHS/Parents, and others as necessary. This information will identify any issues you may need to continue to work on to be successful in your community, as well as identify any progress you have made. We hope that we can report on your involvement in programs and services here, rather than problems and disciplinary reports.

If you have any questions, staff will do their best to provide answers for you. They are here to help you to be successful and experience personal growth.

What is Expected of You:

- Responsibility: Take responsibility for behavior.
- Encouragement: Encourage peers to make better choices.
- Self-Control: Follow rules/expectations, keep anger in check.
- Positive Attitude: Maintain a positive attitude and be a role model/leader.
- Empathy: Consider other’s feelings.
- Constructive Criticism: Accept feedback without arguing.
- Treat Others As You Would Like to be Treated.

You Can, In Turn, Expect Staff to:

- Treat you fairly, consistently and respectfully.
- Hold you accountable for your actions, behaviors, and choices.
- Listen and communicate with you.
- Answer questions and explain things you do not understand.
- Give you praise and encouragement for your efforts.

Each one of us is dealt a hand of cards by life. It’s not so much the hand you get dealt but what you do with what you’ve got.

Woodrow Wilson Sayre
Rights and Responsibilities:

Committed and/or Detained residents have the following rights and responsibilities:

Residents have the right to be treated respectfully, fairly, and to be addressed by name in a dignified manner. In turn, residents will treat others in the same manner.

Residents have the right to be informed of the rules, procedures and schedules concerning the operation of the facility. In turn, residents will follow the rules, procedures, schedules and staff directives while in the facility.

Residents have the right not to be subjected to corporal punishment, harassment, intimidation, harm, humiliation, or interference with normal bodily functions by other residents or staff. In turn, residents will not subject any other person to similar mistreatment.

Residents have the right not to be discriminated against and will have equal access to all services and programs, unless a security risk exists. In turn, residents will not discriminate against any other resident or staff member or use language or behavior that would imply prejudice or discrimination.

Residents have the right to participate in religious services and religious counseling on a voluntary basis, subject only to the limitations necessary to maintain facility order and security. They will have access to clergy, spiritual advisors, publications, and related services that allow them to adhere to their religious practices. In turn, residents will not abuse any of the religious opportunities and provisions they are afforded.

Residents have the right to nutritious meals, proper bedding, clean clothes, toilet facilities, daily showers (to be taken when offered), adequate lighting, proper ventilation, and an overall safe environment that is maintained in compliance with state and local fire safety laws and regulations. In turn, residents will clean and maintain their living quarters.

Residents have the right to appropriate medical and dental treatment. In turn, residents have the responsibility to ask for medical and dental care when they need it.

Residents have the right to regular visits with family and may send and receive correspondence in accordance with policy and procedure. In turn, residents are responsible for conducting themselves properly during visits and for refraining from passing or sending contraband through the mail.

Residents have the right to call, write, and meet with their legal representative while in the facility. In turn, residents will abide by the guidelines set down by the facility and their attorney.

Residents have the right to both indoor and/or outdoor recreational equipment and opportunities pending appropriate security and weather conditions. In turn, residents are responsible for, and expected not to abuse, the equipment and opportunities.

Residents have the right not to participate in uncompensated work assignments unless the work is related to housekeeping or maintenance of the facility or personal hygiene needs. In turn, residents have the responsibility of abiding by facility procedures concerning housekeeping, maintenance and personal hygiene.

Residents have the right to report any problems or complaints they may have while in the facility without the fear of reprisal. In turn, residents also have the responsibility to report these incidents and to follow the facility’s grievance procedures when making such complaints. Residents have the responsibility to report any improper action taken against them as a result of a properly filed grievance.

Residents have the right to appeal any formal disciplinary action against them as a result of a rule violation. In turn, residents have the responsibility of initiating an appeal and following the proper procedures.
Classification

Each resident will be invited to attend a number of meetings with the Classification Committee to discuss needs and treatment goals during their stay at Mountain View Youth Development Center. We will also be inviting each resident’s parent(s)/legal guardian and their Juvenile Community Corrections Officer.

The Director of Classification and Collateral Services will schedule and facilitate each meeting. Other participants may include the Juvenile Program Manager and/or Social Worker from the housing unit, assessment staff, education staff, and program staff. Together, these people form the Classification Committee.

Classification is responsible for overseeing resident treatment progress and for ensuring that the programs and services described in each resident’s Case Plan are being provided in a manner that best serves the interest of each resident and the facility. The Classification Committee shall also advise the Superintendent on matters pertaining to each resident’s readiness to return to the community.

The **Initial Classification** is the first meeting scheduled within 14 days of a resident’s commitment to the facility or 7 days after transferring from another facility.

The **Classification Conference** is the second meeting held approximately 30 days from arrival. The purpose of this meeting is to present and finalize the Case Plan and assign a housing unit.

The Classification Committee will continue to monitor each resident’s progress through the following meetings:

A **Quarterly Review** or a **Phase Advancement Review** will be conducted at least every 90 days. Residents shall be expected to complete the four phases of treatment to the satisfaction of their Unit Treatment Team and the Classification Committee before being released to the final treatment Phase V, Community Reintegration, or discharged from commitment due to reaching their maximum release date as determined by the court.

**Community Reintegration Plan Reviews** will be held approximately 14 days prior to each resident’s release.

Some residents may be allowed to participate in programs and activities directly related to treatment, specialized education or other interventions in the community that may not be available at the facility such as residential treatment programs and therapeutic foster homes. Residents shall supervised by a Juvenile Community Corrections Officer.

In the event that a resident is returned to the facility for violating a Community Reintegration Agreement, a **Reclassification Conference** will be held within 10 days to determine the appropriate modifications to the Resident’s Case Plan.

**Special Reviews** may be held as requested by the resident’s Juvenile Program Manager, Superintendent, or others, to consider any matter pertaining to the Case Plan, custody, housing unit assignment, or release for which some urgency exists.

**Phases of Treatment**

All residents are expected to progress through the 4 Phases of treatment prior to release. Phases are linked to long-term progress and are measured in 4 dimensions:

- Time
- Completion of Cognitive Skills Materials
- Accomplishment of Individual Goals
- Observing Expected Resident Behaviors

To be **eligible** for Phase Advancement the resident must, **at a minimum**, meet the following Criteria & Expected Behavior.
Criteria for Phase Advancement

**Phase 2**
- “Successful” Completion of Cognitive Skills
- Accomplishment of Goals in the Case Plan as outlined by the Unit Treatment Team, to include target behaviors, school, therapy, etc.
- Maintain at least Level 2 privileges for 2 consecutive weeks

**Phase 3**
- “Successful” Completion of Cognitive Skills
- Accomplishment of Goals in the Case Plan as outlined by the Unit Treatment Team, to include target behaviors, school, therapy, etc.
- Maintain at least Level 3 privileges for 3 consecutive weeks

**Phase 4**
- “Successful” Completion of Cognitive Skills
- Accomplishment of Goals in the Case Plan as outlined by the Unit Treatment Team, to include target behaviors, school, therapy, etc.
- Maintain at least Level 3 or 4 privileges for 4 consecutive weeks

**Phase 4 to Release**
- “Successful” Completion of Cognitive Skills
- Accomplishment of Goals in the Case Plan as outlined by the Unit Treatment Team, to include target behaviors, school, therapy, etc.
- Maintain Level 4 privileges for 4 consecutive weeks

**Expected Behaviors for Phases**

In addition to the above you must also meet the behaviors and therapeutic expectations listed below for each phase:

**Phase 1**

**Behavior:**
- Are not yet admitting to wrongdoing
- Are still blaming others for their difficulties
- Are affiliating with other residents who are engaged in deviant behavior in the facility
- Are still behaving (and/or encouraging other residents to behave) in a way that adversely affects other residents or is in violation of facility expectations

