

# Monthly Jail Monitoring Report

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Criminal Justice Coordinating Council

2018

# Login Information

- ID and Password will be provided by CJCC
- Unique ID and Password per Reporting Facility
- Please make sure there are no spaces at the end or beginning of the login information

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Please enter your authentication information.

**Id**

**PWD**

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# Introduction Page

- No information is required for this page
- Please select the ***Next*** button to move on throughout the entirety of the report

**Monthly Jail Monitoring Report**

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Welcome Jail Monitors!

To ensure proper documentation of youth securely held in adult facilities for the purpose of compliance monitoring under the Juvenile Justice and Delinquency Prevention Act (JJDP) of 2002, as amended, the Department of Juvenile Justice (DJJ) and the Criminal Justice Coordinating Council (CJCC) requests your designated Jail Monitor to complete this log. It will be kept on file as documentaiton of compliance with the act and for potential review by the federal office of Juvenile Justice and Delinquency Prevention (OJJDP).

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# Report Filing

- The person who physically completes the report should be listed in the first field. This will be the primary point of contact at the facility.
- JPM will be required to verify the report and should be listed in the second field.
- Please select the month using the provided drop down list.



### Monthly Jail Monitoring Report

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Please indicate the person completing this report.

Please also indicate the Monitor verifying this report.

Please select the month for which you are reporting.

# Reporting Facility

- Please select the facility for which you are reporting.
- If you are reporting for multiple facilities, please select the one associated with the current ID and password.
- All facilities should be listed in the drop down menu.
- If you do not see your facility, please contact P'Aris Dokes.

## Monthly Jail Monitoring Report

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Please choose the facility for which you are reporting. If you are reporting for multiple facilities, please select only the facility for this login information.

CJCC Test ▼

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CJCC Test ▼

CJCC Test

Alpharetta Jail (North Fulton Reg.)

Appling County Jail

Atkinson County Jail

Atlanta City Jail

Bacon County Jail

Bainbridge Public Safety Department

Baldwin County Sheriff's Department

Banks County Sheriff's Office

Barrow County Detention Center

Bartow County Jail

Ben Hill County Jail

Berrien County Sheriff's Office

Bibb County Law Enforcement Center

Bleckley Law Enforcement Center

Brantley County Jail

# Secure Custody

- Use the provided field to indicate how many juvenile offenders were held in *Secure Custody* during the previous month.
- If ***NO*** juveniles were held, fill the space with a 0. This will take you to the end of the report.
- Personal Information regarding each juvenile offender will be populated after this page.

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How many juvenile offenders, **if any**, did your facility hold in **SECURE CUSTODY** this reporting period. If so, please insert the number below. If you held **none**, please put zero.

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# Individual Secure Custody

- Based on the number indicated in the previous slide, you will be prompted to fill out information for *EACH* juvenile.
- Please fill out all of the information for the first juvenile and click next.
- This page will be populated and filled out for each juvenile.
- This section is formatted similar to your current reporting.

### Monthly Jail Monitoring Report

21%

Please fill out the following information for each juvenile held in Secure Custody during the last reporting quarter.

Name of Juvenile:

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# Juvenile Personal Information

- Please provide the personalized information for the juvenile in secure custody.
- This will require the race, sex, date of birth, and county of residence.
- Race, Sex, Date of Birth, and County of Residence all have a provided drop down menu.

Name of Juvenile:

Kelsey Martin

Indicate the race of the juvenile.

Race (Unknown) ▼

Indicate the sex of the juvenile.

Female ▼

Date of Birth:

County of Residence

Appling ▼



# Juvenile Race & Sex

- The Race of the Juvenile should be selected from the provided list.
- If the Race of the juvenile was not collected at intake, please select Race (Unknown).
- The Sex of the Juvenile should be selected from the provided list. Note we have included Transgender as an option.
- If the Sex of the juvenile was not collected at intake, please select Unknown.

Indicate the race of the juvenile.

