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Draft Jamaican Standard
Specification
for
Correctional services for children



BUREAU OF STANDARDS JAMAICA

COMMENT PERIOD:

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DRAFT JAMAICAN STANDARD

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Draft Jamaican Standard

Specification

for

Correctional services for children

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Jamaican Standards establish requirements in relation to commodities, processes, and practices, but do not purport to include all the necessary provisions of a contract.

The attention of those using this specification is called to the necessity of complying with any relevant legislation.

Amendments

No.	Date of Issue	Remarks	Entered by and date

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DRAFT JAMAICAN STANDARD

Foreword

The Ministry of National Security (MNS) proposed that National Standards for correctional services be developed with the support of the Bureau of Standards Jamaica (BSJ). In keeping with its mandate, the BSJ agreed to facilitate local participation in the development of National Standards for correctional services in Jamaica through establishing a Correctional Services Technical Committee (CSTC). The CSTC was established to develop and promulgate standards for the correctional service industry in keeping with regional and international normative standards.

The Technical Committee (TC) is comprised of members from a wide cross-section of ministries, agencies, and disciplines, the private sector, and academia. The TC recognizes the issues relating to children within the correctional setting that need to be addressed; therefore, a working group was established to develop a standard that provides guidance on how to treat these identified gaps and meet the needs of children within the correctional setting. While the standard does not cover every issue related to children's correctional management, the highlighted challenges deserve consideration for inclusion in a complementary Jamaican Standard. The standard also does not prescribe how children's correctional services should be designed and implemented. But it specifies what is expected strategically and operationally based on regional and international normative standards.

The Correctional Service Standard for children was prepared by the BSJ's CSTC, working group one (J-WG1) Juveniles. This standard is a part of a suite of Jamaican standards that are first of its kind developments intended for use by correctional institutions in Jamaica.

This standard is voluntary.

Committee representation

The preparation of this standard for the Standards Council, established under the Standards Act of 1969, was carried out under the supervision of the Correctional Services Technical Committee which at the time comprised the following members:

Acknowledgement

Acknowledgement is made to the International Organization for Standardization (ISO) for the use of material taken from ISO and the United Nations Office on Drug and Crime (UNODC) for the use of the material taken from the Beijing Rules, the Havana Rules, Criminal Justice Handbook Series, and the Convention on the Rights of the Child (2007).

Related documents

This standard makes reference to the following:

- a) International Organization for Standardization, ISO 9001:2015 Quality Management Systems— Requirements

- b) United Nations Convention on the Rights of the Child. (2007). CRC/C/GC/10-25 April 2007- GENERAL COMMENT No. 10 (2007). Children's Rights in Juvenile Justice. Committee On the Rights of the Child Forty-fourth session Geneva, 15 January-2 February 2007
- c) United Nations Office on Drugs and Crime, Handbook on the Classification of Prisoners. Criminal Justice Handbook Series. Vienna: United Nations, (2020)
- d) United Nations Rules for the Protection of Juveniles Deprived of their Liberty (The Havana Rules), Adopted by General Assembly resolution 45/113 of 14 December 1990
- e) United Nations Standard Minimum Rules for the Administration of Juvenile Justice ("The Beijing Rules"), Adopted by General Assembly resolution 40/33 of 29 November 1985

Draft Jamaican Standard Specification for Correctional services for children

1. Scope

The Children's Correctional Service Standard provides specification to protect the fundamental rights of children in custody and improve the quality care provided by the children's correctional service.

As such, the standard does not deal with matters related to children in need of supervision or "uncontrollable children" or children deprived of liberty outside of the children's correctional service. It also does not address important administrative challenges related to for example fiscal management and the management of young offenders 18 years and older.

2. Normative references

The following documents are referred to in the text in such a way that some or all their content constitutes the requirements of this document. For dated references, only the edition cited applies. For undated references, the latest edition of the referenced document (including any amendments) applies:

- a. Office of the Children's Advocate, Child Justice Guidelines, Kingston (2013).
- b. Ministry of Justice, Justice Undertakings for Social Transformation (JUST Programme, Global Affairs Canada, and United Nations Development Programme. Swift, Sure and Inclusive Justice Through Effectively Caring for Witnesses. An Integrated Strategic Plan. Kingston: Sir Arthur Lewis Institute of Social & Economic Studies, Crime Prevention and Offender Management Research Cluster, The University of the West Indies (2020).
- c. Ministry of Justice, Justice Undertakings for Social Transformation (JUST) Programme, Global Affairs Canada, and United Nations Development Programme. Protocol for Strengthening Multi-Agency Interaction within Jamaica's Child Justice System. Kingston: Sir Arthur Lewis Institute of Social & Economic Studies, Crime Prevention and Offender Management Research Cluster, The University of the West Indies (2020)

3. Terms and definitions

For the purpose of this standard the following definitions apply:

3.1 administrative separation

Physical segregation of a client from the general custodial population usually to minimise threats to the safety and security of the facility

3.2 best interests

Principle, requiring that all interventions, actions and decisions are made in accordance with the goal of encouraging and optimising the safety, security, wellbeing, mental and emotional health and development of children

NOTE this definition is grounded in the United Nations Convention on the Rights of the Child and the Child Care and Protection Act.

3.3 case management

Coordinated care that involves state and non-state correctional service providers collaborating to plan, streamline, process, monitor, and evaluate correctional services in ways that address the needs of offenders who are exposed to a range of interventions which form part of an integrated and coherent change management process

3.4 case manager

Person who performs casework and manages the progression of clients

NOTE 1 They keep comprehensive records of their clients' progress throughout the correctional process including assessing the minors needs through co-developing a plan and acting in accordance with this plan to ensure that their identified needs are met.

NOTE 2 They also work with clients to co-develop release plans and liaise with external partners who provide support services.

3.5 child diversion

Child-appropriate process of determining the responsibility and treatment of a child in conflict with the law without resorting to formal adjudication by a court

NOTE This may include elements of mediation, supervision, or restorative justice.

3.6 children's correctional centre

Place where children are held after the conclusion of a matter where a correctional order is made

3.7 children's correctional system

Network of state and non-state agencies, who collectively support the rehabilitation, and reintegration of clients in addition to the administration of children's correctional centres and children's remand centres including probation, counselling, and drug treatment services

3.8 children with disabilities

Persons under 18 years of age who have a long-term physical, mental, intellectual, or sensory impairment which may hinder their effective participation in society on an equal basis with other children

3.9 child witness

Person under 18 years of age who gives testimony to a court of law or statement to the police

3.10 classification plan

Specifies criteria and procedures for determining and changing the status of placement or allocation of clients to one of several custody or supervision levels to match their individual risks and needs to available correctional resources and support

3.11 client

Young person under the age of 18 years who is custodial or non-custodial care

3.12 correctional order

Order from the court for a specific duration that a child offender is to be sent to or admitted to a children's correctional centre

3.13 evidence-based corrections

Scientific process of designing, implementing, monitoring and evaluating innovations (projects, policies, strategies, programmes etc.) that have proven to be effective

3.14 juvenile case management system (JCMS)

JCMS is a computerised system that has the capability to capture real time information on child offenders and remandees from reception to release

NOTE It is updated by, and accessible to staff directly involved in the care of children in custody. The system also has safeguards built in to protect the privacy of clients.