**Therapeutic:**
- Have been oriented to basic unit expectations and to the fact that the primary focus of their stay will be to work on cognitive skills and other individual and family issues so as to set the stage for successful reintegration into the community and reduce the likelihood of recidivism
- May not have participated in the assessment process
- Have yet to develop trusting, therapeutic relationships with unit staff
- Have yet to begin discussing the issues and factors that set the stage for their commitment
- Have yet to begin putting significant effort into the work that must be done during their stay in the facility
- May not yet be participating fully in unit therapeutic programming
- Are demonstrating little or no capacity for independence and have yet to gain the trust of staff
- Have begun discussing community reintegration plan

**Phase 2**

**Behavior:**
- Have begun putting greater effort into following basic unit expectations but are not yet reliable in doing so
- Are demonstrating a willingness to take ownership of their role in wrongdoing
• Have begun attempting to distance themselves from other residents who are engaged in deviant behavior in the facility
• Have shown a noticeable decrease in behaviors that adversely affect other residents or that is in violation of facility expectations
• Have decreased efforts to encourage other residents to behave in a deviant fashion

Therapeutic:
• Have demonstrated an awareness of the cognitive skills and individual or family issues that will need to be resolved to set the stage for successful reintegration into the community and reduce the likelihood of recidivism, and have begun putting some effort into this work (though perhaps without significant success)
• Have participated in the assessment process
• Have demonstrated a willingness engage in trusting, therapeutic relationships with unit staff
• Have begun discussing the issues and factors that set the stage for their commitment
• Have begun participating fully in unit therapeutic programming
• Have shown limited capacity for independence and have yet to gain the trust of staff
• Have made some progress in work related to community reintegration plan

Phase 3

Behavior:
• Are reliably following basic unit expectations
• Rarely engage in wrongdoing but demonstrate a willingness to take ownership of their role in wrongdoing when they do
• No longer affiliate with other residents who are engaged in deviant behavior in the facility
• Seldom exhibit behaviors that adversely affect other residents or is in violation of facility expectations
• No longer encourage other residents to behave in a deviant fashion

Therapeutic:
• Are fully engaged in the process of working on cognitive skills and individual or family issues that need to be resolved to set the stage for successful reintegration into the community and reduce the likelihood of recidivism and have shown significant progress in this work
• Are fully engaged in trusting, therapeutic relationships with unit staff
• Are open in discussing the issues and factors that set the stage for their commitment
• Are participating fully in unit therapeutic programming
• Have shown increasing capacity for independence and have begun to gain the trust of staff.
• Have made significant progress in work related to community reintegration plan

Phase 4

Behavior:
• Are not only reliably following basic unit expectations but have assumed a leadership role in actively encouraging other residents to do so
• Do not engage in wrongdoing and encourage other residents to take ownership of their role in wrongdoing
• Do not affiliate with, and actively discourage other residents from affiliating with, residents who are engaged in deviant behavior
• Do not exhibit behaviors that adversely affect other residents or is in violation of facility expectations and discourage other residents from behaving in a deviant fashion

Therapeutic:
• Have largely completed the work on cognitive skills and individual or family issues that needed to be resolved to set the stage for successful reintegration into the community and reduce the likelihood of recidivism
• May be assisting staff in orientation of new residents
• Encourage other residents to work on their cognitive skills and issues (and may be assisting other residents in this process as mentors)
• Are open in discussing the issues and factors that set the stage for their commitment and have an understanding of their role in ensuring that these issues and factors do not arise again upon release
• Have largely completed unit therapeutic programming
• Have shown significant capacity for independence in the facility, are given maximum opportunities for
  independence, have the full trust of staff, and have largely completed work on community reintegration plan

Levels

The level system provides a short-term incentive to work in the program and maintain appropriate behavior. Levels are
reviewed weekly (Monday-Sunday) by each Resident’s JPM, using Behavior Cards, Cognitive Skills Rating Sheets,
information on any major/minor violations for the preceding 7 days, and any additional expectations set by the Unit
Treatment Team.

Levels are linked to Short-Term acceptable behaviors and are measured in 4 dimensions:

• Time
• Completion of Cognitive Skills Materials
• Accomplishment of Individual Goals
• Observing Expected Resident Behaviors

Criteria for Level Advancement

Level 1
Receive a minimum of 40 (A= Acceptable) for preceding 7 days in both self and community
No day less than 6 of 10 in either self or community
No Major Violations/Minor Violations may cause review of Status
No cutting or other Suicidal or Self-Harmful Behavior, or Behavior Abusive to others
At least 25 in all Cognitive Skills groups (Last 7 Days)
Additional expectations if Unit Treatment Team feels appropriate

Criteria for Level Advancement

Level 2
1 Week at Level 1 in the past
Receive a minimum of 50 (A= Acceptable) for preceding 7 days in both self and community
No day less than 7 of 10 in either self or community
No Major Violations/Minor Violations may cause review of Status
No cutting or other Suicidal or self-harmful behavior, or behavior abusive to others
At least 30 in all Cognitive Skills groups (Last 7 Days)
Additional expectations if Unit Treatment Team feels appropriate

Criteria for Level Advancement

Level 3
1 Week at Level 2 in the past
Receive a minimum of 60 (A= Acceptable) for preceding 7 days in both self and community
No day less than 8 of 10 in either self or community
No Major Violations/Minor Violations may cause review of Status
No cutting or other Suicidal or self-harmful behavior, or behavior abusive to others
At least 35 in all Cognitive Skills groups (Last 7 Days)
Additional expectations if Unit Treatment Team feels appropriate

Criteria for Level Advancement

Level 4
1 Week at Level 3 in the past
Receive a minimum of 65 (A= Acceptable) for preceding 7 days in both self and community
No day less than 8 of 10 in either self or community
No Major Violations/Minor Violations may cause review of Status
No cutting or other Suicidal or self-harmful behavior, or behavior abusive to others
At least 40 in all Cognitive Skills groups (Last 7 Days)
Additional expectations if Unit Treatment Team feels appropriate
All residents are expected to “climb the ladder” once. (I.e. Progress through the levels in succession.) If, during this time, a resident is dropped for inappropriate behavior, they will return to the highest level earned prior to the drop. After a resident has successfully completed 1 week at each Level, the past seven days determines the resident’s Level for the Week. That is, a resident on Level 4 who receives 35 Acceptable ratings for the preceding 7 days (as opposed to 46 or more) would be at Level 2 for the coming week. (The Minimum acceptable for that Level.)

This allows each resident to know exactly what they must do to be on any Level and as the week progresses, each resident can “see” how they are doing and adjust accordingly.

**Perfect Day Privileges**

Any resident who receives 10/10 Acceptable ratings in both Self & Community for the day will earn 1 Additional Privilege from a list of options available to all residents. (These privileges are good for 14 days.) The List will be public and the privilege options will be available to any resident who meets this criteria. The “List” will be reviewed by each new resident’s Unit Treatment Team to determine if it should be restricted for the resident. (I.e. A resident with health problems might have limitations on gym privileges.)

Residents on Reception cannot use Perfect Day Privileges.

**Additional Privileges**

Any privileges given above this must be JPM prior approved & staff initiated. (I.e. for extra cleaning, etc.) These privileges are good for 14 days.

Residents cannot use privileges while serving restrictions. (This includes loss of recreation, dining hall restriction, etc., in addition to any Room, Pod, or Unit restriction.)

Residents on Reception cannot use Additional Privileges.

**Please Note:**

Any week (s) on Reception Level does not count toward the minimum number of weeks required for Phase Advancement. (The one exception to this is the first week of Assessment/Orientation.)

