



OREGON YOUTH AUTHORITY

Policy Statement

Part I – Administrative Services



Subject:

Incident Reviews

Section – Policy Number:

E: Information Management – 4.0

Supersedes:

I-E-4.0 (08/21)
I-E-4.0 (10/19)
I-E-4.0 (07/17)
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I-E-4.0 (06/13)
I-E-4.0 (01/11)

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10/10/2024

Revised:

01/29/2026
[IV.B.8., adds escape]

Related Standards and References:

- [OAR 416-490](#) (Use of Time-out, Room-lock Other, Isolation, Safety Programs, Physical Intervention, and Restraint in OYA Facilities)
- [Incident Notification, Report, and Review Matrix](#)
- [OYA policies](#): I-A-10.0 (Preventing, Detecting, and Responding to Youth Sexual Abuse and Sexual Harassment)
I-E-1.0 (Director's Incident Notification and Report)
II-B-1.1 (Physical Intervention in OYA Facilities)
II-D-2.2 (Suicide Prevention in Close-custody Facilities)
III-D-3.4 (Suicide Prevention in Community Placements)
III-A-1.0 (Youth Incident Reports - Community)
- [OYA forms](#): YA 0024 (Administrative Incident Review Report)
YA 0025 (Critical Incident Review Report)
YA 0021 (Critical Incident Review Action Plan)

Related Procedures:

- [FAC I-E-4.0](#) (Youth Incident Report)
- [FAC II-B-1.1 \(b\)](#) (Planned Physical Removal of Youth from a Confined Space)
- [COM I-E-4.0](#) (Peer Support Program)
- [TS I-E-4.0](#) (Employee Support Plan)

Policy Owner:

Deputy Director

Approved:



Joseph O'Leary, Director

I. PURPOSE:

This policy directs staff on when and how to review youth-related incidents that may happen within OYA facilities or in the community.

II. POLICY DEFINITIONS:

Administrative Incident Review: A review of youth-related incident by an internal facility or field review team designated by the superintendent, camp director or field supervisor.

Critical Incident Review: A review of a youth-related incident by a review team designated by the Director's Office.

Excessive force: A type or amount of force beyond that which is reasonably necessary to control the situation and achieve the correctional objective; or the continued use of physical intervention after it is no longer reasonably necessary.

Executive Team: An executive group that provides oversight of agency operations.

Physical intervention: Direct physical contact where reasonable force is applied to a youth to either restrict movement or mobility or to disengage from harmful behavior.

Restraint chair: A system of security restraints designed to safely restrain a youth in a sitting position with all four limbs and torso restrained to the chair.

Room removal: A physical intervention incident where a noncompliant youth is removed from a confined space, as delineated in OYA facilitywide procedure FAC II-B-1.1 (b).

Substitute care placement: Any of the out-of-home care and treatment program authorized by OYA to serve youth in OYA custody, including contracted residential treatment programs and certified foster homes. Substitute care placements exclude OYA's close-custody facilities.

Suicide attempt: Incomplete, potentially lethal effort to complete suicide.

Youth: A person placed in OYA legal or physical custody who is supervised by OYA staff either in a close-custody facility or on parole or probation status in the community. Such persons include youth placed in the legal custody of the Oregon Department of Corrections (DOC) or other agencies, and placed in OYA physical custody.

Youth Incident Review: A review of a youth-related incident (youth incident) by a supervisor or manager.

III. POLICY:

Part of OYA's mission is to provide youth opportunities for reformation in safe environments. In order to maintain safe environments for its staff and youth, OYA will review youth-related incidents in a timely manner to assess the degree to which the incident responses were in compliance with OYA rules and policies (if applicable) and to recommend ways to enhance safety and security.

The review process described herein may be in addition to an OYA Professional Standards Office (PSO) investigation or law enforcement investigation.

OYA will better understand the circumstances and events contributing to youth incidents by reviewing them in a consistent manner. Information gathered through the review process will be analyzed to identify factors that contributed to successful outcomes and determine if improvements or changes are needed.

Information gained through incident reviews will be used to improve agency policy, procedures, training and practices. The information may also be used in other proceedings, including disciplinary actions.

