

NYC Administration for Children’s Services Horizon Juvenile Center Dry Cells Audit Report – January 2020

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 Jan. 14, 2020, the NYC Board of Correction renewed the Department’s six (6) month limited variance from Minimum Standard 1-04(b)(2) for Horizon¹for 1 month. 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 NYC Department Corrections (DOC) and the NYC Administration for Children’s Services (“ACS”). Prior to August 2019, DOC 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. During the month of 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 and now has responsibility for all housing areas.

Compliance with the limited variance from Minimum Standard 1-04(b)(2) for Horizon in housing areas operated solely by ACS staff will be audited and reported on by ACS.

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 January 2020:

- January 11

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

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- January 15
- January 21
- January 26

The DYFJ Overnight Bathroom Logbook² 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 am³, 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.⁴ 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.

In Horizon, residents reside in halls. For the purpose of this audit, the halls are listed from 1 to 10. ACS is responsible for compliance with the limited variance from Minimum Standard 1-04(b)(2) for Horizon within Halls 1 through 10 on the randomly selected audit dates⁵.

Site Visit

In addition to the logbook review, the audit included a site visit that began during the overnight tour (after 9 pm) on February 18, 2020. 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.

² 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.

³ 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.

⁴ In the hall for residents with special medical needs, two (2) of the five (5) rooms contain a toilet and sink.

⁵ ACS assumed responsibility for Hall 7 on November 15th 2019.

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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 confinement⁶ 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”⁷ 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 January 2020, 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.

Audit Findings

Site Visit Observations

On February 18, 2020, 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 5 – three (3)
Hall 6 – one (1)
Hall 7 – closed
Hall 8 – six (6)
Hall 9 – closed
Hall 10 – closed

⁶ 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.

⁷ 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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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. There were 3 exceptions:
- Hall 4 room 104, Hall 5 room 214 and Hall 10 room 208 are blinking and are scheduled to be fixed. None of those rooms are used for residents as the lights are not operable.

DYFJ Overnight Bathroom Logbook in Hall

- All halls had a DYFJ Overnight Bathroom Logbooks.

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.

January 11th

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

On this audit date, in four (4) halls, Hall 5, Hall 6, Hall 8 and Hall 9, 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.

Total Logbook Entries

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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 5 – four (4)
- Hall 6 – two (2)
- Hall 8 – eight (8)
- Hall 9 – one (1)

January 15th

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

On this audit date, in four (4) halls, Hall 5, Hall 6, Hall 8 and Hall 9, 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.

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 5 – three (3)
- Hall 6 – one (1)
- Hall 8 – four (4)
- Hall 9 – one (1)

January 21st

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

On this audit date, in four (4) halls, Hall 5, Hall 6, Hall 8 and Hall 9, 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.

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 5 – two (2)
Hall 6 – one (1)
Hall 8 – four (4)
Hall 9 – two (2)

January 26th

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

On this audit date, in four (4) halls, Hall 5, Hall 6, Hall 8 and Hall 9, 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 an DYFJ Overnight Bathroom Logbook was located each hall, no entries related to requests for access to bathrooms and/or drinking water were recorded on some of the audit dates 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 in this hall.

Corrective action: Going forward, ACS staff are directed to do an entry, in the event there were no requests during any given night, stating such. We are continuing to reiterate the requirement to staff at roll call. We have included it is training of new staff going forward and have management checking. As of the first week of January, there is now an Operations Manager on the night tour. In addition, in mid December, we had a Tour Commander also transfer in to Horizon on the night tour.

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 5 – eight (8)
Hall 6 – zero (0)
Hall 8 – four (4)
Hall 9 – one (1)