Illinois Department of Juvenile Justice Mitigation Activities

The Department of Juvenile Justice is working closely with the Governor’s Office, the Emergency Management Agency and the Department of Public Health to focus on prevention and planning in response to COVID-19. DJJ shares strategies and supplies with county detention centers where applicable, and coordinates efforts closely with regular communication and data tracking. We will continue updating and aligning our emergency response protocols to protect the health and safety of our youth and staff.

The following COVID-19 mitigation activities and updates became effective on March 17, 2020. These and all subsequent activities and updates are valid through May 31, 2020:

1. All persons entering IDJJ facilities shall be screened prior to entry using the Procedure for Screening for COVID-19.

2. All persons entering DJJ facilities shall be directed to wash or sanitize their hands prior to entry and upon exit.

3. All soap dispensers and hand sanitizer dispensers shall be kept full.

4. Hand sanitizer and tissues shall be available in all common areas.

5. Common touch areas such as door handles, drinking fountains and tabletops shall be wiped down with cleaning solution and/or disinfectant during each shift.

6. Youth shall be educated by facility staff on safety measures and continually provided with updated facts about COVID-19.

7. All community writs shall be discontinued.

8. All Aftercare facility visits to youth shall be suspended, and monthly staffing and release review participation shall be by phone, WebEx, or conference call.

9. All revocation hearings shall be conducted via phone, WebEx, or conference call.

10. Effective immediately, the following restrictions on travel and training are in effect for all staff:
   a. Out of state travel is prohibited except for mission critical operations.
   b. In state travel to alternate sites is restricted and must be approved by the Deputy of Operations or designee.
   c. All staff trainings are suspended.
   d. All meetings with external agencies or partners shall be held remotely using telephone or videoconference. Face-to-face meetings with external partners shall be suspended.

11. All Rutan Interviews are suspended.
12. Monitoring visits including John Howard Association, ACLU and federal monitors are suspended.

13. Monitor youth and staff closely for symptoms or signs of respiratory illness, most importantly fever, cough or shortness of breath.
   a. Immediately notify Medical Director and report the incident to the Executive Staff member on duty.

14. All employees shall always engage in the following safety precautions while at work:
   a. Maintain social distance when possible; avoid close contact with people who are ill.
   b. Wash hands frequently for at least 20 seconds with soap and water, especially after touching any common touch points like door handles; if handwashing is not available use hand sanitizer.
   c. When coughing or sneezing, cover your nose and mouth with a tissue or sleeve. Do not use your hand.
   d. Wash your hands after using a tissue to wipe any area of your face, after using the bathroom, and before and after eating.
   e. Avoid touching your face, eyes or mouth.
   f. Use personal protective equipment (masks, gloves and eye shields) if providing direct care to individuals with viral illnesses.

15. Staff with remote capabilities are moved into remote work status.

16. Implement screening protocol for deliveries.

17. Mental health and substance abuse will implement modified protocols for treatment and groups to maintain social distance.

18. Operations staff are closely monitoring critical inventory and have proactively placed orders through the Emergency Management Agency for additional supplies and equipment to ensure we have enough stores for prolonged use.

19. Visitation and volunteer visits are suspended.
   a. We will provide letters and calls to communicate this announcement to families and volunteers.
   b. We will provide additional calls and video visits (if possible) for youth and families.
   c. Phones should be wiped down in between each call.

20. We will begin health screening for youth who are being released. Screening will be done by health care staff.

21. We are continuing to identify additional groups of staff who will move to remote work status.

22. We coordinate efforts and remain in close contact with county juvenile detention centers.

23. Program staff are developing schedules to ensure we can continue to function, provide communication, and essential services while minimizing human daily traffic flow into facilities.
24. IDJJ is following guidance from the Department of Public Health, the Council of Juvenile Justice Administrators, the American Corrections Association, and national guidance for jails and lockups regarding population management during this time.

25. The Department has put out a call for supplies such as magazines, books, art paper and drawing supplies and snacks for youth who must remain at DJJ during this time.

26. Essential program staff will move to a 14-day on site/14-day remote rotation to limit human traffic into facilities and to conserve employee health and resources for extended containment.

27. Remote educational instruction begins.

28. Volunteer educational staff will remain on site while remaining educational staff will provide remote education through Pearson/Conexus.