IV. GENERAL STANDARDS:

- A. All incidents involving youth that require a Youth Incident Report (YIR) also require a Youth Incident Review by a supervisor or manager.
- B. The following incidents require an Administrative Incident Review if the incident occurs in an OYA facility:
 - 1. Youth-on-staff assault;
 - 2. Use, or alleged use, of excessive force on a youth;
 - 3. Youth room removal from a confined space;
 - 4. Youth placement in a restraint chair;
 - 5. A substantiated or unsubstantiated (by completed investigation) allegation/incident of youth sexual abuse;
 - 6. Youth serious injury due to a physical intervention;
[Serious injuries include, but are not limited to, a break in skin requiring suture, bruising accompanied by swelling or extreme pain, broken bones, internal injury; any injury requiring medical treatment beyond routine first aid, or time off from work or school.]
 - 7. As determined by the Facility Services assistant director, or designee, youth injury resulting in offsite medical care; and
 - 8. Youth escape or attempted escape from an OYA facility.
- C. The Community Services assistant director, or designee, will determine if an Administrative Incident Review is required if any of the incidents listed in section B (above) occur in the community.
- D. Incidents that require a Critical Incident Review include:
 - 1. Death of a staff member due to a youth's action;
 - 2. Youth death not due to terminal illness;
 - 3. Attempted youth suicide in an OYA facility;
 - 4. Attempted youth suicide in a substitute care placement, if the Community Services assistant director in consultation with the OYA supervising clinical psychologist determines the attempt met the definition criteria listed in this policy;
 - 5. Serious injury of a staff member due to a youth's action that resulted in work time loss;
 - 6. Loss of functional control of a facility or housing unit (e.g., loss of control required a staff recall or law enforcement response);
 - 7. Youth escape from an OYA facility; and

8. As determined by the OYA director or deputy director.

E. Review Process

1. Youth Incident Review

- a) A supervisor or manager will conduct a Youth Incident Review within 24 hours of the incident reporting, excluding weekends and holidays.

See OYA Community Services policy III-A-1.0 (Youth Incident Reports) or Facility Services procedure FAC I-E-4.0 (Youth Incident Reports) for more information.

- b) The reviewer will not be a person directly involved in the incident and will:
 - (1) Review the incident reports, incident summary and any other information in the Juvenile Justice Information System (JJIS);
 - (2) Determine whether the action/response to the incident was or was not in compliance with applicable OYA rules and policies and requires further review; and
 - (3) Investigate or cause an investigation of the related incident if the response appears excessive or inappropriate.
- c) Physical interventions
 - (1) In addition to the review described in paragraphs a) and b) above, the facility superintendent, camp director, program director, or field supervisor must review each staff use of physical intervention to determine policy compliance in these areas:
 - (i) Planned or reactive physical intervention;
 - (ii) Use of a control device (shield, control blanket);
 - (iii) Use of restraint devices (security restraints, temporary restraints, shield, restraint chair); and
 - (iv) Proper medical attention for staff and youth.
 - (2) Physical interventions in OYA facilities
 - (i) A certified physical intervention master instructor (master instructor) must review the

incident to evaluate if the physical intervention techniques used by staff reflected those taught during approved training.

- (ii) All master instructors must meet biannually with the Training Academy staff, Facility Services staff, and Professional Standards Office staff to identify any trends, concerns, needs, and coaching opportunities noted from the reviews completed.
- (3) See OYA Community Services policy III-A-1.0 (Youth Incident Reports) or Facility Services procedure FAC I-E-4.0 (Youth Incident Reports) for more information.

2. Administrative Incident Review

All facility incidents listed in section IV. B. and community incidents determined by the Community Services assistant director require an Administrative Incident Review within seven calendar days of when staff became aware of the incident, or within 30 days of the conclusion of a substantiated or unsubstantiated sexual abuse incident investigation.

- a) The superintendent/camp director or field supervisor must designate at least two staff to conduct the review who were not involved in the incident and have the appropriate experience, training, and knowledge of agency policies, procedures and practices necessary to conduct the review.
 - (1) The superintendent/camp director or field supervisor may designate themselves, other managers, program staff, Health Services staff, Community Services staff, or other staff.
 - (2) When reviewing a sexual abuse incident, the review team must include upper-management staff with input from line supervisors, investigators, and medical or mental health practitioners.
- b) An Administrative Incident Review requires the accumulation of all relevant information, such as reports and documents of involved persons and witnesses (e.g., Youth Incident Reports).

Interviews may be necessary to clarify or obtain relevant information.

