

## Horizon Juvenile Center Dry Cells Audit Report August 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. 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.

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.

## NYC Department of Correction Horizon Juvenile Center Dry Cells Audit Report – August 2019

### Audit Parameters

The audit is conducted through an onsite visit 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 August 2019:

- August 1<sup>st</sup>
- August 10<sup>th</sup>
- August 19<sup>th</sup>
- August 28<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 is 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 the randomly selected audit date in this report.

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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 on August 2, 2019.

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#### Site Visit

In addition to the logbook review, the audit included a site visit that began during the overnight tour (after 9 pm) on August 30, 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>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 in the seven (7) halls the Department was responsible for on any of the four (4) randomly selected audit dates. In August 2019, no residents were placed in room confinement on any of the four (4) audit dates in the seven (7) 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

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<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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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 August 30, 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 – ten (10) residents  
Hall 2 – five (5) residents  
Hall 3 – *ACS Hall*  
Hall 4 – five (5) residents  
Hall 5 – *ACS Hall*  
Hall 6 – *ACS Hall*  
Hall 7 – seven (7) residents  
Hall 8 – eight (8) residents  
Hall 9 – hall closed<sup>7</sup>  
Hall 10 – eight (8) residents

Through the site visit, the following was observed for the Department halls: Hall 1, Hall 2, Hall 4, Hall 7, Hall 8, Hall 9 and Hall 10:

##### *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.

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<sup>7</sup> Hall 9 was closed on August 30; therefore, no site visit was conducted in this hall on the site visit audit date.

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- Although Hall 1 had a “Notice to Residents” poster affixed to the wall, this poster was covered by a piece of paper which prevented residents from viewing the contents of this poster.

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

- No Programs Memorandum was present in Hall 2, Hall 8 and Hall 9.
- 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; hall staff indicated that the resident was afforded access to the bathroom.<sup>8</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 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.

#### **August 1<sup>st</sup>**

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

On this audit date, in four (4) of the ten (10) Department controlled halls<sup>9</sup>, Hall 1, Hall 4, Hall 8, and Hall 10, staff properly recorded all the required Overnight Response Logbook information,

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<sup>8</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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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*

Through the audit process, one (1) inaccurate logbook recording was noted in an Overnight Response Logbook. In Hall 2's logbook, on one (1) occasion, "2115" was recorded in the "Light Indicator Time" and "2110" was recorded in the "Time Afforded." As a result, it could not be determined whether access to the bathroom and/or drinking water was provided within five (5) minutes on this occasion.

Overnight Response Logbooks were not located in in Hall 3, Hall 5, or Hall 6 on this audit date. As a result, it could not be determined whether access to the bathroom and/or drinking water was provided within five (5) minutes.

#### *Access Afforded Exceeded Five (5) Minutes*

As part of the logbook review, the audit identified the number of requests for access to the bathroom and/or drinking water where the time in which the request was granted exceeded five (5) minutes. On this audit date, based on a review of Hall 7's Overnight Response Logbook, on one (1) occasion the granting of the request for bathroom and drinking water access exceeded five (5) minutes and was granted in twenty-five (25) minutes. In the above instance, staff recorded the following in the "Remarks" column: "One resident out at the time."

#### *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 controlled halls on this audit date:

- Hall 1 – six (6)
- Hall 2 – five (5)
- Hall 4 – five (5)
- Hall 7 – thirteen (13)
- Hall 8 – seven (7)
- Hall 9 – no logbook entries<sup>9</sup>
- Hall 10 – ten (10)

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<sup>9</sup> Hall 9 was closed on August 1<sup>st</sup>; therefore, no logbook entries were made in the Overnight Response Logbook on this audit date.

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### August 10<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 controlled halls, Hall 1, Hall 2, Hall 4, Hall 7 and Hall 8, 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 not violations of the variance conditions on one (1) occasion in Hall 9's logbook, the logbook entry did not record the "Date." In addition, on one (1) occasion in Hall 10's logbook, the logbook entry also did not record the "Date."

