

## Horizon Juvenile Center Dry Cells Audit Report September 2019

On July 10, 2018, the NYC Board of Correction first granted the NYC Department of Correction (the Department) a six (6) month limited variance from Minimum Standard 1-04(b)(2) for the Horizon Juvenile Center (“Horizon”). This standard states: *“Each single cell shall contain a flush toilet, a wash basin with drinking water, a single bed and a closable storage container for personal property.”* (Emphasis added.) On July 8, 2019, the NYC Board of Correction renewed the Department’s six (6) month limited variance from Minimum Standard 1-04(b)(2) for Horizon<sup>1</sup>. With two (2) exceptions, the individual cells or rooms for residents at Horizon do not contain “a flush toilet” or “a wash basin with drinking water” and are commonly referred to as “dry cells.”

Pursuant to the six (6) month limited variance, allowing residents at Horizon to be housed in single occupancy dry cells, a monthly audit on compliance with the following three (3) variance conditions is required:

1. With respect to youth locked in dry cells, housing unit staff will escort residents of Horizon to the unoccupied housing area bathroom and will provide residents with drinking water within five (5) minutes of the request, absent extenuating circumstances.
2. Housing unit staff will document when a bathroom escort or drinking water is requested. Documentation will include the time of the request and the time escorting begins.
3. Notice of the specific terms and conditions of this variance and the right to notify the Board of any related violations shall be provided to Horizon residents.

Horizon Juvenile Center is co-operated by the Department and the NYC Administration for Children’s Services (“ACS”). Prior to August 2019 the Department was solely responsible for implementing procedures regarding compliance with the limited variance from Minimum Standard 1-04(b)(2) for Horizon in all housing areas. In August, 2019, ACS assumed responsibility for implementing procedures regarding compliance with the limited variance from Minimum Standard 1-04(b)(2) for Horizon in a limited number of housing areas, with the goal of assuming responsibility for additional housing areas each month.

In the following reports, compliance with the limited variance from Minimum Standard 1-04(b)(2) for Horizon in housing areas operated solely by Department staff on the randomly selected audit dates have been audited and reported on by the Department. Compliance in housing areas under the responsibility of ACS on the randomly selected audit dates have been audited and reported on by the ACS.

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<sup>1</sup> This variance was first renewed by the NYC Board of Correction on January 8, 2019.

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#### Audit Parameters

The audit is conducted through an onsite visit to Department halls and a manual review of the Overnight Response Logbooks. A manual review of the logbooks was conducted of four (4) randomly selected dates, one (1) day for each week, during the month of September 2019:

- September 2<sup>nd</sup>
- September 8<sup>th</sup>
- September 21<sup>st</sup>
- September 26<sup>th</sup>

The Overnight Response Logbook<sup>1</sup> was established to document individualized information for each resident request, including the resident's name, book and case number, date, room number, light indicator time, time request was granted, and uniform staff information. To facilitate proper logbook recording, a Programs Memorandum was issued to provide staff with written instruction on the use of the logbook. In addition, the memorandum directed supervisors to conduct daily logbook reviews. The audit review was designed to determine whether residents were provided access to bathrooms and/or drinking water within five (5) minutes of their requests during lock-in hours, between 9 pm and 5 am<sup>2</sup>, absent extenuating circumstances. In addition, the audit reviewed the room confinement records in Horizon to determine whether residents in room confinement were granted access to bathroom and drinking water within five (5) minutes of their requests.

Residents at Horizon reside in dry cells, which are rooms that do not contain a flush toilet or wash basin with drinking water.<sup>3</sup> Residents who are not in room confinement access bathrooms and drinking water without an escort during lock-out hours. During lock-in hours, from 9 pm to 5 am, a resident who needs to access the bathroom and/or drinking water pushes a button within his or her room which activates a red light, alerting housing unit staff that the resident has a request. The Overnight Response Logbook is utilized to document the time of the request, based on the indicator light, and the time the request was granted to the resident.

