October 13, 2015

Re: Your request for access to information under Part II of the Access to Information and Protection of Privacy Act [JPS/036/2015]

Dear [REDACTED],

This is to confirm that on September 15, 2015, the Department of Justice and Public Safety received your request for access to the following records/information:

"Please process a request for any and all information relating to the Newfoundland and Labrador Youth Centre in Whitbourne, NL from 2005-present day. This information should include yearly breakdown of number of persons living there, their ages and gender, as well as number of employees, and any reports of inhabitants being placed on suicide watch, any violent incidents with case workers, and any and all reports regarding the same."

I am pleased to inform you that a decision has been made by the Deputy Minister to provide access to some of the requested information.

In relation to the attached Incident Reports, please note that only the names of the young persons and NLYC staff directly involved in these incidents have been redacted pursuant to subsection 40(1) of the Access to Information and Protection of Privacy Act, 2015 (the Act) which states:

40.1 The head of a public body shall refuse to disclose personal information to an applicant where the disclosure would be an unreasonable invasion of a third party's personal privacy.

As the responsive records relate to young persons in secure custody, the Youth Criminal Justice Act ("the YCJA") also applies. Subsection 110(1) of the YCJA states:

110. (1) Subject to this section, no person shall publish the name of a young person, or any other information related to a young person, if it would identify the young person as a young person dealt with under this Act.
With respect to the names of NLYC staff involved in the incidents, in addition to concerns about the possible identification of the young person involved, the responsive records in many cases document violent incidents in which staff members sustained physical and/or emotional trauma. As such, the information contained in these records relates to the medical and employment history of staff members, the disclosure of which would constitute an unreasonable invasion of their personal privacy.

As required by 8(2) of the Act, we have severed information that is unable to be disclosed and have provided you with as much information as possible. In accordance with your request for a copy of the records, the appropriate copies have been enclosed.

Please be advised that you may appeal this decision and ask the Information and Privacy Commissioner to review the decision to provide partial access to the requested information, as set out in section 42 of the Act (a copy of this section of the Act has been enclosed for your reference). A request to the Commissioner must be made in writing within 15 business days of the date of this letter or within a longer period that may be allowed by the Commissioner. Your appeal should identify your concerns with the request and why you are submitting the appeal.

The appeal may be addressed to the Information and Privacy Commissioner as follows:

Office of the Information and Privacy Commissioner
2 Canada Drive
P. O. Box 13004, Stn. A
St. John’s, NL. A1B 3V8

Telephone: (709) 729-6309
Toll-Free: 1-877-729-6309
Facsimile: (709) 729-6500

You may also appeal directly to the Supreme Court Trial Division within 15 business days after you receive the decision of the public body, pursuant to section 52 of the Act (a copy of this section of the Act has been enclosed for your reference).

Please be advised that responsive records will be published following a 72 hour period after the response is sent electronically to you or five business days in the case where records are mailed to you. It is the goal to have the responsive records posted to the Office of Public Engagement's website within one business day following the applicable period of time.

If you have any further questions, please feel free to contact me by telephone at 709-729-7906, or ncroke@gov.nl.ca.

Sincerely,

[Signature]

Neil Croke
ATIPP Coordinator
Access or correction complaint

42. (1) A person who makes a request under this Act for access to a record or for correction of personal information may file a complaint with the commissioner respecting a decision, act or failure to act of the head of the public body that relates to the request.

(2) A complaint under subsection (1) shall be filed in writing not later than 15 business days after the applicant is notified of the decision of the head of the public body, or the date of the act or failure to act; or

(a) after the date the head of the public body is considered to have refused the request under subsection 16 (2).

(3) A third party informed under section 19 of a decision of the head of a public body to grant access to a record or part of a record in response to a request may file a complaint with the commissioner respecting that decision.

(4) A complaint under subsection (3) shall be filed in writing not later than 15 business days after the third party is informed of the decision of the head of the public body.

(5) The commissioner may allow a longer time period for the filing of a complaint under this section.

(6) A person or third party who has appealed directly to the Trial Division under subsection 52 (1) or 53 (1) shall not file a complaint with the commissioner.

(7) The commissioner shall refuse to investigate a complaint where an appeal has been commenced in the Trial Division.

(8) A complaint shall not be filed under this section with respect to

(a) a request that is disregarded under section 21;

(b) a decision respecting an extension of time under section 23;

(c) a variation of a procedure under section 24; or

(d) an estimate of costs or a decision not to waive a cost under section 26.

(9) The commissioner shall provide a copy of the complaint to the head of the public body concerned.
Direct appeal to Trial Division by an applicant

52. (1) Where an applicant has made a request to a public body for access to a record or correction of personal information and has not filed a complaint with the commissioner under section 42, the applicant may appeal the decision, act or failure to act of the head of the public body that relates to the request directly to the Trial Division.

(2) An appeal shall be commenced under subsection (1) not later than 15 business days after
(a) the applicant is notified of the decision of the head of the public body, or the date of the act or failure to act; or
(b) after the date the head of the public body is considered to have refused the request under subsection 16 (2).

(3) Where an applicant has filed a complaint with the commissioner under section 42 and the commissioner has refused to investigate the complaint, the applicant may commence an appeal in the Trial Division of the decision, act or failure to act of the head of the public body that relates to the request for access to a record or for correction of personal information.

(4) An appeal shall be commenced under subsection (3) not later than 15 business days after the applicant is notified of the commissioner’s refusal under subsection 45 (2).
<table>
<thead>
<tr>
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<tbody>
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<td><strong>Number of Admissions</strong></td>
<td>378</td>
<td>365</td>
<td>385</td>
<td>293</td>
<td>271</td>
<td>258</td>
<td>273</td>
<td>217</td>
<td>259</td>
<td>199</td>
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<tr>
<td><strong>Male / Female Admissions</strong></td>
<td>289 M 89 F</td>
<td>318 M 47 F</td>
<td>290 M 95 F</td>
<td>224 M 69 F</td>
<td>187 M 84 F</td>
<td>182 M 76 F</td>
<td>190 M 83 F</td>
<td>109 M 108 F</td>
<td>159 M 100 F</td>
<td>154 M 45 F</td>
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<tr>
<td><strong>Number of Youth on Suicide Watch</strong></td>
<td>82</td>
<td>41</td>
<td>70</td>
<td>124</td>
<td>121</td>
<td>38</td>
<td>102</td>
<td>51</td>
<td>44</td>
<td>85</td>
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<tr>
<td><strong>Number of Violent Incidents</strong></td>
<td>1</td>
<td>3</td>
<td>1</td>
<td>4</td>
<td>6</td>
<td>5</td>
<td>10</td>
<td>1</td>
<td>4</td>
<td>16</td>
</tr>
<tr>
<td><strong>Number of Staff Members</strong></td>
<td>114</td>
<td>115</td>
<td>115</td>
<td>109</td>
<td>109</td>
<td>103</td>
<td>102</td>
<td>102</td>
<td>60</td>
<td>60</td>
</tr>
</tbody>
</table>
Newfoundland and Labrador Youth Centre

Violent Incidents

Period From January 1, 2005 to September 16, 2015

Reports generated from Youth Case Management System (YCMS).
Names of Residents and Workers have been deleted due to Confidentiality.
Incident Report Numbers have been used as per YCMS.

