This policy establishes the John H. Sununu Youth Services Center (SYSC) practices regarding safety screening and planning for individualized safety plans and to support a therapeutic environment.

**Required Practices**

*Any deviations to the following information must be documented with Supervisory Approval.*

I. Within 72-hours of a youth’s arrival Clinical staff will screen for mental health, sexual abuse victimization or sexual abusiveness towards others, and safety by:

A. Meeting with all youth admitted to the facility;

B. Reviewing court records, case files, SYSC behavioral records, and other relevant documentation from the youth’s files;

C. Consulting with Medical staff about screenings completed at intake.

II. Clinical staff will use the information gathered in section I and the Beck Suicide Screening instrument to complete the PREA Vulnerability Assessment Instrument (Form 2197).

A. Information from Form 2197 will be used to reduce the risk of sexual victimization by (or upon the youth) and will be restricted in order to ensure that sensitive information is not exploited by staff or other youth.

B. Form 2197 will be repeated periodically throughout the youth’s stay, not to exceed 6-months, using updated information from all sources including but not limited to, treatment plan meetings, third-party reports, and any other documentation obtained.

C. If Form 2197 indicates a youth has experienced prior sexual victimization or previously perpetrated sexual abuse, Clinical staff will:

1. Follow-up within 14-calendar days; and
2. Immediately refer to the SYSC Medical Department when a youth discloses sexual victimization.

III. For youth admitted to SYSC for more than 72-hours (detained or committed), Clinical staff in conjunction with youth, the assigned Youth Counselor, parent/guardian, and the youth’s JPPO, will use the information gathered in section I to develop and implement a Resident Personal Safety Plan (Form 2131) within 3-calendar days after the youth’s admission.

A. Form 2131 will include identification of:

1. The youth’s history of physical, sexual, or emotional trauma, if any;
2. Effective responses to potential behavior or situations which will avoid the use of seclusion or restraint;
3. Interventions that may inadvertently trigger the youth to escalate;
4. Health conditions that may make the youth vulnerable to injury while at the SYSC;
5. Any history or risk factors a youth may have for positional asphyxia; and
6. Other items to be included in a youth’s Resident Personal Safety Plan.

B. Form 2131 will be:

1. Typed;
2. Uploaded to YouthCenter;
3. Printed and filed in unit binders and the youth’s record;
4. Sent to the youth’s JPPO; and
5. Printed and provided to the youth.

IV. Information from Form 2131 will be considered for Treatment Planning.

V. Form 2131 will be reviewed and updated by Clinical staff at least once a month.

A. If updates are recommended, proposed changes shall be developed along with the youth, and parent/guardian.

B. Staff shall review the Personal Safety Plan for all youth who experience a restrictive intervention at the next scheduled Crisis Services Unit (CSU) Review Meeting.
### Applicable Forms

<table>
<thead>
<tr>
<th>Form</th>
<th>Title</th>
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<tr>
<td>2131</td>
<td>Resident Personal Safety Plan</td>
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<tr>
<td>2197</td>
<td>PREA Vulnerability Assessment Instrument</td>
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### Glossary and Document Specific Definitions

A - B  C - D  E - F  G - I  J - L  M - N  O - Q  R - S  T - V  W - Z

### Document Change Log

<table>
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<tr>
<td>22-56</td>
<td>2 endnotes inserted for PREA citations on page 1. First &quot;i&quot; for 28 CFR 115.341(d) in Section I-C. Second &quot;iv&quot; for 28 CFR 115.381 (a) and (b) in Section II-C.</td>
<td>Joseph E. Ribsam, Jr., DCYF Director</td>
<td>August 24, 2022</td>
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i 28 CFR 115.341 (d)
n 28 CFR 115.341 (e)
i 28 CFR 115.341 (a)
iv 28 CFR 115.381 (a) and (b)