In Horizon, residents reside in halls. For the purpose of this audit, the halls are listed from 1 to 10. The Department was responsible for compliance with the limited variance from Minimum Standard 1-04(b)(2) for Horizon within Hall 1, Hall 2, Hall 4, Hall 7, Hall 8, Hall 9 and Hall 10<sup>4</sup> on two (2) of the four (4) randomly selected audit dates in this report: September 2<sup>nd</sup> and

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<sup>1</sup> The Overnight Response Logbook is used to comply with the variance condition requirement that housing unit staff documents when a bathroom escort or drinking water is requested and is afforded.

<sup>2</sup> On each randomly selected audit date, entries recorded in the Overnight Response Logbook commencing from 9 pm on the previous date and ending at 5 am on the audit date were reviewed.

<sup>3</sup> In the hall for residents with special medical needs, two (2) of the five (5) rooms contain a toilet and sink.

<sup>4</sup> Compliance with the limited variance from Minimum Standard 1-04(b)(2) for Horizon in Hall 3, Hall 5, and Hall 6 is captured in the ACS's August 2019 Dry Cell Audit Report. ACS assumed responsibility for Hall 3, Hall 5, and Hall 6 in August, 2019.

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September 8<sup>th</sup>. In the case of the remaining two (2) randomly selected audit dates, September 21<sup>st</sup> and September 26<sup>th</sup>, the Department was responsible for compliance with the limited variance from Minimum Standard 1-04(b)(2) for Horizon within Hall 7, Hall 8, Hall 9 and Hall 10.<sup>5</sup>

#### Site Visit

In addition to the logbook review, the audit included a site visit that began during the overnight tour (after 9 pm) on September 27, 2019. The purpose of the site visit was to observe procedures for the provision of access to the bathrooms and/or drinking water and to assess whether the notices of the variance conditions were properly posted in the halls and/or disseminated to Horizon residents.

During the site visit, officers on post were interviewed during the period when residents were locked in to assess their knowledge and understanding of the relevant variance condition requirements. In addition, the provision of bathroom and drinking water access during lock-in hours was observed.

The site visit also assessed whether:

- each hall had an operable water fountain or a water cooler;
- Officers recorded both the residents' requests to access the bathrooms and/or drinking water and the granting of such requests, and that the logbook entries accurately reflected the times taken to provide residents access to the bathrooms and/or drinking water; and
- the Programs Memorandum, governing the use of the Overnight Response Logbooks, was available in each of the halls for the officers' reference and instruction.

#### Room Confinement

When room confinement occurs during any of the four (4) randomly selected audit dates, the audit includes an assessment of whether residents placed in room confinement<sup>6</sup> during hours when residents are not normally locked in were provided access to bathrooms and/or drinking water within five (5) minutes of their requests. This component of the audit involves the review of "Room Confinement Authorization and Termination Forms"<sup>7</sup> to identify residents in the facility who were placed in room confinement in the halls that the Department was responsible

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<sup>5</sup> Compliance with the limited variance from Minimum Standard 1-04(b)(2) for Horizon in Hall 1, Hall 2, Hall 3, Hall 4, Hall 5, and Hall 6 is captured in the ACS's September 2019 Dry Cell Audit Report.

<sup>6</sup> Residents may be placed in room confinement for limited periods of time, in which youth are not permitted to leave their room except for authorized purposes and activities, when they are exhibiting behavior that constitutes serious or evident danger to themselves or others.

<sup>7</sup> The Room Confinement Authorization and Termination Form is used to document the complete history of each room confinement, from referral to termination.

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for on any of the four (4) randomly selected audit dates. In September 2019, no residents were placed in room confinement on any of the four (4) audit dates in the referenced halls. If any resident was placed in room confinement, the Room Confinement Logbook, which is used to document observations and staff visitation to residents in room confinement, and the Overnight Response Logbook, are reviewed for the hall in which the residents were detained while on room confinement. The purpose of this review is to determine whether staff recorded information regarding any requests made by the residents to access the bathrooms and/or drinking water, and the amount of time taken to grant such requests. The purpose of the audit in cases of room confinement is also to assess whether staff accurately, clearly, and completely recorded information needed to audit the facility's compliance with the variance conditions.