3.15 lethal weapon

Any instrument, firearm, device, material, or any other substance that can cause great bodily harm when used as intended or otherwise

3.16 placement

Process of ensuring that children who have been sentenced by the courts are placed in secure physical locations that optimally support their welfare, ensure their safety, minimise risks of harm and addresses their rehabilitation needs

3.17 probation

Legal disposition that allows children who have been sentenced to remain in the community under the supervision of a probation officer, subject to conditions imposed by the probation order

3.18 rehabilitation

Process of empowering persons in the care of the correctional service through a range of appropriate desistance-supportive interventions supported by a structured and enabling correctional environment

3.19 reintegration

Process that follows any interaction with the criminal justice system whereby persons released from custody transition to life in the community as productive and law-abiding citizens with support

3.20 risk assessment

Evaluation of the likelihood and impact or harm of recidivism or reoffending

3.21 sexual abuse

Any unlawful sexual activity with a minor, including sexual touching or sexual intercourse with a minor under the age of 16 or rape

3.22 solitary confinement

The practice of isolating clients in closed cells for 22-24 hours a day, usually free of human contact, for prolonged periods of time

3.23 strip cell

Involves confining clients under psychiatric observation in enclosed spaces void of any material or instrument that can be used to commit self-harm or suicide

4. Context of the children's correctional institution

- 4.1 Institutional leadership shall define the scope of the management system and assure its consistency with the mission, vision, stated purpose and the legal, regulatory, and other requirements of the children's correctional system.
- 4.2 Institutional leadership shall define and detail the policies, processes and interactions of the children's correctional system delivered by the institution, demonstrate, and implement processes that enable staff to understand and appropriately respond to the specific and general needs and expectations of all stakeholders.
- 4.3 The incarceration of children shall be used as a measure of last resort and the unnecessary and extended remand and imprisonment of children shall be discouraged.
- 4.4 All decisions and actions of the children's correctional system shall be geared towards facilitating the protection of children who are in custody, hereinafter referred to as "client", — their rehabilitation and effective reintegration into society.
- 4.5 The rights of clients shall be secured without discrimination with regards to their gender, race, ethnicity, age, language, religion, disability, class, nationality, sexual orientation, offences, or other status.
- 4.6 All clients shall be protected from all forms of abuse and ill-treatment including physical and sexual abuse.
- 4.7 Clients shall be treated with care, sensitivity, fairness, and respect throughout the correctional process, with special attention given to their best interests, personal situation, well-being, and specific needs including their need to be informed about their rights in language that they can understand based on the nature of the judicial proceedings and to be consulted and heard in all proceedings involving or affecting them.
- 4.8 The children's correctional system shall provide age and gender-appropriate services in recognition of the differing needs of clients at different stages of development.

4.9 Except where exceptions are appropriately documented, the Children's Correctional Service Standard shall apply to all aspects of the children's correctional system in Jamaica.

5. Leadership

5.1 Leadership commitment

5.1.1 Institutional leadership shall in consultation with all stakeholders establish clear goals for the children's correctional system.

5.1.2 All goals established for the children's correctional system shall align with the institutional and national vision.

5.1.3 Institutional leadership shall design, plan, implement and deploy processes that enable leadership and staff to demonstrate an understanding of the mission, vision, purpose, and strategic context of the service.

5.1.4 Institutional leadership shall demonstrate its commitment by designing, planning, implementing and continually improving appropriate evidenced-based, trauma-informed correctional interventions.

5.1.5 Institutional leadership shall demonstrate commitment by deploying well-planned evidenced-based care that is least restrictive and supports the effective reintegration of clients released from custody.

5.2 Policies and procedures for children's correctional centres

5.2.1 Institutional leadership shall design, develop, deploy, and improve management policies, processes, and practices to ensure that the vision and mission of the institution are fulfilled.

5.2.2 Institutional leadership shall ensure that policies and procedures are relevant, adequately implemented, and assessed for efficiency, effectiveness, and impact.

5.2.3 Policies shall be adequately communicated to all stakeholders in an approved and suitable format to assure effectiveness of communication and action on policy.

5.2.3.1 Standardised manuals and procedures

5.2.3.1.1 Institutional leadership shall develop, document, maintain and continually improve its approved policies, procedures, and practices.

5.2.3.1.2 A standard children's correctional service manual of policies and procedures shall guide operations in all children's correctional centres, undergo periodic review and updated as needed.

5.2.3.1.3 Specific manuals, policies and procedures shall inter alia exist for the following areas of children's correctional management:

- (a) juvenile case management system;
- (b) human resource management including performance evaluation;

- (c) suicide prevention;
- (d) procurement;
- (e) ethical and professional standards;
- (f) prison research code of ethics;
- (g) admission procedures;
- (h) access to information including media engagement;
- (i) information security management system including data protection and privacy;
- (j) escort protocols;
- (k) violence prevention and anti-bullying measures;
- (l) removal including deportation;
- (m) disciplinary penalties;
- (n) occupational health and safety;
- (o) disaster management;
- (p) classification;
- (q) emergency preparedness and management;
- (r) educational programmes;
- (s) research and evaluation;
- (t) reintegration programme;
- (u) maintenance of hygiene and sanitation practices;
- (v) trauma-informed care for special categories of clients;
- (w) grievance procedure;
- (x) preventing and reporting sexual abuse or harassment.

5.2.3.1.4 The children's correctional service shall have written plans that specify emergency evacuation procedures, and which are reviewed and updated bi-annually.

5.2.3.1.5 The emergency management plans shall include procedures for addressing the following:

- (a) terrorist attack.
- (b) chemical attack.
- (c) revolt.
- (d) escapes.
- (e) drive by shootings.
- (f) drone attack.
- (g) attempted suicides.
- (h) natural disasters.

5.2.3.1.6 The fire suppression plan shall be coordinated with, and recognised by, the local fire department.

5.2.3.1.7 The plan shall detail staff responsibilities, cover evacuation procedures, and show locations of exits, breathing apparatus, fire hoses or fire extinguishers, evacuation routes, muster points and any other features pertinent to fire safety.

5.2.3.1.8 Institutional leadership shall ensure that the following fire safety and prevention requirements are consistently implemented:

5.2.3.1.8.1 The training of all staff in first aid and fire-fighting equipment including the conducting of an annual refresher training and fire drills.

5.2.3.1.8.2 The maintenance of corridors and walkways which should be kept clear, including those near fire exits which should be plainly and permanently marked with appropriate signs.

5.2.3.1.8.3 The Servicing and maintenance of smoke detectors which are installed at strategic points throughout the premises.

5.2.3.1.8.4 The annual servicing and maintenance of basic firefighting equipment, including fire extinguishers, should be kept in a secure but accessible storage area.

5.2.3.1.9 Institutional leadership shall have the facility inspected for fire prevention and safety measures by the local fire department at least once every year, and a record of such inspection shall be kept on file within the facility.

5.2.3.1.10 Up-to-date written policies and procedures shall be implemented in all children's correctional facilities to effectively separate clients who are determined to be disposed escape, or to assault staff and other clients, or whose presence in the general custodial population poses a serious threat to the orderly operation or security of the facility.

5.2.3.1.11 Written policies and procedures shall specify that clients placed in solitary confinement are afforded living conditions and privileges approximating those available to the general population and exceptions are justified by clear and sustained evidence.

5.3 Institutional roles and responsibilities

5.3.1 Institutional leadership shall ensure that the roles, responsibilities and interactions of all staff and partners align with the vision and mission of the institution and are efficiently and effectively defined, documented, and communicated to all stakeholders.

5.4 Planning

5.4.1 Institutional management shall ensure that all children's correctional centres take efficient action to address strategic, tactical, and operational risk and opportunities relevant to delivering effective evidenced-based and trauma-informed care.