2005

April 11
No. 8649
No. 8647
No. 8648

2006

December 21
No. 10918
No. 10919
No. 10917

October 21
No. 10687

December 3
No. 10854

2007

June 27
No. 11628
No. 11629

2008

May 2
No. 12760
2008 (cont'd)
No. 12762
No. 12764
No. 12769
No. 12770

November 22
No. 13437
No. 13438
No. 13440
No. 13443

December 13
No. 13496

2009
January 5
No. 13556

January 11
No. 13594
No. 13596

May 7
No. 13945
No. 13946
No. 13948
No. 13949
No. 13951
2009 (cont’d)
November 13
No. 14414
No. 14415
No. 14416
November 16
No. 14418
No. 14419
December 21
No. 14470
No. 14471
No. 14472

2010
February 3
No. 14496
July 18
No. 14726
No. 15032
November 2
No. 14915
November 15
No. 14946
No. 14947
2010 (cont'd)

December 10
No. 15003
No. 15009
No. 15022
No. 15039

2011

February 10
No. 15145

February 21
No. 15177
No. 15178

April 15
No. 15304

August 2
No. 15487
No. 15489
No. 15493
No. 15494
No. 15605

August 11
No. 15508
No. 15509
No. 15510

August 28
No. 15540
No. 15542
2011 (cont'd)

September 16
No. 15582
No. 15583
No. 15584

October 8
No. 15625
No. 15626

October 24
No. 15671

October 25
No. 15670
No. 15672
No. 15675

2012

March 18
No. 16189
No. 16190

2013

July 30
No. 16794

September 3
No. 16869
2013 (cont'd)

September 22
No. 16934
No. 16935

December 15
No. 17105

2014

January 14
No. 17142
No. 17143
No. 17144
No. 17145
No. 17146

January 17
No. 17161
No. 17162
No. 17163
No. 17164

February 7
No. 17948
No. 17954

February 24
No. 17281
No. 17290
2014 (cont’d)

March 14
No. 17349
No. 17350
No. 17351

July 4
No. 17654

August 14
No. 17708
No. 17711

August 16
No. 17718
No. 17719
No. 17720
No. 17721

October 21
No. 17843
No. 17844
No. 17845
No. 17862
No. 17869
No. 17870

October 3
No. 17805
No. 17806
2014 (cont’d)

October 22
No. 17850
No. 17851
No. 17853
No. 17854
No. 17857
No. 17858

October 26
No. 17875
No. 17876
No. 17873
No. 17874

November 27
No. 17947
No. 17949
No. 17953
No. 17955

December 8
No. 17974
No. 17975
No. 17976
No. 17977
No. 17978
No. 17979
2015

February 17
No. 18079
No. 18080
No. 18081
No. 18082
No. 18083
No. 18084

February 23
No. 18099
No. 18101

February 25
No. 18104
No. 18105
No. 18106
No. 18107
2005
SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2005/04/11 Time of Incident: 01:35 AM YCMS Incident # 8649
Location of Incident: UNIT 3
Resident(s) Name and File #: [redacted]
Staff on Duty and Deployment: [redacted]
Witnesses: [redacted]

SECTION "B"

Type of Incident:
Assault on Staff
Damage to Property
IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At @ 1:35 I was just picking up the phone to call laundry about pictures for [redacted]. To my right I heard books fall and screams. I witnessed [redacted] repeatedly striking [redacted] to the back and head area. I responded by physically restraining [redacted] until the response team arrived. Code 2 called and MOSO notified. During this time [redacted] proceeded to toss the unit.

Signature of Reporting Staff: [redacted] Date: [redacted]

SECTION "C"

Special Action Taken:
Mechanically Restrained
Physically Restrained
Comments of M.O.S.O./Supervisor:

Acknowledged. I'm recommending 72hrs. V/O. Also disciplinetreatment plan to be put in place.
RCMP were contacted and took statments from [redacted] and [redacted].
~ they will return in the a.m. to get statments from [redacted].

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ___________________________

Further Action Required: (for administration use only)

________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Signature of Administrator or Designate: ___________________________ Date: ___________________________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR
Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2005/04/11  Time of Incident: 01:35 AM  YCMS Incident # 8647
Location of Incident: UNIT 3 ENTRANCE
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:
Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

I was walking up to Unit 3 and first I spotted [redacted] in the vestibule window. I looked again and he was gone. I proceeded to walk up the steps of Unit 3 and I found it odd that [redacted] was in the window by the door with a wide grin on his face. I found it odd because he was not allowed in the classroom until we had a meeting about his behavior on Wednesday, April 13th. He carried an English textbook in his left hand. I laid down my briefcase and the books I was carrying outside of the locked entranceway to Unit 3. I placed my key in the lock to open the door and [redacted] greeted me with a big smile and held the door open for me while I crossed the threshold. I never knew a thing until I was assaulted from behind by an object. Something had hit me very hard on the back of my head, around the left ear. I was dazed from the blow and it knocked me of balance. I dropped my briefcase and books. I received another hard blow to the left shoulder. I raised up my left arm and hand only to receive the third blow which broke my wristwatch. I was trying to defend myself from any serious injury. By that time, [redacted] and [redacted] (YCCs) intervened and took [redacted] down on the floor. A Code 2 was called. At the same time [redacted] began tossing tables and chairs and anything on the Unit that wasn’t nailed down. The object that [redacted] had hit me with was about 14 to 18 inches in length and grey in color. I did not know what it was. I called a Code 2 as well. All other Units shut down and responded to the Code. Staff had their hands full because [redacted] and [redacted] were reluctant to cooperate. Both students had to be physically restrained and carried to Unit 2, Discipline Unit.

This is a serious assault and was pre-mediated. I believe [redacted] was the spotter and was just as much involved in the planning of the scheme as [redacted] was. I went to the facility nurse and was examined. I had the RCMP contacted and gave this same report and statement to them.

I would be remiss if I didn’t thank [redacted] and other staff members for responding so efficiently and effectively. There could have been a lot more injuries!