#### **Audit Findings**

##### Site Visit Observations

On September 27, 2019, auditors conducted a site visit during the evening hours when residents were locked in their rooms. During the site visit, entries in the Overnight Response Logbook in each hall for each of the audit dates were photographed for review and analysis, and on-site observations were made relative to the implementation of the variance conditions and the procedures set forth in the Programs Memorandum.

On the day of the site visit, the total resident count in each hall was:

Hall 1 – *ACS Hall*

Hall 2 – *ACS Hall*

Hall 3 – *ACS Hall*

Hall 4 – *ACS Hall*

Hall 5 – *ACS Hall*

Hall 6 – *ACS Hall*

Hall 7 – six (6) residents

Hall 8 – five (5) residents

Hall 9 – hall closed<sup>8</sup>

Hall 10 – six (6) residents

Through the site visit, the following was observed for the Department halls, which include Hall 7, Hall 8, Hall 9 and Hall 10:

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<sup>8</sup> Hall 9 was closed on September 27<sup>th</sup>; therefore, no site visit was conducted in this hall on the site visit audit date.

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### *Availability of Drinking Water*

- Drinking water, either from water fountains or water coolers, were available in all of the Department halls.

### *Notice to Residents*

- The “Notice to Residents” poster, notifying residents of the procedures for access to bathrooms and drinking water during lock-in, was posted in all of the Department halls.

### *Programs Memorandum entitled “Overnight Response Logbook”*

- No Programs Memorandum was present in Hall 8.
- The updated Programs Memorandum, entitled “Overnight Response Logbook,” dated July 11, 2019, was posted in all of the remaining Department halls.

### *Room Labels*

- All resident rooms were properly labeled in each of the Department halls.

### *Unauthorized Use of Showers*

- One (1) resident housed in Hall 8 was using the shower rather than the toilet. The resident in Hall 8 using the shower was recorded in the Overnight Response Logbook.<sup>9</sup>

### *Red Lights over Room Doors*

- The red indicator lights were operable in all of the Department halls.

### *Overnight Response Logbook in Hall*

- All Department halls had an Overnight Response Logbook.

### Overnight Response Logbooks – Manual Review

A portion of the audit was conducted through a manual review of the Overnight Response Logbooks located in the Department halls on the four (4) audit dates. Listed below are the audit findings based on a manual review of the Overnight Response Logbooks on each of the dates audited.

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<sup>9</sup> As indicated in previous audit reports, residents sometimes use showers instead of, or in addition to, the toilets when provided access to bathrooms during the overnight tour. Hall staff are unable to turn off the showers in the residents’ bathrooms.

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### September 2<sup>nd</sup>

#### *Complete and Accurate Logbook Recordings, Access Afforded in Five (5) Minutes*

On this audit date, in six (6) of the seven (7) Department halls<sup>10</sup>, Hall 1, Hall 2, Hall 4, Hall 7, Hall 8 and Hall 10, staff properly recorded all the required Overnight Response Logbook information, and based on these halls' logbooks, residents were consistently afforded access to the bathrooms and/or drinking water within five (5) minutes, in compliance with the variance conditions.

#### *Total Logbook Entries*

The following was the total number of logbook entries regarding access to bathrooms and/or drinking water recorded for the seven (7) Department halls on this audit date:

Hall 1 – seven (7)  
Hall 2 – two (2)  
Hall 3 – ACS Hall  
Hall 4 – six (6)  
Hall 5 – ACS Hall  
Hall 6 – ACS Hall  
Hall 7 – nine (9)  
Hall 8 – six (6)  
Hall 9 – no logbook entries<sup>10</sup>  
Hall 10 – nine (9)

### September 8<sup>th</sup>

#### *Complete and Accurate Logbook Recordings, Access Afforded in Five (5) Minutes*

On this audit date, in five (5) of the seven (7) Department halls<sup>11</sup>, Hall 1, Hall 4, Hall 7, Hall 8 and Hall 10, staff properly recorded all the required Overnight Response Logbook information, and based on these halls' logbooks, residents were consistently afforded access to the bathrooms and/or drinking water within five (5) minutes, in compliance with the variance conditions.