Any Major Violation, including acts of Aggression: assault, threatening, intimidation, being out of place, etc. will automatically drop the resident to Reception at review time. (Additional Restrictions will be imposed immediately.) Any Minor Violation may cause a Level drop and/or prevent a resident from advancing, regardless of the number of Acceptable Ratings. Minor Violations are violations of facility rules.

- For Level 1 & 2, any day of less than 6 or 7 of 10 Acceptable Ratings, as indicated above, in either Self or Community will result in a drop to Reception/1 at review time.
- For Level 3 & 4, any day of less than 8 of 10 Acceptable Ratings in either Self or Community will result in a Level drop to Reception, Level 1, or 2 as indicated above, at review time.
- Less than 25 in cognitive skills for the week will automatically drop the resident to Reception.

**Behavior Management**

The Behavior Management Program was developed to give residents the opportunity to learn socially acceptable ways for acting and reacting in situations. Positive behaviors are reinforced while negative behaviors are corrected. Acceptable behavior allows residents to move up in the Level system and earn available privileges. Unacceptable behavior results in corrective action, which may include disciplinary action.

**Defining Acceptable/Unacceptable Behavior:**

**Self:** Making appropriate effort and accepting feedback

**Community:** Taking care of the physical environment and interpersonal behavior (respecting boundaries, respecting differences, not threatening and not getting others off track)

**Self**

1. **Effort in tasks that provide learning opportunities or that work toward personal goals**
   - Negative Behavior: Off Task, Inattentive
   - Neutral Behavior: Generally Attentive, Compliant
   - Positive Behavior: Focused on Task, Active Effort

2. **Accepting Feedback, Direction, Assistance**
• Negative: Oppositional, Unresponsive to Feedback, Direction, or Assistance
• Neutral: Registers Feedback with Little Response
• Positive: Receptive and Cooperative with Feedback, Direction, or Assistance

3. **Maintain a Safe, Clean, Healthy environment**
• Negative: Creates Physical Hazards or Clutter, Unhygienic Behavior
• Neutral: No Hazards or Clutter, Reasonably Hygienic
• Positive: Actively Involved in Cleaning, Pursuing Hygienic Practices, and Organizing Objects in Living Space

**Community (Interpersonal Norms)**

4. **Respect Differences in Others**
• Negative: Actively Disrespectful of Differences in Others
• Neutral: No Apparent Reaction to Differences in Others
• Positive: Acknowledges Differences Without Critical Attitude

5. **Respect Physical and Personal Space and Property of Others**
• Negative: Touches or Takes Others’ Things, Inappropriate or Unwanted Touching of Others
• Neutral: Does Not Violate Boundaries
• Positive: Acknowledges Ways Others May Feel Threatened, With No Threatening Behavior

6. **Respect Rights of Others to Feel Safe from Harm or Danger**
• Negative: Threatens Overtly or Covertly
• Neutral: Does Not Threaten Others
• Positive: Acknowledges Ways Others May Feel Threatened with No Threatening Behavior

7. **Respect Rights of Others to Participate in Program Without Distraction or Delay**
• Negative: Distracting Peers During Tasks, Engaging Others in Inappropriate Behavior
• Neutral: Not Distracting or Engaging Others in Inappropriate Behavior
• Positive: Prompts or Facilitates Others’ Participation in Tasks

**Privileges:**

**Reception Level**
• General Population Activities:
  Recreation, Television/Games during Free Time
• Allowable Room Items:
  State Issued Property, 15 Personal Photos
• Bedtime:
  9:00 pm

**Level One**
• General Population Activities:
  Recreation, Television/Games during Free Time, Facility-Wide Special Events
• Canteen
  Saturday
• Allowable Room Items:
  State Issued Property, 15 Personal Photos
• Bedtime:
  9:00 pm

**Level Two**
• General Population Activities:
  Recreation, Television/Games during Free Time, Facility-Wide Special Events, Activity Room
• Canteen
  Tuesday & Saturday
• Allowable Room Items:
  State Issued Property, 15 Personal Photos
• Bedtime:
  9:30 pm

**Level Three**
• General Population Activities:
Recreation, Television/Games during Free Time, Facility-Wide Special Events, Activity Room, Inter-Facility Events (Softball, Music, Etc.)

- **Canteen**
  Tuesday, Saturday & Sunday
- **Allowable Room Items:**
  State Issued Property, 15 Personal Photos
- **Bedtime:**
  10:00 pm

**Level Four**

- **General Population Activities:**
  Recreation, Television/Games during Free Time, Facility-Wide Special Events, Activity Room, Inter-Facility Events (Softball, Music, Etc.)
- **Canteen**
  Tuesday, Thursday, Saturday, & Sunday
- **Allowable Room Items:**
  State Issued Property, 15 Personal Photos, Personal Items Not Considered Contraband
- **Bedtime:**
  10:00 pm

TV Times, PS 2 Times, Movie Times, etc. will be determined by the JPM of the individual units. Please check the Unit Schedules.

**Daily Levels**

Some residents are assigned to a Daily Level program by their Treatment Team. These residents will receive privileges as stated below:

- Daily levels determine activities on the unit (Bed times, privileges, canteen, etc.)
- Weekly levels determine activities off the unit. (Movie nights, rec of choice, using the weight room, etc)

**Hall Pass**

To be eligible for a Hall Pass a resident must be Moderate Custody or lower, have two weeks on Level 4, two staff written recommendations (one from the coach and the other from a staff on a different shift), and approval from the unit JPM.

If approved, areas that a Hall Pass can be used include: Booking for Furloughs, Classification, Guidance Office, Library, Unit Classrooms, Visits, Kitchen for Work Detail & Meals, Activity Room. During regular meals, Hall Pass residents shall be called down from their unit & return as a group.

Staff will call (radio or phone) resident(s) to their destination, the receiving staff will confirm through calls that the resident(s) did arrive. Residents will not be allowed to leave areas without being called out.

A **Hall Pass shall be worn on the shirt collar and/or attached to clothing around the neck and be plainly visible when in use.**

All corridor rules apply. i.e. hands should be behind the back & no talking/horseplay, etc. Residents shall go directly to their destination without delay. Residents who do not follow these rules, will lose their hall pass for a minimum of two weeks. Residents will need to reapply using the same eligibility criteria. If a resident is dropped from Level 4, and/or looses their Hall Pass for any other reason, they will need to reapply following the same eligibility criteria.

**Crochet Hooks**

Residents must be on Level 2 to use crochet hooks and they are for use in the Day Area only (If a staff feels that the resident is unsafe, they may restrict the use of the crochet hooks. Also, like other privileges, a resident may loose the use of the crochet hooks as provided under policy 15.3)

**Phase II/Level 2:**
Eligible for Facility Job or Work Crew

**Phase III/Level 3:**
Eligible for Pass/Leave

Phase IV/Level 4:
Eligible for Pass/Leave & Community Reintegration

Visits
Residents are allowed regularly scheduled visits with the resident’s parent/legal guardian and, if the resident is married or has a child, the resident is allowed regular visits with the resident’s spouse or child. All visitors must have prior approval by the resident’s Unit Treatment Team. Residents are allowed four visitors per visit.

If approved by the JPM, a resident may be allowed a visit with a minor sibling as part of a visit with a parent/legal guardian, or a visit with an adult sibling as part of a visit with a parent/legal guardian or as a separate visit.

Under no circumstances will any person be permitted to visit a resident until the person’s relationship to the resident is verified, if necessary by court order or other legal document, and it is determined by the JPM, or designee, that visits between the resident and that person are allowed.

