

**I. ENVIRONMENTAL HEALTH EVALUATION**  
**Juvenile Halls, Special Purpose Juvenile Halls and Camps**

FACILITY NAME: Alameda County Juvenile Justice Center		COUNTY: Alameda	
FACILITY ADDRESS (STREET, CITY, ZIP CODE, TELEPHONE): 2500 Fairmont Drive, San Leandro, CA, 94578, (510)667-4970			
CHECK THE FACILITY TYPE AS DEFINED IN TITLE 15, SECTION 1302:	JUVENILE HALL <input checked="" type="checkbox"/>	SPECIAL PURPOSE JUVENILE HALL <input type="checkbox"/>	CAMP <input type="checkbox"/>
ENVIRONMENTAL HEALTH EVALUATION		DATE INSPECTED: 7/19/2017	
		DEFICIENCIES OR NON COMPLIANCE ISSUES NOTED: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
ENVIRONMENTAL HEALTH EVALUATORS (NAME, TITLE, TELEPHONE): Jason Beebe, Registered Environmental Health Specialist (510) 567-6711			
FACILITY STAFF INTERVIEWED (NAME, TITLE, TELEPHONE): Raymond Nickaloff, Food and Support Services Manager (510) 667-7463			

**Purpose**

Pursuant to Title 15, California Code of Regulations, Article 2, Section 1313, Subsection (c) "On an annual basis, or as otherwise required by law, each juvenile facility administrator shall obtain a documented inspection and evaluation from the local health officer, inspection in accordance with Health and Safety Code Section 101045."

Per California Health and Safety Code 101045, the county health officer shall annually investigate health and sanitary conditions in every operated detention facility in the county. He or she may make additional investigations of any county jail or other detention facility of the county as he or she determines necessary. He or she shall submit a report to the Board of State and Community Corrections (BSCC), to the person in charge of the detention facility and to the County Board of Supervisors.

**Instructions**

To complete the evaluation, assess each element listed and document the findings on the checklist. Columns in the checklist identify compliance as "Yes," "No" or "N/A" (not applicable). If the evaluator assessing the Environmental Health of the facility "checks" a column to indicate that a facility is either out of compliance with all or part of a regulation or indicates that all or part of a regulation is not applicable, a brief explanation is required in the comments section. This explanation is critical. It assists both the BSCC and facility staff in understanding the rationale for the decision and highlights what needs correction.

Evaluators may elect to assess areas that are not covered by the inspection checklists. If this is done, the additional issues must be clearly delineated on a separate sheet to maintain their distinction from the BSCC's Title 15 checklist. For information purposes, this additional sheet should be attached and distributed with the checklist.

Checklists and regulations are available on the BSCC website ([http://www.bscc.ca.gov/s\\_fsresources](http://www.bscc.ca.gov/s_fsresources)). Please contact the BSCC Field Representative assigned to your county at the number below or through e-mail access on the web site.

Board of State and Community Corrections; FSO Division  
 2590 Venture Oaks Way, Suite 200, Sacramento, CA 95833  
 Phone: 916-445-5073; <http://www.bscc.ca.gov/>

**ENVIRONMENTAL HEALTH EVALUATION**

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
<b>Article 9. Food</b>				
<p><b>1464 Food Services Plan</b>                      Facilities shall have a written site specific food service plan that shall comply with the applicable California Retail Food Code (Cal Code). In facilities with an average daily population of 50 or more, there shall be employed or available, a trained and experienced food services manager to prepare a written food service plan. In facilities of less than an average daily population of 50, that do not employ or have a food services manager available, the facility administrator shall prepare a written food service plan.</p> <p>The plan includes, but is not limited to the following policies and procedures: menu planning; purchasing; storage and inventory control; food preparation; food serving; transporting food; orientation and on-going training; personnel supervision; budgets and food costs accounting; documentation and record keeping; emergency feeding plan; waste management; and, maintenance and repair.</p>				<p>The Nutrition Inspector retains primary responsibility to determine compliance with Section 1464. Compliance should be assessed in consultation with the Environmental Health Inspector so that the findings on the Nutritional Health Evaluation reflect the observations, expertise and consensus of both parties. The text of the regulation is provided here for reference only.</p>
<p><b>1465 Food Handlers Education and Monitoring</b>                      The facility administrator, in cooperation with the food services manager, shall develop and implement written policies and procedures to ensure that supervisory staff and food handlers receive ongoing training in safe food handling techniques, including personal hygiene, in accordance with § 113947 of the Health and Safety Code, Cal Code.</p> <p>The procedures shall include provisions for monitoring compliance that ensure appropriate food handling and personal hygiene requirements.</p>	X			<p>The Environmental Health Inspector retains primary responsibility to determine compliance with Section 1465. Compliance should be assessed in consultation with the Nutrition Inspector so that the findings on the Environmental Health Evaluation reflect the observations, expertise and consensus of both parties.</p>
<p><b>1466 Kitchen Facilities, Sanitation, and Food Storage</b>                      Kitchen facilities, sanitation, and food preparation, service, and storage shall comply with standards set forth in Health and Safety Code, Division 104, Part 7, Chapters 1-13, §113700 et seq. Cal Code.</p> <p>In facilities where youth prepare meals for self-consumption or where frozen meals or pre-prepared food from other permitted food facilities (see Health and Safety Code § 114381) are (re)heated and served, the following applicable Cal Code standards may be waived by the local health officer: <i>(Note: While the regulation uses the word "waived," the intent is that the inspector exercises professional latitude to approve alternative methods that provide for food safety and sanitation.)</i></p>	X			<p>The Environmental Health Inspector retains primary responsibility to determine compliance with Section 1466. Compliance should be assessed in consultation with the Nutrition Inspector so that the findings on the Environmental Health Evaluation reflect the observations, expertise and consensus of both parties.</p>
(a) HSC § 114130-114141;	X			
(b) HSC § 114099.6, 114095-114099.5, 114101-114109, 114123, and 114125;	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
(c) HSC § 114149-114149.3 except that, regardless of such a waiver, the facility shall provide mechanical ventilation sufficient to remove gases, odors, steam, heat, grease, vapors and smoke from the kitchen;	X			
(d) HSC § 114268-114269; and,	X			
(e) HSC § 114279-114282.	X			
<b>1467 Food Serving and Supervision</b> Policies and site specific procedures shall be developed and implemented to ensure that appropriate work assignments are made and food handlers are adequately supervised. Food shall be prepared and served only under the immediate supervision of a staff member.	X			The Environmental Health Inspector retains primary responsibility to determine compliance with Section 1467. Compliance should be assessed in consultation with the Nutrition Inspector so that the findings on the Environmental Health Evaluation reflect the observations, expertise and consensus of both parties.
<b>Article 10. Clothing and Personal Hygiene</b>				
<b>1480 Standard Facility Clothing Issue</b> The youth's personal clothing, undergarments and footwear may be substituted for the institutional clothing and footwear specified in this regulation. The facility has the primary responsibility to provided clothing and footwear. Clothing provisions ensure that:	X			
(a) clothing is clean, reasonably fitted, durable, easily laundered, and in good repair; and,	X			
(b) the standard issue of climatically suitable clothing for youth consist of but not be limited to:	X			
(1) socks and serviceable footwear;	X			
(2) outer garments; and,	X			
(3) undergarments, are freshly laundered and free of stains, including shorts and tee shirt for males; and, bra and panties for females.	X			
(c) clothing is laundered at the temperature required by local ordinances for commercial laundries and dried completely in a mechanical dryer or other laundry method approved by the local health officer.	X			
<b>1481 Special Clothing</b> Provision shall be made to issue suitable additional clothing essential for minors to perform special work assignments where the issue of regular clothing would be unsanitary or inappropriate.	X			
<b>1482 Clothing Exchange</b> The facility administrator shall develop and implement written policies and site specific procedures for the cleaning and schedule exchange of clothing.	X			
Unless work, climatic conditions or illness necessitates more frequent exchange, outer garments, except footwear, shall be exchanged at least once each week. Undergarments and socks shall be exchanged daily.	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
<b>1483 Clothing, Bedding and Linen Supply</b> There shall be a quantity of clothing, bedding, and linen available for actual and replacement needs of the facility population. Each facility shall have a written procedure for acquisition, handling, storage, transportation and processing of clothing, bedding and linen in a clean and sanitary manner.	X			
<b>1484 Control of Vermin in Minors' Personal Clothing</b> There shall be written policies and site specific procedures developed and implemented by the facility administrator to control the contamination and/or spread of vermin in all youths' personal clothing.	X			
Infested clothing shall be cleaned or stored in a closed container so as to eradicate or stop the spread of the vermin.	X			
<b>1485 Issue of Personal Care Items</b> There shall be written policies and site specific procedures developed and implemented by the facility administrator for the availability of personal hygiene items.	X			
Each female youth shall be provided with sanitary napkins and/or tampons as needed.	X			
Each youth to be held over 24 hours shall be provided with the following personal care items:	X			
(a) toothbrush;	X			
(b) dentifrice;	X			
(c) soap;	X			
(d) comb; and,	X			
(e) shaving implements.	X			
Youth shall not be required to share any personal care items listed in items (a) through (d). Liquid soap provided through a common dispenser is permitted.	X			
Youth shall not share disposable razors. Double edged safety razors, electric razors, and other shaving instruments capable of breaking the skin, when shared among youth, shall be disinfected between individual uses by the method prescribed by the State Board of Barbering and Cosmetology in Sections 979 and 980, Chapter 9, Title 16, CCR.	X			
<b>1486 Personal Hygiene</b> There shall be written policies and site specific procedures developed and implemented by the facility administrator for showering/bathing and brushing of teeth.	X			
Youth shall be permitted to shower/bathe upon assignment to a housing unit and on a daily basis thereafter and given an opportunity to brush their teeth after each meal.	X			
<b>1487 Shaving</b> Male youth shall be allowed to shave their faces daily, unless their appearance must be maintained for reasons of identification in Court. Female youth shall be allowed to shave their underarms and legs once per week. The facility administrator may suspend this requirement in relation to youth who are considered to be a danger to themselves or others.	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
<b>1488 Hair Care Services</b> Written policies and site specific procedures shall be developed and implemented by the facility administrator to comply with Title 16, Chapter 9, Sections 979 and 980, CCR. Hair care services shall be available in all juvenile facilities. Youth shall receive hair care services monthly.	X			
Equipment shall be cleaned and disinfected after each haircut or procedure, by a method approved by the State Board of Barbering and Cosmetology.	X			
<b>Article 11. Bedding and Linens</b>				
<b>1500 Standard Bedding and Linen Issue</b> Clean laundered, suitable bedding and linens, in good repair, shall be provided for each minor entering a living area who is expected to remain overnight, shall include, but not be limited to:	X			
(a) one mattress or mattress-pillow combination which meets the requirements of Title 15 § 1502;	X			
(b) one pillow and a pillow case unless provided for in (a) above;	X			
(c) one mattress cover and a sheet or two sheets;	X			
(d) one towel; and,	X			
(e) one blanket or more depending upon climatic conditions.	X			
<b>1501 Bedding and Linen Exchange</b> The facility administrator shall develop and implement site specific written policies and procedures for the scheduled exchange of laundered bedding and linen issued to each youth housed.	X			
Washable items such as sheets, mattress covers, pillowcases and towels shall be exchanged for a clean replacement at least once each week.	X			
The covering blanket shall be cleaned or laundered once a month.	X			
<b>1502 Mattresses</b> Any mattress issued to a youth in any facility shall conform to the size of the bed as referenced in Title 24, Section 1230.2.5 and be enclosed in an easily cleaned, non-absorbent ticking.	X			Mattresses with tears or paint on them were found in the following rooms and have been replaced: Unit 1 rooms 1,4,16,18,21. Unit 2 room 20, Unit 3 room 3 and 26, Unit 4 room 25, Unit 5 room 28, Unit 6 room 9, Unit 8 room 9, Unit 10 room 9.
Any mattress purchased for issue to a youth in a facility, which is locked to prevent unimpeded access to the outdoors, shall be certified by the manufacturer as meeting all requirements of the State Fire Marshal and Bureau of Home Furnishings test standard for penal mattresses at the time of purchase.	X			
<b>Article 12. Facility Sanitation and Safety</b>				
<b>1510 Facility Sanitation, Safety and Maintenance</b> The facility administrator shall develop and implement written policies and site specific procedures for the maintenance of an acceptable level of cleanliness, repair and safety throughout the facility.	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
The plan shall provide for a regular schedule of housekeeping tasks, equipment, including restraint devices, and physical plant maintenance, and inspections to identify and correct unsanitary or unsafe conditions or work practices in a timely manner.	X			
Medical care housing as described in Title 24, Part 1 § 13-201(c)6 shall be cleaned and sanitized according to policies and procedures as established by the health administrator.	X			
<b>1511 Smoke Free Environment</b> The facility administrator shall develop policies and procedures to assure that State laws prohibiting minors from smoking are enforced in all juvenile facilities, related work details, and other programs. Policies and procedures shall assure that minors are not exposed to second-hand smoke while in the facility or in the custody of staff.	X			
<b>Other Applicable Codes</b>				
<b>Title 24, Uniform Building Code</b> Toilet bowls, wash basins, drinking fountains, and showers are clean and in good repair.	X			Unit 1 room 16 had dirty toilet, Unit 2 room 27 dirty toilet, Unit 5 rooms 28 dirty toilet and room 29 dirty and inoperable toilet. All cleaned and functional.
<b>Title 24, Uniform Building Code</b> Floors, walls, windows, grillwork and ceilings are clean and in good repair.	X			The following units had showers with missing or dirty grout. Units 1.2.4.5 and 6. All Cleaned and regouted. The following Units had peeling paint in the showers: 1 and 4. They have been repainted. A few rooms had toothpaste on the light fixtures. They have been cleaned. Several room windows have degraded seals. These will be replaced as part of the window privacy project scheduled this fiscal year. Graffiti is removed on a regular basis.
<b>Title 24, Part 1, 13-201(c)6</b> There is provision for a comfortable living environment in accordance with the heating, ventilating, and air conditioning requirements of Parts 2 and 4 and energy conservation requirements, of Part 6, Title 24, CCR.	X			
<b>Title 24, Uniform Plumbing Code</b> Floor drains are flushed at least weekly.	X			
Traps contain water to prevent escape of sewer gas.	X			
Grids and grates are present.	X			
<b>CA Safe Drinking Water Act</b> Potable water is supplied from an approved source in satisfactory compliance with this Act.	X			
<b>Local Ordinances</b> Solid, toxic and infectious wastes are disposed of in accordance with state and local laws and regulations.	X			
<b>HSC and CCR Titles 22 and 24 Relating to Public Pools</b> Swimming pools are designed, constructed, operated, and maintained in accordance with state and local laws and regulations			X	No pool
<b>Health and Safety Code, § 1803 and 2271</b> (Farms, petting zoos, etc.) All animal operations are removed from the immediate living area, designed, constructed, and maintained to minimize odor, vermin, and physical hazards.			X	No farms etc.
The facility is free of vermin (or vermin signs), and general housekeeping is satisfactory.	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
General Industry Safety Order, Title 8-3362 The facility is free of structural and other safety hazards.	X			