Signature of Reporting Staff: ___________________________ Date: ___________________________

SECTION "C"

Special Action Taken:

Charges Laid
Comments of M.O.S.O./Supervisor:

Acknowledged.
- I'm recommending 72hrs. T/O for [redacted] Also a discipline treatment plan to be put into place.
- The R.C.M.P were contacted and statements were taken from [redacted]
- R.C.M.P will return in the a.m. for statements from the residents. All units remain locked down.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ________________

Further Action Required: (for administration use only)

Signature of Administrator or Designate: ___________________________ Date: ________________
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre  
Date of Incident: 2005/04/11  Time of Incident: 01:35 PM  YCMS Incident # 8648
Location of Incident: UNIT 3
Resident(s) Name and File #:  
Staff on Duty and Deployment:  
Witnesses:  

SECTION "B"

Type of Incident:  
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):  
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approximately 13:35, [REDACTED] was entering the unit for class when [REDACTED] started hitting him repeatedly around the head area with an unidentified object. At the exact same time [REDACTED] started ‘flipping’ the unit, knocking over tables and chairs, I called a code 2 as I opened the bedroom doors from the panel and [REDACTED] attempted to restrain [REDACTED]. I ordered [REDACTED] to get into his room (which he did) and went to assist [REDACTED] who was on the floor trying to restrain [REDACTED] who continued to struggle even after responding staff had handcuffed him. [REDACTED] were both mechanically restrained and escorted to unit 2 using as much force as was necessary.

Signature of Reporting Staff:  

Date:  

SECTION "C"

Special Action Taken:  
Police Investigation  
Mechanically Restrained  
Physically Restrained
Comments of M.O.S.O./Supervisor:

Acknowledged. I'm recommending 72hrs. T/O. for [redacted]. Also a discipline treatment plan to be put in place.
- R.C.M.P. contacted and statements were taken from [redacted].
- The RCMP will return in the a.m. to take statements from [redacted].

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ___________________________

Further Action Required: (for administration use only)

[Blank lines for comments]

Signature of Administrator or Designate: ___________________________ Date: ___________________________
2006
SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2006/12/21   Time of Incident: 01:00 PM   YCMS Incident # 10918
Location of Incident: UNIT 2B
Resident(s) Name and File #: 
Staff on Duty and Deployment: 
Witnesses: 

SECTION "B"

Type of Incident: Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At 1:30 pm upon returning from dinning hall [redacted] became upset with [redacted] because she was spoken to about her behavior. [Redacted] told [redacted] not to speak to her anymore today and that if she did she would not listen to her. [Redacted] told [redacted] she was just going to ignore her. [Redacted] was told that this behavior was not acceptable and to go to her room. At this point got up in [redacted] face and challenged her to hit her, call her names and threatening to kill her on the outside. [Redacted] called code 2. [Redacted] was placed in her room but she hesitated and went slowly. Response showed up within seconds [redacted] was told to put out her things. She began calling me names throwing her books at me. She picked up her pencil broke it in half and aimed it at me, threw it at me and it stuck in my neck. I feel that [redacted] is a dangerous girl and needs to be dealt in a serious way before somebody gets seriously hurt. She loses control easily and does not take instructions well. She is instructing [redacted] to be disrespectful towards staff, she makes negative remarks about staff to

Signature of Reporting Staff: ___________________________ Date: __________________

SECTION "C"

Special Action Taken:
SECURE ISOLATION 3 HOURS OR MORE
Comments of M.O.S.O./Supervisor:
Administrative Comments:

Signature of M.O.S.O./Supervisor: ________________ Date: ________________

Further Action Required: (for administration use only)
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________
____________________________________________________________________

Signature of Administrator or Designate: ________________ Date: ________________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR
Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2006/12/21 Time of Incident: 01:00 PM YCMS Incident # 10919
Location of Incident: UNIT 2B
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

Section 40(1)

SECTION "B"

Type of Incident:
Other

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

at 1:30pm during a code 2 on unit 2B, [REDACTED] was told by [REDACTED] to go immediately to her room. She hesitated and smiled all the while, looking at [REDACTED] who was being escorted to her room. [REDACTED] was told a second time to hurry and go to her room. I feel she intentionally delayed going to her room and that she is following negative instructions from [REDACTED] also was disrespectful towards [REDACTED] while the 2 residents were being spoken to about their behaviour. [REDACTED] told [REDACTED] she didn’t have to listen to her, again it appears to be the advice from [REDACTED]. [REDACTED] notified. Actions taken with Resident [REDACTED] and resident [REDACTED]

Signature of Reporting Staff: ___________________ Date: ___________________

SECTION "C"

Special Action Taken:
SECURE ISOLATION 3 HOURS OR MORE
Comments of M.O.S.O./Supervisor:
Administrative Comments:

Signature of M.O.S.O./Supervisor: _______________________________ Date: ____________

Further Action Required:  *(for administration use only)*

______________________________________________________________

______________________________________________________________

______________________________________________________________

______________________________________________________________

Signature of Administrator or Designate: _______________________________ Date: ____________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2006/12/21 Time of Incident: 01:40 PM YCMS Incident # 10917
Location of Incident: UNIT2B
Resident(s) Name and File #:
Staff on Duty and Deployment:
Witnesses:

SECTION "B"

Type of Incident:

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:
Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approx. 1:30, after leaving the cafeteria and returning to the unit [redacted] became very rude and saucy towards myself. She said she wasn’t going to listen to me and when I spoke to her she was going to ignore me. She said it was none of my fucking business what she said and it was me with the fucking problems. I told her she had a major problem with her attitude towards staff in this facility and if it didn’t improve she was going to spend a lot of time in her room. She started shouting at me, so I told her to go to her room. At this point she became out of control shouting and challenging me to fight with her and to make a smack at her. She said she was going to fucking kill me, beat my fucking face off and when she gets out she’s going to get me on the outside and kill me. [redacted] continued to stay in my face and threatened me until staff responded to the code call. At that point I walked away and let other staff who were not involved in the situation take control. This is the second time today that [redacted] had to be removed from the unit and placed in her room for discipline reasons. [redacted] is a very violent girl who has had numerous incidents with staff, she is rude to staff and does not like to follow rules. When [redacted] is not given her own way she loses control directs her aggression towards staff and justifies her actions through withdrawal. This particular incident caused Y.C.C [redacted] to have a pencil stuck in her neck as a result of outbursts. [redacted] has a long list of incident reports and I think her behavior needs to be seriously addressed.

Resident [redacted] became involved in the incident as well when I was dealing with [redacted] tried to shout me down when I was speaking to [redacted] and said she wasn’t going to listen. I spoke to her several times through dinner about making silly cracks at staff and she simply laughed and sneered. I feel [redacted] is encouraging [redacted] to behave this way. For threatening and injuring staff I feel [redacted] deserves a 48 hour time out. For disrespect and interfering with staff while disciplining another resident, I feel [redacted] should also receive a 24 hour time out.