#### *Incomplete, Inaccurate, or Indeterminate Logbook Recordings*

While an Overnight Response Logbook was located in Hall 2, no entries related to requests for access to bathrooms and/or drinking water were recorded on this audit date and, as a result, it

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<sup>10</sup> Hall 9 was closed on September 2<sup>nd</sup>; therefore, no logbook entries were made in the Overnight Response Logbook on this audit date.

<sup>11</sup> Hall 9 was closed on September 8<sup>th</sup>; therefore, no logbook entries were made in the Overnight Response Logbook on this audit date.

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could not be determined through a logbook review whether any requests for access to the bathrooms and/or drinking water were made in this hall. An entry related to the change of tour in Hall 2 was recorded in the logbook on this audit date.

### *Total Logbook Entries*

The following was the total number of logbook entries regarding access to bathrooms and/or drinking water recorded for the seven (7) Department halls on this audit date:

Hall 1 – twelve (12)  
Hall 2 – no logbook entries  
Hall 3 – ACS Hall  
Hall 4 – nine (9)  
Hall 5 – ACS Hall  
Hall 7 – two (2)  
Hall 8 – three (3)  
Hall 9 – no logbook entries<sup>11</sup>  
Hall 10 – thirteen (13)

### **September 21<sup>st</sup>**

#### *Complete and Accurate Logbook Recordings, Access Afforded in Five (5) Minutes*

On this audit date, in three (3) of the four (4) Department halls<sup>12</sup>, Hall 7, Hall 8 and Hall 10, staff properly recorded all Overnight Response Logbook information, and based on these halls' logbooks, residents were consistently afforded access to the bathrooms and/or drinking water within five (5) minutes, in compliance with the variance conditions.

### *Total Logbook Entries*

The following was the total number of logbook entries regarding access to bathrooms and/or drinking water recorded for the four (4) Department halls on this audit date:

Hall 7 – two (2)  
Hall 8 – nine (9)  
Hall 9 – no logbook entries<sup>12</sup>  
Hall 10 – four (4)

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<sup>12</sup> Hall 9 was closed on September 21<sup>st</sup>; therefore, no logbook entries were made in the Overnight Response Logbook on this audit date.

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**September 26<sup>th</sup>**

*Complete and Accurate Logbook Recordings, Access Afforded in Five (5) Minutes*

On this audit date, in three (3) of the four (4) Department halls<sup>13</sup>, Hall 7, Hall 8 and Hall 10, staff properly recorded all the Overnight Response Logbook information, and based on these halls' logbooks, residents were consistently afforded access to the bathrooms and/or drinking water within five (5) minutes, in compliance with the variance conditions.

### *Total Logbook Entries*

The following was the total number of logbook entries regarding access to bathrooms and/or drinking water recorded for the four (4) Department halls on this audit date:

Hall 1 – ACS Hall

Hall 2 – ACS Hall

Hall 3 – ACS Hall

Hall 4 – ACS Hall

Hall 5 – ACS Hall

Hall 6 – ACS Hall

Hall 7 – two (2)

Hall 8 – seven (7)

Hall 9 – no logbook entries<sup>13</sup>

Hall 10 – seven (7)

### Room Confinement Findings

No residents were placed in room confinement on the first two (2) randomly selected audit dates, which include Hall 1, Hall 2, Hall 4, Hall 7, Hall 8, Hall 9, and Hall 10, based on a review of the Room Confinement Authorization and Termination Forms in the seven (7) Department halls. In addition, no residents were placed in room confinement for the remaining two (2) randomly selected audit dates, which include Hall 7, Hall 8, Hall 9, and Hall 10, based on a review of the Room Confinement Authorization and Termination Forms in the remaining four (4) Department halls.

### Corrective Actions and Audit Recommendations

**The facility administration has implemented the following corrective actions:**

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<sup>13</sup> Hall 9 was closed on September 26<sup>th</sup>; therefore, no logbook entries were made in the Overnight Response Logbook on this audit date.



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Availability of updated Programs Memorandum 05/18R, entitled “Overnight Response Logbook”

- The facility administration placed an updated Programs Memorandum in Hall 8.

