

Baldwin County Regional Juvenile Detention Center

Grievance Procedure

I. Summary

The Baldwin County Juvenile Detention Center shall afford all residents the right to submit a grievance regarding any facility conditions, health care, educational services, or behavior or actions of other youth or staff. A grievance system is in place and any resident who chooses to file a grievance shall not be subject to disciplinary action or retaliation of any kind. The intent of the grievance process is to provide:

1. A mechanism for residents to express their concerns.
2. A process for the efficient and fair resolution of legitimate residents' concerns.
3. For the effective management of the facility and departments within the facility.

II. Purpose

To provide a well-defined process for residents to resolve concerns related to the conditions of confinement.

III. Definitions

As used in this document, the following definitions shall apply:

- A. Appeal: The submission of a grievance for a higher level of review following the receipt of a response at a lower level.
- B. Department of Human Resources: State or county services for the protection of children including investigations of abuse or neglect.
- C. Classification: A process used to determine the appropriate housing assignment, education needs, and program needs for a resident before and after they arrive at the facility.
- D. Emergency Grievance: A grievance filed by a resident based upon a situation or condition which presents a potential and substantial risk to life or safety of a resident/staff or when irreparable harm to the resident's health is imminent.
- E. Grievance: A written report by a resident asking for the resolution of a problem or incident of concern considered by the grievant to be unjust.
- F. Grievance Officer: Assigned facility staff member responsible for reviewing and responding to grievances.
- G. Grievant: A resident who submits a grievance seeking a resolution.
- H. Mandated Reporter: All employees of the facility are mandated to report all knowledge or reports of abuse or neglect of a youth in the care of the facility.
- I. Prison Rape Elimination Act (PREA): A federal law supporting the prevention, detection, and response to sexual abuse and sexual harassment within facilities. This law applies to all federal, state, county, local and private facilities housing adults and juveniles.
- J. Remedy: A meaningful response, action, or resolution to a grievance.

- K. Retaliation: Any act or threat of action against a resident for the legitimate and honest use of the grievance process.

IV. General Guidelines

- A. The facility's grievance procedure in the resident living areas and facility handbook.
- B. Facility staff shall explain the grievance process to residents upon intake.
 - a. Facility staff shall indicate the date the resident received training by entering the information on the resident's intake folder.
 - b. The Resident Handbook includes instructions for the grievance process.
- C. Residents' parents/legal guardians are given the opportunity to learn about the grievance process. Written information is provided at the front desk for all parents/legal guardians. Parents and legal guardians can also obtain the information from their child's probation officer.
- D. Facility staff shall be trained in the grievance process so they can assist residents in filing grievances upon request. Grievances are confidential and shall be handled in a confidential manner by staff.
- E. Facility administration shall ensure the grievance resolution process provides:
 - a. An available system for hearing and resolving concerns of residents.
 - b. Assistance to residents in resolving issues and concerns they may have.
 - c. Specific timeframes at each level of review to ensure timely responses.
 - d. A fair, neutral, and prompt decision in response to concerns.
 - e. A management tool for the director to track the number, nature, and response to grievances.
 - f. Assurances no resident shall be subject to retaliation as a result of submitting a grievance.
- F. The assistant director is designated as the Grievance Officer.
- G. Residents may attempt to resolve a grievance or concern against another resident or staff member by informally discussing the issue with the concerned party. Staff shall make themselves available to discuss issues or solutions with the resident in order to resolve the issue in an informal manner.
- H. Issues which may prompt a resident to submit a grievance include, but are not limited to:
 - a. Violation of a resident's rights
 - b. Policies, procedures, and rules of the facility
 - c. Resident's civil rights
 - d. Words and actions of individual staff, contractors, or volunteers at the facility
 - e. Acts of retaliation for the legitimate and honest use of or participation in the resident's grievance policy
 - f. Concerns relating to the condition of care or treatment within the facility
 - g. Unsafe or unsanitary living conditions
 - h. Abuse, neglect, and harassment which includes sexual abuse and sexual harassment from either staff or other residents
 - i. Issues related to educational services
 - j. Issues related to facility meals

- I. Some issues cannot be resolved by the resident grievance process including but not limited to:
 - a. Federal, state or local law
 - b. Court actions and decisions
 - c. Polices from agencies outside of the facility
 - d. Matters over which the facility has no control
- J. Residents may initiate the grievance process when they have a problem, concern or an incident has occurred affecting them personally
- K. Residents who choose to use the grievance process shall not be subject to retaliation by staff or other residents
- L. Residents shall not be subject to disciplinary action for the legitimate and honest use of the resident grievance process. Residents who use the grievance process for illegitimate reasons may be subject to the facility's standard disciplinary procedures. This may include writing a grievance based on information or accusations proven to be false.
- M. Residents shall be made aware of the levels of appeal available to them when they disagree with the findings/decisions at any level of the grievance process.

V. Procedures

- A. Residents who wish to submit a grievance shall do so by submitting a Resident Grievance Form (Attachment A).
- B. Residents may request staff assistance in completing a grievance form. Staff shall respond positively to a resident's request for assistance.
- C. Resident Grievance Forms shall be readily accessible to residents in locations throughout the facility. Forms are located in all the dayrooms, classrooms, and multi-purpose room.
- D. No resident shall be required to ask a staff member for a grievance form.
- E. The facility has a locked box for resident grievances. Grievances shall be placed in a sealed envelope by the resident and the sealed envelope placed by the resident in the locked box. Only the Assistant Director and Director have keys to the locked grievance box.
- F. Residents may submit emergency grievances in instances where the situation presents a potential or substantial risk to life or safety or in situations where the health or well-being of a resident or staff member may be harmed.
 - a. In these instances, residents may still place the grievance form in the grievance box, or they may give the form to a trusted staff member to deliver to the Assistant Director or designee.
 - b. Staff shall in no way impede the process, or interfere in any manner, when a resident believes there is a legitimate need to submit this type of grievance.
- G. Residents are encouraged to provide the following information on their Resident Grievance Form:
 - a. Resident's name
 - b. A description of what occurred
 - c. Name(s) of staff involved in applicable
 - d. Date and time of incident
 - e. Where incident occurred
 - f. Name(s) of witnesses

- g. Any steps they have taken to resolve the issue
 - h. Proposed remedy or resolution to the issue, problem, or concern
 - i. Signature and date
- H. If residents are unable to obtain a grievance form, residents should attempt to contact the Assistant Director/designee or Director as soon as possible by placing a written letter in the grievance box or telling any facility staff member.