5.4.2 Institutional management shall ensure that appropriate evidenced-based and innovative methods are designed, developed, and deployed to identify, evaluate, prevent, and mitigate the risks of harm and optimise opportunities associated with the efficient and effective execution of services.

5.4.2.1 Setting objectives

5.4.2.1.1 In partnership with all stakeholders, institutional leadership shall identify specific, measurable, achievable, and time-bound objectives for the service along with appropriate and suitable methods to achieve these objectives.

5.4.2.1.2 Institutional leadership shall detail and implement methods for the effective assessment, review and improvement of the children's correctional service objectives and the methods applied to achieve these objectives which should align with the institutional goals.

5.4.2.2 **Planning for change**

5.4.2.2.1 Institutional leadership shall ensure that changes made to the management system and its processes are done in a structured manner and in a way that prevents unauthorised changes or use of unapproved policies, processes, procedures, or practices.

5.4.2.2.2 Institutional leadership shall establish procedures that authorise line staff to make proposed changes, subject to being formalised and implemented once approved by the competent authorities.

5.4.2.2.3 The agreed goals or expected impact of the children's correctional system shall be:

- (a) the embodiment of a strategic plan;
- (b) translated into measurable results;
- (c) subject to ongoing monitoring and periodic evaluation with the support of a logical framework matrix or and monitoring, evaluation and learning framework.

5.4.2.2.4 The Strategic Plan shall:

- (a) comprise a physical and electronic document that is subject to periodic review and clearly states the strategic goals, objectives, core values and guiding principles of the children's correctional service;
- (b) provide a roadmap for the children's correctional service over a five-year period;
- (c) include a stakeholder map that demarcates key interfaces between the children's correctional system and other criminal justice agencies (including the courts, police and army) and the voluntary sector;
- (d) promote evidence-based corrections;
- (e) identify clear, relevant, economic, adequate and monitorable (CREAM) key performance indicators;
- (f) include a risk analysis;
- (g) inform and feed into the corporate strategy;
- (h) include the timely and consistent implementation of the Children's Correctional Service Standard as a key output.

6. Support

6.1 Resources

6.1.1 Institutional leadership shall ensure that resources necessary and relevant to ensure efficient and effective delivery of evidenced-based and trauma-informed services are budgeted and made available to the institution.

6.1.2 Institutional leadership shall review the adequacy of resources on an ongoing basis and the outcome of the reviews should inform planning and budgeting processes.

6.1.3 Institutional leadership shall ensure available resources are appropriately and efficiently deployed in sufficient quantities.

6.2 Human resources

6.2.1 Institutional leadership shall ensure that criteria for recruitment, selection, special training, management responsibilities and conditions of work are established, documented, implemented, monitored, and improved upon on an ongoing basis.

6.2.2 Institutional leadership shall ensure that specially designated and trained staff are assigned to the children's correctional service.

6.2.3 All children's correctional service staff shall provide the established standard of care to meet the distinctive needs of all children in custodial and non-custodial care.

6.2.4 All potential candidates for employment shall undergo a thorough background investigation, including a check of references, criminal records and central registry of suspected child abuse and neglect reports.

6.2.5 Institutional leadership shall put measures in place to ensure that the professional competence of staff dealing with children in custodial and non-custodial care is regularly reinforced and developed through training, mentorship, coaching, supervision and performance reviews and feedback.

6.3 Competence

6.3.1 Institutional leadership shall ensure that all staff, volunteers, and contractors are sufficiently competent to deliver effective evidenced-based and trauma-informed services because of qualification and experience.

6.3.2 Institutional leadership shall ensure that all staff, volunteers, and contractors are adequately oriented in the relevant institutional policies, procedures, and practices before being deployed.

6.4 Training

6.4.1 Institutional leadership shall ensure that adequate developmental training opportunities as outlined in policy manual, are provided to staff, volunteers, and contractors based on risk, needs, changes, and strategic objectives of the service.

6.4.2 Development and training programmes shall meet the competency and job-related training needs of all staff and volunteers.

6.4.3 Institutional leadership shall ensure that the following requirements are implemented and continually monitored.

6.4.3.1 All children's correctional service staff and volunteers assigned to a children's correctional centre complete a minimum of the 12-week intensive residential training programme prior to assignment.

6.4.3.2 All children's correctional service educators are licensed or have a teaching accreditation from a recognised higher education institution, or they are facilitating classes under the supervision of certified or licensed educators.

6.4.3.3 All vocational training programmes are delivered by persons who are qualified in the area in which vocational training is being conducted.

6.4.3.4 Records of all training and awareness activities are maintained in a central registry tracking the records of all staff, volunteers, and relevant contractors.

6.5 Infrastructure

6.5.1 Institutional leadership shall ensure that infrastructure remains suitable to effectively address the needs of children under correctional supervision and discharge the requirements of the service.

6.5.2 Periodic assessments of the children's correctional system's infrastructure and facilities shall be conducted to assure compliance with legal, regulatory, statutory, and other requirements.

6.5.3 The facilities for children in custody shall be operated within the rated capacity, and kept clean and well ventilated, have the necessary amenities including bathroom facilities, play and recreational areas, meeting rooms and spaces for interviews and visits with family.

6.5.4 Periodic inspections and reviews of the rated capacity and capacity level of each centre shall be conducted annually, and reports shared with sector leadership.

6.5.5 All security safeguards including locks, intercom systems, closed-circuit television (CCTV) cameras, fire walls, encryptions shall be regularly inspected to ensure that they are in proper working order.

6.5.6 All security measures in place shall promote the safe operation of the facility and assure the orderly completion of the custodial and non-custodial terms of children under the supervision of the children's correctional system.

6.6 Work environment

6.6.1 Institutional leadership shall ensure that the work environment remains suitable to fulfil the requirements of the children's correctional system.

6.6.2 Institutional management shall provide an environment in which clients, staff and visitors feel safe, secure, and not threatened by any form of physical, sexual or any other form of abuse or harassment.

6.6.3 All clients and visitors to the facility shall be subjected to search upon entering and leaving the facility.

6.6.4 Searches shall respect the dignity and privacy of clients and visitors.

6.6.5 A body cavity search may only be conducted by a licensed medical professional of the same gender.

6.6.6 Written documents detailing search procedures are to be maintained in a format that is accessible to all clients, visitors and staff and shall outline the conditions under which various types of searches shall be undertaken by supervisory staff.

6.6.7 Restraints must be used as a last resort mechanism and shall only be used, where necessary, for the reasons outlined below. Where restraints are deemed necessary, they should be used in a manner that applies the minimum amount of force necessary and for the shortest possible time. Restraints must never be used as a form of punishment or to deter or sanction prohibited activities.

6.6.8 Institutional leadership shall put in place policies and procedures to guide the use of restraints and lethal weapons. These policies and procedures shall be accompanied by appropriate staff training and refresher activities and shall be closely monitored to ensure consistent implementation. At minimum, policies and procedures shall instruct staff to:

6.6.8.1 Use the least amount of restraint, as and when necessary:

- (a) to prevent a client from self-injury or injury to others, by order of a superintendent or his or her designee;
- (b) as a short-term measure and by order of a superintendent or his or her designee, to prevent damage to property;
- (c) as a security precaution during a transfer or temporary emergency;
- (d) on medical grounds, at the direction of the physician or responsible medical authority.

6.6.8.2 Use lethal weapons as an absolute last resort mechanism.

6.6.8.3 The amount of force used shall be the bare minimum necessary and shall be applied for the shortest time necessary.