29. 14 day remote and onsite rotations are in effect for MHPs, YFSs, YOS staff, LTAs, along with supervisors.

30. Upon learning of potential exposure to DJJ employees, DJJ will work with IDPH to assess risk to other staff and next steps.
   a. In cases where a DJJ employee reports a positive test but the risk of exposure within a facility is minimal, DJJ will notify the facility generally that an employee has tested positive and the exposure risk is minimal.
   b. In cases of higher risk exposure, DJJ will notify any potentially exposed staff personally and ask them to self-quarantine and monitor themselves for symptoms.

31. DJJ will implement daily temperature checks on youth in custody.

32. All employees who are screening staff for entry into the facility will be issued N95 masks for their screening shift.

33. Postponed visitation is extended through April 30, 2020. Letters to families and FAQs are being distributed to families.

34. Youth will continue to receive as many calls and video visits where feasible.

35. IDJJ moves to universal masking procedures. All staff at DJJ are required to wear a mask during their shift. Procedural masks are supplied to all staff on all shifts.

36. Additional thermometers, cleaning supplies, and gloves have been obtained and distributed based on need across the facilities. Additional supplies are in the queue.

37. IDJJ facilities will implement PPE control procedures and standardized inventory tracking to ensure responsible use and safety of all staff and youth during the COVID-19 response period.

38. All youth and staff will receive a cloth mask, sewn by supporters of IDJJ.

39. Youth masking procedures were developed in consultation with our Medical Director, Dr. Kwak. Masking is required for youth working in dietary, youth in classrooms or programming where 6 feet of separation is not easily maintained, and for youth who have symptoms of illness. Aside from these circumstances, masking is optional for youth.

40. IDJJ is following the IDPH protocol for notification and communication regarding positive cases of COVID-19 among employees. The protocol is as follows:
• Facility/healthcare administrators are notified about a case within their facility and immediately notify Deputy Vickery and Dr. Kwak;
• Dr. Kwak reviews the case timeline and potential close contacts using employee self-report, review of rosters, screening logs and video review;
• Any potential close contacts are contacted directly and instructed to test and self-quarantine for any remainder of the 14-day incubation period; youth close contacts are placed on quarantine status and monitored for any remainder of the 14-day incubation period;
• The Statewide COVID-19 Exposure Team and Department of Public Health are notified and provided all case information; this team then provides direction regarding any further actions that must be taken;
• The Department circulates a memo to all employees in the facility notifying them of the positive case.

41. School District #428 moves to a weekly school rotation schedule.

42. IDJJ will continue with live Online trainings on Trauma Informed Care, Self-Care, and Youth Response to COVID-19 for all staff to access.

43. Employees seeking modified or altered work assignments due to serious health conditions during the COVID-19 can submit an official request to Chief of Labor Relations and Chief of Staff.

44. A 14 Day Social Distancing Challenge officially kicked off on April 24. Facilities were challenged to find new and creative ways to message the importance of screening, cleaning, and social distancing over the next 14 days.

45. The moratorium on detention intakes is extended through May 15. The Compliance Officer is working directly with juvenile detention centers to develop an orderly and safe schedule for receiving intakes once the moratorium is lifted.

46. The Department’s screening instrument has been updated with new symptoms from CDC guidelines. The new symptom guidelines should be posted in the screening area.

47. The CDC has also changed recommendations for how soon to return to work post-symptoms. The guidelines are now: 10 days after symptom onset; or 3 days from last fever/symptom improvement; or medically cleared.

48. Program staff rotations will move to weekly beginning May 18.

49. IDJJ will work with county juvenile detention centers to begin a planned transfer process of youth awaiting transfer to DJJ. Youth will be processed as intakes in cohorts of 8 or less. The process will begin in the Southern region first. We will accept youth from one or two counties at a time, every 14 days.

50. Juvenile detention centers will implement DJJ’s medical screening protocol prior to transferring youth to DJJ, and the Department will screen, process, and assess impact after each cohort before approving a new cohort for intake.

51. Over the next several weeks, as the Department moves toward opening more operations and returning to work, a critical focus is on Source Control. We will continue to provide reminders and track our source control procedures to ensure we are operating as safely as possible.