In

D

Co

Race (Unknown) ▼

African American (Black)

Asian

American Indian/Alaska Native

Caucasian

Hispanic/Latino

Multi-racial

Native Hawaiian & Other Pacific Islander

Race (Other)

Race (Unknown)

Indicate the sex of the juvenile.

D

Female ▼

Male

Female

Transgender

Unknown

County of residence

# Date of Birth & County of Residence

- Date of Birth can be selected by the provided drop down calendar. Please note that the dates shown are in 2016. This will need to be adjusted per juvenile.
- County of Residence should be selected from the drop down menu. Provided are all 159 Georgia Counties.

Date of Birth:

Co

Da

Ti

Da



County of Residence

Appling

Appling

D Atkinson

Bacon

Baker

Baldwin

Ti Banks

Barrow

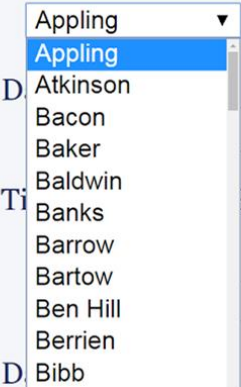
Bartow

Ben Hill

Berrien

D Bibb

Example: 5:00 pm)



# Date & Time Admitted

- Date Admitted will provide a calendar drop down similar to the date of birth. Please note that the calendar automatically populates on today's date.
- Time Admitted will be entered in a 12 hour format. Please be certain to include either am or pm when indicating time admitted.

Date Admitted:

September						
S	M	T	W	T	F	S
28	29	30	31	1	2	3
4	5	6	7	8	9	10
11	12	13	14	15	16	17
18	19	20	21	22	23	24
25	26	27	28	29	30	1
2	3	4	5	6	7	8
2015      2016      2017						

Date Admitted:

Time Admitted: (Example: 5:00 pm)

# Date & Time Released

- Date Released will provide a calendar drop down similar to the date of birth. Please note that the calendar automatically populates on today's date.
- Time Released will be entered in a 12 hour format. Please be certain to include either am or pm when indicating time admitted.

Date Released:

9/14/2016

Time

September

S M T W T F S

28 29 30 31 1 2 3

4 5 6 7 8 9 10

To

11 12 13 14 15 16 17

18 19 20 21 22 23 24

25 26 27 28 29 30 1

Se

2 3 4 5 6 7 8

2015 2016 2017

☐ Status/CHINS

Date Released:

9/14/2016

Time Released: (Example: 5:00 pm)

5:17 am

# Secure Custody Details

- The total time in jail will be calculated manually by the time admitted & released.
- Please select the accused offense from the provided list. If you select *Other*, please specify in the space provided.
- Please indicate whether the juvenile received Sight, Sound, Sight & Sound, or NO separation.

Total time in jail (**in hours**):

Select Accused Offenses:

- ☐ Delinquent  
☐ Status/CHINS  
☒ Non-Offender  
☐ **Other (please specify):**

Did the juvenile receive Sight and Sound Separation?

- ☐ Sight and Sound separation  
☐ Sight separation only  
☐ Sound separation only  
☒ No separation

# Reason for Detention

- Please indicate the reason the juvenile was securely detained.
- If the reason the juvenile was securely detained does not meet the provided selection, chose *Other* (please specify):
- There is a space below this to provide a description if *Other* was selected in the previous question. If you did not select *Other*, please select **No Answer.**

What was the reason this juvenile was securely detained?

- ☒ Held as adult
- ☐ Awaiting transfer to court
- ☐ Awaiting transfer to Youth Detention Center, RYDC, Juvenile Prison
- ☐ Identification, investigation, processing, or release to parents
- ☐ Other (please specify):

To whom was the juvenile released?

P'Aris Dokes

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# Incomplete Juvenile Record

- If you select *NEXT*, and the information provided regarding the juvenile is incorrect, you will not be able to move on in the report.
- Please provide a response in the selections with **Missing Answer(s)** above them.
- Once this information is complete, select *NEXT* at the bottom of the

**Monthly Jail Monitoring Report**

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Please fill out the following information for each juvenile held in Secure Custody during the last reporting quarter.