Signature of Reporting Staff: ___________________________ Date: ___________________________

Comments of M.O.S.O./Supervisor:

As a result of this incident [redacted] will serve 24 hours T / O for her actions. An additional 24 hours T / O is recommended. RCMP have been notified and witness statements completed. In addition resident [redacted] will serve 24 hours T / O for her part in this incident.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ___________________________

Further Action Required: (for administration use only)

____________________________________________________

____________________________________________________

____________________________________________________

____________________________________________________

Signature of Administrator or Designate: ___________________________ Date: ___________________________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2006/10/21 Time of Incident: 05:35 PM
Location of Incident: UNIT 2B ROOM 2203
Resident(s) Name and File #: [REDACTED]

Staff on Duty and Deployment: [REDACTED]

Witnesses: [REDACTED]

SECTION "B"

Type of Incident:
Other
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approx. 17:35, YCC [REDACTED] asked myself [REDACTED] for assistance with resident [REDACTED]. Upon arriving at the scene, [REDACTED] was beligerant and refusing to let staff remove her bedding in order for her to begin T/O [REDACTED]. [REDACTED] was asked several times to calm down and pass out her belongings. [REDACTED] continued yelling and screaming at staff calling [REDACTED] and myself bitches etc. [REDACTED] was physically removed off her mattress at which point she began kicking and flailing wildly, kicking and scratching my right forearm. [REDACTED] restrained and placed in handcuffs at which point she began to settle down. She asked for her ventolin inhaler, her cuffs were removed, her inhaler administered and her bedding removed.

Signature of Reporting Staff: [REDACTED] Date: [REDACTED]
Comments of M.O.S.O./Supervisor:
Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ________________

Further Action Required: (for administration use only)
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Signature of Administrator or Designate: ___________________________ Date: ________________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2006/12/03 Time of Incident: 02:00 PM YCMS Incident # 10854
Location of Incident: COURTYARD AND UNIT 2
Resident(s) Name and File #: [redacted]
Staff on Duty and Deployment: [redacted]
Witnesses: [redacted]

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:
 Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

while escorting [redacted] to unit 2 for church she seemed upset saying she probably wasn't gonna get to the gym at 2:30. I told her that I would arrange my breaks for her 6:25 gym time, but I was busy with breaks at 2:30. She got increasingly upset saying she wanted to go at 2:30. I told her that [redacted] would do what he could. She stated 'well that's not good enough.' I said its only 4 hours don't worry about. She seemed to be getting increasingly agitated and when she got into the porch she kicked off her shoes and threw her coat up on the shelf nearly hitting me with it. I told her that that was inappropriate and that she would be going to her room for a few minutes cool down when she got in on the unit. She started yelling your putting me in my room for nothing, fuck i hate this place.' I said [redacted] maybe if you kept clean and off the drugs you wouldn't have to come back.' She then turned around pointing her finger only inches away from my face screaming at me. [redacted] and I proceeded to put [redacted] in her room informing her that she now had 3 hrs time out for her outburst. [redacted] was instructed to put her things out. She began yelling at me stating 'I could tear your fucking head off.' She then threw her blankets and mattress out, then lunged at me with total rage in her eyes saying she was gonna punch me in the head. She then turned around and grabbed a red book and violently threw it at my head causing me to duck to avoid getting hit in the head. [redacted] again lunged at me calling me a 'stupid slut' and threatening to punch me and tear my head off. [redacted] instructed [redacted] to sit down on the bed. [redacted] did as she was told but continued yelling, and said 'you are lucky you are in here cause I would punch you in the fucking head.' She continued yelling, her door was closed and MOSO [redacted] was notified. This staff recomends at least 24 hrs time out for [redacted]

Signature of Reporting Staff: ___________________________ Date: __________

SECTION "C"

Special Action Taken:
Isolated

Comments of M.O.S.O./Supervisor:
[redacted] is to serve 24 hours T/O for this incident. As well the incident will be referred to the RCMP for investigation. [redacted] mother (not [redacted]) was notified at approximately 4:25 P.M. as well as Mr. Whitten.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: __________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: ___________________________ Date: __________
2007
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2007/06/27 Time of Incident: 06:20 PM YCMS Incident # 11628
Location of Incident: ADMISSIONS
Resident(s) Name and File #: ...
Staff on Duty and Deployment: ...
 Witnesses: ...

SECTION "B"

Type of Incident:
Verbally Abuse Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At the above noted time Res. [redacted] became verbally abusive, and extremely vulgar. She will be in T/O for the remainder of tonight. She was upset because she had to remain in observation until 8 pm.

Signature of Reporting Staff: [redacted] Date: [redacted]
Comments of M.O.S.O./Supervisor:
   T/O for remainder of tonight.

Administrative Comments:

Signature of M.O.S.O./Supervisor: _____________________________ Date: ________________

Further Action Required:  (for administration use only)

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Signature of Administrator or Designate: _____________________________ Date: ________________
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2007/06/27 Time of Incident: 06:00 PM YCMS Incident # 11629
Location of Incident: SAFETY ROOM 172
Resident(s) Name and File #: [redacted]
Staff on Duty and Deployment:
Witnesses: [redacted]

SECTION "B"

Type of Incident:
Verbally Abuse Staff
Assault on Staff
Non Compliance With Direction
Injury
Suicide Referral
Admission - NEW - SECTION 1.9

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:
Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

During the admission process MOSO [redacted] informed Resident [redacted] she would have to remain in the safety cell until night shift arrived because of a suicide risk reported by the Sheriff. Ms. [redacted] became very upset and belligerent towards MOSO [redacted] at which point the MOSO informed the Resident she would not only be lodged in the safety cell but she would also be serving time-out later on Unit 2. The resident went to the safety cell without incident and requested a blanket. When the request was made to the MOSO he denied the blanket saying her time-out was now in effect. Upon entering the safety cell to remove her mattress the resident again became upset and bolted for the door. YCC [redacted] prevented the resident from exiting and she was physically restrained. I circled Mr. [redacted] to remove her hand from the door facing and in the process of further restraint the resident bit my left bicep. She also attempted to bite Mr. [redacted] but failed. She also slapped Mr. [redacted] in the face. MOSO [redacted] was notified of the incident.

Signature of Reporting Staff: [redacted] Date: [redacted]

SECTION "C"

Special Action Taken:
Physically Restrained

Comments of M.O.S.O./Supervisor:
Acknowledged [redacted] will remain isolated until court in the am. If she returns, consequences will be administered [redacted] and [redacted] will determine whether to charge her with assault tomorrow, June 28/07.

Administrative Comments:

Signature of M.O.S.O./Supervisor: [redacted] Date: [redacted]

Further Action Required: (for administration use only)

Signature of Administrator or Designate: [redacted] Date: [redacted]
2008
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2008/05/02 Time of Incident: 08:00 AM YCMS Incident # 12760
Location of Incident: COURTYARD
Resident(s) Name and File #: [redacted]
Staff on Duty and Deployment: [redacted]
Witnesses: [redacted]

SECTION "B"

Type of Incident:
Other

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

at approx 6:20 unit 1 was in the gym. Residents [redacted] immediately began to take the residents back to the unit. While in the courtyard resident [redacted] jumped Resident [redacted] from behind. a code 2 was called. Resident [redacted] & [redacted] were fighting and then [redacted] jumped in [redacted] was kicking and punching [redacted] then backed away. [redacted] and [redacted] were mechanically restrained. Resident [redacted] was escorted to unit2 while [redacted] were escorted to unit 1. during the code [redacted] put her foot up to kick [redacted] and missed kicking me y.c.c. [redacted] in the neck. m.o.s.o. [redacted] arrived during the incident.