6.6.8.4 At no time shall unauthorised staff be allowed to carry weapons into the facility.

6.6.9 Staff members shall only be authorised to use lethal weapons, including stun shields, tear gas, stun belts, Tasers, and mace, where:

- (a) Such use is in keeping with the policies and procedures developed by institutional leadership;
- (b) The staff member has been trained and certified in the use of such equipment.

6.6.10 Institutional leadership shall ensure that all staff who directly deal with children in custodial and non-custodial care are trained in techniques that enable the minimal use of force in the restraint of aggressive behaviour, and refresher training courses are conducted on an annual basis.

6.7 Communication

6.7.1 Institutional leadership shall ensure that the communication needs of all stakeholders are adequately met with the support of a comprehensive and effective communication plan and strategy.

6.7.2 Institutional leadership shall ensure that persons doing work within the children's correctional service are aware of:

- (a) the correctional services policy;
- (b) relevant correctional objectives;
- (c) their contribution to the effectiveness of the system, including the benefits of improved performance;
- (d) the implications of adhering to children's correctional service requirements.

6.8 Documented information

6.8.1 The institution's children's correctional service management system shall include documented information:

- (a) required by this national standard; and
- (b) determined by the institution as being necessary for effective service delivery.

6.8.2 When creating and updating documented information, institutional leadership shall ensure appropriate:

- (a) identification and description (e.g., a title, date, author, or reference number);
- (b) format (e.g., language, software version, graphics) and media (e.g., paper, electronic); and
- (c) review and approval for suitability and adequacy.

6.8.3 Institutional management shall ensure that documented information required by the management system and by this national standard shall be:

- (a) available and suitable for use, where and when it is needed; and
- (b) adequately protected (e.g., from loss of confidentiality, improper use, or loss of integrity).

6.8.4 Institutional management shall ensure that client files and records are accurate, up-to-date, and securely maintained and electronic information systems interface with inter-agency and departmental electronic information systems.

6.8.5 The effective management of documented information shall entail secure:

- (a) distribution, access, retrieval and use;
- (b) storage and preservation (including legibility);
- (c) control of changes (e.g., version control);
- (d) retention and disposition.

6.8.6 Institutional leadership shall put systems to ensure that:

6.8.6.1 Documented information of external origin that has been determined by the institution to be necessary for the planning and operation of the correctional service management system are kept in a secure and confidential location, access to which is closely regulated.

6.8.6.1.1 Documented information retained as evidence of conformity shall be protected from unintended alterations.

6.8.7 Staff members shall document all incidents, accidents, escapes, use of force incidents and other breaches of correctional policies by clients, and all actions taken in response to each such incident. Institutional leadership shall review such records to ensure that incidents are acted upon in a manner consistent with corrective action processes.

6.9 Information security management

6.9.1 The children's correctional service shall have access to and use an organised system of information retrieval, sharing and review that forms part of strategic planning and decision-making.

6.9.2 A computerised record of each client admitted to each children's correctional centre shall be maintained on the electronic JCMS.

6.9.3 Physical and electronic formats of data derived from the following sources shall form part of the children's correctional services' information management system:

- (a) log of incoming and outgoing telephone calls - date, time, number, name and relation;
- (b) secured personal property and money of the client;
- (c) log of visitors - date, name, relation;
- (d) annual reports;
- (e) completed release information consent forms;
- (f) quarterly monitoring reports for the children's correctional service;
- (g) a roster of current court appearances and relevant detention orders;
- (h) agency referrals, visits, and placements;
- (i) types and hours of training completed by staff and volunteers;
- (j) CCTV camera footage;
- (k) audit reports.

6.9.4 All data management sources shall be reviewed at least quarterly by relevant staff and made available for examination by onsite inspectors and auditors, to the extent allowed by the data protection and privacy policy.

6.9.5 The children's correctional system's cybersecurity protocols shall be prioritised in all considerations related to the security and management of the computer laboratories and all digital surveillance technology.

6.10 Data protection and privacy

6.10.1 In compliance with any requirements of the Data Protection Act, 2020, institutional leadership shall ensure that there are written policies and procedures for safeguarding client records from improper and unauthorised disclosure.

6.10.2 The data protection and privacy policies and procedures shall address disclosure or mandatory reporting of, for example allegations of child abuse or neglect, unreported delinquent acts, and suicidal ideation.

7. Operations

7.1 Operational planning and control

7.1.1 Institutional leadership shall plan, implement, and effectively manage the processes needed to provide high-quality care and services to clients, as determined by:

- (a) the requirements for products and services;
- (b) criteria established for:
 - i. the processes (including management processes),
 - ii. the acceptance of programmes, processes, regimes and services; and
- (c) resources needed to ensure effective and efficient service delivery.

7.1.2 The institution shall appropriately manage planned changes and review the consequences of unintended changes, taking action to mitigate any adverse effects, as necessary (see section 5.4).

7.1.3 The institution shall also ensure that outsourced processes are properly managed.

7.2 Case management

7.2.1 Central functions of client case management shall be screening, assessing, risk assessment, planning, implementation, and evaluation.

7.2.2 The children's correctional system's case management process shall:

- (a) inform clients of their rights (including the right to counsel and report breaches of their rights to the Office of the Children's Advocate), expectations and responsibilities from the point of intake and admission through to release including reminding clients, their parents or legal guardians or support persons of the date and time of any hearings
- (b) assess and closely monitor the child to determine whether he or she has experienced or is experiencing undue discomfort, trauma, exhibiting suicidal tendencies, experiencing harassment or intimidation, and indicate this to relevant authorities or stakeholders at the earliest possible opportunity;
- (c) promote collaboration when working between child justice agencies involved in the care of the clients;
- (d) closely coordinate the intervention of social workers, psychologists, teachers, other professionals, and staff who have regular contact with clients with the intervention of medical doctors in seeking to provide a seamless web of support and therapy and without prejudice to professional confidentiality; and

(e) synthesise coordinated resources into a coherent delivery plan.

7.2.3 Re-entry planning shall begin at the time of sentencing, as such, case managers shall be assigned early in process.

7.2.4 The re-entry plan shall be developed in a manner that prioritises preparing clients for early release and give an indication of appropriate post-release support services the client will seek to access.

7.2.5 An individual plan shall guide the re-entry planning process and be implemented in a timely fashion.

7.3 Juvenile Case Management System (JCMS)

7.3.1 Institutional leadership shall ensure that a case file is created for every child on admission to a children's correctional centre and maintained throughout the period of detention or confinement.

7.3.2 As far as possible, the case file shall include but not limited to the following:

- (a) photograph of the child
- (b) completed intake form;
- (c) biometric information;
- (d) a case number;
- (e) date and time of admission, any peculiar observation made, discharge and release;
- (f) name (last, first, initial, nickname, aliases, name changes);
- (g) last known address;
- (h) name and title of staff presenting and receiving client;
- (i) specific charges;
- (j) orders received if adjudicated;
- (k) court dates;
- (l) age, date of birth, place of birth, gender, race or ethnicity, nationality, marital status;
- (m) special circumstances and needs;
- (n) tentative release date;
- (o) name and address of next of kin;
- (p) emergency contact details;
- (q) name, address, relationship, and phone number of parent(s) or legal guardian(s); or trusted adult person;
- (r) number and names of child dependents;
- (s) health status;
- (t) literacy, education level and skills;
- (u) religious affiliation;
- (v) evidence of body vermin (or rashes or other evident health conditions);
- (w) tattoos, scars or other visible marks;
- (x) medical record;
- (y) inventory of property;
- (z) name of attorney;
- (aa) copy of birth certificate or passport or other forms of ID.