**Summary of environmental evaluation:**

Revolution Foods prepares the meals off site. Food temperatures are taken leaving their facility and upon arrival at JJC. A log is maintained. Hot water is available in the kitchen (measured in excess of 120 degrees F at the 3 compartment sink). Cold cuts and milk in the walk in cooler measured 38 and 37 F respectively. No temperature violations were found at the facility. Kidango provides special diet meals to the facility and similar practices are followed.

The kitchen was clean and organized. The staff washes hand and wears gloves as required. Meals are sent from the kitchen to the units for service to the population. A meal was probed after rethermalization and it measured 181 F. Refrigerators store milk and fruit in the units and all were maintaining the food at or below 41 F. A mechanical dish washer is used and reached 180 F during the final rinse cycle. The Kitchen staff is well trained and the managers have Manager Food Safety Certificates.

**Units:**

There are 12 Units each with approximately 26 rooms. Shower stalls with closing doors are located on each of the two floors within each unit. The common area is open and an exercise area is provided adjacent to each unit. The rooms each have flushing toilets and sinks with hot and cold running water. The beds are one or two to a room, but staff indicated that sharing of rooms is rare due to low population levels. The beds consist of smooth molded surfaces and each has a plastic covered mattress. Linens are provided and exchanged weekly or when soiled. Each room also has its own air exchange vents that are linked to the unit's heating and air conditioning system.

**Camp Sweeney:**

Camp Sweeney has one story buildings with residents sleeping in on large room. Beds are fixed in position and mattresses and bedding are provided similar to the main facility. There are common restroom and shower facilities within the same building. The kitchen does not prepare food, but receives prepackaged meals from the main kitchen and reheats them (similar to the process in the main facility units.) Hot water 120 F was available in the kitchen and the walk in cooler was keeping foods at proper temperatures. (milk at 35 F.)

**Problems/issues:**

**Kitchen:**

No sanitizer test strips were available. Corrected

**Units:**

Unit 1 Showers had soap residue and peeling paint. Cleaned and repainted.

Room 4 Loose handle and dirty wall. Handle repaired and wall painted.

Room 26 Dirty back window. Window cleaned.

Unit 2 Shower grout dirty or missing. Regouted and cleaned.

Room 23 Crack at bed bench/wall junction. Resealed.

Room 26 Cracked window. Replaced.

Room 27 Dirty toilet area. Cleaned.

Unit 3 Hair sprayer nozzle broken. Nozzle replaced.

Shower has residue on partition. Partition cleaned.

Shower grout dirty/ missing. Shower regouted.

Room 3 Dirty room. Room Cleaned.

Room 30 tear in mattress. Replaced.

Unit 4 Paint peeling on stair railing. Repainted railing.

Showers dirty/ grout missing. Showers regouted and cleaned.

Room 25 Mattress tear. Mattress replaced.



Unit 5 Showers dirty/ missing grout. Showers cleaned and regouted.

Unit 6 Showers grout missing/ dirty. Showers regouted and cleaned.

Units 7- 12 no issues.

Many rooms have windows with degraded seals. The windows are to be replaced as part of privacy project to be completed this fiscal year.

Graffiti is removed as it occurs.

All mattresses with tears or paint on them have been replaced.

#### Camp Sweeney:

Observed one dried mouse dropping in storage room on the floor. Dropping removed, floor cleaned and sanitized and pest control measures in place.

Observed ventilation hood filter move out of position when hood was turned on. Corrected.

Observed drain lines for ice machine and food prep sink extending into floor sink. Air gap provided.

Observed floor drain in storage area with hole in it. Replaced floor drain.

Observed gaps around doors to kitchen . Gaps closed to exclude vermin.

#### Intake:

Shower room, toilet flush button had broken tile around it. Replaced and sealed tile.

Followup inspections were conducted on July 20<sup>th</sup> and 26<sup>th</sup> 2017 to verify corrected items. (see attached reports)



County of Alameda  
 Department of Environmental Health  
 1131 Harbor Bay Parkway, Suite 200  
 Alameda, CA 94502-6577  
 510-567-6700 http://www.acgov.org/aeeh

# OFFICIAL RETAIL FOOD INSPECTION REPORT

Date: 7/19/17  
 Time In: 8:30 AM  
 Time Out: 4:00 PM  
 Page 1 of 7

Facility Name: Alameda County Juvenile Justice Center Address: 2500 Fairmont Drive City: San Leandro CT: 305

Permit #: 0307990 Exp Date: 3/13/18 PR: 0506723 SR: \_\_\_\_\_ CO: \_\_\_\_\_ Inspection Type

Permit Holder: \_\_\_\_\_ Food Safety Cert Name: Renee Burrell Exp Date: 2/12/19 R FBI Inv FU C/O  
Const Consult

Major violations pose threats to public health and must be corrected immediately. Non-compliance may warrant closure of the facility.

CDC RISK FACTORS	OUT	PTS	-PTS	APPROVED RETAIL PRACTICES	OUT	PTS	-PTS
<b>Demonstration of Knowledge</b>				<b>Supervision</b>			
1. Demonstration of food safety knowledge		2		24. Person in Charge present & performs duties		1	
<b>Employee Health &amp; Hygienic Practices</b>				<b>Personal Cleanliness</b>			
2. Compliance w/ Communicable disease procedures		4		25. Personal cleanliness & hair restraints		1	
3. No discharge from eyes, nose & mouth		2		<b>General Food Safety Requirements</b>			
4. Proper eating, tasting, drinking or tobacco use		2		26. Approved thawing methods used, frozen food		1	
5. Hands clean and properly washed; gloves used properly; RTE food handling		4		27. Food separated and protected		1	
6. Adequate handwashing facilities supplied & accessible		2		28. Washing fruits and vegetables		1	
<b>Time &amp; Temperature Relationships</b>				29. Toxic substances properly identified, stored, used		1	
7. Proper hot and cold holding temperatures		4/2		<b>Food Storage/Display/Service</b>			
8. Time as a public health control; procedures/ records		4/2		30. Food storage; food storage containers labeled		1	
9. Proper cooling methods		4		31. Consumer self-service		1	
10. Proper cooking time & temperatures		4		32. Food properly labeled & honestly presented		1	
11. Proper reheating procedures for hot holding		4		<b>Equipment/Utensils/Linens</b>			
<b>Protection from Contamination</b>				33. Nonfood contact surfaces clean		1	
12. Returned and reservice of food		2		34. Warewashing facilities: installed, maintained, used; testing devices	✓	1	-1
13. Food in good condition, safe and unadulterated		4/2		35. Equipment/Utensils ANSI approved		1	
14. Food contact surfaces: clean and sanitized		4/2		36. Equipment, utensils and linens: storage & use		1	
<b>Food from Approved Sources</b>				37. Vending machines maintained		1	
15. Food obtained from approved source		4		38. Approved & adequate ventilation and lighting	✓	1	-1
16. Compliance with shell stock tags, condition, display		2		39. Food thermometers provided and accurate		1	
17. Compliance with Gulf Oyster Regulations		2		40. Wiping cloths: properly used and stored		1	
<b>Conformance with Approved Procedures</b>				<b>Physical Facilities</b>			
18. Compliance with variance, specialized process & HACCP Plan		2		41. Plumbing: proper backflow devices	✓	1	-1
<b>Consumer Advisory</b>				42. Garbage and refuse properly disposed; facilities maintained		1	
19. Consumer advisory for raw undercooked foods and foods with 1/2 of 1% alcohol		2		43. Toilet facilities cleaned, supplied, maintained		1	
<b>Highly Susceptible Populations</b>				44. Premises; personal/cleaning items; vermin-proofing	✓	1	-1
20. Licensed health care facilities; public & private schools; prohibited foods not offered		4		<b>Permanent Food Facilities</b>			
<b>Water/ Hot Water</b>				45. Floor, walls and ceilings are maintained and clean		1	
21. Hot and cold water available <u>120</u> Temp		4/2		46. No living or sleeping quarters inside facility		1	
<b>Liquid Waste Disposal</b>				<b>Signs/ Requirements</b>			
22. Sewage and wastewater properly disposed		4/2		47. Signs and permits posted; last inspection reports and food safety certificates available		1	
<b>Vermin</b>				<b>Compliance &amp; Enforcement</b>			
23. No rodents, insects, birds, or animals	✓	4/2	-2	48. Compliance with plan review requirements		1	
				49. Facility operating with valid permit		1	

Received by: Ray Nicholas

EHS: Juan B...

County of Alameda  
 Department of Environmental Health  
 1131 Harbor Bay Parkway, Suite 200  
 Alameda, Ca 94502-6577  
 510-567-6700  
 http://www.acgov.org/acch

# OFFICIAL RETAIL FOOD INSPECTION REPORT

Date: 7.19.17  
 Time In: 8:30 AM  
 Time Out: 4 PM  
 Page 2 of 7

Facility Name: Alameda County JJC Address: 2500 Fairmont Dr City: San Leandro CT: 305

All violations of the California Health & Safety Code as listed on this report must be corrected. *Major violations must be corrected immediately. Non-compliance may warrant immediate closure of the food facility.* See reverse sides of this inspection report form for code sections that correspond to each violation.  
Main kitchen

**TEMPERATURE CONTROL**-Documentation is required for all food facilities with PHF (Potentially Hazardous Foods)  No PHF

Food Item	Temp (°F)	Temp Violation (✓)	Process/Holding Location	Food Discarded (Amount)	Food Item	Temp (°F)	Temp Violation (✓)	Process/Holding Location	Food Discarded (Amount)
Cold cuts	38		Walkin						
milk	37		Walkin						
Victoria Iceing	31		Freezer						
Ice cream	-5		Freezer						

**OBSERVATIONS AND CORRECTIVE ACTIONS**

**(34)** No Quaternary Ammonium test strips available  
 Provide 'Quat' test strips (Corrected)

JB.

**ACTIONS/STATUS**

50. Food/Equipment Impounded or VCD (1)   
 51. Permit Suspension / Require Closure (1)  
 Inspection Report Total Score 99/100  
GREEN  
 Follow-Up Inspection Date Next Routine

The Person-In-Charge (PIC) is responsible for maintaining this food facility in compliance with all applicable sections of the California Health & Safety Code.

Received by (Sign): Ray Nickatoff  
 Name & Title (Print): RAY NICKATOFF  
 EHS: Juan Barber  
 Phone: (510) 567-6711

County of Alameda  
 Department of Environmental Health  
 1131 Harbor Bay Parkway, Suite 200  
 Alameda, Ca 94502-6577  
 510-567-6700  
 http://www.acgov.org/aech

# OFFICIAL RETAIL FOOD INSPECTION REPORT

Date: 7/19/17  
 Time In: 8:30 AM  
 Time Out: 4 PM  
 Page 3 of 7

Facility Name: Alameda County JIC Address: 2500 Fairmont Dr. City: San Leandro CT: 305

All violations of the California Health & Safety Code as listed on this report must be corrected. Major violations must be corrected *immediately*. Non-compliance may warrant immediate closure of the food facility. See reverse sides of this inspection report form for code sections that correspond to each violation.