Name of Juvenile:

Kelsey Martin

Indicate the race of the juvenile.

Race (Unknown)

Indicate the sex of the juvenile.

Female

Date of Birth:  
**Missing Answer(s).**

County of Residence

Appling

Date Admitted:  
**Missing Answer(s).**

## Additional Juvenile Information

- If you had indicated that you held more than 1 juvenile in secure custody during the reporting period, a personal information page will be populated for additional juveniles.
- The information provided on these pages is the same as the previous. Please be aware that you are not duplicating juvenile's personal information.
- Once you have completed the personal information for all juveniles in secure custody for the reporting period. Select *NEXT* to move on in the report.



# Reporter Information

- Before completing the report, please list the JPM who certifies the Jail Monitoring Report, as well as their official title.
- Additionally, please list your office phone number in the last blank. Do not include any dashes in the number.

### Monthly Jail Monitoring Report

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Please indicate the name of the person certifying the data (Name & Title):

Kelsey Martin  
Research Analyst

Phone where you can be reached: (### - ### - ####)

404-654-5692

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# Answer Summary Page

- After you have completed all of the juvenile's information, the report will provide a summary page.
- Please print a copy of this page (CTRL + P) for your records.
- If you realize a mistake in your summary page, use the *PREVIOUS* button to navigate back to this page.
- You must select *NEXT* at the bottom of this page to submit the report.

Monthly Jail Monitoring Report	
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WARNING: Clicking NEXT will end your Monthly Jail Monitoring Report submission.	
Please verify your entries and ensure that your totals are consistent with your calculations. If you notice discrepancies, click the previous button and correct your entries in the corresponding categories. If the totals from the ANSWER SUMMARY page are consistent with your calculations, click the next button to continue with your submission.	
Below is a summary of your submitted answers. Please verify that these answers are correct before clicking next. You should print this page for your records.	
Please indicate the person completing this report.	Kit
Please also indicate the Monitor verifying this report.	Kit
Please select the month for which you are reporting.	January
Please choose the facility for which you are reporting. If you are reporting for multiple facilities, please select only the facility for this login information.	Alpharetta Jail (North Fulton Reg.)
How many juvenile offenders, if any, did your facility hold in SECURE CUSTODY this reporting period. If so, please insert the number below. If you held none, please put zero.	1
Name of Juvenile:	Kelsey Martin
Date of Birth (mm/dd/yyyy):	11/19/2016
Indicate the sex of the juvenile.	Female
Indicate the race of the juvenile.	Race (Unknown)
County of Residence:	Cobb
Date admitted:	9/9/2016
Time admitted: (please enter in format of hour:min for example 10:45am)	3:12:00 AM
Date released:	9/10/2016
Time released: (please enter in format of hour:min for example 10:45am)	5:00:00 PM
Total time in jail (in hours):	26
Select Accused Offenses:	Non-Offender
Did the juvenile receive Sight and Sound Separation?	No separation
What was the reason this juvenile was securely detained?	Held as adult
To whom was the juvenile released?	P Aris Dokes
Please indicate the name of the person certifying the data (Name & Title):	Kelsey Martin Research Analyst
Phone where you can be reached: (### - ### - ####)	404-664-5692
YOU MUST CLICK NEXT TO COMPLETE AND SUBMIT THIS REPORT.	
<a href="#">Previous</a> <a href="#">Next</a>	

How many juvenile offenders, if any, did your facility hold in SECURE CUSTODY this reporting period. If so, please insert the number below. If you held none, please put zero.	1
Name of Juvenile:	Kelsey Martin
Date of Birth (mm/dd/yyyy):	11/19/2016
Indicate the sex of the juvenile.	Female
Indicate the race of the juvenile.	Race (Unknown)
County of Residence:	Cobb
Date admitted:	9/9/2016

# Questions

**Keima Davis Juvenile Detention Compliance Monitor**

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**Kayla Kane; Research Analyst**

**[Kayla.Kane@cjcc.ga.gov](mailto:Kayla.Kane@cjcc.ga.gov)**