7.3.3 The electronic JCMS shall:

- (a) be used to capture real time information on children from reception to release;
- (b) updated immediately upon change of information and accessible to, all staff directly involved in the care of clients.

7.3.4 Trained personnel shall routinely enter all required data derived from physical records, forms, logs, and reports into the JCMS.

7.3.5 The JCMS shall store data obtained from the following instruments:

- (a) youth admission interview (including personal information and picture);
- (b) Institutional leadership's interview (verified admission information and Welfare Case Manager assignment);
- (c) Risk or needs assessment and analysis rating tool (risk or reoffending);
- (d) individual development rehabilitation plan;
- (e) individual development rehabilitation plan review;
- (f) medical admission questionnaire;
- (g) medical record;
- (h) risk of harm form;
- (i) summary of case management;
- (j) community release plan;
- (k) psychological assessment;
- (l) psychological summary;
- (m) outcome report (including educational or vocational progress and all activities done with the child, responsible team member and timeline);
- (n) academic and vocational records and reports.

7.3.6 A medical, dental, and mental health appraisal shall:

- (a) form part of the intake process by way of the medical admission questionnaire or a post-admission interview by a health practitioner or medical personnel;
- (b) be completed before the client is placed in the general custodial population or dormitory area;
- (c) include review of initial screening; taking of height, weight, pulse, blood pressure, and temperature; medical, dental, and psychiatric assessment; assessment or testing for communicable disease and other examinations deemed appropriate by the responsible medical doctor or his or her designee.

7.4 **Classification and placement**

7.4.1 The children's correctional service's classification plan shall guide the assignment of clients to classification categories for placement based upon consideration of gender, age and other applicable criteria comprehensively delineated in the classification policy manual.

7.4.2 Placement shall be made based on the following considerations:

- (a) drug and alcohol use and treatment;
- (b) transitional requirements;
- (c) medical or psychiatric conditions;
- (d) physical limitations or disabilities;
- (e) citizenship status;
- (f) risk of harm to self and others;
- (g) verified existence of a communicable disease;
- (h) pregnancy and lactation;
- (i) offences;
- (j) institutional history;
- (k) client's security rating and relevant risk factors.

7.4.3 Clients whose cases have been adjudicated shall be classified as low, medium, or high risk using the JCMS. Classification decisions shall be subject to triennial review.

7.4.4 Administrative separation based on safety and security concerns shall only be used as an absolute last resort following approval by a competent authority who shall specify the nature of the separation, its maximum duration, and the basis for its imposition in compliance with relevant national laws.

7.5 Use of isolation or solitary confinement

7.5.1 Institutional leadership shall put in place policies and procedures to guide the use of isolation and solitary confinement and shall monitor these policies and procedures closely to ensure consistent compliance. At minimum, these policies and procedures shall include the following:

7.5.1.1 Clients placed in protective custody shall be afforded the same privileges as the general custodial population.

7.5.1.2 Clients placed in disciplinary separation shall maintain their basic rights including contact with legal guardian or legal representative, access to reading material and at least one hour to exercise outdoor every day.

7.5.1.3 Separation of clients accused of a major rule violation requiring solitary confinement for the safety of the client or others, or to ensure the security of the facility shall be for a maximum period of up to 24 hours pending review by a competent authority or his or her designee who was not involved in the incident.

7.5.1.4 A medical practitioner shall be immediately notified in situations where isolation is used as a temporary restraint measure to calm clients. The medical practitioner shall be given immediate access to the client concerned.

7.5.2 The procedures and documentation used for isolation shall include:

- (a) documentation of reasons for placement and retention in administrative separation;
- (b) self-placement or protective custody in which the client signs an agreement requesting to be placed in, or removed from, protective custody;
- (c) seven days periodic review and documentation, at least every seven (7) days a client is in administrative separation.

7.5.3 Clients who are removed from the regular programs because of administrative separation, must be referred to and seen by the assigned case manager, counsellor or probation officer as soon as possible, but not more than 24 hours after removal.

7.5.4 Each children's correctional centre shall provide for the separate management of the following categories of clients:

- (a) adjudicated clients and those on remand
- (b) female and male clients;
- (c) younger and older clients;
- (d) clients who are especially vulnerable (children with drug and alcohol disorders, children with disabilities, children with communicable diseases);
- (e) high profile cases or cases that attract significant media attention due to the public figures involved or the seriousness of the crimes committed;
- (f) clients awaiting removal;
- (g) sexual offenders.

7.6 **Special operational considerations for especially vulnerable children**

7.6.1 Institutional leadership shall ensure that special arrangements and systems are developed to meet the needs of clients deemed “especially vulnerable”.

7.6.2 In the orienting process, reasonable accommodations shall be made for “especially vulnerable” clients.

7.6.3 The children’s correctional centre shall make accommodation for special diets prescribed by authorised medical staff and clients with dietary restrictions due to religion.

7.6.4 Particular attention shall be paid to the needs of children on remand, children in need of supervision, children with disabilities, foreign nationals, drug and alcohol dependent clients, child witnesses, clients living with HIV/AIDs, clients who identify with the LGBTQ+ community and pregnant and lactating mothers.

7.7 **Children on remand**

7.7.1 All children on remand shall be kept separate from adults and children on Correctional Orders.

7.7.2 All clients whose cases are being adjudicated shall be detained in a separate institution or a separate part of the institution established for their keeping.

7.8 **Children with disabilities**

7.8.1 Institutional leadership shall ensure that children’s correctional centres are adapted to accommodate and address the needs of children with disabilities, and shall put systems in place to ensure that:

7.8.1.1 Unless otherwise specified in the suite of Children’s Correctional Service Standards, children with disabilities shall be detained and confined in a children’s correctional centre in which the accommodation has been adapted to meet their needs.

7.8.1.2 Telephone terminal devices, interpreters, and other reasonable accommodations are provided to clients with hearing disabilities.

7.8.1.3 Clients who are blind or visually impaired shall be facilitated to review all relevant documents including pamphlets, orientation packages and verification forms, by ensuring that material is provided in braille or in audio or any other suitable format made available by leadership.

7.8.2 Written policies and procedures shall be put in place in each children’s correctional centre to guide the treatment of all minors with mental disabilities, as determined by the classification plan, in accordance with guidance and standard procedures developed or informed by a child psychologist.

7.8.3 Strip cells shall be implemented in accordance with the suicide prevention protocols but shall not be used as a form of punishment.

7.9 **Foreign nationals**

7.9.1 Parents or legal guardians and other representatives of children who are foreign nationals, shall be informed of the possibilities of requesting that the execution of their sentence take place in their country of origin. Similar information shall be shared with the client, in language that they can understand.

7.9.2 Every attempt shall be made to meet the linguistic needs of non-English speakers by engaging competent interpreters on a needs basis and ensuring that as far as possible clients are provided written and audio material in their mother language.

7.9.3 A directory of consular representatives, child welfare and justice agencies and the names of contact persons in receiving states shall be maintained by the children's correctional service.

7.9.4 The children's correctional service, guided by the legal department, shall cooperate fully with diplomatic or consular officials representing such clients in seeking to meet their unique needs.

7.10 **Drug and alcohol dependent children**

7.10.1 The children's correctional service shall develop and put in place drug abuse prevention interventions. These interventions shall be implemented wherever needed, and shall be administered by specialised staff, with the support of relevant stakeholders.