Camp Sweeney

TEMPERATURE CONTROL-Documentation is required for all food facilities with PHF (Potentially Hazardous Foods)  No PHF

Food Item	Temp (°F)	Temp Violation (✓)	Process/Holding Location	Food Discarded (Amount)	Food Item	Temp (°F)	Temp Violation (✓)	Process/Holding Location	Food Discarded (Amount)
<u>milk</u>	<u>35</u>		<u>Walker</u>						
<u>Burgers</u>	<u>39</u>		<u>Walker</u>						
<u>food meal</u>	<u>170</u>		<u>Diner</u>						

J.B.

OBSERVATIONS AND CORRECTIVE ACTIONS

- 23 Observed one dried mouse dropping in storage room on floor. Clean floor + continue pest control. (Corrected)
- 38 Observed ventilation hood filter move out of position when hood is turned on. Adjust fan speed to pull out air without moving filters.
- 41 observed drain lines for ice machine and food prep sink extending into floor sink. Adjust drain lines to terminate at least 1 inch above the rim of the floor sink to provide an air gap.
- 44 Observed floor drain in storage area with hole in it. Replace floor drain cover + secure.
- 44 Observed gaps around doors to kitchen at camp sweeney. Install weather stripping to exclude vermin.

ACTIONS/STATUS

- 50. Food/Equipment Impounded or VCD (1)
- 51. Permit Suspension / Require Closure (1)

Inspection Report Total Score 95/100  
GREEN

Follow-Up Inspection Date Next Month

The Person-In-Charge (PIC) is responsible for maintaining this food facility in compliance with all applicable sections of the California Health & Safety Code.

Received by (Sign): Roy Nikoloff  
 Name & Title (Print): RAY NIKOLOFF  
 EHS: Jean Paul  
 Phone: (510) 567-6711

County of Alameda  
 Department of Environmental Health  
 1131 Harbor Bay Parkway, Suite 200  
 Alameda, Ca 94502-6577  
 510-567-6700  
 http://www.aecgov.org/aceh

# OFFICIAL RETAIL FOOD INSPECTION REPORT

Date: 7-19-17  
 Time In: 8:30  
 Time Out: 9 PM  
 Page 5 of 7

Facility Name: Alameda County Jail Address: 2500 Fairmont Dr City: San Leandro CA 94688

All violations of the California Health & Safety Code as listed on this report must be corrected. Major violations must be corrected immediately. Non-compliance may warrant immediate closure of the food facility. See reverse sides of this inspection report form for code sections that correspond to each violation.

TEMPERATURE CONTROL-Documentation is required for all food facilities with PHF (Potentially Hazardous Foods)  No PHF

Food Item	Temp (°F)	Temp Violation (Y)	Process/Holding Location	Food Discarded (Amount)	Food Item	Temp (°F)	Temp Violation (Y)	Process/Holding Location	Food Discarded (Amount)
Milk	29		Unit 2		Milk	38		Unit 3	
Milk	26		Unit 3		Milk	32		Unit 6	
Milk			Unit 4		Eggs	30		Unit 7	

### OBSERVATIONS AND CORRECTIVE ACTIONS

Units:

Unit 1: Observed residue on shower partitions clean partitions  
 Observed soap residue on floor of lower level shower. Clean floor in shower.  
 Lower level shower has peeling paint. Repair shower

Room #1 mattress has paint - replace mattress  
 #4 mattress peeling replace mattress  
 #4 door handle loose. Secure door handle  
 #4 Dirty wall - clean wall,  
 #16 Toilet dirty - clean toilet #16 Replace mattress  
 #21 Paint on mattress - replace mattress  
 #18 Paint on mattress Replace mattress.  
 #26 Clean back window  
 18, 30, 29, 28 & 4 NO ISSUES

Unit 2: Observed graffiti on showers - Clean Showers.  
 Window seals on all room doors are degraded. Replace seals or windows.  
 Rm #20 mattress tear. Replace mattress.  
 #23 seal caulking on bed bench,  
 clean walls, remove toothpaste from light.

### ACTIONS/STATUS

50. Food/Equipment Impounded or VCD (1)   
 51. Permit Suspension / Require Closure (1)   
 Inspection Report Total Score \_\_\_\_\_  
 Follow-Up Inspection Date \_\_\_\_\_

The Person-In-Charge (PIC) is responsible for maintaining this food facility in compliance with all applicable sections of the California Health & Safety Code.

Received by (Sign): Ray Nickaloff  
 Name & Title (Print): RAY NICKALOFF  
 EHS: Jean Bel  
 Phone: (510) 567-6711

County of Alameda  
 Department of Environmental Health  
 1131 Harbor Bay Parkway, Suite 200  
 Alameda, Ca 94502-6577  
 510-567-6700  
 http://www.aegov.org/uceh

# OFFICIAL RETAIL FOOD INSPECTION REPORT

Date: 7.19.17  
 Time In: 8:30 AM  
 Time Out: 3:00 PM  
 Page 5 of 7

Facility Name: Alameda Co JTC Address: 2500 Fairmount Dr City: San Leandro CT: 305

All violations of the California Health & Safety Code as listed on this report must be corrected. Major violations must be corrected immediately. Non-compliance may warrant immediate closure of the food facility. See reverse sides of this inspection report form for code sections that correspond to each violation.

TEMPERATURE CONTROL-Documentation is required for all food facilities with PHF (Potentially Hazardous Foods)  No PHF

Food Item	Temp (°F)	Temp Violation (✓)	Process/Holding Location	Food Discarded (Amount)	Food Item	Temp (°F)	Temp Violation (✓)	Process/Holding Location	Food Discarded (Amount)

### OBSERVATIONS AND CORRECTIVE ACTIONS

Unit 2 (cont):  
#25 Dirty wall went to bed. Clean wall  
#26 Dirty walls - clean walls  
#26 Cracked glass. Replace door glass.  
#27 Toilet, wall & floor next to sink are dirty. Clean room.  
#3, 16 18 No issues.

Unit 3:  
Hair sprayer nozzle is missing. Replace nozzle  
Downstairs shower has residue on partitions. Clean partitions  
Upstairs shower grout dirty. Clean grout.  
#3 Replace mattress & clean room.  
#4 Clean room.  
#5 Writing on wall & door. Repaint  
#8 Graffiti remove graffiti  
#26 Mattress has paint. Replace mattress  
#28 Replace mattress - Paint on both sides  
#30 Tear in mattress - Replace.  
#29 No issues.

### ACTIONS/STATUS

50. Food/Equipment Impounded or VCD (1)   
 51. Permit Suspension / Require Closure (1)   
 Inspection Report Total Score \_\_\_\_\_  
 Follow-Up Inspection Date \_\_\_\_\_

The Person-In-Charge (PIC) is responsible for maintaining this food facility in compliance with all applicable sections of the California Health & Safety Code.

Received by (Sign): Roy Nickeloff  
 Name & Title (Print): Roy Nickeloff - Mgr  
 EHS: [Signature]  
 Phone: (510) 567-6711

County of Alameda  
 Department of Environmental Health  
 1131 Harbor Bay Parkway, Suite 200  
 Alameda, Ca 94502-6577  
 510-567-6700  
 http://www.acgov.org/aceh

# OFFICIAL RETAIL FOOD INSPECTION REPORT

Date: 7.19.17  
 Time In: 8:30  
 Time Out: 4 PM  
 Page 6 of 8

Facility Name: Alameda Co SJC Address: 2500 Farnham Dr City: San Leandro CT: 305

All violations of the California Health & Safety Code as listed on this report must be corrected. Major violations must be corrected immediately. Non-compliance may warrant immediate closure of the food facility. See reverse sides of this inspection report form for code sections that correspond to each violation.

TEMPERATURE CONTROL-Documentation is required for all food facilities with PHF (Potentially Hazardous Foods)  No PHF

Food Item	Temp (°F)	Temp Violation (✓)	Process/Holding Location	Food Discarded (Amount)	Food Item	Temp (°F)	Temp Violation (✓)	Process/Holding Location	Food Discarded (Amount)
<u>Unit 10</u>	<u>21</u>		<u>Pot Pies</u>						

### OBSERVATIONS AND CORRECTIVE ACTIONS

**Unit 4:** Paint peeling on stair railing. Paint railing 1st floor shower dirty, clean shower. 2nd floor shower tile dirty. Clean shower.  
 Room # 25 Mattress tear. Replace mattress  
 30 Toothpaste on light fixture. Clean light.  
 16, 18, 20, 22, 24, 25 + 30 No issues

**Unit 5:** showers first floor dirty, great clean great. 2nd floor clean shower tile.  
 Rooms All rooms have graffiti on glass in doors + degraded seals. Replace windows 17, 19, 21, 23, 26, 27, ~~28~~, ~~29~~ No other issues JB, JB,  
 Rm 28 Replace mattress + clean toilet #29 Service toilet.

**Unit 6:** 2nd floor great dirty, clean great. Window seals bad on rooms 16, 21, 19, 23, 25 + 29. 9, 17, 20 No issues.

### ACTIONS/STATUS

50. Food/Equipment Impounded or VCD (1)   
 51. Permit Suspension / Require Closure (1)   
 Inspection Report Total Score \_\_\_\_\_  
 Follow-Up Inspection Date \_\_\_\_\_

The Person-In-Charge (PIC) is responsible for maintaining this food facility in compliance with all applicable sections of the California Health & Safety Code.  
 Received by (Sign): Roy Nickeloff  
 Name & Title (Print): ROY NICKELOFF - Mgr.  
 EHS: John B.  
 Phone: (510) 567-6711

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 Department of Environmental Health  
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# OFFICIAL RETAIL FOOD INSPECTION REPORT

Date: 7.19.17  
 Time In: 8:30  
 Time Out: 4 PM  
 Page 7 of 8 JB

Facility Name: Alameda Co JJC Address: 2500 Fairmont Dr City: San Leandro ST: CA

All violations of the California Health & Safety Code as listed on this report must be corrected. *Major violations must be corrected immediately. Non-compliance may warrant immediate closure of the food facility.* See reverse sides of this inspection report form for code sections that correspond to each violation.

**TEMPERATURE CONTROL-Documentation is required for all food facilities with PHF (Potentially Hazardous Foods)**  No PHF

Food Item	Temp (°F)	Temp Violation (✓)	Process/Holding Location	Food Discarded (Amount)	Food Item	Temp (°F)	Temp Violation (✓)	Process/Holding Location	Food Discarded (Amount)

**OBSERVATIONS AND CORRECTIVE ACTIONS**

Unit 7:  
 Rooms 4 + 5 toothpaste on lights.  
 Clean lights.  
 1, 6, 7, 9, 12, 14, 18, 22 No issues

Unit 8: Rm #6 graffiti on wall above sink.  
 Clean wall or paint.  
 # 9 mattress with paint. Replace mattress  
 # 3, 4, 12, 13, 14, 15, 16, 19, 22 No issues

Unit 9: Recreation Room No. issues

Unit 10: #9 Paint on mattress. Replace Mattress.  
 # 6, 10, 12, 13, 14, 19, 20, 22 No issues

Unit 11: # 6, 9, 11, 14, 13, 18, 19, 21  
 No issues

Unit 12: No issues Rooms # 2, 4, 8, 10, 12, 15, 18, 20.

Intake: Shower room toilet flush bottom has  
 hole in tile. Seal hole.

**ACTIONS/STATUS**

50. Food/Equipment Impounded or VCD (1)   
 51. Permit Suspension / Require Closure (1)   
 Inspection Report Total Score \_\_\_\_\_  
 Follow-Up Inspection Date \_\_\_\_\_

The Person-In-Charge (PIC) is responsible for maintaining this food facility in compliance with all applicable sections of the California Health & Safety Code.

Received by (Sign): Ray Mickeloff  
 Name & Title (Print): RAY Mickeloff - mgr.  
 EHS: Jean Beal  
 Phone: (510) 567-6711



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# OFFICIAL RETAIL FOOD INSPECTION REPORT

Date: 7-20-17  
 Time In: 1040  
 Time Out: 1245 PM  
 Page 1 of 1

Facility Name: Alameda Co. JJC Address: 2500 Farmington Dr City: San Leandro CT: 305

All violations of the California Health & Safety Code as listed on this report must be corrected. *Major violations must be corrected immediately. Non-compliance may warrant immediate closure of the food facility.* See reverse sides of this inspection report form for code sections that correspond to each violation

TEMPERATURE CONTROL-Documentation is required for all food facilities with PHF (Potentially Hazardous Foods)  No PHF

Food Item	Temp (°F)	Temp Violation (✓)	Process/Holding Location	Food Discarded (Amount)	Food Item	Temp (°F)	Temp Violation (✓)	Process/Holding Location	Food Discarded (Amount)

OBSERVATIONS AND CORRECTIVE ACTIONS

Follow up

All Camp Sweeney issues corrected except for weather stripping on kitchen + Dining room doors.

ACTIONS/STATUS

50. Food/Equipment Impounded or VCD (1) 1  
 51. Permit Suspension / Require Closure (1) 1  
 Inspection Report Total Score \_\_\_\_\_  
 Follow-Up Inspection Date \_\_\_\_\_

The Person-In-Charge (PIC) is responsible for maintaining this food facility in compliance with all applicable sections of the California Health & Safety Code.