Visitation days and times at the Mountain View Youth Development Center are as follows:

**Committed Residents**
- Tuesdays 6:15 pm to 7:45 pm
- Thursdays 6:15 pm to 7:45 pm
- Saturdays 8:30 am to 10:00 am & 2:30 pm to 4:00 pm
- Sundays 8:30 a.m. to 10:00 am

The Superintendent or his/her designee will approve professional visits (such as Attorneys, Social Workers, Juvenile Community Corrections Officers, DHS, Clergy, etc.) Professionals can contact the Unit Social Worker and visit by appointment during the scheduled business hours of 8:00 a.m. – 4:30 p.m. Monday through Friday and are not counted as a visit.

All visitors must follow the Rules and Regulations outlined below. Failure to follow these rules and regulations may result in termination of a visit or denial of future visits.

- Visitors arriving for scheduled resident visits will not be allowed to enter the lobby area unless a staff is present and no sooner than 15 minutes prior to the scheduled visit times.
- Visits may be contact, or non-contact as determined by the Unit Treatment team and/or Security personnel.
- All visitors must check in to the designated visit area and must provide picture identification, such as a driver’s license.
- No visitor shall be allowed in the Mountain View Youth Development Center if he/she is under the influence of drugs or alcohol, in possession of contraband, or wearing inappropriate apparel.
- **All items are to be shown to the visitation officer prior to the start of visits.**
- NO item shall be handed from a visitor to a resident.
- Cash, checks, and/or money orders, cannot be accepted and must be sent through the US Postal Service. ALL items must be presented to, and approved by a staff member using appropriate channels.
- All residents shall be escorted to and from the visit area. All residents and their visitors must remain in the visiting area.
- Bathrooms in the visit area are for visitor use only.
- Hats & Jackets are not allowed in the visit room.
- Tobacco use is prohibited inside the facility and on the grounds.
- No photographs shall be taken during the visit.
- If any resident or visitor exhibits behavior which is disruptive or inappropriate, including excessive physical contact, or otherwise is a threat to the good order of the Mountain View Youth Development Center, the visit shall be terminated.
- Visitors shall be scanned with a metal detector, and may be subject to search (including their vehicle) when staff has reason to suspect that a visitor may be carrying contraband. If a visitor refuses a search, they will be removed from the facility, escorted off facility grounds, and future-visiting privileges may be revoked.
- Under no circumstances shall a visitor for one resident be allowed to communicate with any other visitor or resident during the visit.
• Loud and/or profane language is NOT allowed.
• Visitors shall leave all handbags, suitcases, and other items not necessary during visits locked in their automobiles. The facility will not assume the responsibility for visitors’ personal effects.
• All visitors who leave the Visiting Room must go directly to their vehicle.
• The Mountain View Youth Development Center reserves the right to refuse or terminate any visit, which may be deemed detrimental to the resident(s) or detrimental to the safety, security, or good order of the facility.

**Telephone Calls**

Residents are not allowed to receive incoming calls unless it is an emergency situation; staff will not pass on messages. If a parent or guardian needs to talk with someone, they should contact the Unit Social Worker or Juvenile Program Specialist.

All residents receive an initial phone call (10 minutes) if no parent or legal guardian is available to accept the initial call then grandparents or other close adult family members are acceptable.

Residents are not allowed to place collect calls. Calls paid through family deposits to the resident phone account (canteen system) for phone calls are at $0.25 per minute for domestic calls. Calls will be no longer than 1 hour. If a resident phone and canteen account goes below $10.00, the resident can apply for indigent status and be authorized two free calls per week.

Calls to professionals such as Lawyers, Probation Officers, etc., need to be requested in writing and made during business hours.

**Mail**

Residents **may not** correspond with former residents or other incarcerated individuals, unless they are approved **immediate** family members and permission is granted from UTT and Superintendent. Envelopes and paper will be provided by the facility to all residents. Resident mail needs to be sealed prior to being placed in the unit area mail box, especially if Legal Correspondence. I.e. Courts, Counsel, Officials of the Confining Authority, Administrators of Grievance Systems, and members of the Releasing Authority. (Ref: 16.1 procedure c, 1&2)

Incoming personal mail is distributed on days that mail is delivered and is opened prior to distribution to remove any money or other items not permitted in the facility. Incoming legal mail will be opened in the presence of the resident.

All money will be counted, recorded, and placed in the resident’s account. Other items are placed in personal property or destroyed, as appropriate. All residents can send two letters at no charge on Sundays. General mail can be prohibited due to contraband, information related to criminal activity, violation of facility rules or risk of safety of the person sending the mail.

Residents are prohibited from receiving inappropriate publications, subscriptions, catalogues, mail order packages, club memberships, and junk mail. **Residents are allowed to receive ONLY the following items through the mail:** PRIOR approved appropriate publications and appropriate photographs,

All resident incoming mail with No Return Address or No Return Name or is found to have an Incorrect Name or Address will be confiscated. All resident Outgoing mail with an incorrect name or address will be confiscated.

No foreign substance of any kind is allowed to be mailed to residents. This means no foreign substance is to be put in or on any incoming mail, whether by spraying, soaking, affixing, or otherwise. This includes, but is not limited to, perfume, cologne, lipstick, powder, paint, finger-paint, crayon, colored pencil, glue, glitter-glue, stickers, tape, body fluids, etc.

Residents are responsible to inform their correspondents that these and other foreign substances are not allowed. Mail with any foreign substance in it or on it will not be delivered to the resident.

If a foreign substance is determined to be a drug or other illegal substance, disciplinary action may be taken against the intended recipient and criminal prosecution of the sender and intended recipient may result. If the substance is not illegal, at
a minimum, the mail will not be delivered but, in accordance with policy, may be either returned to the sender or disposed of.

In addition, beginning March 1, 2009, the receipt at a Departmental facility of incoming resident mail with any foreign substance on it or in it, whether it is illegal or legal, may result in the imposition of a prohibition on corresponding between the sender and the resident.

Clothing and Personal Property

All residents are issued facility clothing and hygiene supplies upon admission. Sneakers and shower shoes are the only approved footwear in the facility. All personal property is placed in a personal property envelope and either given to parents and/or guardians at their first visit or returned upon discharge. All personal clothing is stored in the personal property room after being laundered. Money is applied to an account.

Uniform Standard

Daytime: Monday-Sunday

At minimum, all residents shall be uniformed as described below. Shirts shall be tucked in at all times. Residents shall keep their hands out of their pants.

Day Area of Units & Throughout Facility

- Polo Shirt must be worn. (I.e. The T–Shirt is worn under the Uniform and is NOT acceptable worn alone.) Must have a polo on, a sweatshirt can be worn under or over it.
- Shoes (Laced/Fastened Properly) & Socks. Flip-flops can be worn in day area.
- Uniform Pants worn properly above the hip. Pants need to be over sweats/shorts during the day (example: going to gym)

Pod Area

- T-Shirt
- Sweat Pants/ Sweat Shorts worn properly above the hip
- Flip-Flops

Recreation (Outside & Inside)

- T-Shirt (Worn Appropriately. I.e. Not bunched up exposing stomach)
- Shoes (Laced/Fastened Properly) & Socks /Not flip-flops
- Sweat Pants/Sweat Shorts/Uniform Pants worn properly above the hip

After Dinner (Pod & Unit)

- T-Shirt
- Flip-Flops
- Sweat Pants/Sweat Shorts/Uniform Pants worn properly above the hip

After Dinner (Facility-Including Activity Room)

- Polo Shirt (I.e. The T–Shirt is worn under the Uniform and is NOT acceptable worn alone.)
- Shoes (Laced/Fastened Properly) & Socks. (Flip flops only if there is a documented need to wear Flip-Flops to medical on the Medical restriction list)
- Sweat Pants/Uniform Pants worn properly above the hip

Facility Events/Programs/Visits (Anytime & Any day)

- Polo Shirt (I.e. the T–Shirt is worn under the Uniform and is not acceptable worn alone.)
- Shoes (Laced/Fastened Properly) & Socks/Not flip-flops
- Uniform Pants worn properly above the hip

In Room (At a minimum for sleeping)

- Male residents need to wear shorts/ females need to wear t-shirt and shorts

Kitchen Workers

- Requires regular T-Shirt and kitchen issued Shirt/Jacket

Counts

All Units

Formal Counts: During Formal Counts all Residents will be locked in their rooms until count clears. The only exception to this is a medical emergency. Residents must stand at their door for Formal Counts.
Informal Counts: Residents are not locked in their rooms. At the 1400 count only, residents on the Unit will be sent to their Pods so staff may complete shift change duties, inventories, etc.