7.10.2 Drug and alcohol assessment, education and intervention shall be provided and aimed towards helping children understand the issues arising from their use of alcohol or other drugs, and how they can safely manage or reduce their use.

7.10.3 Steps shall be taken to transfer children who abuse drugs and alcohol to specialised addiction treatment centres or specialised community-based rehabilitation programmes once it has been determined by the courts that their needs cannot be accommodated in any of the children's correctional centres.

7.10.4 Children who are required to complete their sentences in confinement but need specialised care shall have supervised access to detoxification facilities.

7.11 **Child witnesses**

7.11.1 Institutional leadership shall respond without delay in a child-friendly manner to any report (orally or in writing) of a case involving a victimisation of a client and guided by the Child Justice Guidelines (2013) notify the relevant authorities.

7.11.2 Child witnesses in custody shall receive the following care services:

- (a) on-the-scene crisis counselling;
- (b) orientation of next steps;
- (c) reclassification where necessary in cases considered high profile;
- (d) referrals to other witness support services including victim or offender mediation;
- (e) status of investigation updates;
- (f) notification of court dates;
- (g) liaison with appropriate authorities to secure assigned transportation to and from hearings;
- (h) accompaniment to court only where necessary and allowed.

7.11.3 Clients who have been violently victimised while in custody shall be:

- (a) notified of their rights and next steps by trained staff;
- (b) referred to follow-up or long-term counselling;
- (c) notified of the filing and the outcome of the case -- whether it was dismissed, adjudicated or sentenced.

7.11.4 Client victim-witnesses in sexual offences and assault matters shall be seen by an approved medical doctor and immediately referred to the relevant authorities.

7.11.5 Special measures shall be put in place to protect and separate child witnesses who are confined in the same social environment as the accused.

7.11.6 Children's correctional service staff shall fully support the participation of a child witness in legal proceedings through liaising with appropriate authorities to arrange transportation and related assistance to ensure that the child is safely transported and arrives to the court proceedings on time.

7.12 Clients living with HIV/AIDS

7.12.1 Decisions shall be taken on the same grounds as in the community and in the best interests of children in custody living with HIV/AIDS.

7.12.2 Clients who test positive while in custody shall be provided counselling.

7.12.3 Staff shall take the necessary steps to minimise the stigmatisation, abuse and exclusion of clients living with HIV/AIDS in custody.

7.12.4 Referrals shall be made to specialised care services which include access to antiretroviral therapy where clients living with HIV consent to receiving treatment.

7.13 Clients who identify as LGBTQ+

7.13.1 All clients in custody, including those who identify as LGBTQ+ or are nongender conforming, shall be treated with respect, dignity and fairness and enjoy equal access to available rehabilitation services.

7.13.2 Clients shall volunteer to report their sexual orientation at admission.

7.13.3 Steps shall be taken to minimise the stigmatisation, abuse and exclusion of clients who self-identify as or are falsely accused of identifying as LGBTQ+ or nongender conforming.

7.14 Clients who are pregnant and lactating

7.14.1 Counselling on reproductive healthcare and family planning shall be provided in all facilities.

7.14.2 There shall be a focus on the development, implementation, and ongoing review of policies, procedures and processes to facilitate the provision of comprehensive levels of counselling, care, and accommodation to pregnant and lactating girls.

7.14.3 Emergency delivery kits shall be available in each children's correctional centre that has girls in custody.

7.14.4 The use of custody restraints during labour and delivery is prohibited. However, if used earlier in the pregnancy, it shall be applied only in extenuating circumstances and limited to handcuffs in front of the body and administered by a trained officer.

7.15 Sanitation and maintenance

7.15.1 The accommodation provided for clients shall respect their human dignity, privacy and meet health and hygiene requirements.

7.15.2 Clients shall have ready access to sanitary facilities that are hygienic, and which provide respect for privacy

7.15.3 Due regard shall be given to ventilation, floor space, cubic content of air, lighting, access to clean water, maintaining clean, safe, functional toilets and, maintenance of drainage system, secure garbage collection and disposal in keeping with specific minimum requirements outlined in legislation and the Institutional Correctional Service Standard.

7.15.4 The facility shall be kept orderly, clean, and free of litter to discourage the presence and breeding of vermin within the facility.

7.16 **Personal hygiene and health**

7.16.1 The health and well-being of clients shall be safeguarded according to recognised medical standards applicable to children in the wider community.

7.16.2 Health education programmes shall be adapted to the needs of clients and shall seek to foster attitudes and behaviour conducive to the prevention of transmissible diseases.

7.17 **Clothing and grooming**

7.17.1 Clients shall be provided with an adequate amount and reasonable choice of clean apparel in a decent condition, and their preferences in matters of personal grooming are maximised consistent with facility guidelines.

7.18 **Nutrition and diet**

7.18.1 Clients shall be provided with a nutritious diet in keeping with their health, culture, religion, physical condition, age, and involvement in rehabilitation programmes.

7.18.2 Each centre shall provide three (3) nutritious meals at regular mealtime intervals with no more than fourteen (14) hours between breakfast and the evening meal.

7.18.3 Clients shall always have access to safe drinking water.

7.19 **Medical care**

7.19.1 Every client admitted to a children's correctional centre shall undergo medical, dental and health screening that shall involve the following:

- (a) current illnesses and health problems, including those specific to girls, and including sexually transmitted diseases and other infectious diseases, as appropriate;
- (b) medications taken and special health requirements;
- (c) screening of other health problems designated by the responsible physician;
- (d) behavioural observation, including state of consciousness and mental status, appearance, conduct, tremor, and sweating;
- (e) notation of body deformities, trauma markings, scars, birthmarks, tattoos, bruises, lesions, ease of movement, jaundice, and other physical characteristics of medical interest;
- (f) condition of skin and body, including rashes and infestations, and needle marks or other indications of drug abuse;
- (g) disposition or referral of clients to qualified medical staff on an emergency basis;
- (h) past or present treatment, hospitalisation or likelihood of mental disturbance or suicide attempt;
- (i) dental problems;
- (j) use of alcohol and other drugs, which includes types of drugs used, mode of use, amounts used, frequency of use, date or time of last use, and a history of problems that may have occurred after ceasing use;
- (k) medical disposition regarding housing of clients including any referrals to appropriate health care service for emergency treatment.

7.19.2 Every client who is ill, who complains of illness during confinement or who demonstrates symptoms of physical or mental difficulties, shall be examined promptly by a licensed medical practitioner.

7.19.3 If a client or his or her parent or legal guardian refuses medical, psychological, or psychiatric treatment deemed necessary, this case shall be presented to the Family Court for resolution.

7.19.4 Each shall in custody have in place formalised arrangements for the provision of emergency medical and dental care including:

- (a) emergency evacuation of clients in need of treatment;
- (b) access to an appropriate emergency medical vehicle;
- (c) access to one (1) or more designated hospital emergency rooms or other appropriate health facilities;
- (d) access to emergency physician and dentist services.

7.19.5 Clients referred to a community hospital or medical facility within the community shall only be re-admitted to the facility based on a written medical clearance.

7.19.6 Clients with diagnosed infections shall be treated in accordance with established clinical guidelines.

7.19.7 Clients in need of medical treatment or healthcare shall be paired with a medical or healthcare professional best suited to meet their needs.

7.19.8 Each facility shall have SOPs for the separation of clients with communicable diseases.

7.19.9 Every centre shall have a medical examination room that is private and properly outfitted with an examination bed.