**The facility administration should implement the following corrective actions:**

Availability of updated Programs Memorandum 05/18R, entitled “Overnight Response Logbook”

- Supervisory staff should verify daily on each tour that the updated Programs Memorandum 05/18R, dated July 11, 2019, governing the use of the Overnight Response Logbook, is on post in each housing area hall for the officers’ instruction and reference.

# NYC Administration for Children's Services

## Horizon Juvenile Center Dry Cells Audit Report – September 2019

### Audit Parameters

The audit is conducted through an onsite visit and a manual review of the DYFJ Overnight Bathroom Logbooks. A manual review of the logbooks was conducted on four (4) randomly selected dates during the month of September 2019:

- September 4
- September 15
- September 28
- September 30

The DYFJ Overnight Bathroom Logbook<sup>1</sup> was established to document individualized information for each resident request, including the resident's name, book and case number, date, room number, light indicator time, time request was granted, and uniform staff information. The audit review was designed to determine whether residents were provided access to bathrooms and/or drinking water within five (5) minutes of their requests during lock-in hours, between 9 pm and 5 am<sup>2</sup>, absent extenuating circumstances. In addition, the audit reviewed the room confinement records in Horizon to determine whether residents in room confinement were granted access to bathroom and drinking water within five (5) minutes of their requests.

Residents at Horizon reside in dry cells, which are rooms that do not contain a flush toilet or wash basin with drinking water.<sup>3</sup> Residents who are not in room confinement access bathrooms and drinking water without an escort during lock-out hours. During lock-in hours, from 9 pm to 5 am, a resident who needs to access the bathroom and/or drinking water pushes a button within his or her room which activates a red light, alerting housing unit staff that the resident has a request. The DYFJ Overnight Bathroom Logbook is utilized to document the time of the request, based on the indicator light, and the time the request was granted to the resident.

As part of the audit, a video footage review was done of random entries identified in the logbook review. In all cases, it was found that the logbook entries aligned with what was observed on the video footage.

In Horizon, residents reside in halls. For the purpose of this audit, the halls are listed from 1 to 10. ACS was responsible for compliance with the limited variance from Minimum Standard 1-04(b)(2) within Hall 3, Hall 5, Hall 5, and Hall 6 on four (4) of the randomly selected audit dates in this report. In the case of the remaining three (3) randomly selected audit dates, September 15, September 28, and

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<sup>1</sup> The DYFJ Overnight Bathroom Logbook is used to comply with the variance condition requirement that housing unit staff documents when a bathroom escort or drinking water is requested and is afforded.

<sup>2</sup> On each randomly selected audit date, entries recorded in the DYFJ Overnight Bathroom Logbook commencing from 9 pm on the previous date and ending at 5 am on the audit date were reviewed.

<sup>3</sup> In the hall for residents with special medical needs, two (2) of the five (5) rooms contain a toilet and sink.

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September 30, ACS was responsible for compliance with the limited variance from Minimum Standard 1-04(b)(2) for Horizon within Halls 1 through 6 on the randomly selected audit dates<sup>4</sup>.

### Site Visit

In addition to the logbook review, the audit included a site visit that began during the overnight tour (after 9 pm) on October 11, 2019. The purpose of the site visit was to observe procedures for the provision of access to the bathrooms and/or drinking water and to assess whether the notices of the variance conditions were properly posted in the halls and/or disseminated to Horizon residents.

During the site visit, Youth Development Specialists on post were interviewed during the period when residents were locked in to assess their knowledge and understanding of the relevant variance condition requirements. In addition, the provision of bathroom and drinking water access during lock-in hours was observed.

The site visit also assessed whether:

- each hall had an operable water fountain or a water cooler; and
- Youth Development Specialists recorded both the residents’ requests to access the bathrooms and/or drinking water and the granting of such requests, and that the logbook entries accurately reflected the times taken to provide residents access to the bathrooms and/or drinking water.