- c) An Administrative Incident Review Report (YA 0024) with relevant information must be submitted by the reviewing staff to the applicable superintendent/camp director or field

supervisor, and assistant director for review with the following elements:

- (1) Incident summary;
 - (2) Whether the action/response to the incident was in or not in compliance with applicable OYA rules and policies and requires no further review or requires a Critical Incident Review;
 - (3) Acknowledgements of what went well;
 - (4) Corrective actions taken or still needed to improve outcomes in future similar incidents;
 - (5) When reviewing a sexual abuse incident, specific areas must be addressed in accordance with national PREA standard 115.386(d), as reflected in the Administrative Incident Review Report template.
- d) The applicable superintendent/camp director, field supervisor or assistant director may forward the Administrative Incident Review Report to the Director's Office to be considered for a Critical Incident Review when deemed appropriate.
 - e) The superintendent/camp director, field supervisor, or assistant director must notify the staff involved in the incident being reviewed of corrective actions taken.
 - f) A copy of the Administrative Incident Review Report must be forwarded to the facility's PREA compliance manager and OYA PREA coordinator when reviewing a sexual abuse incident.

3. Critical Incident Review

A Critical Incident Review is required for incidents listed in section IV.D.

- a) Incidents not listed in section IV.D. may require a Critical Incident Review if the Youth Incident Review or Administrative Incident Review Report recommends a Critical Incident Review.
- b) When an incident is forwarded to the Director's Office for a possible Critical Incident Review, the deputy director or designee will determine the need for a Critical Incident Review.

- c) When a Critical Incident Review is determined required, the deputy director or designee will convene an impartial Review Committee within 10 business days.
 - (1) Review Committee members must not have any personal involvement in the incident being reviewed, or be part of the facility, field office, or work unit of the incident to be reviewed. At least one member must have the appropriate experience, training, and knowledge of agency policies, procedures and practices related to the review.
 - (2) This process will not take the place of any legal investigation process or any judicial procedures or remedies.
 - (3) The Review Committee must complete its review within 20 business days of being assigned, and complete a final Critical Incident Review Report (YA 0025) for the Director no later than 10 business days following the completion of the review.

Any exception to the timeline must be reasonable, documented, and reported to the Director.
- d) The Critical Incident Review Report will include:
 - (1) The degree to which the response to the incident was in compliance with OYA rules and policies;
 - (2) Summary of observations and interviews during the review;
 - (3) Acknowledgement of what went well; and
 - (4) Any recommendations to enhance staff and youth safety during similar incidents, and to minimize the occurrence of future incidents.
- e) Distribution of Critical Incident Review Reports
 - (1) Critical Incident Review Reports will be retained by the Director's Office in an electronic repository.
 - (2) For facility incidents, a copy of the final Critical Incident Review Report will be forwarded to the superintendent/camp director, and the living unit manager.
 - (3) For community incidents, a copy of the final Critical Incident Review Report will be forwarded to the field supervisor.

- (4) The superintendent/camp director, field supervisor, or assistant director must notify the staff involved in the incident being reviewed of any recommendations made in the report.

4. Corrective Action Plans

- a) The assistant director who oversees the area of a Critical Incident Review must ensure a corrective action plan is developed that addresses recommendations made by the Review Committee. The plan must be developed within 30 days of receiving the Critical Incident Review Report and documented on a CIR Action Plan form (YA 0021).
- b) The assistant director will share agencywide improvements mentioned in the CIR Action Plan with Executive Team on a quarterly basis until the plan is fully implemented.

F. Record Retention

1. All Critical Incident Review Reports and CIR Action Plans will be retained by the Director's Office in an electronic repository for 10 years.
2. All Administrative Incident Review Reports and related corrective action plans will be retained by the corresponding facility or field office for 10 years.

G. Employee Support Plan

All staff exposed to significant incidents must be offered assistance through the Employee Support Plan (ESP). The ESP provides for staff welfare during and after major emergencies and is to assist staff with their ability to process and cope with the effects of crisis, significant incidents or catastrophe.

Services available may include, but are not limited to, support for staff victims and first responders; support for staff families; incident trauma response; ongoing staff victimization; and staff support training.

See Treatment Services agencywide procedure TS I-E-4.0 (Employee Support Plan), and Community Services procedure COM I-E-4.0 (Peer Support Program).

V. LOCAL OPERATING PROTOCOL REQUIRED: NO