7.19.10 At least two Suicide Monitoring Rooms shall be in operation.

7.19.11 Appropriate medical care shall be provided and documented following any use of force incident involving clients.

7.19.12 All medical interventions, including the use of medication, shall be made only on medical grounds.

7.19.13 The withholding of medication or any form of medical treatment shall not be used for the purpose of a disciplinary measure or maintaining order.

7.20 **Grievance procedures**

7.20.1 Clear, accessible, and fair avenues for lodging and resolving complaints and grievances shall be in place in each facility or in relation to the community sanction or measure to which the client concerned is subject.

7.20.2 The grievance mechanism shall include the following provisions:

- (a) written responses to all grievances, including the reasons for the decision;
- (b) responses within prescribed, reasonable time limit, with special provisions for responding to emergencies;
- (c) advisory review of grievances;
- (d) participation by staff in the design and operation of the grievance procedure;
- (e) access by all clients, with guarantees against reprisal;
- (f) applicability over a broad range of issues;
- (g) means for resolving questions.

7.20.3 Mediation and restorative conflict resolution shall be given priority as means of resolving client grievances.

7.20.4 All procedures for making requests, complaints and appeals shall be:

- (a) conspicuously posted around the facility or written in pamphlets or handbooks;
- (b) simple and effective;
- (c) explained and made available to clients;
- (d) involve a decision-making process that is prompt;
- (e) protect the right of the client or parent or legal guardian to appeal to an independent and impartial authority.

7.21 Access to legal assistance

7.21.1 Institutional leadership shall establish and closely monitor policies and procedures to protect the right of clients to have access to legal counsel and courts and assist clients in making confidential contact with attorneys and their authorised representatives through telephone communications, uncensored correspondence, visits, or other means.

7.21.2 Institutional leadership shall provide clients with reasonable facilities for gaining effective, timely and confidential access to advice and assistance regarding grievances, including unrestricted and unsupervised visits by legal advisors.

7.22 Rehabilitation interventions

7.22.1 Institutional leadership shall ensure that evidence-based rehabilitation programmes and services are established for the range of learning and development needs and issues experienced by clients. Appropriate programmes and services shall be initiated for all clients immediately after completing the admissions process.

7.22.2 All interventions shall be designed to promote the development of clients, and systems put in place to ensure that clients are actively encouraged to participate in them.

7.22.3 Every rehabilitation programme shall have a graduation strategy that clearly delineates criteria for gaining access and exiting each programme.

7.22.4 Interventions shall be designed to meet the needs of clients in accordance with gender, social and cultural background, stage of development, type of offence committed, and proven professional standards based on research findings and best practices in the field.

7.22.5 A suite of interventions that include vocational and educational training, spiritual enrichment, library services and counselling shall be implemented in each centre and subjected to annual review, adjustment, and improvement.

7.23 Access to education

7.23.1 Counselling on reproductive healthcare and family planning shall be provided in all facilities.

7.23.2 The literacy and proficiency level of all clients shall be assessed at admission or shortly thereafter.

7.23.3 The quality of education offered inside each facility shall be comparable to that found in the community and where necessary referrals should be made to support clients with learning deficits.

7.23.4 All education and vocational programmes shall be delivered by trained and certified teachers and instructors.

7.23.5 Steps shall be taken to integrate clients into the educational and vocational training system of the country so that after their release they may continue their education and vocational training without difficulty.

7.23.6 Where community schooling is not possible, the children's correctional service shall employ appropriately trained teachers to provide in-house services or engage suitable volunteers.

7.23.7 Clients shall be encouraged to make full use of the library, which in each facility shall be adequately stocked with both instructional and recreational books and periodicals suitable for children.

7.23.7.1 **Vocational training**

7.23.7.1.1 Every client who is to remain or has remained in a children's correctional facility for a period longer than two months shall have the right to receive vocational training in occupations likely to prepare them for future employment.

7.23.7.1.2 Clients shall be allowed to perform remunerated work in keeping with national child labour laws, however, the work shall:

- (a) serve as a meaningful complement to vocational training;
- (b) not interfere with a child's education and, or vocational training;
- (c) not support the institutionalisation of the child;
- (d) enhance the client's possibility of finding suitable employment upon release.

7.24 **Counselling and psychological support**

7.24.1 Clients shall be provided with opportunities to resolve family and personal issues through supportive guidance and professional assistance, including individual, group, and family counselling.

7.24.2 Where services are not available in-house then clients shall be referred to relevant external agencies so that he or she can receive appropriate medical, counselling, or other support services.

7.25 **Recreation**

7.25.1 Clients shall be provided with a suitable amount of time for recreational activities and adequate space and equipment for these activities.

7.25.2 Clients shall have opportunities to participate in structured and unstructured recreational, cultural, educational activities with staff or volunteers when outside their rooms or dormitories.

7.25.3 Rules governing access to sports and other recreational facilities must be clearly established and documented.

7.26 **Contact with the wider community**

7.26.1 Clients shall receive support from institutional authorities in maintaining adequate contact with the outside world and provide them with the appropriate means to do so.

7.26.2 Clients are entitled to visitation, telephone privileges and correspondence in accordance with established rules and regulations.

- 7.26.3 There shall be no restrictions on these privileges unless there are justified safety and security concerns that require the suspension of such privileges.
- 7.26.4 In no instance shall disciplinary punishment include restricted family contacts or visits unless the disciplinary offence relates to such contacts or visits.
- 7.26.5 Information regarding the death or serious illness of any relative of a client shall be promptly communicated to them by trained staff.
- 7.26.6 The centres shall maximise opportunities for clients to interact with the community, and community involvement at every state of custody.
- 7.26.7 Institutional leadership shall provide adequate opportunities for clients to contact family and friends by mail.
- 7.26.8 Restrictions on making telephone calls should not be imposed unless such privileges have been suspended and or restricted based on safety and security concerns.
- 7.26.9 Clients shall be informed if there is the intention or possibility that their telephone calls may be monitored or recorded.
- 7.26.10 Policies and procedures related to visitations, including visitor searches shall be established and periodically reviewed by a competent authority.
- 7.26.11 Parents or guardians, teachers, lawyers, and researchers shall be allowed to visit at any appropriate time as designated by the centre.
- 7.26.12 Refusals and reasons for denial shall be nonarbitrary, documented and kept on file.
- 7.26.13 Institutional leadership and staff shall ensure that visitors are:
- (a) treated with courtesy;
 - (b) informed of their rights and restrictions; and
 - (c) made aware of the procedure they can follow to file a complaint.

7.27 **Transitional support and reintegration**

- 7.27.1 All clients shall be assisted in making the transition to life in the community.
- 7.27.2 Where possible, arrangements shall be made for clients to attend or participate in off-site schools, training programmes and other activities in the community, if it is determined by institutional management to be in the client's best interests.
- 7.27.3 Community services, including restorative justice, shall be utilised in-house to provide added support to clients who need it.
- 7.27.4 As far as possible, clients nearing the end of their sentences shall be transferred to transitional facilities to allow them to begin to re-connect with family members and access community support once doing so is in their best interest.
- 7.27.5 Where a child under the age of 18 is being released, they shall be released into the care of a parent or guardian, who shall be requested to sign a release document confirming the transfer of custody. Where a child is to be released and no parent or guardian can be found, institutional management shall coordinate with child protection services to arrange suitable placement.

8. Performance evaluation

8.1 Monitoring, evaluation, accountability, and learning/MEAL

8.1.1 The institutional leadership shall ensure that the performance of the children's correctional service is monitored and evaluated, and the results used to inform decision-making that affects the well-being of clients.