### Room Confinement

When room confinement occurs during any of the four (4) randomly selected audit dates, the audit includes an assessment of whether residents placed in room confinement<sup>5</sup> during hours when residents are not normally locked in were provided access to bathrooms and/or drinking water within five (5) minutes of their requests. This component of the audit involves the review of “Room Confinement Authorization and Termination Forms”<sup>6</sup> to identify residents in the facility who were placed in room confinement during the month on any of the four (4) randomly selected audit dates. In September 2019, no residents were placed in room confinement on any of the four (4) audit dates. If any resident was placed in room confinement, a logbook used to document observations and staff visitation to residents in room confinement and the DYFJ Overnight Bathroom Logbook and in some cases the regular logbook also, are reviewed for the hall in which the residents were detained while on room confinement.

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<sup>4</sup> ACS assumed responsibility for Hall 3, Hall 5, and Hall 6 in August, 2019 and Hall 1, Hall 2, and Hall 4 on September 15, 2019.

<sup>5</sup> Residents may be placed in room confinement for limited periods of time, in which youth are not permitted to leave their room except for authorized purposes and activities, when they are exhibiting behavior that constitutes serious or evident danger to themselves or others.

<sup>6</sup> The Room Confinement Authorization and Termination Form is used to document the complete history of each room confinement, from referral to termination.

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### Audit Findings

#### Site Visit Observations

On October 11 2019, auditor conducted a site visit during the evening hours when residents were locked in their rooms. During the site visit, entries in the DYFJ Overnight Bathroom Logbook in each hall for each of the audit dates were reviewed and analyzed, and on-site observations were made relative to the implementation of the variance conditions.

On the day of the site visit, the total resident count in each hall was:

- Hall 1 – eleven (11) residents
- Hall 2 – six (6) residents
- Hall 3 – two (2) residents
- Hall 4 – six (6) residents
- Hall 5 – six (6) residents
- Hall 6 – two (2) residents
- Hall 7 – *DOC Hall*
- Hall 8 – *DOC Hall*
- Hall 9 – *DOC Hall*
- Hall 10 – *DOC Hall*

Through the site visit, the following was observed:

#### *Availability of Drinking Water*

- Drinking water, either from water fountains or water coolers, were available in all halls.

#### *Notice to Residents*

- The “Notice to Residents” poster, notifying residents of the procedures for access to bathrooms and drinking water during lock-in, was posted in all halls.

#### *Room Labels*

- All resident rooms were properly labeled in each hall.

#### *Red Lights over Room Doors*

- The red indicator lights were operable in all halls.

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### *DYFJ Overnight Bathroom Logbook in Hall*

- All halls had a DYFJ Overnight Bathroom Logbook.

### DYFJ Overnight Bathroom Logbooks – Manual Review

A portion of the audit was conducted through a manual review of the DYFJ Overnight Bathroom Logbooks located in the halls on the four (4) audit dates. Listed below are the audit findings based on a manual review of the DYFJ Overnight Bathroom Logbooks on each of the dates audited.

#### **September 4<sup>th</sup>**

##### *Complete and Accurate Logbook Recordings, Access Afforded in Five (5) Minutes*

On this audit date, in two (2) of the six (6) ACS halls, Hall 4 and Hall 5, staff properly recorded all the required DYFJ Overnight Bathroom Logbook information, and based on these halls’ logbooks, residents were consistently afforded access to the bathrooms and/or drinking water within five (5) minutes, in compliance with the variance conditions.

##### *Incomplete, Inaccurate, or Indeterminate Logbook Recordings*

While a DYFJ Overnight Bathroom Logbook was located in Hall 6, no entries related to requests for access to bathrooms and/or drinking water were recorded on this audit date and, as a result, it could not be determined through a logbook review whether any requests for access to the bathrooms and/or drinking water were made.

##### *Total Logbook Entries*

The following was the total number of logbook entries regarding access to bathrooms and/or drinking water recorded for each hall on this audit date:

Hall 1 – DOC Hall

Hall 2 – DOC Hall

Hall 3 – four (4)

Hall 4 – DOC Hall

Hall 5 – one (1)

Hall 6 – no logbook entries

Hall 7 – DOC Hall

Hall 8 – DOC Hall

Hall 9 – DOC Hall

Hall 10 – DOC Hall

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**September 15<sup>th</sup>**

*Complete and Accurate Logbook Recordings, Access Afforded in Five (5) Minutes*

On this audit date, in two (2) of the six (6) Halls, Hall 4 and Hall 5, staff properly recorded all the required DYFJ Overnight Bathroom Logbook information, and based on these halls’ logbooks, residents were consistently afforded access to the bathrooms and/or drinking water within five (5) minutes, in compliance with the variance conditions.