Signature of Reporting Staff: [redacted] Date: [redacted]

SECTION "C"

Special Action Taken:
SECURE ISOLATION 3 HOURS OR MORE
Comments of M.O.S.O./Supervisor:
acknowledged: will receive 48 hrs t/o: will receive 24 hrs t/ remp contacted r whitten contacted see briefing report

Administrative Comments:

Signature of M.O.S.O./Supervisor: __________________________ Date: ________________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: __________________________ Date: ________________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR

Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2008/05/02 Time of Incident: 06:20 PM YCMS Incident # 12762
Location of Incident: COURTYARD
Resident(s) Name and File #: [Redacted]

Staff on Duty and Deployment:

Witnesses: [Redacted]

SECTION "B"

Type of Incident:
Other
Resident to Resident Assault

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At the above noted time unit 1 residents were being escorted from the gym back to the unit due to arguing. When in the court yard resident [Redacted] ran towards resident [Redacted] and jumped her from behind hitting her several times. A code 2 was called and staff immediately intervened trying to separate the girls. At this point resident [Redacted] also began assaulting resident [Redacted] but backed off when told to do so. Resident [Redacted] was violently kicking and hitting resident [Redacted] and she also kicked myself, yee [Redacted] in the neck and shoulder area. Moso [Redacted] and several other staff responded. Resident [Redacted] was mechanically restrained and escorted to unit 2. During the restraint [Redacted] tried again to kick [Redacted] but missed kicking yee [Redacted] in the neck area. Resident [Redacted] was also mechanically restrained and escorted to unit 1. Resident [Redacted] was escorted to unit 1 as well.

Signature of Reporting Staff: [Redacted] Date: [Redacted]
SECTION "C"

Special Action Taken:
- Police Investigation
- Mechanically Restrained
- Isolated
SECURE ISOLATION 3 HOURS OR MORE

Comments of M.O.S.O./Supervisor:
acknowledged resident will receive a min of 48 hrs t/o and will receive a min of 24 hrs t/o
r cmp and r whitten notified mom notified

Administrative Comments:

Signature of M.O.S.O./Supervisor: ______________________ Date: ______________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: ______________________ Date: ______________
SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2008/05/02     Time of Incident: 06:20 PM
Location of Incident: COURTYARD

Resident(s) Name and File #: 

Staff on Duty and Deployment: 

Witnesses: 

SECTION "B"

Type of Incident:
Assault on Staff
Other Assault

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At the above stated date and time I noticed the girls to be upset when leaving the gym I proceeded to help and escort them to the unit. When we entered the courtyard I saw run up behind and hit her several times, then dumped in. A code 2 was called I intervened with both and at that time was standing to the right of us and proceeded to kick me in the face. When response got there and were cuffed and taken to unit 2 and unit 1 respectively.

Signature of Reporting Staff: 
Date: 

SECTION "C"

Special Action Taken:
Mechanically Restrained
Physically Restrained
Isolated
Comments of M.O.S.O./Supervisor:
acknowledged she will receive a minimum of 48 hrs t/o to be reviewed in the am rcmp have been called
and her parents have been notified and updated on the incident

Administrative Comments:

Signature of M.O.S.O./Supervisor: __________________________ Date: __________________________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: __________________________ Date: __________________________
GOVERNMENT OF
NEWFOUNDLAND
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Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2008/05/02 Time of Incident: 06:45 PM

YCMS Incident # 12769
Location of Incident: UNIT 2 B
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

Resident was in her room in T/O and on watch as she said she was going to hurt herself. She was told that she would have to remove her bra. She refused. This writer and YCC told her that she would have to remove her bra and cooperate before her T/O started. She again refused and stated that she was going to the bathroom and began to push her way out of the room. She was stopped and forced to stay in her room. She began to swing and fight hitting YCC in the face several times. At this point was restrained until she calmed down. Moso aware of incident.

Signature of Reporting Staff: Date:

SECTION "C"

Special Action Taken:
Isolated
Comments of M.O.S.O./Supervisor:
acknowledged resident very aggressive this evening she will serve a min of 48 hrs t/o and a case plan will be developed before this t/o is completed RCMP notified parents notified and R Whitten notified

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ___________________________

Further Action Required: (for administration use only)

Signature of Administrator or Designate: ___________________________ Date: ___________________________
GOVERNMENT OF
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YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2008/05/02 Time of Incident: 06:45 PM YCMS Incident # 12770
Location of Incident: UNIT 2B ROOM 2205
Resident(s) Name and File #:
Section 40(1)
Staff on Duty and Deployment:
Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At the above noted date and time resident was in her room (with the door open) on suicide watch in time out for a previous incident. Resident demanded to go to the washroom. She was very upset and agitated. She was told that she had to remove her bra. She refused. YCC's and were standing in the doorway. Resident became aggressive and proceeded to try to push YCC out of the doorway. She became more aggressive and started to punch in the face several times. was restrained by YCC's and myself.

Signature of Reporting Staff: ______________________ Date: ______________________

SECTION "C"

Special Action Taken:
Mechanically Restrained
Comments of M.O.S.O./Supervisor:

acknowledged resident will serve a min of 48 hrs t/o and she will be placed on a case plan. parents notified. remp notified. r whitten notified.

Administrative Comments:

Signature of M.O.S.O./Supervisor: _______________________________ Date: ________________

Further Action Required: (for administration use only)

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________________________________________________________________________

Signature of Administrator or Designate: _______________________________ Date: ________________
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2008/11/22 Time of Incident: 05:50 PM YCMS Incident # 13437
Location of Incident: UNIT ONE
Resident(s) Name and File #: [Redacted]
Staff on Duty and Deployment: [Redacted]
Witnesses: [Redacted]

SECTION "B"

Type of Incident:
Verbally Abuse Staff
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approximately 5:50pm, on November 22nd, 2008, [Redacted] was standing up watching the television. At this time, he impulsively turned and threw his milk at the wall. I (YCC [Redacted]) told [Redacted] that this was unacceptable behaviour and informed him that he would have to clean up the mess. He paced around the unit and stared at me, he did not respond verbally. I then informed [Redacted] that he would have to go into his cell until he was ready to clean up the milk. I unlocked his cell door and stood in the doorway, holding the door open. [Redacted] started to go into his cell, at the same time he made a motion toward my head with his right hand. I deflected his hand and redirected him toward his cell. At this time, [Redacted] swung around with his right hand in a full fist, and hit me in the left side of my head. YCC [Redacted] called a code 2 for assistance. [Redacted] continued to come toward me, swinging both fists at me and at the same time he became verbally abusive toward me. I then pushed [Redacted] into his cell with my left hand, as I closed the door with my right hand. MOSO [Redacted] was notified of the incident and [Redacted] was then escorted to unit 2 by the YCC's who responded to the code 2. I have a large bump on the left side of my head, a massive headache and a cut on my upper lip where I was struck with a second punch.