0600  Formal Count
1050  Formal Count
2100  Formal Count
2200  Formal Count (Do not need to stand)

Discipline:
Residents who fail to stand for formal count, will be given a Minor Misconduct #3, Failure to Follow a Staff Directive or Posted Rule.

Allowable Items

(Residents may be restricted from items on this list due to Safety & Security concerns, Assigned Housing Unit, UTT Recommendation, and Phase & Level)

- Any items not on this list are considered contraband and contraband will be confiscated when found.
- Residents are subject to searches at any time.
- Trading/Sharing/Giving Away items is strictly prohibited.

The following items may be allowed

<table>
<thead>
<tr>
<th>Item</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>State-Issued Property:</strong> All clothing shall be marked with the resident’s name. All unmarked clothing will be confiscated.</td>
<td>3 Pants-3 Polos-3 T-Shirts-1 Sweat Shirt-1 Sweat Pant-1 Sweat Short-3 Underwear</td>
</tr>
<tr>
<td><strong>Small Engines Students:</strong> 1 pair of Bob Barkers for class. (Bob Barkers must stay in class.) 1 -Jumpsuit</td>
<td>Bedding: 3 Blankets (Fall/Spring) 2 Blankets (Summer) 5 Blankets including 1 Wool (Winter)</td>
</tr>
<tr>
<td><strong>JMG Students:</strong> 1-Jumpsuit-Cleaning Crew</td>
<td></td>
</tr>
<tr>
<td><strong>Personal Hygiene Items (Limit of 1 each)</strong></td>
<td>Facility Issued or Canteen Purchased Only-Must be marked w/ resident name. Unmarked items will be confiscated. (This is in place to prevent residents from loosing their hygiene due to theft and/or strong-arming.) Empty hygiene bottles will be confiscated due to potential for misuse. Mixed hygiene products will be confiscated due to potential for poisoning.</td>
</tr>
<tr>
<td>Hat</td>
<td>1 crocheted or issued knit hat and 1 baseball cap</td>
</tr>
<tr>
<td>Legal Documents</td>
<td>Not to include discovery</td>
</tr>
<tr>
<td>Religious Writings</td>
<td>Chaplain’s Discretion</td>
</tr>
<tr>
<td>Religious Necklace (Must be purchased through the canteen and PRIOR approved by the chaplain.) Religious necklaces must be worn inside the shirt.</td>
<td></td>
</tr>
<tr>
<td>Books &amp; Magazines -Personal books are not an allowable item. Books may be checked out from the facility library. Magazines-Individual and approved publications only. Subscriptions, catalogs and junk mail are not allowed.</td>
<td>Combined total of 5 not counting religious books or school books. (School books-GED, Notebooks, Etc. not to be kept in rooms) Residents cannot have mail order club memberships, Facility newspapers are not allowed in resident rooms or pods.</td>
</tr>
<tr>
<td>Medical Items</td>
<td>Medical Department’s Discretion</td>
</tr>
<tr>
<td>Pictures</td>
<td>Limit of 15, No Polaroids, No frames, Must be on photo paper. Size Limit: 5x7”</td>
</tr>
<tr>
<td>Writings, Drawings</td>
<td>Must be Appropriate, Must Fit in Shoebox and/or Folder*</td>
</tr>
</tbody>
</table>
Mail: Residents are not allowed to keep envelopes in their rooms. They may be kept in personal property, if appropriate.

<table>
<thead>
<tr>
<th>Personal Sneakers &amp; Socks</th>
<th>No Steel Toes, Gang Symbols, Lights, or Decorative Metal Pieces on Sneakers allowed. Must also be otherwise appropriate and prior approved by JPM. Limited to once every 90 days. <strong>Socks limited to 5 pair.</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td>Notebook</td>
<td>Limit of 1, No Spirals</td>
</tr>
<tr>
<td>Playing Cards</td>
<td>Limit of 2 Decks-Canteen purchased</td>
</tr>
</tbody>
</table>

*Writings, drawings, sketches and letters must fit in a combined space the size of a shoebox and/or one issued folder. This shoebox or folder must be kept in the fireproof tote that is issued to residents.

The following items **may** be allowed in a resident’s **Personal Property Locker** to be accessed on Pass/Leave, Work Assignments, Job Interviews, or Religious Services.

<table>
<thead>
<tr>
<th>Personal Clothing (1 set)</th>
<th>Appropriate for Weather</th>
</tr>
</thead>
<tbody>
<tr>
<td>Religious Items</td>
<td>Chaplain’s Discretion</td>
</tr>
<tr>
<td>Boots (1 pair)</td>
<td>Per Work Assignment</td>
</tr>
<tr>
<td>Dress Shoes (1 pair)</td>
<td>If Applicable for Court or Job Interviews</td>
</tr>
</tbody>
</table>

“I’m just a little bit not feeling on the well side.”

Medical Services

Residents are given a complete physical examination upon admission to the facility. Medical staff is available 24 hours a day. Our own doctor is available once a week to give physicals to newly committed residents and to see residents who have problems that might need more care. He or his coverage is available to consult by phone after hours as well. Physicians-in-training and nurse practitioners will also participate, under the doctor’s supervision, in providing care to residents. Interns, at times, assist with physicals and with the needs of the female residents. Any resident wishing medical attention must fill out a sick call slip and place it in the sick call box. Sick call is done once a day. Emergency medical/dental services are provided as needed.

Residents are not permitted to have or use medication unless it has been authorized or prescribed by the facility’s Medical Department.

Refusing Medications

Residents must go to Med Call to refuse any medications, if they do, **no** consequences will be imposed. If a resident refuses to go to Med Call to refuse medications, then they will receive consequences (2 U’s) and a notation will be made on the Behavior Card.

After 3 consecutive refusals, the UTT will meet with the Medical Department. The Resident will also be required to meet with the Medical Department for assessment & counseling.

Committed residents shall not be allowed to retain contract lenses. Policy 13.5 Procedure C. 7.

Psychology

Please Note: If you have been a victim of Sexual Abuse, you may report that to any staff in the facility, including psychologists & psychiatrists, whether they work with you or not.

The psychology staff at MVYDC serve to develop an understanding of psychological issues residents may have, and use those understandings to develop treatment plans and goals that will help residents be as successful as possible in the program and in the community.
Psychology staff perform psychological tests to identify strengths or problems a resident may have in intellectual and personality functioning. This testing is done during the first month, in the Assessment and Orientation Unit; to help identify a resident’s needs and develop treatment plans.

Psychology staff also provide psychotherapy, sometimes individually and sometimes in groups, where it is likely to be helpful. Psychology staff are also available to help if a resident has a mental health crisis and is extremely distressed or unable to function, or if some new psychological problem arises during the resident’s stay in the program.

Residents wishing to access additional psychological services should fill out a Request for Services-Information form and give it to their unit Social Worker.