Received by (Sign): [Signature]  
 Name & Title (Print): RAY NICKOLSON  
 EHS: [Signature]  
 Phone: (510) 567-6711

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 Alameda, CA 94502-6577  
 510-567-6700 http://www.acgov.org/aceh

# OFFICIAL RETAIL FOOD INSPECTION REPORT

Date: 7-26-17  
 Time In: 1 PM  
 Time Out: 2:30  
 Page 1 of 2

Facility Name: Alameda County JJC Address: 2500 Fairmont Dr City: San Leandro CT: 305

Permit #: 0307990 Exp Date: 3/3/18 PR: 0506723 SR: \_\_\_\_\_ CO: \_\_\_\_\_ Inspection Type  
 R FU C/O  
 Pmt Holder: \_\_\_\_\_ Food Safety Cert Name: \_\_\_\_\_ Exp Date: \_\_\_\_\_ FBInv Const Consult

**Major violations pose threats to public health and must be corrected immediately. Non-compliance may warrant closure of the facility.**

CDC RISK FACTORS	OUT	PTS	-PTS	APPROVED RETAIL PRACTICES	OUT	PTS	-PTS
<b>Demonstration of Knowledge</b>				<b>Supervision</b>			
1. Demonstration of food safety knowledge		2		24. Person in Charge present & performs duties		1	
<b>Employee Health &amp; Hygienic Practices</b>				<b>Personal Cleanliness</b>			
2. Compliance w/ Communicable disease procedures		4		25. Personal cleanliness & hair restraints		1	
3. No discharge from eyes, nose & mouth		2		<b>General Food Safety Requirements</b>			
4. Proper eating, tasting, drinking or tobacco use		2		26. Approved thawing methods used, frozen food		1	
5. Hands clean and properly washed; gloves used properly; RTE food handling		4		27. Food separated and protected		1	
6. Adequate handwashing facilities supplied & accessible		2		28. Washing fruits and vegetables		1	
<b>Time &amp; Temperature Relationships</b>				29. Toxic substances properly identified, stored, used		1	
7. Proper hot and cold holding temperatures		4/2		<b>Food Storage/Display/Service</b>			
8. Time as a public health control; procedures/ records		4/2		30. Food storage; food storage containers labeled		1	
9. Proper cooling methods		4		31. Consumer self-service		1	
10. Proper cooking time & temperatures		4		32. Food properly labeled & honestly presented		1	
11. Proper reheating procedures for hot holding		4		<b>Equipment/Utensils/Linens</b>			
<b>Protection from Contamination</b>				33. Nonfood contact surfaces clean		1	
12. Returned and reservice of food		2		34. Warewashing facilities: installed, maintained, used; testing devices		1	
13. Food in good condition, safe and unadulterated		4/2		35. Equipment/Utensils ANSI approved		1	
14. Food contact surfaces: clean and sanitized		4/2		36. Equipment, utensils and linens: storage & use		1	
<b>Food from Approved Sources</b>				37. Vending machines maintained		1	
15. Food obtained from approved source		4		38. Approved & adequate ventilation and lighting		1	
16. Compliance with shell stock tags, condition, display		2		39. Food thermometers provided and accurate		1	
17. Compliance with Gulf Oyster Regulations		2		40. Wiping cloths: properly used and stored		1	
<b>Conformance with Approved Procedures</b>				<b>Physical Facilities</b>			
18. Compliance with variance, specialized process & HACCP Plan		2		41. Plumbing: proper backflow devices		1	
<b>Consumer Advisory</b>				42. Garbage and refuse properly disposed; facilities maintained		1	
19. Consumer advisory for raw undercooked foods and foods with 1/2 of 1% alcohol		2		43. Toilet facilities cleaned, supplied, maintained		1	
<b>Highly Susceptible Populations</b>				44. Premises; personal/cleaning items; vermin-proofing		1	
20. Licensed health care facilities/ public & private schools: prohibited foods not offered		4		<b>Permanent Food Facilities</b>			
<b>Water/ Hot Water</b>				45. Floor, walls and ceilings are maintained and clean		1	
21. Hot and cold water available <u>120</u> Temp		4/2		46. No living or sleeping quarters inside facility		1	
<b>Liquid Waste Disposal</b>				<b>Signs/ Requirements</b>		1	
22. Sewage and wastewater properly disposed		4/2		47. Signs and permits posted; last inspection reports and food safety certificates available		1	
<b>Vermin</b>				<b>Compliance &amp; Enforcement</b>			
23. No rodents, insects, birds, or animals		4/2		48. Compliance with plan review requirements		1	
				49. Facility operating with valid permit		1	

Received by: [Signature]

EHS: [Signature]



County of Alameda  
 Department of Environmental Health  
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 http://www.acgov.org/aceh

# OFFICIAL RETAIL FOOD INSPECTION REPORT

Date: 7-28-17  
 Time In: 1 PM  
 Time Out: 2:30  
 Page 2 of 3

Facility Name: Alameda County JTC Address: 2500 FAIRMONT DR City: SAN LEANDRO CT: 805

All violations of the California Health & Safety Code as listed on this report must be corrected. *Major violations must be corrected immediately. Non-compliance may warrant immediate closure of the food facility.* See reverse sides of this inspection report form for code sections that correspond to each violation.

TEMPERATURE CONTROL-Documentation is required for all food facilities with PHF (Potentially Hazardous Foods)					☐ No PHF				
Food Item	Temp (°F)	Temp Violation (✓)	Process/Holding Location	Food Discarded (Amount)	Food Item	Temp (°F)	Temp Violation (✓)	Process/Holding Location	Food Discarded (Amount)

OBSERVATIONS AND CORRECTIVE ACTIONS

Kitchen - NO ISSUES

Camp Sweeney - all issues resolved,

Unit 1: What was thought to be residue on shower partitions, turns out to be discoloration. Partitions will be replaced in normal course of maintenance.  
All other issues resolved,  
All damaged mattress replaced.

Unit 2  
Unit 26 Plastic window replaced in room # 26.  
All other issues resolved.

Unit 3. Hair sprayer replaced  
Grout replaced in shower.  
All other issues corrected.

Unit 4. Railing painted.  
All issues corrected

ACTIONS/STATUS

50. Food/Equipment Impounded or VCD (1)

51. Permit Suspension / Require Closure (1)

Inspection Report Total Score \_\_\_\_\_

Follow-Up Inspection Date \_\_\_\_\_

The Person-In-Charge (PIC) is responsible for maintaining this food facility in compliance with all applicable sections of the California Health & Safety Code.

Received by (Sign): Roy Nicholas

Name & Title (Print): ROY NICHOLAS

EHS: Juan Bal

Phone: (510) 567-6711



County of Alameda  
 Department of Environmental Health  
 1131 Harbor Bay Parkway, Suite 200  
 Alameda, Ca 94502-6577  
 510-567-6700  
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# OFFICIAL RETAIL FOOD INSPECTION REPORT

Date: 7 26 17  
 Time In: 1  
 Time Out: 2:30  
 Page 3 of 3

Facility Name: Alameda Co JSC Address: 2500 Farmway Dr City: San Leandro CT: 305

All violations of the California Health & Safety Code as listed on this report must be corrected. *Major violations must be corrected immediately.* Non-compliance may warrant immediate closure of the food facility. See reverse sides of this inspection report form for code sections that correspond to each violation.

TEMPERATURE CONTROL-Documentation is required for all food facilities with PHF (Potentially Hazardous Foods)

No PHF

Food Item	Temp (°F)	Temp Violation (✓)	Process/Holding Location	Food Discarded (Amount)	Food Item	Temp (°F)	Temp Violation (✓)	Process/Holding Location	Food Discarded (Amount)

OBSERVATIONS AND CORRECTIVE ACTIONS

Unit 5: grout replaced.  
 All other issues corrected.

Unit 6: All issues corrected

Units 7-12 all issues corrected.

Seals on windows in rooms will be replaced as part of replacement project for windows to be completed this fiscal year.

Showers have been painted in all identified units.

Intake tile in shower room has been repaired.

ACTIONS/STATUS

- 50. Food/Equipment Impounded or VCD (1)
- 51. Permit Suspension / Require Closure (1)

Inspection Report Total Score \_\_\_\_\_

Follow-Up Inspection Date \_\_\_\_\_

The Person-In-Charge (PIC) is responsible for maintaining this food facility in compliance with all applicable sections of the California Health & Safety Code.

Received by (Sign): Ray Nikolaoff

Name & Title (Print): RAY NIKOLAOFF

EHS: Jasen Balin

Phone: (510) 567-6711





**II. NUTRITIONAL HEALTH EVALUATION**  
**Juvenile Halls, Special Purpose Juvenile Halls and Camps**

FACILITY NAME: Juvenile Justice Center		COUNTY: Alameda	
FACILITY ADDRESS (STREET, CITY, ZIP CODE, TELEPHONE): 2200 Fairmont Drive San Leandro, CA 94578-1090 510-667-4970			
CHECK THE FACILITY TYPE AS DEFINED IN TITLE 15, SECTION 1302:	JUVENILE HALL <input checked="" type="checkbox"/>	SPECIAL PURPOSE JUVENILE HALL <input type="checkbox"/>	CAMP <input type="checkbox"/>
NUTRITIONAL EVALUATION		DATE INSPECTED: July 19 & 20, 2017	
		DEFICIENCIES OR NON COMPLIANCE ISSUES NOTED: YES <input checked="" type="checkbox"/> NO <input type="checkbox"/>	
NUTRITIONAL EVALUATORS (NAME, TITLE, TELEPHONE): Annette Laverty, MPH, RD 510-595-6446			
FACILITY STAFF INTERVIEWED (NAME, TITLE, TELEPHONE): Shanta Ramdeholl, Medical Services Director, Children's Hospital of Oakland 510-667-3131 Renee Brunell, Probation, Assistant Manager of Food Service Ray Nickaloff, JJC Food Services Manager 510-667-7463 Noelle Payomo, Kidango, npayomo@kidango.org Mary Oser, Program & Services Manager, Revolution Foods, moser@revolutionfoods.com Jessica LaChance, Customer Success Coordinator, Revolution Foods, jlachance@revolutionfoods.com			

**Purpose**

Pursuant to Title 15, California Code of Regulations, Article 2, Section 1313, Subsection (c) "On an annual basis, or as otherwise required by law, each juvenile facility administrator shall obtain a documented inspection and evaluation from the local health officer, inspection in accordance with Health and Safety Code Section 101045."

Per California Health and Safety Code 101045, the county health officer shall annually investigate health and sanitary conditions in every operated detention facility in the county. He or she may make additional investigations of any county jail or other detention facility of the county as he or she determines necessary. He or she shall submit a report to the Board of State and Community Corrections (BSCC), to the person in charge of the detention facility and to the County Board of Supervisors.

**Instructions**

To complete the evaluation, assess each element listed and document the findings on the checklist. Columns in the checklist identify compliance as "Yes," "No" or "N/A" (not applicable). If the evaluator assessing the Nutritional Health of the facility "checks" a column to indicate that a facility is either out of compliance with all or part of a regulation or indicates that all or part of a regulation is not applicable, a brief explanation is required in the comments section. This explanation is critical. It assists both the BSCC and facility staff in understanding the rationale for the decision and highlights what needs correction.

Evaluators may elect to assess areas that are not covered by the inspection checklists. If this is done, the additional issues must be clearly delineated on a separate sheet to maintain their distinction from the BSCC's Title 15 checklist. For information purposes, this additional sheet should be attached and distributed with the checklist.

Checklists and regulations are available on the BSCC website ([http://www.bscc.ca.gov/s\\_fsoresources](http://www.bscc.ca.gov/s_fsoresources)). Please contact the BSCC Field Representative assigned to your county at the number below or through e-mail access on the web site.