Signature of Reporting Staff: ___________________________ Date: ___________________________
SECTION "C"

Special Action Taken:
Isolated

Comments of M.O.S.O./Supervisor:
Acknowledged. [redacted] isolated on unit 2 room #2212. Mr.Head notified, R.C.M.P. contacted, as [redacted] wished to press charges. A Phone call was made to [redacted] Mom. A message was left. She was unavailable.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: _____________

Further Action Required:  (for administration use only)

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_________________________________________________________

Signature of Administrator or Designate: ___________________________ Date: _____________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2008/11/22 Time of Incident: 03:05 PM YCMS Incident # 13438
Location of Incident: GYM
Resident(s) Name and File #:
Staff on Duty and Deployment:
Witnesses:

SECTION "B"

Type of Incident:
Other

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At about 3:05pm [xxx] was playing badminton with me YCC [xxx] YCC [xxx] had just left the Gym, upon the gym door closing [xxx] with a smile on his face raised the racket over his head and let it fly over the net, striking above the gym door. YCC [xxx] then reentered the gym to inquire about the noise, was at that time informed by staff.

Signature of Reporting Staff: ____________________________ Date: ____________________________
Comments of M.O.S.O./Supervisor:
Acknowledged.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ________________

Further Action Required: (for administration use only)
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__________________________________________________________________________
__________________________________________________________________________

Signature of Administrator or Designate: ___________________________ Date: ________________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
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SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2008/11/22 Time of Incident: 05:50 PM YCMS Incident # 13440
Location of Incident: UNIT 1

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At above time and date, [redacted] for no apparent reason threw his container of milk at the wall. Mr. [redacted] informed [redacted] that this is unacceptable, and that he would have to clean up his mess. [redacted] did not respond to Mr. [redacted] and began to pace the Unit. Mr. [redacted] informed [redacted] that he would have to go to his room until he was ready to clean up the mess. Mr. [redacted] opened [redacted] door. As [redacted] went toward his room he made a motion towards Mr. [redacted] head with his right hand. Mr. [redacted] then redirected him towards his room. At this time, [redacted] began swinging at Mr. [redacted] striking him several times. [redacted] called a Code 2. Mr. [redacted] managed to get [redacted] into his room and close his door.

Signature of Reporting Staff: [redacted] Date: [redacted]

SECTION "C"

Special Action Taken:
Isolated
Comments of M.O.S.O./Supervisor:
Acknowledged

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ________________

Further Action Required: (for administration use only)

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______________________________________________________

Signature of Administrator or Designate: ___________________________ Date: ________________
GOVERNMENT OF
NEWFOUNDLAND
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SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2008/11/22  Time of Incident: 05:50 PM
Location of Incident: UNIT 1
Resident(s) Name and File #: 
Staff on Duty and Deployment: 
Witnesses: 

SECTION "B"

Type of Incident:
Verbally Abuse Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

On the above date and time while YCC [redacted] was dealing with the issue with [redacted] (as stated in previous incident report), [redacted] was verbally abusive towards YCC [redacted], using profanities, swearing and yelling until situation was under control and [redacted] was in his room with the door secure.

Signature of Reporting Staff: 
Date: 

(Relevant redacted sections are indicated with '[redacted]' for privacy reasons.)
Comments of M.O.S.O./Supervisor:

Acknowledged. Issue forwarded to [redacted] case team.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ____________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: ___________________________ Date: ____________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2008/12/13 Time of Incident: 04:12 AM YCMS Incident # 13496
Location of Incident: SJYDC

Resident(s) Name and File #: [redacted]
Staff on Duty and Deployment: [redacted]
Witnesses: [redacted]

SECTION "B"

Type of Incident:
Verbally Abuse Staff
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

Immediately upon the RNC leaving the SJYDC Resident [redacted] became uncooperative. We began the admission and she refuse to remove her clothing and shower. We continued to ask the questions necessary for admission and she was given something to eat. [redacted] became verbally abusive and was placed in cell 112, at which time she was given blankets and a pillow. When she lay down she covered her head with the blanket. I, YCC [redacted] opened the door to the cell and went in to explain that she could not put the blanket on the floor. [redacted] began screaming and cursing at me that "..." that is the way I sleep bitch." I gave her another opportunity to remove the blanket, which she wouldn't, so the blankets were taken. At this point [redacted] came at me swinging her arms and hands, striking me in the face. YYC [redacted] restrained [redacted] and placed her in her room. I closed the door and started banging on the door again and the door to the cell popped open. She immediately charged from the room and came at me knocking me over into the chair next to the control panel. YYC [redacted] restrained her again and put her back in the cell. The door was secured again. We were unable to complete the suicide assessment and health status screen due to aggressive behavior.

[redacted] admitted to taking pills. She was seen by [redacted] at the Janeway and her father gave medical release on her.

Signature of Reporting Staff: [redacted] Date: [redacted]
SECTION "C"

Special Action Taken:
   Isolated

Comments of M.O.S.O./Supervisor:
   If [redacted] returns from court today, she will serve 12 hours time-out.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: _____________________

Further Action Required: (for administration use only)

__________________________________________________________
__________________________________________________________
__________________________________________________________

Signature of Administrator or Designate: _____________________ Date: _____________________
2009
Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2009/01/05 Time of Incident: 06:30 PM YCMS Incident # 13556
Location of Incident: UNIT 2 WASHROOM AND ROOM # 2207

Resident(s) Name and File #: ________________________________

Staff on Duty and Deployment: _________________________________

Witnesses: _________________________________________________

SECTION "B"

Type of Incident:
Verbally Abuse Staff
Other
Assault on Staff
Non Compliance With Direction

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At 17:35Pm this afternoon [redacted] asked to go to the washroom. He said he had a bad stomach so staff [redacted] him out of T/O to go to the washroom and he went back to his room 10 Min later. At 18:00Pm again he said he needed to use the washroom. Staff [redacted] and [redacted], thinking he was still ill, let him go to washroom again. This was only a sham as he was only faking staff out. He started brushing his teeth then went to the stall for 33 min. on the toilet. When he did come out he was escorted toward his room by staff [redacted] and [redacted] then threatened to spit in Mr [redacted] face. As [redacted] made the attempt to spit he was restrained. [redacted] placed [redacted] to the back of his cell. Staff removed themselves from the cell and closed the door. MOSO [redacted] was called and told about [redacted] and his actions.