*Incomplete, Inaccurate, or Indeterminate Logbook Recordings*

While a DYFJ Overnight Bathroom Logbook was located in Hall 1, Hall 2, Hall 3, and Hall 6, no entries related to requests for access to bathrooms and/or drinking water were recorded on this audit date and, as a result, it could not be determined through a logbook review whether any requests for access to the bathrooms and/or drinking water were made.

*Total Logbook Entries*

The following was the total number of logbook entries regarding access to bathrooms and/or drinking water recorded for each hall on this audit date:

- Hall 1 – no logbook entries
- Hall 2 – no logbook entries
- Hall 3 – no logbook entries
- Hall 4 – one (1)
- Hall 5 – one (1)
- Hall 6 – no logbook entries
- Hall 7 – DOC Hall
- Hall 8 – DOC Hall
- Hall 9 – DOC Hall
- Hall 10 – DOC Hall

**September 28<sup>th</sup>**

*Complete and Accurate Logbook Recordings, Access Afforded in Five (5) Minutes*

On this audit date, in four (4) of the six (6) ACS halls, Hall 1, Hall 3, Hall 4, and Hall 6, staff properly recorded all the required DYFJ Overnight Bathroom Logbook information, and based on these halls’ logbooks, residents were consistently afforded access to the bathrooms and/or drinking water within five (5) minutes, in compliance with the variance conditions.

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#### *Incomplete, Inaccurate, or Indeterminate Logbook Recordings*

While a DYFJ Overnight Bathroom Logbook was located in Hall 2 and Hall 5, no entries related to requests for access to bathrooms and/or drinking water were recorded on this audit date and, as a result, it could not be determined through a logbook review whether any requests for access to the bathrooms and/or drinking water were made.

#### *Total Logbook Entries*

The following was the total number of logbook entries regarding access to bathrooms and/or drinking water recorded for each hall on this audit date:

- Hall 1 – two (2)
- Hall 2 – no logbook entries
- Hall 3 – one (1)
- Hall 4 – one (1)
- Hall 5 – no logbook entries
- Hall 6 – one (1)
- Hall 7 – *DOC Hall*
- Hall 8 – *DOC Hall*
- Hall 9 – *DOC Hall*
- Hall 10 – *DOC Hall*

#### **September 30<sup>th</sup>**

#### *Complete and Accurate Logbook Recordings, Access Afforded in Five (5) Minutes*

On this audit date, in three (3) of the six (6) ACS halls, Hall 1, Hall 4, and Hall 5, staff properly recorded all the required DYFJ Overnight Bathroom Logbook information, and based on these halls’ logbooks, residents were consistently afforded access to the bathrooms and/or drinking water within five (5) minutes, in compliance with the variance conditions.

#### *Incomplete, Inaccurate, or Indeterminate Logbook Recordings*

While a DYFJ Overnight Bathroom Logbook was located in Hall 2, Hall 3, and Hall 6, no entries related to requests for access to bathrooms and/or drinking water were recorded on this audit date and, as a result, it could not be determined through a logbook review whether any requests for access to the bathrooms and/or drinking water were made.

#### *Total Logbook Entries*

The following was the total number of logbook entries regarding access to bathrooms and/or drinking water recorded for each hall on this audit date:

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Hall 1 – two (2)  
Hall 2 – no logbook entries  
Hall 3 – no logbook entries  
Hall 4 – five (5)  
Hall 5 – two (2)  
Hall 6 – no logbook entries  
Hall 7 – *DOC Hall*  
Hall 8 – *DOC Hall*  
Hall 9 – *DOC Hall*  
Hall 10 – *DOC Hall*

**Corrective Actions**

**The facility administration has implemented the following corrective actions:**

**Documenting Complete and Accurate Entries in the DYFJ Overnight Bathroom Logbook**

- ACS staff have been directed to complete an entry, in the event there were no requests during any given night, stating such.