Board of State and Community Corrections; FSO Division  
2590 Venture Oaks Way, Suite 200, Sacramento, CA 95833  
Phone: 916-445-5073; <http://www.bscc.ca.gov/>



## NUTRITIONAL HEALTH EVALUATION

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
<b>Article 9. Food</b>				
<b>1460 Frequency of Serving</b> Food shall be served three times in any 24-hour period.	X			Meals are served approximately at 7:30am (breakfast), 12 noon (lunch), and 5:00pm (dinner). Snacks are served at 10am and 2pm, approximately.
At least one of these meals shall include hot food.	X			
Supplemental food shall be offered to minors at the time of initial intake;	X			Snack bags are available for minors at intake.
Supplemental food shall be served to minors if more than 14 hours pass between meals;	X			
Supplemental food shall be served to minors on medical diets as prescribed by the attending physician.	X			
A minimum of twenty minutes shall be allowed for the actual consumption of each meal except for those minors on medical diets where the responsible physician has prescribed additional time.	X			
Minors who miss a regularly scheduled facility meal, shall be provided with a substitute meal and beverage.	X			
Minors on medical diets shall be provided with their prescribed meal.	X			
<b>1461 Minimum Diet</b> <i>Note: See regulations for equivalencies and serving requirements. Snacks may be included as part of the minimum diet. A wide variety of foods should be served and spices should be used to improve the taste and eye appeal of food that is served.</i>	X			
The minimum diet provided shall be based upon the nutritional and caloric requirements found in the 2011 Dietary Reference Intakes (DRI) of the Food and Nutrition Board, Institute of Medicine of the National Academies; the 2008 California Food Guide; and, the 2010 Dietary Guidelines for Americans.	X			
Facilities electing to provide vegetarian diets, and facilities that provide religious diets, shall also conform to these nutrition standards.	X			
Snacks may be included as part of the minimum diet; a wide variety of foods should be served.	X			
(a) <b>Protein Group.</b> The daily requirement shall equal two servings (one serving equals 14 grams; total of 196 grams per week)	X			
There shall be a requirement to serve a third serving from the legumes three days a week.	X			Each day there is a minimum of two servings of protein with the addition of 0.5 serving of legumes served seven days per week.
(b) <b>Dairy Group.</b> For persons 9-18 years of age, including pregnant and lactating women, the daily requirement is four servings (a serving is equivalent to 8 oz. of fluid milk and provides at least 250 mg of calcium).	X			
All milk products shall be pasteurized and fortified with vitamins A and D.	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
(c) <b>Vegetable-Fruit Group.</b> The daily requirement shall be at least six servings (one serving equals: ½ cup vegetables or fruit; 6 oz. of 100% juice); at least one serving per day, or seven servings per week, shall be from each of the following three categories:	X			An average of 9.5 servings of fruits and vegetables are offered each day.
(1) One serving of a fresh fruit or vegetable.	X			
(2) One serving of a Vitamin C source containing 30 mg. or more.	X			
(3) One serving of a Vitamin A source fruit or vegetable containing at least 200 micrograms Retinol Equivalents (RE).	X			
(d) <b>Grain Group.</b> The daily requirement for youth shall be a minimum of six servings, or 42 servings per week (At least four servings from this group must be made with some whole grains).	X			A minimum of six servings of whole grains are served daily.
(e) <b>Calories.</b> <i>Note: Providing only the minimum serving is not sufficient to meet the youths' caloric requirements. Based on activity levels, additional servings from dairy, vegetable-fruit, and bread-cereal (grain) groups shall be provided to meet caloric requirements. Pregnant youth shall be provided with a diet as approved by a doctor in accordance with Penal Code Section 6030(e) and a supplemental snack, if medically indicated.</i>	X			An average of approximately 2,250 calories is provided each day. The female youth receive the same food tray as the male youth, so may be receiving more calories than needed, depending on energy expenditure through physical activity.
The average daily caloric allowances shall be based on the level of physical activities and shall be: 1800-2000 calories for females 11 to 18 years of age; 2000-2800 calories for males 11 to 18 years of age.				
Total dietary fat does not exceed 30% of total calories on a weekly basis. Fat shall be added only in minimum amounts necessary to make the diet palatable.	X			
(f) <b>Sodium.</b> Facilities shall reduce the sodium content of menus. Herbs and spices may be used to improve the taste and eye appeal of food served.	X			
<b>1462 Medical Diets</b> Only the attending physician shall prescribe a medical diet.	X			
The medical diets utilized by a facility shall be planned, prepared, and served with the consultation of a registered dietitian.	X			
The facility manager shall comply with any medical diet prescribed for a minor.		X		Snacks of medical diets were not in compliance with restrictions. Kidango is responsible for preparing special diet meals and snacks to JJC facility. Several snacks assigned to youth on dietary restrictions included low fiber foods for a youth on a high fiber diet, and sugary foods for a youth with diabetes. See Recommendation 1.
Diet orders shall be maintained on file for at least one year.	X			
The facility manager and responsible physician shall ensure that the medical diet manual, with sample menus for medical diets, shall be available in both the medical unit and the food service office for reference and information.	X			The Revolution Foods Diet and Nutrition Manual and Kidango Therapeutic Diet Manual was available at the time of inspection. They had been reviewed by all required staff (JJC Deputy Chief, Children's Hospital Clinical Director, CPNP, and JJC Food and Support Management). Suggestions were made to update the manual.

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
A registered dietitian shall review, and the responsible physician shall approve the diet manual on an annual basis.	X			
<b>1463 Menus</b> Menus shall be planned at least one month in advance of their use. Menus shall be planned to provide a variety of foods considering the cultural and ethnic makeup of the facility, thus, preventing repetitive meals.	X			The menu provides a variety of cultural foods, which accommodates a variety of ethnicities at the facility.
Menus shall be approved by a registered dietitian before being used.	X			
If any meal served varies from the planned menu, the change shall be noted in writing on the menu and/or production worksheet.	X			
Menus, as planned and including changes, shall be retained for one year and evaluated by a registered dietitian at least annually.		X		Per USDA regulations, Rev Foods retains their menu documentation for 3 years. Their menu is evaluated by members of the Nutrition and Compliance Department which is made up of Registered Dietitians and Nutritionists. RD needs to sign and date diet manual on an annual basis. The menu was signed without a date, making it unclear if it had been reviewed within the past year. See Recommendation 2.
<b>1464 Food Services Plan</b> Facilities shall have a written site specific food service plan that shall comply with the applicable California Retail Food Code (Cal Code). In facilities with an average daily population of 50 or more, there shall be employed or available, a trained and experienced food services manager to prepare a written food service plan. In facilities of less than an average daily population of 50, that do not employ or have a food services manager available, the facility administrator shall prepare a written food service plan. The plan shall include, but not be limited to the following policies and procedures:	X			A seamless process has been established now for several years under the direction of Mr. Nickeloff, and remains in good order.
(a) menu planning;	X			
(b) purchasing;	X			
(c) storage and inventory control;	X			
(d) food preparation;	X			
(e) food serving;	X			
(f) transporting food;	X			
(g) orientation and on-going training;	X			Training of JIOs occurs on an annual basis in regards to food service safe food handling.
(h) personnel supervision;	X			
(i) budgets and food costs accounting;	X			
(j) documentation and record keeping;	X			
(k) emergency feeding plan;	X			An excellent emergency plan is on file. Emergency water containers are located in the entryway to each unit.
(l) waste management; and,	X			
(m) maintenance and repair.	X			Documentation records of all service and repair activities are kept in the GSA office.

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
<p><b>1465 Food Handlers Education and Monitoring</b> The facility administrator, in cooperation with the food services manager, shall develop and implement written policies and procedures to ensure that supervisory staff and food handlers receive ongoing training in safe food handling techniques, including personal hygiene, in accordance with § 113947 of the Health and Safety Code, Cal Code.</p> <p>The procedures shall include provisions for monitoring compliance that ensure appropriate food handling and personal hygiene requirements.</p>				<p>The Environmental Health Inspector retains primary responsibility to determine compliance with Section 1465. Compliance should be assessed in consultation with the Nutrition Inspector so that the findings on the Environmental Health Evaluation reflect the observations, expertise and consensus of both parties. The text of the regulation is provided here for reference only.</p>
<p><b>1466 Kitchen Facilities, Sanitation, and Food Storage</b> Kitchen facilities, sanitation, and food preparation, service, and storage shall comply with standards set forth in Health and Safety Code, Division 104, Part 7, Chapters 1-13, §113700 et seq. Cal Code.</p> <p>In facilities where youth prepare meals for self-consumption or where frozen meals or pre-prepared food from other permitted food facilities (see Health and Safety Code § 114381) are (re)heated and served, the following applicable Cal Code standards may be waived by the local health officer: <i>(Note: While the regulation uses the word "waived," the intent is that the inspector exercises professional latitude to approve alternative methods that provide for food safety and sanitation.)</i></p>				<p>The Environmental Health Inspector retains primary responsibility to determine compliance with Section 1466. Compliance should be assessed in consultation with the Nutrition Inspector so that the findings on the Environmental Health Evaluation reflect the observations, expertise and consensus of both parties. The text of the regulation is provided here for reference only.</p>
(a) HSC § 114130-114141;				
(b) HSC § 114099.6, 114095-114099.5, 114101-114109, 114123, and 114125;				
(c) HSC § 114149-114149.3 except that, regardless of such a waiver, the facility shall provide mechanical ventilation sufficient to remove gases, odors, steam, heat, grease, vapors and smoke from the kitchen;				
(d) HSC § 114268-114269; and,				
(e) HSC § 114279-114282.				
<p><b>1467 Food Serving and Supervision</b> Policies and site specific procedures shall be developed and implemented to ensure that appropriate work assignments are made and food handlers are adequately supervised. Food shall be prepared and served only under the immediate supervision of a staff member.</p>				<p>The Environmental Health Inspector retains primary responsibility to determine compliance with Section 1467. Compliance should be assessed in consultation with the Nutrition Inspector so that the findings on the Environmental Health Evaluation reflection the observations, expertise and consensus of both parties. The text of the regulation is provided here for reference only.</p>

**Summary of nutritional evaluation:**

Alameda County Juvenile Justice Center was inspected on July 19th and 20st, 2017. This Nutritional Health Evaluation reviewed all departments relating to nutritional provisions of minors housed at this facility, including food service, medical, and housing units. Findings of this inspection showed maintenance of quality over the previous year's inspection with the exception of service of snacks to youth on special medical diets.

Approximately 73 minors (61 male, 12 female) were housed in the main facility at the time of inspection. Minors held at this facility are generally in good health or have minimal health issues. Only seven (7) of the 73 minors (10%) are on a special therapeutic diet. Special diets ordered for minors are predominantly lactose intolerant and allergy diets. During this inspection, additionally, there was an order for the following medical diets: diabetic, high protein/high cal, and high fiber.

Revolution Foods manages the food service and meals are made and packaged at an off-site (ordering food, performing administrative duties and documenting activities during food production) location. The two week cycle menu is in compliance with USDA NSLP Guidelines for age/grade groups 6-8 and 9-12 and Title 15 Dietary Guidelines for 11-18 year old youth. Kidango, a non-profit organization funded by the USDA Child and Adult Care Food Program, is a subcontractor of Revolution Foods and provides medically-restricted diets. Alameda County staff supervises on-site food service staff. A chill system is used with mobile re-therm units at each juvenile unit. Meals are served three times a day with snacks provided at 10:00am and 2:00pm to help quench minors' hunger. Meal service consists of individual trays for each minor with vegetables served "family style" at round tables in each unit. Fruit and milk are available at all times to minors. Youth pod workers set out the meals at meal time for the youth in their respective unit.

Kidango does not use any of the following in its therapeutic meals: beef, pork, fish, deep fried foods, high fructose corn syrup, highly processed foods, added salt and added sugar typically, though the soy butter that was being served to the diabetic contained sugar.

There is a tightly-monitored system in place to insure that minors who require a therapeutic diet actually receive their prescribed special diets. Medical diet orders are processed within four hours of being faxed to the food service department. With the delivery of each mobile re-therm cart to its respective unit, kitchen staff drops off a hard-copy of the special diet receipt form provided by Kidango and then the JIO signs off, acknowledging the minors in his/her unit have received their therapeutic diets. The minors themselves also sign that they indeed receive their special diet (except those on no fish diets--no fish is served on site--and preference requests). Similarly, signatures are requested for minors receiving diabetic diets with snack bags. An Alpha Daily Detention Report Summary, Unit Assignments/Transfer List, Youth Release Form, and a roster of Camp Sweeney minors are provided to the food service department on a daily basis to alert the department of the whereabouts of minors on a special diet on a daily basis.

Two housing units were visited during the inspection (units 2 and 6). JIOs who were interviewed at each unit were aware of the policy of feeding minors who are on special diets; were aware of the special diet receipt form and the need to sign it; had a listing of each minor who is to receive a special diet; and were aware of the meal procedure. JIOs participate in a two hour training on safe food handling annually. Topics included in this training are: meal service, wellness policy, extra food distribution procedure, medical diets, standard diets, special diet receipt form, food handling safety tips, nutrition requirements and standards, Title 15, and the two-week menu cycle. The JIOs then completed a safe food handling quiz and a course evaluation. This training proved to be successful, based on the knowledge and standards awareness noted by each JIO who was interviewed during this inspection.

Thirteen (13) medical charts were reviewed. Of these 12 minors (all of which represented a minor receiving a therapeutic diet) had already been discharged from the facility, making it difficult to follow through on accuracy of meals served and whether they met the physician's special diet order for the minors. It also made it difficult to check whether the special diet orders had been prepared according to the special dietary needs. Of the one chart reviewed of the minor who was still in custody, the minor was receiving his intended special diet as prescribed. Of the 13 charts reviewed 100% had either a physician's order or a nurse practitioner order for a special diet and 100% had a Medical Diet Order (MDO) form.

Taste test of one hot sample meal (enchilada, rice, with glazed carrots) was conducted by the inspection team. The appearance of the sample meal was outstanding, like last year. The main entrée of enchilada and rice tasted very good and the amount was sufficient for a minor. The glazed carrots were terrific and the family style service is beneficial to the youth. Revolution Foods does a great job of preparing the meals. Overall, the quality of the meals is very good!

## 2017 Findings and Recommendations

The two week menu cycle set in place by Revolution Foods works well at this facility, though the meals tend to be repetitious given just a two week cycle. There is a plan to introduce a four-week cycle menu at this facility. A draft is under review and plans to start serving are set for August 7, 2017. The food quality remains high and the food

offered is appealing. Kidango strives to work closely with Revolution Foods to prepare special diets for minors on prescribed therapeutic diets in alignment with the two week menu cycle. Both companies do an amazing job in providing appealing and tasty food for their teenage audience. There were errors noted in the snacks being served to youth on medically-restricted diets. Conversation was had with the Kidango representative and it was acknowledged that staff need to be retrained. I have confidence that retraining of staff will remedy the issue.