Social Services

Each resident will receive social services from an assigned Social Worker on an individual and group basis. The Social Worker is here to help residents resolve problems and provide support. The Social Worker is also one of the contact persons for families, the Department of Human Services, Juvenile Community Corrections Officers and other providers. The Social Worker is a member of the Unit Treatment Team and will meet with each resident on a regular basis. Residents may ask to meet with the Social Worker at other times by submitting a written request. The Social Worker will be an integral part of planning for community re-integration and necessary services.

Education

The school offers approved classes so that credit towards graduation may be earned and sent to schools the resident may attend once released from this facility. We believe that everyone can learn and that “it is not how smart you are, but how you are smart.” Considering the multi-intelligence factor and learning styles, residents will be engaged in “hands-on” learning activities to prepare them for further education or the work force.

During the first few days at the Mountain View Youth Development Center, each resident will meet with the Director of Special Education who will ask the resident to share information about prior schooling. Each resident will also be asked to sign a release so the records can be sent to the Mountain View Youth Development Center. Residents will be given educational tests to determine where they are academically and how we can help them to learn. Students with special needs will be meeting the Special Education Director and can expect to have a Pupil Evaluation Team meeting shortly after coming to the Mountain View Youth Development Center. Residents may be scheduled for classes before the records arrive, so there may be changes later, based on the school records and the results of testing.

Each resident will have an opportunity to take some vocational classes that will help to determine career interests and skills that will be helpful in the future. We also offer a mountaineering program and other interesting programs to fit the needs of the residents.

Library

All residents may utilize the library to check out books. Residents are expected to handle all materials appropriately and will be held responsible for any damages.

Recreation

Residents will be able to participate in a wide variety of activities. These activities are part of the facilities’ youth development program. Activities take place daily, either during the regular school day or during the evening hours and on weekends. Staff will encourage individual skill development through physical fitness. The programs will be structured and planned by the facility’s Recreation Supervisor who will assure residents an equal opportunity for recreational activities.

Residents on Reception Level are not allowed on the ball field unless it is part of the regular school program. In the event the ball field is used in lieu of regular recreation, an alternate activity will be offered for those residents not eligible to participate. E.g. An equivalent amount of time offered in the courtyard for the residents on Reception.

The Recreation Supervisor and the Juvenile Program Specialist/Workers will ensure that the proper safety procedures are followed at all times and that all equipment is used properly and in its intended manner.

Canteen

- Canteen will be withheld from any resident serving restrictions and is not allowed for residents on Reception Level.
- Swapping or giving of canteen items is strictly prohibited.
• Canteen items can be restricted or denied for medical reasons, as designated by the Medical Staff Office.
• There is no monetary limit on ordering canteen items; however, residents are limited as to the number of items they may order.
• Residents will be allowed canteen outside of scheduled times if they were participating in a scheduled event, meeting, group activity, etc. Residents will be given an opportunity for canteen when they return to the unit.

Hygiene items may be available through canteen and do not count toward the item limit. No resident will be allowed to possess more than one of the same hygiene products.

Orders are placed by Thursday and received the following Wednesday.

**Food Service**

Any Resident that has an issue or would like to ask any questions that pertain to menus or Food Service meals may fill out a request form and send it to the Deputy Superintendent of Support Services. Please respect the process and we will respect your request, and get back with you.

**Volunteer Services**

The Office of Volunteer Services provides many services to residents. It matches both men and women from communities with boys and girls at Mountain View Youth Development Center. The volunteers go through a process of training before being assigned to the facility.

**Tutors:** Tutors are available for residents having trouble with school subjects and/or for those who have gaps in learning. The Principal and the Chief of Volunteer Services can arrange for an experienced tutor to assist a resident.

**Mentors:** Mentors are available to residents and may visit weekly to play games, share hobbies, and assist in other ways. Residents interested in having a Tutor/Mentor should express their interest through the unit Social Worker.

**Other Services:** Residents needing clothing for a Pass/Leave, interview, and/or court, who have no other means of obtaining them, should speak to the unit Social Worker about the clothing room.

**Religious Services**

Religious services are offered to all residents. All program times and Bible class schedules are posted within the facility. Requests for religious services other than those posted, need to be in writing on a request form. The Chaplain is available for one-on-one meeting times during the week, per written request. The Chaplain is also responsible for all religious materials and artifacts. These will be reviewed and distributed per request, and as needed.

**Sanitation & Hygiene**

Residents will be assigned cleaning duties in the unit. Residents are required to shower during scheduled shower times, and maintain a clean and neat appearance while at the facility. Residents will be responsible for doing their own laundry according to their housing unit laundry schedule. Residents may be subject to discipline or other administrative actions for violating rules regarding safety, sanitation, and/or health.

**Haircuts:** Each resident will have the opportunity to receive a free haircut at least once every two months. Additional haircuts can be received at the resident’s expense. Residents need to complete a Request for Haircut form if they want a haircut and will be placed on the list according to the date the request is received. Hair care service times will be posted in each block.

**Razors:** Residents will be issued a razor at a designated time in each unit for personal hygiene, if appropriate. All residents will be supervised while using razors. Each razor must be returned to staff immediately after use, including dull & broken razors. Misuse of a razor and/or loss of a razor will result in loss of razor privileges and further discipline. Males are authorized to shave facial hair (beards, mustache only). Females are authorized to shave under arms and legs only. Razors will be replaced a maximum of once per week.

**Daily Room Inspections:** Resident rooms will be inspected every day for cleanliness and neatness. The resident(s) assigned to the room are responsible for having the room ready for inspection no matter what their status. Resident(s) assigned to the room are responsible for any unauthorized items found.

**Room Inspection Standard**
• Nothing in windows
• Nothing attached to, or hanging from, walls, lights, ceiling, door, fixtures, etc.
  Except personal photos which can hang inside the designated area over the desk.
• Bed made – neat in appearance, not looking for military style (Residents are allowed 3 blankets & 1 set of sheets)
• Clothes/personal items orderly.

All residents are expected to keep their rooms neat and orderly at all times.
This includes cleaning windows & doors, sweeping the floor, keeping the walls, ceiling, bed, desk, etc. free of markings.
Failure to do so will result in a “u” or other discipline, as appropriate, at inspection time. Defacing property will result in further discipline.

**Smoking:** State Law does not permit smoking at the facility.

**General Rules**

Respect the rights of others
No Gang-related/Hate related signs, symbols, graffiti, or clothing are allowed
No actions, pictures, signs, symbols, etc., which promote violence, drugs, and/or disrespect are allowed
No physical contact, other than a handshake, is allowed with other residents and staff
Show respect for and follow the directions of all staff
Treat the building and equipment properly
Keep the rooms clean, neat, and orderly
Maintain personal hygiene
Take part in all required activities
Carry behavior sheets as directed
No communication between units. No waving, talking, or passing notes, including pictures, drawings, or other forms of communications

Residents’ hands will be behind their back when walking outside their housing unit

**Dining Rules**

Each Unit will enter the dining area as a group and leave as a group
Residents should not eat any food or drink before seated
Residents should sit as directed, with no more than 3 residents per table, after receiving their meal
As directed by staff, residents should go quietly to empty trays
Residents should not visit or talk between tables (residents may talk quietly with residents at their own table)
Residents need to get all their items the first time through the line. If they need to return, they must receive permission first
Swapping of food items is not allowed
Proper manners and treatment of food should be demonstrated at all meals
Tampering with the trays of others is unacceptable
No food or utensils are allowed to leave the dining area

**General Housing Area Rules**

(Unit Specific Rules Are Posted in Each Unit)

Get out of bed on first call
Allow other residents to complete their personal hygiene needs without interference
Residents are not allowed in other residents’ rooms
No use of call boxes except in an emergency
No sitting on tables
Residents must stand in front of cell doors during formal counts

**Recreation Rules**

Exhibit good sportsmanship at all times. No inappropriate physical contact related to sporting activity
Treat all equipment with care and do not deliberately misuse or destroy
Leave the gym or recreational area in an orderly fashion and at the designated time
Do not touch or lean on the fence while outside
Movement Rules
You must remain in direct supervision of staff at all times
In moving from one area to another, outside the living area, walk in a single file in an orderly fashion, with hands clasped behind back
During movement, there will be no talking, horseplay, or disruptive behavior. Residents may talk to staff if spoken to.
No running in the hallways

Discipline
Discipline is necessary, not only to maintain control and security, but also to provide a safe, sound, and civilized environment. Disciplinary actions may restrict any activity or privilege. Residents may appeal a Formal Disciplinary Action. Those Appeals must be placed in the Chow Hall Mailbox by the resident within the required time frame. Please address Appeals to the Deputy Superintendent.