Signature of Reporting Staff: ________________________________ Date: ____________________
SECTION "C"

Special Action Taken:
  Physically Restrained
  SECURE ISOLATION 3 HOURS OR MORE

Comments of M.O.S.O./Supervisor:
  [ ] to serve time-out for rest of the night.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ____________________________ Date: ____________

Further Action Required:  (for administration use only)

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________________________________________________________________________

Signature of Administrator or Designate: ____________________________ Date: ____________
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2009/01/11  Time of Incident: 10:15 PM  YCMS Incident # 13594
Location of Incident: UNIT 4.
Resident(s) Name and File #:
Staff on Duty and Deployment:
Witnesses:

SECTION "B"

Type of Incident:
   Assault on Staff
   Non Compliance With Direction
   IF ESCAPE OR UAL, (A) Length of Absence (Days):
   (B) Still at Large:
Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At 10:15pm I, [redacted], received a phone call from Moso, [redacted] requesting assistance on unit 4 to place a resident in his room who was refusing to go to his room. Unit two residents were sent to their rooms and I then went to unit 4. Upon my arriving on unit 4, [redacted] was still out of his room and Youth Care Counsellors [redacted] and [redacted], along with Moso, [redacted] were attempting to encourage [redacted] to go to his room. I also spoke to [redacted] and asked him to go to his room but he continued to refuse. When staff attempted to escort [redacted] to his room he began to resist and pushed Youth Care Counsellor [redacted] who ended up underneath [redacted] when he was restrained to the floor by Youth Care Counsellors [redacted] and myself. While being restrained to the floor [redacted] resisted and kicked, hitting Youth Care Counsellor [redacted] in the face with his foot. [redacted] mouth (possibly nose) started to bleed and he began to spit blood at staff hitting Youth Care Counsellor [redacted] in the face. [redacted] was cuffed and escorted to unit 2. Upon arrival on unit two [redacted] had calmed down and was no longer bleeding. He was counselled regarding his behaviour and given a cloth to clean dried blood off his face.

Signature of Reporting Staff: ___________________________ Date: _______________

SECTION "C"

Special Action Taken:
Police Investigation
Mechanically Restrained
SECURE ISOLATION 3 HOURS OR MORE

Comments of M.O.S.O./Supervisor:
[redacted] will receive 48 hours T/O and the incident has been referred to the RCMP to determine if charges will be laid.

P. Mahoney

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: _______________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: ___________________________ Date: _______________
GOVERNMENT OF
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Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2009/01/11  Time of Incident: 10:20 PM  YCMS Incident # 13596
Location of Incident: UNIT 4
Resident(s) Name and File #: [Redacted]
Staff on Duty and Deployment:
Witnesses: [Redacted]

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)
During the restraint of resident [Redacted] he turned towards me and spit in my face.

Signature of Reporting Staff: [Redacted]  Date: [Redacted]

SECTION "C"

Special Action Taken:
Mechanically Restrained
Isolated
Comments of M.O.S.O./Supervisor:
RCMP contacted. Resident given 48 hours T/O.
P. Mahoney

Administrative Comments:

Signature of M.O.S.O./Supervisor: ____________________________ Date: ________________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: ____________________________ Date: ________________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR

Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2009/05/07 Time of Incident: 01:00 PM YCMS Incident # 13945
Location of Incident: UNIT 2 B
Resident(s) Name and File #: 

Staff on Duty and Deployment: 

Witnesses: 

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approximately 1230pm, [redacted] came out of his room to shower and have lunch.

[redacted] then went to the laundry with Ms [redacted] to get a change of clothing. When returning to B side, he [redacted] became verbally abusive towards Ms [redacted]—saying open the 'fucking door bitch'. I ( ) then instructed [redacted] to go directly to his room for his inappropriate behavior.

[redacted] then went to sit at the table to eat his lunch, I again told [redacted] to go to his room. [redacted] then went into a crouching stance and advanced towards me in a threatening manner. I then backed off a few feet to create space between us. [redacted] then threw a punch that connected with my right upper lip.

A code 2 was immediately called, and while restraining [redacted], the both of us tumbled over the chairs by the tv and bounced off the walls and ending up on the floor of the 2B office.

Assistance arrived, [redacted] was mechanically and physically restrained and placed in room 2204.

Signature of Reporting Staff: ___________________________ Date: _______________
SECTION "C"

Special Action Taken:
    Mechanically Restrained
    Physically Restrained

Comments of M.O.S.O./Supervisor:
    Mr. received an injury to his mouth from the blow given him - (bloodied mouth and swollen lip) and during the struggle with Mr. and Mr. fell to the floor, struck his face splitting his lower lip and broke off his left front tooth. Medical attention was immediately given by Nurse and was later followed up by medical attention at the Newhook Clinic. According to the Dr. treating stitches were not required but he will have to have an appointment with a dentist to have his tooth checked. This will be arranged by the facility nurse. The RCMP have been notified of this incident.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ____________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: ___________________________ Date: ____________
SECTION "A"

Name of Facility:  Newfoundland and Labrador Youth Centre
Date of Incident:  2009/05/07  Time of Incident:  01:00 PM  YCMS Incident # 13946
Location of Incident:  UNIT 2 B SIDE
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL,  (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approximately 1pm, I (________) entered unit2b. I was informed by Mr [REDACTED] that [REDACTED] was going to his room for his verbal abuse towards Ms [REDACTED].

[REDACTED] was told to pick up his meal tray and go to his room, he then went to sit down. Mr [REDACTED] again instructed [REDACTED] to go to his room. [REDACTED] then went into a crouch and lunged at Mr [REDACTED].

I called a code 2 immediately. While waiting for assistance Mr [REDACTED] was preventing further attack. [REDACTED] and Mr [REDACTED] tumbled over the chairs and hit the wall ending up on the floor of the unit 2B office.

Mr [REDACTED] opened the door between B side and A side (2222), I then relieved Mr [REDACTED] who then responded to B side.

Signature of Reporting Staff:  

Date:  

SECTION "C"

Special Action Taken:
Mechanically Restrained
SECTION "C"

Special Action Taken:
Physically Restrained

Comments of M.O.S.O./Supervisor:
Acknowledged. Mr. [redacted] received a swollen bloodied upper lip and required minor medical attention. [redacted] will serve 3 hours T / O for his behaviour and the RCMP have been notified.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ___________________________

Further Action Required: (for administration use only)

[Blank lines]

Signature of Administrator or Designate: ___________________________ Date: ___________________________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR
Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2009/05/07 Time of Incident: 01:05 PM YCMS Incident # 13948
Location of Incident: UNIT 2B
Resident(s) Name and File #: [Redacted]
Staff on Duty and Deployment:
Witnesses: [Redacted]

SECTION "B"

Type of Incident:
IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

[Redacted] was verbally abusive to me [Redacted] he refused to open the door to the unit and said' open the fucking door bitch'. At approximately 1300 [Redacted] was asked to go to his room for a cool down. He sat at the table he was told again to go to his room for cool down. He stood up and then got in a crouching position and lurched at [Redacted] punching him in the face. Code 2 was called, staff restrained [Redacted]

Signature of Reporting Staff: [Redacted] Date: [Redacted]
Comments of M.O.S.O./Supervisor:
Acknowledged.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ________________

Further Action Required:  (for administration use only)

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Signature of Administrator or Designate: ___________________________ Date: ________________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR

Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2009/05/07 Time of Incident: 01:00 PM YCMS Incident # 13949
Location of Incident: UNIT 2 B
Resident(s) Name and File #: 

Staff on Duty and Deployment: 

Witnesses: 

SECTION "B"

Type of Incident: Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approx. the above date and time was being told by staff (YCC ) to go to his room. He lay down his lunch and with no notice and punched YCC in the face. A code two was called. Staff and including myself fell to the floor. Staff responded from the other units. was handcuffed and placed into his cell. It was noticed by staff that was bleeding from his bottom lip. After closer examination by Nurse , had cut his lip with his tooth and part of the tooth was recovered by the Nurse for his bottom lip. was then taken to the whitbourne clinic where he was see by The Dr. on site. Moso notified.