8.1.2 Routine monitoring shall involve the systematic collection, collation and reporting on disaggregated statistical and qualitative data on the child population in custodial and non-custodial care, and the use of key performance indicators to track progress made towards agreed targets, including the extent to which stakeholder needs and expectations have been fulfilled.

8.1.3 All interventions geared towards supporting the rehabilitation and reintegration of children in custodial or non-custodial care shall undergo monitoring and evaluation.

8.1.4 Institutional leadership shall promote research that facilitates analysis and evaluation of reliable data and information arising from monitoring. The results of analysis shall be used to evaluate the:

- (a) conformity of programmes, processes, regimes, services and other interventions to these standards;
- (b) degree of stakeholder satisfaction;
- (c) process including the extent to which implementation has taken place as planned;
- (d) performance including effectiveness and impact of the children's correctional system including the performance of external partners;
- (e) need for improvements to the operation of the children's correctional system.

8.1.5 Institutional leadership shall publish regular reports on the reforms and developments taking place inside the centres and in relation to community sanctions and measures.

8.1.6 The media and the public shall be provided with information about conditions of custodial and noncustodial care and the steps taken by the institution to implement alternative sanctions for clients including child diversion services.

8.1.7 Institutional leadership shall ensure that annual departmental reports are timely and are made available to the public.

8.2 Internal audit

8.2.1 Institutional management shall conduct internal audits at planned intervals to provide information on whether the children's correctional system conforms to:

- (a) Institutional requirements;
- (b) the requirements of this national standard; and
- (c) provide independent assurance that the children's correctional system's risk management, governance, and internal control processes are operating effectively.

8.2.2 Institutional management shall:

- (a) plan, establish, implement and maintain an audit programme(s) including the frequency, methods, responsibilities, planning requirements and reporting, which shall take into consideration the importance of the processes concerned, changes affecting the institution, and the results of previous audits;

- (b) define the audit criteria and scope for each audit;
- (c) select auditors and conduct audits to ensure objectivity and the impartiality of the audit process; d) ensure that the results of the audits are reported to institutional leadership;
- (d) take appropriate correction and corrective actions without undue delay; and
- (e) retain documented information as evidence of the implementation of the audit programme and the audit results.

8.3 External reviews and inspections

8.3.1 Institutional leadership and management shall subject itself to external audits and reviews that are planned and executed by relevant, competent, and authorised bodies.

8.3.2 All children's correctional centres, probation offices and other facilities under the purview of these standards shall be inspected regularly by a governmental agency to assess whether they are operating in accordance with the requirements of national and international law, and the provisions of these standards.

8.3.3 The conditions of custodial and non-custodial care including the use of force, sexual violations, restraints, disciplinary punishments shall be monitored by an independent body or bodies whose findings shall be made public.

8.3.4 The findings of these competent and authorised bodies shall be reviewed and assessed by institutional leadership with taking effective action in addressing any issues identified.

8.3.5 All findings from external reviews and inspections shall inform the design and implementation of improvement plans and actions which shall be monitored.

8.4 Management review

8.4.1 At planned intervals Institutional leadership shall review the performance of the children's correctional system, to ensure its sustainability, coherence, appropriateness, effectiveness, efficiency, and impact.

8.4.1.1 Inputs

8.4.1.1.1 The management review shall be planned and implemented with consideration given to the following:

- (a) the status of actions from previous management and external reviews;
- (b) changes in external and internal issues that are relevant to the children's correctional system;
- (c) performance information, including trends in:
 - stakeholder satisfaction and feedback from stakeholders;
 - the extent to which system objectives have been met;
 - process performance and conformity of products and services;
 - nonconformities and corrective actions;
 - monitoring and evaluation results;
 - audit results;
 - the performance of external partners;
 - the adequacy of resources;
 - the effectiveness of actions taken to address risks and opportunities;
 - opportunities for improvement.

8.4.1.2 **Outputs**

8.4.1.2.1 The outputs of the management review shall include decisions and actions related to:

- (a) opportunities for improvement;
- (b) any need for adjustments to the children's correctional system;
- (c) resource needs

8.4.1.2.2 In all instances, documented information as evidence of the results of management reviews shall be retained, shared, and used by institutional leadership where applicable.

9. **Improvement**

9.1 **Opportunities for improvement**

9.1.1 Institutional leadership shall determine and select opportunities for improvement and implement any necessary actions to meet customer requirements and enhance stakeholder satisfaction including:

- (a) improving the effectiveness of correctional programmes, processes, regimes and services in keeping with institutional requirements and future needs and expectations;
- (b) correcting, preventing or reducing undesired effects;
- (c) improving the performance of the children's correctional system.

9.2 **Corrective action and managing non-conformity**

9.2.1 When non-conformity occurs, including any arising from incidents, accidents or complaints, institutional leadership shall:

- (a) Respond by taking control and correct the situation;
- (b) Acknowledge and address any consequences; and
- (c) Implement measures to prevent any future occurrences by:
 - reviewing and analysing the cause for non-conformity;
 - determining similar or other threats to conformity;
 - implement any action needed;
 - review the effectiveness of any corrective action taken;
 - update risks and opportunities determined during planning, if necessary;
 - make appropriate changes to the children's correctional system, if necessary.

9.2.2 Institutional leadership shall retain documented information as evidence of the:

- (a) nature of the nonconformities and any subsequent actions taken; and
- (b) results of any corrective action.

9.3 **Continual improvement**

9.3.1 Institutional leadership shall consider evaluation results, and the outputs from management review, to determine if there are needs or opportunities that should be addressed as part of continual improvement.

END OF DOCUMENT

Standards Council

The Standards Council is the controlling body of the Bureau of Standards Jamaica and is responsible for the policy and general administration of the Bureau.

The Council is appointed by the Minister in the manner provided for in the Standards Act, 1969. Using its powers in the Standards Act, the Council appoints committees for specified purposes.

The Standards Act, 1969 sets out the duties of the Council and the steps to be followed for the formulation of a standard.

Preparation of standards documents

The following is an outline of the procedure which must be followed in the preparation of documents:

1. The preparation of standards documents is undertaken upon the Standard Council's authorisation. This may arise out of representation from national organisations or existing Bureau of Standards' Committees of Bureau staff. If the project is approved it is referred to the appropriate sectional committee or if none exists a new committee is formed, or the project is allotted to the Bureau's staff.
2. If necessary, when the final draft of a standard is ready, the Council authorises an approach to the Minister in order to obtain the formal concurrence of any other Minister who may be responsible for any area which the standard may affect.
3. The draft document is made available to the general public for comments. All interested parties, by means of a notice in the Press, are invited to comment. In addition, copies are forwarded to those known, interested in the subject.
4. The Committee considers all the comments received and recommends a final document to the Standards Council
5. The Standards Council recommends the document to the Minister for publication.
6. The Minister approves the recommendation of the Standards Council.
7. The declaration of the standard is gazetted and copies placed on sale.
8. On the recommendation of the Standards Council the Minister may declare a standard compulsory.
9. Amendments to and revisions of standards normally require the same procedure as is applied to the preparation of the original standard.

Overseas standards documents

The Bureau of Standards Jamaica maintains a reference library which includes the standards of many overseas standards organisations. These standards can be inspected upon request.

The Bureau can supply on demand copies of standards produced by some national standards bodies and is the agency for the sale of standards produced by the International Organization for Standardization (ISO) members.

Application to use the reference library and to purchase Jamaican and other standards documents should be addressed to:

Bureau of Standards Jamaica
6 Winchester Road
P.O. Box 113,
Kingston 10
JAMAICA, W. I.

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