Minor & Major Misconduct

Minor Misconduct: Minor misconduct is behavior that is inappropriate but does not create a substantial risk to the safety of the resident or another person or to the security of the facility. The following behavior constitutes minor misconduct:

Failure to Maintain Cleanliness and Neatness of Oneself, Property, or Assigned Area (room, school desk, dining area, activity area, etc.)
Disrespectful Behavior Toward Another Person (name calling, swearing, offensive words or gestures, harassment other than harassment constituting major misconduct, ignoring staff, lying, etc.)
Failure to Follow a Staff Directive or Posted Rule (housing rule, library rule, dining room rule, visitation rule, etc.)
Failure to Conduct Oneself in an Orderly or Courteous Manner (horseplay, running except as part of an approved activity, arguing, loud or obnoxious noise, language, or behavior, etc.)
Unauthorized Physical Touching of Another Person (shoving, poking, grabbing, excessive physical contact during sporting activities, etc.)
Being Out of Place (being late for any program or activity, taking an excessive amount of time to arrive at a destination, etc.)
Damage or Destruction, Misuse, or Unauthorized Possession of Property (damaging or destroying the property not belonging to the resident, using any item in a way in which it was not designed to be used, possession of any property of another party without authorization of facility staff, etc.), of which the cost of Replacement or Repair, including labor, is 50.00 or less.
Violation of Any Facility Procedure Contained in the Resident Handbook (telephone use, correspondence procedures, care of facility issued property, etc.)

Refusal to abide by an Informal Resolution of a prior Misconduct Incident.

(All Violations Include Planning, Attempting, Inciting, or Acting as an Accessory)

Major Misconduct: Major misconduct is behavior that creates a substantial risk to the safety of the resident or another person or to the security of the facility or constitutes a juvenile crime or crime. The following behavior constitutes major misconduct:

Arson or Possession of Any Item that May be Used to Facilitate Arson (match, lighter, explosive, combustible chemical or other combustible material, etc.)
Hiding (concealing oneself or disguising oneself or wearing clothing not issued to the resident by the facility), Touching or Approaching the Security Fence, Escape (escape from the facility, a transport, or an off-grounds activity, or Being Out of Place During a Leave or Pass (leaving the supervision of the sponsor, failing to appear at the approved location, going to a location other than the approved location, or failing to return to the facility at the appointed time)
Use of Machinery, Computer, or Other Equipment Without Authorization or using authorized machinery, computer, or other equipment for an unauthorized purpose.

Possession of Major Contraband—an item prohibited by law (dangerous weapon, tool or other item that may be used to facilitate escape, alcohol, or illegal drugs), tobacco or tobacco related products (match, lighter, pipe, etc.), inhalant, medication, cash, check, money order, or any other legal currency, debit/credit card, telephone calling card, ATM card, or any account number information, or key or keycard or any item that might be used to harm self or another person without authorization of facility staff.

Fighting, Assault or Inflicting Bodily Injury on Others or Threatening any of these or Demonstrating or Practicing Wrestling, Boxing, or Other Martial Arts

Assault with Body Fluid (spitting, excreting, or urinating on or at another person, throwing any body fluid or any fluid appearing to be or stated to be a body fluid on or at another person, or contaminating any item with any body fluid or any fluid appearing to be or stated to be a body fluid)

Sexual Contact (touching of a sexual nature, whether voluntary or involuntary, including kissing or hugging) or Exposure (exposing or fondling one’s genitals, female breasts, or buttocks in the presence of another person)

Damaging or Destruction, Misuse, or Unauthorized Possession of Property damaging or destroying Property not belonging to the resident, using any item in a way in which it was not designed to be used, possession of any property of another party without authorization of facility staff, etc.) of Which The Cost of Replacement or Repair, Including Labor, is More than $50.00.

Dishonesty (stealing, making a false statement, counterfeiting, forgery, cheating, etc.)

Gang-Related Activity or Article (possessing any gang-related article or engaging in any gang-related activity, including the use of a gang gesture or symbol).

Tampering with or Blocking a Safety or Security Device (tampering with, blocking or obtaining control of any security device, including, but not limited to, any locking device, door, fire alarm, smoke alarm, heat sensor, fire sprinkler, security touch screen, radio.) Causing a false alarm or Interfering with a Count or Failing to Obey a Staff Directive During an Emergency or a Critical Incident.

Producing a Positive Drug or Alcohol Test Result Or Refusing to Take a Drug or Alcohol Test (outright refusal, failure to produce an adequate sample, tampering with a sample, failing to follow instructions for producing an uncontaminated sample, etc.)

Mistreatment of an Animal (abuse, harassment, etc.)

Demonstrating (organizing or participating in an unauthorized group demonstration, strike, sit-in, etc.)

Gambling (whether or not involving money and including participation in legal gambling, such as state sponsored lottery games) or Bribery (whether or not involving money)

Violation of State or Federal Juvenile Criminal or Criminal Law

Repeated Minor Misconduct (three or more minor misconduct violations arising out of three different incidents on the same day), if the Juvenile Program Manager or, in the Juvenile Program Manager’s absence, the on-duty Juvenile Facility Operations Supervisor approves designating it as major misconduct

Self-Injurious Behavior (cutting, rubbing, etc.), provided disciplinary intervention is prescribed by the resident’s Unit Treatment Team after consultation with appropriate mental health staff and is outlined in the resident’s case plan or, for a resident without a case plan, disciplinary intervention is deemed appropriate by mental health staff.

Body Piercing or Tattooing
Harassment (harassment by words or gestures of any person that is motivated by the person’s race, color, ethnicity, national origin, religion, creed, gender, sexual orientation, physical or mental disability, or juvenile crime)

Being in another Resident’s room

(All Violations Include Planning, Attempting, Inciting, and Acting as an Accessory)

Consequences for Violations

1. Violations of rules may result in imposition of one or more of the following consequences, the reasons for which shall be explained to the resident prior to being imposed:

   a. Verbal Redirection or Modification: This consists of staff interacting with the resident for the purpose of teaching the resident better alternatives to the behavior the resident just engaged in. This should occur immediately following the observed behavior but should not take place in front of other residents. Verbal Redirection or Modification is not a punishment. A warning may or may not be included as a punishment.

   b. “Unacceptable” Rating on Behavior Card: Staff may record that a resident’s behavior was “unacceptable” during a particular rating period on the resident’s Daily Behavior Card. It is not a punishment.

   c. Writing Assignment: This is not a punishment. A resident may be assigned a writing project which offers an explanation and reflection into the behavior that violated the rule and a plan for alternative acceptable behavior in a similar situation. The writing assignment shall be collected and reviewed by the staff assigning the task. Staff shall give the resident appropriate direction and instruction to ensure completeness and accuracy. An alternative to writing may be assigned for a resident with a learning disability (e.g. a drawing, verbal report, etc.).