The Food Service department was remarkably organized again this year. The efforts of Mr. Nickaloff, Ms. Brunell, and Ms. Lee are to be commended. The JIO training that continues to be conducted annually provides important food handling and food service procedure topics that help to align meal practices in each unit.

**Recommendation 1:**

Train Kidango staff who prepare special diet meals and snacks on appropriate foods that fit each diet. Develop a procedure for management to regularly check dietary meals/snacks to insure staff are following proper procedures.

**Recommendation 2:**

Insure a Registered Dietitian reviews, signs and dates the approved diet menu provided in the diet manual on an annual basis.

**Suggestion 1:**

While not part of Title 15, as of January 27, 2010 the Alameda County Nutrition and Physical Activity Policy and Guidelines is in effect. Juvenile Justice Facility representatives need to work with the contracted vending company to supply healthier options for County staff and visitors. It is recommended that at least 50% of the items served in the vending machines on site for both staff and visitors meet the following nutrition standards:

- a. Have no more than 35% of its calories from total fat (not including nuts & seeds);
- b. Have no more than 10% of its calories from saturated fat.
- c. Have no more than 35% sugar by weight (not including fruits or vegetables).

**For questions, contact:**

Annette Laverty, MPH, RD  
Alameda County Nutrition Services  
510-595-6446 Annette.Laverty@acgov.org

**III. MEDICAL/MENTAL HEALTH EVALUATION**  
**Juvenile Halls, Special Purpose Juvenile Halls and Camps**

FACILITY NAME: Juvenile Hall Justice Center		COUNTY: Alameda	
FACILITY ADDRESS (STREET, CITY, ZIP CODE, TELEPHONE): 2500 Fairmount			
CHECK THE FACILITY TYPE AS DEFINED IN TITLE 15, SECTION 1302:	JUVENILE HALL <input checked="" type="checkbox"/>	SPECIAL PURPOSE JUVENILE HALL <input type="checkbox"/>	CAMP <input type="checkbox"/>
MEDICAL/MENTAL HEALTH EVALUATION		DATE INSPECTED: 7/19/2017-7/20/2017	
		DEFICIENCIES OR NON COMPLIANCE ISSUES NOTED: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	
MEDICAL/MENTAL HEALTH EVALUATORS (NAME, TITLE, TELEPHONE): Paulina Lopez-PHN (510)589-0801 Kimberly Boston-PHN (510)589-0829 Beverly Juan-MD/PH/FHS Bahark Amanzadeh-Dental Marta Gonzalez-PHN (510)670-8453 Annette Leverty-Nutrition (510)919-7751 Kim Caison-(510)520-3220 Susan Sawley-(510)589-1112 Georgia Schrieber-(510)547-3773			
FACILITY STAFF INTERVIEWED (NAME, TITLE, TELEPHONE):			

**Purpose**

Pursuant to Title 15, California Code of Regulations, Article 2, Section 1313, Subsection (c) "On an annual basis, or as otherwise required by law, each juvenile facility administrator shall obtain a documented inspection and evaluation from the local health officer, inspection in accordance with Health and Safety Code Section 101045."

Per California Health and Safety Code 101045, the county health officer shall annually investigate health and sanitary conditions in every operated detention facility in the county. He or she may make additional investigations of any county jail or other detention facility of the county as he or she determines necessary. He or she shall submit a report to the Board of State and Community Corrections (BSCC), to the person in charge of the detention facility and to the County Board of Supervisors.

**Instructions**

To complete the evaluation, assess each element listed and document the findings on the checklist. Columns in the checklist identify compliance as "Yes," "No" or "N/A" (not applicable). If the evaluator assessing the Medical and Mental Health of the facility "checks" a column to indicate that a facility is either out of compliance with all or part of a regulation or indicates that all or part of a regulation is not applicable, a brief explanation is required in the comments section. This explanation is critical. It assists both the BSCC and facility staff in understanding the rationale for the decision and highlights what needs correction.

Evaluators may elect to assess areas that are not covered by the inspection checklists. If this is done, the additional issues must be clearly delineated on a separate sheet to maintain their distinction from the BSCC's Title 15 checklist. For information purposes, this additional sheet should be attached and distributed with the checklist.



Checklists and regulations are available on the BSCC website ([http://www.bscc.ca.gov/s\\_fsoresources](http://www.bscc.ca.gov/s_fsoresources)). Please contact the BSCC Field Representative assigned to your county at the number below or through e-mail access on the web site.

Board of State and Community Corrections; FSO Division  
2590 Venture Oaks Way, Suite 200, Sacramento, CA 95833  
Phone: 916-445-5073; <http://www.bscc.ca.gov/>

**MEDICAL/MENTAL HEALTH EVALUATION**

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
<b>Article 8. Health Services</b>				
<b>1400 Responsibility For Health Care Services</b>				SERIES 100 REV. 7/5/2017
The facility administrator shall ensure that health care services are provided to all minors.	X			
The facility shall have a designated health administrator who, in cooperation with the mental health director and facility administrator and pursuant to a written agreement, contract or job description, is administratively responsible to:	X			
(a) develop policy for health care administration;	X			
(b) identify health care providers for the defined scope of services;	X			
(c) establish written agreements as necessary to provide access to health care;	X			
(d) develop mechanisms to assure that those agreements are properly monitored; and,	X			
(e) establish systems for coordination among health care service providers.	X			
When the health administrator is not a physician, there shall be a designated responsible physician who shall develop policy in health care matters involving clinical judgments.	X			
<b>1401 Patient Treatment Decisions</b>				
Clinical decisions about the treatment of individual youth are the sole province of licensed health care professionals operating within the scope of their license and within facility policy defining health care services.	X			
Security policies and procedures that are applicable to child supervision staff also apply to health care personnel.	X			
<b>1402 Scope of Health Care</b>				
(a) The health administrator, in cooperation with the facility administrator, shall develop and implement written policy and procedures to define the extent to which health care shall be provided within the facility and delineate those services that shall be available through community providers. Each facility shall provide:	X			
(1) at least one physician to provide treatment; and,	X			
(2) health care services which meet the minimum requirements of these regulations and be at a level to address acute symptoms and/or conditions and avoid preventable deterioration of health while in confinement.	X			
(b) When health services are delivered within the juvenile facility, staff, space, equipment, supplies, materials, and resource manuals shall be adequate to the level of care provided.	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
(c) Consistent with security requirements and public safety, written policy and procedures for juvenile facilities shall provide for parents, guardians, or other legal custodians, at their own expense, to authorize and arrange for medical, surgical, dental, mental health or other remedial treatment of youth that is permitted under law.	X			
<b>1403 Health Care Monitoring and Audits</b> <i>(Applicable to facilities with on-site health care staff)</i>				SERIES 100 J-105 REV. 6/21/2017
(a) In juvenile facilities with on-site health care staff, the health administrator, in cooperation with the facility administrator, shall develop and implement written policy and procedures to collect statistical data and submit at least annual summaries of health care services to the facility administrator.	X			
(b) The health administrator, in cooperation with the responsible physician and the facility administrator, shall establish policies and procedures to assure that the quality and adequacy of health care services are assessed at least annually.	X			
(1) Policy and procedures shall identify a process for correcting identified deficiencies in the medical, dental, mental health and pharmaceutical services delivered.	X			
(2) Based on information from these assessments, the health administrator shall provide the facility administrator with an annual written report on medical, dental, mental health and pharmaceutical services. <i>(Inspectors are requested to verify existence of these reports.)</i>	X			
(c) Medical, mental and dental services shall be reviewed at least quarterly, at documented administrative meetings between the health and facility administrators and other staff, as appropriate.	X			
<b>1404 Health Care Staff Qualifications</b> <i>(Applicable to facilities with on-site health care staff)</i>				SERIES 200 J-201 REV. 6/21/2017
(a) The health administrator shall, at the time of recruitment for health care positions, develop education and experience requirements that are consistent with the community standard and the needs of the facility population.	X			
(b) In all juvenile facilities providing on-site health care services, the health administrator, in cooperation with the facility administrator, shall establish policy and procedures to assure that State licensure, certification, or registration requirements and restrictions that apply in the community, also apply to health care personnel who provide services to minors.	X			
(c) Appropriate credentials shall be on file at the facility, or in another central location where they are available for review. Policy and procedures shall provide that these credentials are periodically reviewed and remain current.	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
(d) The health administrator shall assure that position descriptions and health care practices require that health care staff receive the supervision required by their license and operate within their scope of practice.	X			
<b>1405 Health Care Procedures</b> ( <i>Applicable to facilities with on-site health care staff</i> )  The responsible physician for each facility providing on-site health care may determine that a clinical function or service can be safely and legally delegated to health care staff other than a physician. When this is done, the function or service shall be performed by staff operating within their scope of practice pursuant to written protocol, standardized procedures or direct medical order.	X			SERIES 200 REV. 6/21/2017
<b>1406 Health Care Records</b> ( <i>Applicable to facilities with on-site health care staff</i> )  In juvenile facilities providing on-site health care, the health administrator, in cooperation with the facility administrator, shall maintain complete individual and dated health records that include, but are not limited to:	X			SERIES 500 J-501 REV. 6/5/2017
(a) intake health screening form; ( <i>Note: The intake screening form may also be included in the probation file as a non-confidential document. See guidelines for discussion.</i> );	X			
(b) Health appraisals/medical examinations;	X			
(c) health service reports (e.g., emergency department, dental, psychiatric, and other consultations);	X			
(d) Complaints of illness or injury;	X			
(e) names of personnel who treat, prescribe, and/or administer/deliver prescription medication;	X			
(f) location where treatment is provided;	X			
(g) medication records in conformance with Title 15 § 1438;	X			
(h) progress notes;	X			
(i) consent forms;	X			
(j) authorization for release of information;	X			
(k) copies of previous health records;	X			
(l) immunization records; and,	X			
(m) laboratory reports.	X			
Written policy and procedures shall provide for maintenance of the health record in a locked area separate from the confinement record.	X			
Access to the medical/mental health record shall be controlled by the health administrator and shall assure that all confidentiality laws related to the provider-patient privilege apply to the health record. Minors shall not be used to translate confidential medical information for other non-English speaking minors.	X			
Health care records shall be retained in accordance with community standards.	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
<b>1407 Confidentiality</b>				SERIES 300 REV. 6/21/2017
(a) For each juvenile facility that provides on-site health services, the health administrator, in cooperation with the facility administrator, shall establish policy and procedures, consistent with applicable laws, for the multi-disciplinary sharing of health information. These policies and procedures shall address the provision for providing information to the court, child supervision staff and to probation. Information in the minor's case file shall be shared with the health care staff when relevant. The nature and extent of information shared shall be appropriate to treatment planning, program needs, protection of the minor or others, management of the facility, maintenance of security, and preservation of safety and order.	X			
(b) Medical and mental health services shall be conducted in a private manner such that information can be communicated confidentially.	X			
<b>1408 Transfer of Health Care Summary Records</b>				SERIES 100 REV. 6/21/2017TRANSFER OF JUVENILE WITH ACUTE ILLNESS OR INJURY
The health administrator, in cooperation with the facility administrator, shall establish written policy and procedures to assure that a health care summary and relevant records are forwarded to health care staff in the receiving facility when a minor is transferred to another jurisdiction, and to the local health officer, when applicable. Policies shall include:	X			
(a) a summary of the health record, or documentation that no record exists at the facility, is sent in an established format, prior to or at the time of transfer;	X			
(b) relevant health records are forwarded to the health care staff of the receiving facility;	X			
(c) advance notification is provided to the local health officer in the sending jurisdiction and responsible physician of the receiving facility prior to the release or transfer of minors with known or suspected active tuberculosis disease;	X			
(d) written authorization from the minor and/or parent-legal guardian is obtained prior to transferring copies of actual health records, unless otherwise provided by court order, statute or regulation having the force and effect of law; and,	X			
(e) confidentiality of health records is maintained.	X			
After minors are released to the community, health record information shall be transmitted to specific physicians or health care facilities in the community, upon request and with the written authorization of the minor and/or parent/guardian.	X			
In special purpose juvenile halls and other facilities that do not have on-site health care staff, policy and procedures shall assure that child supervision staff forward non-confidential information on medications and other treatment orders prior to or at the time of transfer.	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
<b>1409 Health Care Procedures Manual</b> ( <i>Applicable to facilities with on-site health care staff</i> )  For juvenile facilities with on-site health care staff, the health administrator, in cooperation with the facility administrator, shall develop, implement and maintain a facility-specific health services manual of written policies and procedures that address, at a minimum, all health care related standards that are applicable to the facility. ( <i>Note: "Facility specific" means that policies and procedures for that facility are included. In multi-facility systems policies and procedures for more than one facility in that system may be included in the same manual.</i> )	X			SERIES 300 REV. 6/21/2017 CARE AND TREATMENT
Health care policy and procedure manuals shall be available to all health care staff, to the facility administrator, the facility manager, and other individuals as appropriate to ensure effective service delivery.	X			
Each policy and procedure for the health care delivery system shall be reviewed at least every two years and revised as necessary under the direction of the health administrator. The health administrator shall develop a system to document that this review occurs.	X			
The facility administrator, facility manager, health administrator and responsible physician shall designate their approval by signing the manual.	X			
<b>1410 Management of Communicable Diseases</b>  The health administrator/responsible physician, in cooperation with the facility administrator and the local health officer, shall develop written policies and procedures to address the identification, treatment, control and follow-up management of communicable diseases. The policies and procedures shall address, but not be limited to:	X			SERIES 300 REV. 6/21/2017 CARE AND TREATMENT
(a) intake health screening procedures;	X			SERIES 300 REV. 6/21/2017
(b) identification of relevant symptoms;	X			
(c) referral for medical evaluation;	X			
(d) treatment responsibilities during detention;	X			
(e) coordination with public and private community-based resources for follow-up treatment;	X			
(f) applicable reporting requirements, and,	X			
(g) strategies for handling disease outbreaks.	X			
The policies and procedures shall be updated as necessary to reflect communicable disease priorities identified by the local health officer and currently recommended public health interventions.	X			
<b>1411 Access to Treatment</b>  The health administrator, in cooperation with the facility administrator, shall develop written policy and procedures to provide unimpeded access to health care.	X			SERIES 3000 REV. 6/21/2017