VI. Grievance Review Process

A. The Grievance Officer shall:

- a. Collect grievances on each of their scheduled workdays from the locked grievance box.
- b. For scheduled days off the officer will respond to emergency grievances only. Non-emergency grievances will be addressed by the Grievance Officer upon their next working day, which shall be considered the date of receipt with respect to the timelines in this policy.
- c. For extended time off (e.g., annual leave, sick leave, jury duty, etc.) the designee shall respond to all grievances as per policy.
- d. Ensure that each grievance is dated
- e. Ensure grievances are logged in the grievance log on the same day it is received.
- f. Review each grievance and prioritize any grievance which may require immediate action and/or notification.
- g. Return from to a resident if there is missing information (this should be done as quickly as possible to maintain required timeframes)
- h. Return a form to a resident if the grievance has profanities/obscenities (the resident shall be asked to re-write the grievance taking out the unacceptable language); this does not apply in cases where the obscenities reflect language actually used or exchanged between parties involved.
 - i. If the resident refuses to re-write the grievance:
 1. Grievances that allege abuse, neglect, PREA violations or other serious allegations shall be addressed without delay. The facility may consider consequences or follow-up to remediate the inappropriate behavior.
 2. Grievances determined by the Grievance Officer to be unrelated to abuse, neglect, PREA, or other safety concerns may be delayed pending the revision of the grievance with acceptable language.

B. All Baldwin County Regional Juvenile Detention Employees are mandated reporters of suspected abuse or neglect, including sexual abuse. If the grievance is an allegation of abuse or neglect, it shall no longer be handled as a youth grievance, and shall be immediately reported to the Alabama Department of Human Resources, the Director and licensing authority.

- a. The Grievance Officer shall be prepared to provide the basic information of the situation such as the name of the resident, name of the alleged perpetrator, and summary of the incident.

- C. If the incident involves sexual abuse or sexual harassment, the Grievance Officer shall immediately notify the PREA Compliance Manager and the Director who will then notify local law enforcement.
- D. The Grievance Officer has three business days to provide a response, in writing, to each grievance. This may include:
 - a. Why the grievance does not meet the criteria for action and what alternatives he/she has to address the issue.
 - b. What remedies will be taken by the facility and/or youth to address the situation.
 - c. Notification an investigation will be initiated, and a response will be provided at the conclusion of the investigation.
- E. If a grievance is filed against the Grievance Officer, the Grievance Officer shall submit the grievance to the Director who shall delegate the grievance to another person.
- F. If the grievance requires an investigation, the Grievance Officer shall conduct an investigation to last no longer than three business days to include:
- G. Upon completion of the investigation, the response shall be prepared on the Resident Formal Grievance Investigative Results Form (Attachment B). At a minimum the following information should be included:
 - a. Name of the staff person investigating the grievance and their title.
 - b. Whether timeframes were met or not (an explanation shall be provided when timeframes are not met).
 - c. The decision reached.
 - d. Any broad corrective action taken by the facility to remedy process or procedural deficiencies.
 - e. Additionally, the responder may also address or reference any policy or guideline; any witnesses interviewed; any suggestions for further consideration such as other alternatives or any positive, commendations related to a resident's decision making or behavior.
 - f. Grievance Officer's signature.
- H. A face-to-face meeting with the resident shall take place to present the findings as outlined in the Grievance Investigative Results Form (Attachment B).
 - a. Presentation to the resident should be as clear and concise as possible and free of language difficult for the resident to comprehend.
 - b. Resolution of the grievance may include, when appropriate, mediation between the resident and other party.
- I. The resident shall have an opportunity to review the form, ask questions and indicate the date.
- J. If the resident agrees with the findings, the resident shall be asked to sign their name and indicate the date.
- K. If the resident disagrees with the findings, the resident shall indicate so and sign and date the form. Within five days, the resident may submit their request for the next level of review to the Director. The resident shall resubmit via the grievance box.

- L. A resident can choose to withdraw their grievance at any time. The Grievance Officer must document the resident's decision and rationale on the grievance or the Response to a Formal Grievance Form (Attachment C).
- M. If the resident disagrees with the Grievance Officer's decision, the Director shall review the grievance to include a review of all paperwork and may include a new investigation and/or an interview with the resident.
 - a. The Director Grievance Officer shall notify the Director within 24 hours of their obligation to review a grievance.
 - b. The Grievance Officer shall provide all relevant materials to the Director within 48 hours.
 - c. The Director shall complete a written response to the grievance on the Response to a Formal Grievance Form (Attachment C) within 10 business days. The Director's findings shall be the final decision.

VII. Documentation

- A. Copies of all resident grievances and responses at every level of review shall be retained and be provided to the resident.
- B. At every level of review, a copy of the resident's grievance and the response is to be filed in paper in a location only accessible by administrative staff as designated by the Director.
- C. The Director shall monitor grievances regarding the nature of the grievance types, types of remedies being provided, the number of appeals, if timeframes are being met, and if there are any potential trends developing.