   d. Extra Work Duties: A resident may be assigned one or more additional chores above and beyond the resident’s daily assignments.

   e. Monetary or Service Restitution: A resident may be required to pay monetary restitution for the purpose of repairing or replacing property damaged or destroyed by the resident or for the purpose of paying the cost of medical care incurred as a result of the resident’s conduct. If a resident does not have the funds to pay for restitution, the resident may be assigned work projects, preferably relating to the incident, designed to reimburse the facility for costs, including labor and materials.

   f. Specific Activity Restriction: A resident may lose a privilege to engage in one or two specific activities, (depending on whether the violation is a minor or major infraction) preferably relating to the incident. Examples of such activities include, but are not limited to, watching television, group recreation, game playing, computer use, canteen purchase, library use, etc.

   g. Unit Restriction: A resident may be placed on Unit Restriction. Unit Restriction means that when the resident is not participating in normal educational and treatment programs and excluding regular bedtime hours, the resident shall report to the resident’s housing unit for a specified period of time, during which time the resident has lost the privilege of participating in activities outside the unit, other than regularly scheduled visits and meals. Time spent on Time Out or in the Special Management Unit shall not count toward restriction time. The resident shall maintain all the privileges associated with activities taking place in the unit, except that the resident may not play sports or games while in the outdoor recreation area.

   h. Pod Restriction: A resident may be placed on Pod Restriction. Pod Restriction means that when the resident is not participating in normal educational and treatment programs and excluding regular bedtime hours, the resident shall report to the resident’s housing unit pod for a specified period of time, during which time the resident has lost the privilege of participating in activities outside the pod, other than regularly scheduled visits and meals. Time spent on Time Out or in the
Special Management Unit shall not count toward restriction time. The resident shall maintain all the privileges associated with activities taking place in the pod.

i. Room Restriction: A resident may be placed on Room Restriction. Room Restriction means that when the resident is not participating in normal educational and treatment programs and excluding regular bedtime hours, the resident shall report to the resident’s room for a specified period of time, during which time the resident has lost the privilege of participating in activities outside the room, other than regularly scheduled visits and meals. Time spent on Time Out or in the Special Management Unit shall not count toward restriction time. While the resident is on Room Restriction, the door shall be closed and the resident must ask permission of a staff person to exit the room for any reason. If the resident exits the room without staff permission, the door may be locked. Staff shall check the resident a minimum of every 15 minutes while the resident is on Room Restriction.

Residents do not get credit for time served during formal counts or meals or any other administrative room restriction. (Emergency lock down, etc.)

2. Extra Work Duties, Monetary or Service Restitution, Specific Activity Restriction, Unit Restriction, Pod Restriction, and Room Restriction are punishments and may only be imposed pursuant to the resident’s agreement or the formal disciplinary process.

Grievances

Residents may file a Grievance and request an administrative review of policies, actions, decisions, and conditions, which they feel is unfair, violates his/her rights or is in violation of departmental Policies/Procedures without fear of reprisal. (Per DOC Policy 29.1 Grievance Process, General) Cannot grieve informal discipline or U’s.

*Please note: All policies not classified confidential are available in the Library and may be viewed during regularly scheduled library times.

Exceptions: Decisions made by:

1. Classification/UTT
2. Disciplinary Board/Hearings
3. Leave Requests

The resident must use the Appeal Process to request a review of these decisions.

Grievances about Medical or Mental Health Care must follow DOC Policy 29.2 Grievance Process, Medical and Mental Health Care.

If a resident believes they have a Grievance, staff or the Advocate will assist them in filling out the appropriate forms. If the resident does not understand the process, staff or the Advocate will explain it to them.

The resident must follow the Grievance Process; a copy is available for reading in each Housing Unit.

Suspension of the Grievance Process

If the Commissioner of Corrections determines that a Resident is abusing the grievance process and the grievance(s) is frivolous, silly, not serious the Commissioner may suspend the resident’s use of the grievance process for up to 90 days. When the Commissioner suspends the resident’s grievance privilege, the resident will be notified in writing.

False Statements

If a resident knowingly makes a false statement in a grievance, appeal, or other official report, disciplinary action may be taken against the resident including criminal prosecution.
Emergency Procedures

In the event of a fire or other emergency, it is extremely important that you follow all staff directives and remain silent. Familiarize yourself with the evacuation plans in each housing area.

Facility Policies

Copies of NON-Confidential Policies are available in the Facility Library

Court Ordered Restitution/Fines

For residents with court ordered restitution and/or fines the MVYDC Business Office shall deduct 25% of money received by the resident from any source. Deductions shall be made on a single docket number, one at a time, commencing with the oldest.

Facility Restitution may be imposed for the purpose of replacing or repairing property destroyed or damaged by a juvenile, or for the purpose of paying the cost of medical care incurred as a result of a juvenile, while the juvenile is at MVYDC. Juveniles will be notified as part of the disciplinary process. 25% of any funds a juvenile receives will be deducted toward payment.

Office of Advocacy

As of February 1, 2009 the Office of Advocacy has been eliminated from the budget and there is no longer the ability to contact an internal advocate to address your concerns.

In order to address your concerns you have the ability to address them with appropriate staff at your facility, grieve the issue through the grievance process or contact a number of outside advocacy agencies or attorneys appropriate to the issue you have raised. Issues dealing with the disciplinary or the classification process have their own built in appeal mechanisms that you should utilize if it falls into this area.

Issues dealing with Americans with Disabilities Act compliance will be temporarily forwarded to a staff person here at Central Office until such time as a permanent compliance officer can be designated and trained.

Please contact your caseworker or correctional care and treatment worker to assist you in obtaining any necessary addresses for outside advocacy agencies or attorneys.

Out of Program Placement- held on unit

General Information:

- Residents are not allowed to bring anything to OPP, nor should staff bring anything for them. (Exception: School assignments in the area or those provided by the teacher.)

- Residents in OPP for refusing to attend school/programs will be seated at a table to complete assignments, as behavior allows.

- Residents who have been removed from school/programs will be seated at a table in the day area.
- Residents who cannot attend school due to no fault of their own will be taken to the library/study hall under Educational Supervision or will remain on the unit.

- Residents must attend school or work assignment unless excused by the JPM/JPS or Medical

- If a JMG resident refuses their work assignment, they will be placed in OPP and treated as a resident who has refused to attend school. (See below) The exception is that they will not go to PM classes.
Resident refuses to attend school:

- Unit staff will give the resident a directive to attend school, if the resident refuses, unit staff shall issue a minor misconduct for failure to obey a staff directive. Resident will then be considered on OPP status.

- When on OPP status, OPP staff will give the resident a directive to complete school work or cleaning, if the resident refuses, OPP staff shall issue a minor misconduct for failure to obey a staff directive.

Resident removed from class:

- Use of Time-Out will be encouraged to manage inappropriate behavior. If the behavior escalates to a point where the resident must be removed from class, the teacher will complete a misconduct (minor or major depending on infraction) form prior to leaving work. The teacher shall notify the principal in each case.

- When/if the resident regains control, as determined by JPM, JFOS, Principal, or JPS, he or she will be taken back to class and/or programming.

Discipline/Consequence information:

- Residents will be issued a minor misconduct for each refusal to attend school (a possible of two (2) minor misconducts per period.) School consists of four (4) periods per day. (8:00am-9:15am/9:30am-10:50am/12:30pm-1:45pm-3:00pm)

- For each minor misconduct written, the resident will loose 1 privilege for up to 2 days. (This does not require the resident’s agreement.) I.e. loss of recreation, loss of canteen, etc.

- Recreation is defined as: Gym, Activity Room, Weight Room, Ball Field, Movies, Library, and any other scheduled activity outside of the unit.