ARTICLE/SECTION	YES	NO	N/A	COMMENTS
<b>1412 First Aid and Emergency Response</b>				SERIES 100 ADMINISTRATION REV. 6/21/2017
The health administrator/responsible physician, in cooperation with the facility administrator, shall establish facility-specific policies and procedures to assure access to first aid and emergency services.	X			
(a) First aid kits shall be available in designated areas of each juvenile facility.	X			
(b) The responsible physician shall approve the contents, number, location and procedure for periodic inspection of the kits.	X			
Child supervision and health care staff shall be trained and written policies and procedures established to respond appropriately to emergencies requiring first aid.	X			
<b>1413 Individualized Treatment Plans</b> <i>(Excluding Special Purpose Juvenile Halls)</i>				SERIES 300 REV. 6/21/2017
With the exception of special purpose juvenile halls, the health administrator/responsible physician, in cooperation with the facility administrator, shall develop and implement policy and procedures to assure that health care treatment plans are developed for all youth who have received services for significant health care concerns.	X			
(a) Policies and procedures shall assure that health care treatment plans are considered in facility program planning.	X			
(b) Health care restrictions shall not limit participation of a youth in school, work assignments, exercise and other programs, beyond that which is necessary to protect the health of the youth or others.	X			
(c) Medical and mental health information shall be shared with youth supervision staff in accordance with Section 1407 for purposes of programming, treatment planning and implementation.	X			
(d) Program planning shall include pre-release arrangements for continuing medical and mental health care, together with participation in relevant programs upon return into the community.	X			
(d) Program planning shall include pre-release arrangements for continuing medical and mental health care, together with participation in relevant programs upon return into the community.	X			
(e) Policies and procedures shall address accommodations for youth who may have special needs when using showers and toilets and dressing/undressing.	X			
Policy and procedures shall require that any youth who is suspected or confirmed to be developmentally disabled is referred to the local Regional Center for the Developmentally Disabled for purposes of diagnosis and/or treatment within 24 hours of identification, excluding holidays and weekends.	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
<p><b>1414 Health Clearance for in-Custody Work and Program Assignments</b></p> <p>The health administrator/responsible physician, in cooperation with the facility administrator, shall develop health screening and monitoring procedures for work and program assignments that have health care implications, including, but not limited to, food handlers. <i>(See also Title 15 § 1465.)</i></p>	X			SERIES 100 REV. 7/5/2017
<p><b>1415 Health Education</b> <i>(Excluding Special Purpose Juvenile Halls)</i></p> <p>With the exception of special purpose juvenile halls, the health administrator for each juvenile facility, in cooperation with the facility administrator and the local health officer, shall develop written policies and procedures to assure that age- and sex-appropriate health education and disease prevention programs are offered to minors.</p>	X			SERIES 300 REV. 6/21/2017
<p>The education program shall be updated as necessary to address current health priorities and meet the needs of the confined population.</p>	X			
<p><b>1416 Reproductive Services</b></p> <p>For all juvenile facilities, the health administrator, in cooperation with the facility administrator, shall develop written policies and procedures to assure that reproductive health services are available to both male and female minors.</p>	X			SERIES 300 J-314 REV. 6/21/2017
<p>Such services shall include but not be limited to those prescribed by Welfare and Institutions Code Sections 220, 221 and 222 and Health and Safety Code Section 123450.</p>	S			
<p><b>Section 1417. Pregnant Minors.</b></p> <p>With the exception of special purpose juvenile halls, the health administrator for each juvenile facility, in cooperation with the facility administrator, shall develop written policies and procedures pertaining to pregnant minors that address the following: a diet, vitamins and education as required by Penal Code Section 6030(e) and limitations on the use of restraints in accordance with Penal Code Section 6030(f) and Welfare and Institutions Code Section 222.</p>	X			SERIES 300 REV. 6/21/2017
<p><b>1430 Intake Health Screening</b></p> <p>The health administrator/responsible physician, in cooperation with the facility administrator and mental health director shall establish policies and procedures defining when a health evaluation and/or treatment shall be obtained prior to acceptance for booking. Policies and procedures shall also establish a documented intake health screening procedure to be conducted immediately upon entry to the facility.</p>	X			SERIES 300 REV. 6/21/2017

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
(a) The responsible physician shall establish criteria defining the types of apparent health conditions that would preclude acceptance of a minor into the facility without a documented medical clearance. The criteria shall be consistent with the facility's resources to safely hold the minor. At a minimum, such criteria shall provide:	X			
(1) a minor who is unconscious shall not be accepted into a facility;	X			
(2) minors who are known to have ingested or who appear to be under the influence of intoxicating substances shall be cleared in accordance with Section 1431;	X			
(3) written documentation of the circumstances and reasons for requiring a medical clearance whenever a minor is not accepted for booking; and,	X			
(4) written medical clearance shall be received prior to accepting any minor referred for a pre-booking treatment and clearance.	X			
(b) Procedures for an intake health screening shall consist of a defined, systematic inquiry and observation of every minor booked into the juvenile facility. The screening shall be conducted immediately upon entry to the facility and may be performed by either health care personnel or trained child supervision staff.	X			
(1) Screening procedures shall address medical, dental and mental health concerns that may pose a hazard to the minor or others in the facility, as well as health conditions that require treatment while the minor is in the facility.	X			
(2) Any minor suspected to have a communicable disease that could pose a significant risk to others in the facility shall be separated from the general population pending the outcome of an evaluation by health care staff.	X			
(3) Procedures shall require timely referral for health care commensurate with the nature of any problems or complaint identified during the screening process.	X			
<b>1431 Intoxicated and Substance Abusing Minors</b>				SERIES 300 CARE AND TREATMENT REV. 6/21/2017
(a) The responsible physician, in cooperation with the health administrator and the facility administrator, shall develop and implement written policy and procedures that address the identification and management of alcohol and other drug intoxication in accordance with Section 1430.	X			
(b) Policy and procedures shall address:	X			
(1) designated housing, including use of any protective environment for placement of intoxicated youth;	X			
(2) symptoms or known history of ingestion that should prompt immediate referral for medical evaluation and treatment;	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
(3) determining when the youth is no longer considered intoxicated and documenting when the monitoring requirements of this regulation are discontinued;	X			
(4) medical responses to youth experiencing intoxication or withdrawal reactions;	X			
(5) management of pregnant youth who use alcohol or other drugs;	X			
(6) initiation of substance abuse counseling during confinement and referral procedures for continuation upon release to the community consistent with Section 1413 and Section 1355; and,	X			
(7) coordination with mental health services in cases of substance abusing youth with known or suspected mental illness.	X			
(c) A medical clearance shall be obtained prior to booking any youth who is intoxicated to the extent that they are a threat to their own safety or the safety of others. Supervision of intoxicated youth who are cleared to be booked into a facility shall include monitoring by personal observation no less than once every 15 minutes until resolution of the intoxicated state.	X			
These observations shall be documented, with actual time of occurrence recorded.	X			
Medical staff, or child supervision staff operating pursuant to medical protocols, shall conduct a medical evaluation for all youth whose intoxicated behavior persists beyond six hours from the time of admission.	X			
<b>1432 Health Appraisals/Medical Examinations</b>				SERIES 300 REV. 6/21/2017
The health administrator/responsible physician, in cooperation with the facility administrator for each juvenile hall, shall develop and implement written policy and procedures for a health appraisal/medical examination of youth and for the timely identification of conditions necessary to safeguard the health of the youth.	X			
(a) The health appraisal/medical examination shall be completed within 96 hours of admission, excluding holidays, to the facility and result in a compilation of identified problems to be considered in classification, treatment, and the multi-disciplinary management of the youth while in custody and in pre-release planning. It shall be conducted in a location that protects the privacy of the youth and conducted by a physician, or other licensed or certified health professional working within his/her scope of practice and under the direction of a physician.	X			
(1) At a minimum, the health evaluation shall include a health history, examination, laboratory and diagnostic testing, and necessary immunizations as outlined below:	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
<p>(A) The health history includes: Review of the intake health screening, history of illnesses, operations, injuries, medications, allergies, immunizations, systems review, exposure to communicable diseases, family health history, habits (e.g., tobacco, alcohol and other drugs), developmental history (e.g., school, home, and peer relations), sexual activity, contraceptive methods, reproductive history, physical and sexual abuse, neglect, history of mental illness, self-injury, and suicidal ideation.</p>	X			
<p>(B) The examination includes: Temperature, height, weight, pulse, blood pressure, appearance, gait, head and neck, a preliminary dental and visual acuity screening, gross hearing test, lymph nodes, chest and cardiovascular, breasts, abdomen, genital (pelvic and rectal examination, with consent, if clinically indicated), musculoskeletal, neurologic.</p>	X			
<p>(C) Laboratory and diagnostic testing includes: Tuberculosis screening and testing for sexually transmitted diseases for sexually active youth. Additional testing should be available as clinically indicated, including pregnancy testing, pap smears, urinalysis, hemoglobin or hematocrit.</p>	X			
<p>(D) Immunizations shall be verified and, within two weeks of the health appraisal/medical examination, a program shall be started to bring the youth's immunizations up-to-date in accordance with current public health guidelines.</p>	X			
<p>(2) The health examination may be modified by the responsible physician, for youth admitted with an adequate examination done within the last 12 months, provided there is reason to believe that no substantial change would be expected since the last full evaluation. When this occurs, health care staff shall review the intake health screening form and conduct a face-to-face interview with the youth.</p>	X			
<p>(b) For adjudicated youth who are confined in any juvenile facility for successive stays, each of which totals less than 96 hours, the responsible physician shall establish a policy for a medical evaluation and clearance. If this evaluation and clearance cannot be completed at the facility during the initial stay, it shall be completed prior to acceptance at the facility. This evaluation and clearance shall include screening for tuberculosis.</p>	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
(c) For youth who are transferred to juvenile facilities outside their detention system, the health administrator, in cooperation with the facility administrator, shall develop and implement policy and procedures to assure that a health appraisal/medical examination:	X			
(1) is received from the sending facility at or prior to the time of transfer;	X			
(2) is reviewed by designated health care staff at the receiving facility; and,	X			
(3) absent a previous appraisal/examination or receipt of the record, a health appraisal/medical examination, as outlined in this regulation, is completed on the youth within 96 hours of admission, excluding holidays.	X			
(d) The responsible physician shall develop policy and procedures to assure that youth who are transferred among juvenile facilities within the same detention system, receive a written health care clearance. The health appraisal/medical examination shall be reviewed and updated prior to transfer and forwarded to facilities that have licensed on-site health care staff.	X			
<b>1433 Requests for Health Care Services</b>				SERIES 300 REV. 6/21/2017
The health administrator, in cooperation with the facility administrator, shall develop policy and procedures to establish a daily routine for youth to convey requests for emergency and non-emergency health care services.	X			
(a) There shall be opportunities for both written and verbal communications, including provision for youth who have language or literacy barriers.	X			
(b) Child supervision staff shall relay requests from the youth, initiate referrals when a need for health care services is observed, and advocate for the youth when the need for services appears to be urgent.	X			
(c) Staff shall inquire and make observations regarding the health of each youth on a daily basis and in the event of possible injury.	X			
(d) There shall be opportunities available on a twenty-four hour per day basis for youth and staff to communicate the need for emergency health care services.	X			
(e) Provision shall be made for any youth requesting health care attention, or observed to be in need of health care, to be given that attention by licensed or certified health care personnel.	X			
(f) All health care requests shall be documented and maintained.	X			
<b>1434 Consent for Health Care</b>				SERIES 600 REV. 6/5/2017
The health administrator, in cooperation with the facility administrator, shall establish written policy and procedures to obtain informed consent for health care examinations and treatment.	X			