#### *Access Afforded Exceeded Five (5) Minutes*

On this audit date, based on a review of the halls' Overnight Response Logbooks, all residents were afforded access to the bathrooms and/or drinking water within five (5) minutes of their requests, 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 controlled halls on this audit date:

- Hall 1 – nine (9)
- Hall 2 – five (5)
- Hall 4 – four (4)
- Hall 7 – seven (7)
- Hall 8 – two (2)
- Hall 9 – three (3)
- Hall 10 – nine (9)

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### August 19<sup>th</sup>

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

On this audit date, in six (6) of the seven (7) Department controlled halls<sup>10</sup>, Hall 1, Hall 2, Hall 4, 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 seven (7) Department controlled halls on this audit date:

Hall 1 – seven (7)  
Hall 2 – four (4)  
Hall 4 – two (2)  
Hall 7 – ten (10)  
Hall 8 – eleven (11)  
Hall 9 – no logbook entries<sup>10</sup>  
Hall 10 – nine (9)

### August 28<sup>th</sup>

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

On this audit date, in six (6) of the seven (7) Department controlled halls<sup>11</sup>, Hall 1, Hall 2, Hall 4, 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 seven (7) Department controlled halls on this audit date:

Hall 1 – five (5)

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<sup>10</sup> Hall 9 was closed on August 19<sup>th</sup>; therefore, no logbook entries were made in the Overnight Response Logbook on this audit date.

<sup>11</sup> Hall 9 was closed on August 28<sup>th</sup>; therefore, no logbook entries were made in the Overnight Response Logbook on this audit date.

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Hall 2 – three (3)  
Hall 4 – six (6)  
Hall 7 – four (4)  
Hall 8 – four (4)  
Hall 9 – no logbook entries<sup>11</sup>  
Hall 10 – five (5)

#### Room Confinement Findings

No residents were placed in room confinement on any of the four (4) randomly selected audit dates, based on a review of the Room Confinement Authorization and Termination Forms in the seven (7) Department controlled halls.

#### Corrective Actions and Audit Recommendations

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

##### Posting of Notice to Residents

- In Hall 1, the “Notice to Residents” poster affixed to the wall was uncovered, which allowed residents to view the contents.

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

- The facility administration placed an updated Programs Memorandum in Hall 2, Hall 8 and Hall 9.

##### Documenting Complete and Accurate Entries in the Overnight Response Logbooks

- Officers responsible for each incomplete or inaccurate logbook recording have been identified and provided with counseling.

**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.

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#### Documenting Complete and Accurate Entries in the Overnight Response Logbooks

- The facility administration should continue to train staff to consistently and properly record the times in the Overnight Response Logbook in the columns entitled “Light Indicator Time” and “Time Afforded.” In addition, the facility administration should direct supervisors to verify daily that facility staff is properly completing the above referenced columns.
- The facility administration should continue to train staff to consistently, properly and completely record all entries in the Overnight Response Logbook (e.g., Date, Light Indicator Time, Bathroom Request, Drinking Water Request, etc.).

## NYC Administration for Children's Services Horizon Juvenile Center Dry Cells Audit Report – August 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 two (2) randomly selected dates during the month of August 2019:

- August 23
- August 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.

In Horizon, residents reside in halls. For the purpose of this audit, the halls are listed from 1 to 10. ACS assumed responsibility for compliance with the limited variance from Minimum Standard 1-04(b)(2) for Horizon within Hall 3, Hall 5, and Hall 6 on August 2, 2019.<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 August 30, 2019. The purpose of the site visit was to observe procedures

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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.

<sup>4</sup> Compliance with the limited variance from Minimum Standard 1-04(b)(2) for Horizon in Hall 1, Hall 2, Hall 4, Hall 7, Hall 8, Hall 9, and Hall 10 are captured in the Department's August 2019 Dry Cell Audit Report.

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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 two (2) 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 two (2) randomly selected audit dates. In August 2019, no residents were placed in room confinement on any of the two (2) 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, 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.

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<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 August 30, 2019, auditors 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 photographed for review and analysis, 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 3 – five (5) residents  
Hall 5 – five (5) residents  
Hall 6 – hall closed<sup>7</sup>

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.

#### *DYFJ Overnight Bathroom Logbook in Hall*

- All halls had a DYFJ Overnight Bathroom Logbook.

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<sup>7</sup> Hall 6 was closed on August 30; therefore, no site visit was conducted in this hall on the site visit audit date.

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### 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 two (2) 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.

#### **August 23<sup>rd</sup>**

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

On this audit date, in three (3) of the halls, Hall 3, Hall 5, 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.

##### *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 3 – three (3)  
Hall 5 – six (6)  
Hall 6 – two (2)

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

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

On this audit date, in three (3) of the halls, Hall 3, Hall 5, Hall 6<sup>s</sup>, 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 3 – nine (9)  
Hall 5 – nine (9)

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Hall 6 – no logbook entries<sup>8</sup>

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<sup>8</sup> Hall 6 was closed on August 30; therefore, no logbook entries were made in the DYFJ Overnight Bathroom Logbook on this audit date.