ARTICLE/SECTION	YES	NO	N/A	COMMENTS
(a) All examinations, treatments, and procedures requiring verbal or written informed consent in the community also require that consent for confined youth.	X			
(b) There shall be provision for obtaining parental consent and obtaining authorization for health care services from the court when there is no parent/guardian or other person standing in loco parentis, including the requirements in Welfare and Institutions Code Section 739.	X			
(c) Policy and procedures shall be consistent with applicable statutes in those instances where the youth's consent for testing or treatment is sufficient or specifically required.	X			
(d) Conservators can provide consent only within limits of their court authorization.	X			
Youth may refuse, verbally or in writing, non-emergency medical and mental healthcare.	X			
<b>1435 Dental Care</b>  The health administrator, in cooperation with the facility administrator, shall develop and implement written policy and procedures to require that dental treatment be provided to youth as necessary to respond to acute conditions and to avert adverse effects on the youth's health and require preventive services as recommended by a dentist. Treatment shall not be limited to extractions.	X			SERIES 300 REV. 5/26/2017 REFER DENTAL POLICY AND PROCEDURE MANUAL
Annual dental exams shall be provided to any youth detained for longer than one year.	X			
<b>1436 Prostheses and Orthopedic Devices</b>				
(a) The health administrator, in cooperation with the facility administrator and the responsible physician shall develop written policy and procedures regarding the provision, retention and removal of medical and dental prostheses, including eyeglasses and hearing aids.	X			
(b) Prostheses shall be provided when the health of the minor would otherwise be adversely affected, as determined by the responsible physician.	X			
(c) Procedures for retention and removal of prostheses shall comply with the requirements of Penal Code Section 2656.	X			
<b>1437 Mental Health Services and Transfer to a Treatment Facility</b>  The health administrator/responsible physician, in cooperation with the mental health director and the facility administrator, shall establish policies and procedures to provide mental health services. These services shall include, but not be limited to:	X			SERIES 300 REV. 6/21/2017/ SERIES 100 REV. 6/21/2017
(a) screening for mental health problems at intake;	X			
(b) crisis intervention and the management of acute psychiatric episodes;	X			
(c) stabilization of persons with mental disorders and the prevention of psychiatric deterioration in the facility setting;	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
(d) elective therapy services and preventive treatment where resources permit;	X			
(e) medication support services;				
(f) provision for timely referral, transportation, and admission to licensed mental health facilities, and follow-up for youth whose psychiatric needs exceed the treatment capability of the facility; and,	X			
(g) assurance that any youth who displays significant symptoms of severe depression, suicidal ideation, irrational, violent or self destructive behaviors, or who is receiving psychotropic medication shall be provided a mental status assessment by a licensed mental health clinician, psychologist, or psychiatrist.	X			
(h) transition planning for youth undergoing mental health treatment, including arrangements for continuation of medication and therapeutic services.	X			
Mentally disordered youth who appear to be a danger to themselves or others, or to be gravely disabled, shall be evaluated either pursuant to applicable statute or by on-site licensed health personnel to determine if treatment can be initiated at the juvenile facility.	X			
Absent an emergency, unless the juvenile facility has been designated as a Lanterman-Petris-Short (LPS) facility, and youth meet the criteria for involuntary commitment under the LPS Act in Welfare and Institutions Code Section 5000 et seq., all services shall be provided on a voluntary basis. Voluntary mental health admissions may be sought pursuant to Penal Code Section 4011.8 or Welfare and Institutions Code Section 6552.				
<b>1438 Pharmaceutical Management</b>				SEREIS 400 REV. 5/31/2017 PHARMACEUTICAL BINDER
For all juvenile facilities, the health administrator, in consultation with a pharmacist and in cooperation with the facility administrator, shall develop and implement written policy, establish procedures, and provide space and accessories for the secure storage, controlled administration, and disposal of all legally obtained drugs.	X			
(a) Such policies, procedures, space and accessories shall include, but not be limited to, the following:	X			
(1) securely lockable cabinets, closets, and refrigeration units;	X			
(2) a means for the positive identification of the recipient of the prescribed medication;	X			
(3) administration/delivery of medicines to youth as prescribed;	X			
(4) confirmation that the recipient has ingested the medication;	X			
(5) documenting that prescribed medications have or have not been administered, by whom, and if not, for what reason;	X			
(6) prohibition of the delivery of medication from one youth to another;	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
(7) limitation to the length of time medication may be administered without further medical evaluation;	X			
(8) the length of time allowable for a physician's signature on verbal orders, not to exceed seven (7) days;	X			
(9) training for non-licensed personnel which includes, but is not limited to: delivery procedures and documentation; recognizing common symptoms and side-effects that should result in contacting health care staff for evaluation; procedures for consultation for confirming ingestion of medication; and, consultation with health care staff for monitoring the youth's response to medication; and,	X			
(10) a written report shall be prepared by a pharmacist, no less than annually, on the status of pharmacy services in the institution. The pharmacist shall provide the report to the health authority and the facility administrator.	X			
(11) transition planning.	X			
(b) Consistent with pharmacy laws and regulations, the health administrator shall establish written protocols that limit the following functions to being performed by the identified personnel:	X			
(1) Procurement shall be done only by a physician, dentist, pharmacist, or other persons authorized by law.	X			
(2) Storage of medications shall assure that stock supplies of legend medications shall only be accessed by licensed health personnel. Supplies of legend medications that have been properly dispensed and supplies of over-the-counter medications may be accessed by both licensed and trained non-licensed personnel.	X			
(3) Repackaging shall only be done by a physician, dentist, pharmacist, or other persons authorized by law.	X			
(4) Preparation of labels can be done by a physician, dentist, pharmacist or other personnel, both licensed and trained non-licensed, provided the label is checked and affixed to the medication container by the physician, dentist, or pharmacist before administration or delivery to the youth. Labels shall be prepared in accordance with Section 4047.5 of the Business and Professions Code.	X			
(5) Dispensing shall only be done by a physician, dentist, pharmacist, or other person authorized by law.	X			
(6) Administration of medication shall only be done by licensed health personnel who are authorized to administer medication and acting on the order of a prescriber.	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
(7) Licensed health care personnel and trained non-licensed personnel may deliver medication acting on the order of a prescriber.	X			
(8) Disposal of legend medication shall be done in accordance with pharmacy laws and regulations and requires any combination of two of the following classifications: physician, dentist, pharmacist, or registered nurse. Controlled substances shall be disposed of in accordance with Drug Enforcement Administration disposal procedures.	X			
(c) The responsible physician shall establish policies and procedures for managing and providing over-the-counter medications to youth.	X			
<b>1439 Psychotropic Medications</b>  The health administrator/responsible physician, in cooperation with the mental health director and the facility administrator, shall develop and implement written policies and procedures governing the use of voluntary and involuntary psychotropic medications. (a) These policies and procedures shall include, but not be limited to:	X			SERIES 400 REV. 4/5/2017
(1) protocols for physicians' written and verbal orders for psychotropic medications in dosages appropriate to the youth's need;	X			
(2) the length of time voluntary and involuntary medications may be ordered and administered before re-evaluation by a physician;	X			
(3) provision that youth who are on psychotropic medications prescribed in the community are continued on their medications pending re-evaluation and further determination by a physician;	X			
(4) provision that the necessity for continuation on psychotropic medications is addressed in pre-release planning and prior to transfer to another facility or program; and,	X			
(5) provision for regular clinical/administrative review of utilization patterns for all psychotropic medications, including every emergency situation.	X			
(b) Psychotropic medications shall not be administered to a youth absent an emergency unless informed consent has been given by the legally authorized person or entity.	X			
(1) Youth shall be informed of the expected benefits, potential side effects and alternatives to psychotropic medications.	X			
(2) Absent an emergency, youth may refuse treatment.	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
(c) Youth found by a physician to be a danger to themselves or others by reason of a mental disorder may be involuntarily given psychotropic medication immediately necessary for the preservation of life or the prevention of serious bodily harm, and when there is insufficient time to obtain consent from the parent, guardian, or court before the threatened harm would occur. It is not necessary for harm to take place or become unavoidable prior to initiating treatment.	X			
(d) Assessment and diagnosis must support the administration of psychotropic medications. Administration of psychotropic medication is not allowed for coercion, discipline, convenience or retaliation.	X			
<b>1452 Collection of Forensic Evidence</b>  The health administrator, in cooperation with the facility administrator, shall establish policies and procedures assuring that forensic medical services, including drawing of blood alcohol samples, body cavity searches, and other functions for the purpose of prosecution are collected by appropriately trained medical personnel who are not responsible for providing ongoing health care to the minor.	X			SERIES 600 REV. 6/5/2017 MEDICAL LEGAL ISSUES
<b>1453 Sexual Assaults</b>  The health administrator, in cooperation with the facility administrator, shall develop and implement policy and procedures for treating victims of sexual assaults and for reporting such incidents to local law enforcement when they occur in the facility.		X		
The evidentiary examination and initial treatment of victims of sexual assault shall be conducted at a health facility that is separate from the custodial facility and is properly equipped and staffed with personnel trained and experienced in such procedures.		X		
<b>1454 Participation in Research</b>  The health administrator, in cooperation with the facility administrator, shall develop site specific policy and procedures governing biomedical or behavioral research involving youth. Such research shall occur only when ethical, medical and legal standards for human research are met. Written policy and procedure shall require assurances for the safety of the youth and informed consent.		X		
Participation shall not be a condition for obtaining privileges or other rewards in the facility. This regulation does not preclude the collection and analysis of routine facility data or use of Investigational New Drug protocols that are available in the community. Neither does it prohibit blind studies of disease prevalence performed under the auspices of the local health officer. The court, health administrator, and facility administrator shall be informed of all such proposed actions.		X		

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
<b>1358 Use of Physical Restraints</b>  (a) The facility administrator, in cooperation with the responsible physician and mental health director, shall develop and implement written policies and procedures for the use of restraint devices.	X			SERIES 300 REV. 6/21/2017
(b) Physical restraints may be used only for those youth who present an immediate danger to themselves or others, who exhibit behavior which results in the destruction of property, or reveals the intent to cause self-inflicted physical harm. The circumstances leading to the application of restraints must be documented.	X			
(c) Restraint devices include any devices which immobilize a youth's extremities and/or prevent the youth from being ambulatory. Physical restraints should be utilized only when it appears less restrictive alternatives would be ineffective in controlling the disordered behavior.	X			
(d) In addition to the areas specifically outlined in this regulation, as a minimum, the policy shall address the following areas: known medical conditions that would contraindicate certain restraint devices and/or techniques; acceptable restraint devices; signs or symptoms which should result in immediate medical/mental health referral; availability of cardiopulmonary resuscitation equipment; protective housing of restrained youth; provision for hydration and sanitation needs; and exercising of extremities.	X			
(e) Youth shall be placed in restraints only with the approval of the facility manager or designee. The facility manager may delegate authority to place a youth in restraints to a physician. Reasons for continued retention in restraints shall be reviewed and documented at a minimum of every hour.	X			
(f) A medical opinion on the safety of placement and retention shall be secured as soon as possible, but no later than two hours from the time of placement. The youth shall be medically cleared for continued retention at least every three hours thereafter.	X			
(g) A mental health consultation shall be secured as soon as possible, but in no case longer than four hours from the time of placement, to assess the need for mental health treatment.	X			
(h) Continuous direct visual supervision shall be conducted to ensure that the restraints are properly employed, and to ensure the safety and well-being of the youth. Observations of the youth's behavior and any staff interventions shall be documented at least every 15 minutes, with actual time of the documentation recorded. While in restraint devices all youth shall be housed alone or in a specified housing area for restrained youth which makes provision to protect the youth from abuse. In no case shall restraints be used as punishment or discipline, or as a substitute for treatment. Additionally, the affixing of hands and feet together behind the back (hogtying) is prohibited.	X			



ARTICLE/SECTION	YES	NO	N/A	COMMENTS
(i) The provisions of this section do not apply to the use of handcuffs, shackles or other restraint devices when used to restrain youth for movement or transportation reasons.	X			
(j) The use of restraints on pregnant youth is limited in accordance with Penal Code Section 6030(f) and Welfare and Institutions Code Section 222.	X			
<b>1359 Safety Room Procedures</b>				SERIES 300 REV. 6/21/2017
The facility administrator, in cooperation with the responsible physician, shall develop and implement written policies and procedures governing the use of safety rooms, as described in Title 24, Part 2, Section 1230.1.13.	X			
The room shall be used to hold only those youth who present an immediate danger to themselves or others, who exhibit behavior which results in the destruction of property, or reveals the intent to cause self-inflicted physical harm. A safety room shall not be used for punishment or discipline, or as a substitute for treatment. Policies and procedures shall:	X			
The safety room is not to be used for punishment, discipline, or as a substitute for treatment. Policies and procedures:	X			
(a) include provisions for administration of necessary nutrition and fluids, access to a toilet, and suitable clothing to provide for privacy;	X			
(b) provide for approval of the facility manager, or designee, before a youth is placed into a safety room;	X			
(c) provide for continuous direct visual supervision and documentation of the youth's behavior and any staff interventions every 15 minutes, with actual time recorded;	X			
(d) provide that the youth shall be evaluated by the facility manager, or designee, every four hours;	X			
(e) provide for immediate medical assessment, where appropriate, or an assessment at the next daily sick call;	X			
(f) provide that a youth shall be medically cleared for continued retention every 24 hours;	X			
(g) provide that a mental health opinion is secured within 24 hours; and,	X			
(h) provide a process for documenting the reason for placement, including attempts to use less restrictive means of control, and decisions to continue and end placement.	X			

Summary of medical/mental health evaluation:

Policy and Procedure Manual is up to date with the exception of : 1453 Sexual Assaults and 1454 Participation in Research.