Signature of Reporting Staff: 

Date: 

SECTION "C"

Special Action Taken:
Medical Treatment Required
Mechanically Restrained
Physically Restrained
SECTION "C"

Special Action Taken:
Isolated

Comments of M.O.S.O./Supervisor:
Acknowledged [redacted] received medical attention and was later escorted to the Newhook Clinic. RCMP were notified of the incident as well as [redacted] will serve 3 hours (maximum for [redacted] T/O on Unit 2.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ___________________________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: ___________________________ Date: ___________________________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2009/05/07  Time of Incident: 08:40 PM  YCMS Incident # 13951
Location of Incident: TELEPHONE CONVERSATION ON UNIT 2B
Resident(s) Name and File #: [redacted]
Staff on Duty and Deployment: [redacted]
Witnesses: [redacted]

SECTION "B"

Type of Incident:

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At ~840pm [redacted] (black [redacted] mother) called me to check on [redacted] to see how he was after today's incident involving him. I informed her how he was doing, then she asked about his lip and how it appeared. She then proceeded to say that she is not finished with this matter and that she will be talking to [redacted] and another gentleman (cannot recall the name she used to identify this man) in the morning. As well she said that the fact that charges are being pressed against [redacted] will hinder him going to New Hampshire. Also, she informed me that she will be pressing charges for what happened to her boy at the youth centre today.

Signature of Reporting Staff: ________________________ Date: ________________________

SECTION "C"

Special Action Taken:
Other (specify in Comments)
Comments of M.O.S.O./Supervisor:  
ACKNOWLEDGED  

Administrative Comments:

Signature of M.O.S.O./Supervisor: __________________________ Date: __________________________

Further Action Required:  (for administration use only)

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Signature of Administrator or Designate: __________________________ Date: __________________________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR

Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2009/11/13 Time of Incident: 07:00 PM YCMS Incident # 14414
Location of Incident: UNIT 2 B 2205
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
 Verbally Abuse Staff
 Assault on Staff
 Non Compliance With Direction

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

During the quiet hour resident [redacted] was in her room being argumentative with staff while she was being supervised for Suicide Watch. She was being verbally abusive and accusing staff of talking about her. She was assured that staff were not talking about her and reminded that it was quiet hour and she should stop being disruptive. She refused to be quiet so she was told that she would lose her mistress if her negative behavior continued. She replied with a 'f*ck you b*tch' and began to bang and kick. Her door was closed while awaiting staff to assist. Once staff had arrived, her door was opened and staff proceeded to enter her room. She was told to go to the corner of her room as she was facing staff. She responded by spitting at this staff twice (one hitting the face) [redacted] was physically and mechanically restrained. Moso [redacted] notified.

Signature of Reporting Staff: ___________________________ Date: ____________________
SECTION "C"

Special Action Taken:
  Mechanically Restrained
  Physically Restrained
  SECURE ISOLATION 3 HOURS OR MORE

Comments of M.O.S.O./Supervisor:
  acknowledged resident to serve 48 hrs t/o to be reviewed on Monday morning RCMP notified b tobin notified
  and [redacted] mom notified

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________  Date: __________________

Further Action Required:  (for administration use only)

Signature of Administrator or Designate: ___________________________  Date: __________________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR

Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility:  Newfoundland and Labrador Youth Centre
Date of Incident:  2009/11/13  Time of Incident:  07:05 PM  YCMS Incident # 14415
Location of Incident:  UNIT 2 B
Resident(s) Name and File #:  
Staff on Duty and Deployment:  
Witnesses:  

SECTION "B"

Type of Incident:  Assault on Staff
IF ESCAPE OR UAL, (A) Length of Absence (Days):  
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approx. the above date and time I was asked to assist Y.C.C. and to remove bedding from resident room. She was going back in time out. Her door was closed. She was standing in front of it shouting. She was told by me Y.C.C. to stand back. She refused. The door was opened. was the first to enter followed by and then myself. was shouting at and then began to spit. She was taken to the floor and cuffed with as much force as needed. Moso notified.

Signature of Reporting Staff:  
Date:  

SECTION "C"

Special Action Taken:
Mechanically Restrained
Physically Restrained
Isolated
Comments of M.O.S.O./Supervisor:
acknowledged

Administrative Comments:

Signature of M.O.S.O./Supervisor: ________________________________ Date: ____________________________

Further Action Required: (for administration use only)
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______________________________________________________________________________
______________________________________________________________________________
______________________________________________________________________________

Signature of Administrator or Designate: ____________________________ Date: ____________________________
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2009/11/13  Time of Incident: 07:10 PM  YCMS Incident # 14416
Location of Incident: UNIT 2 B, ROOM 2205

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Other

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approximately 7:10 pm, resident [redacted] who is on suicide watch was being verbally abusive and disruptive. Her door was closed and she was monitored through her window and told that her door would re-open when she calmed down. The verbal abuse continued and she was told if her behaviour continued, she would serve a time out, and counselled to settle down. She answered these requests by kicking the door and screaming further verbal abuse. Staff [redacted] entered resident [redacted]'s room to remove her bedding, as she refused to pass it out. Resident [redacted] was stood in the centre of her room, and spit toward ycc [redacted], the first spit missed; but the second spittle landed in Miss [redacted] hair and the right side of her face just below her eye. Resident [redacted] was physically restrained with myself taking resident [redacted] left arm, ycc [redacted] was on the right side of resident [redacted] and took her other arm. Resident [redacted] was lowered to the floor with as much force as necessary and I moved down to her feet to prevent her from kicking either of us. Ycc's [redacted] and [redacted] took control of her arms and applied mechanical restraints and prevented resident [redacted] from banging her head off of the floor (as she had attempted to self-injure in previous incidents) Resident [redacted] further verbally abused staff, and was attempting to get up, but was prevented from doing so. Moso [redacted] notified.

Signature of Reporting Staff: 
Date: 

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SECTION "C"

Special Action Taken:
SECURE ISOLATION 3 HOURS OR MORE

Comments of M.O.S.O./Supervisor:
acknowledged resident to serve 48 hrs t/o b tobin notified rcmp notified mom notified

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ____________________

Further Action Required:  (for administration use only)

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Signature of Administrator or Designate: ___________________________ Date: ____________________
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2009/11/16  Time of Incident: 12:00 PM  YCMS Incident # 14418
Location of Incident: UNIT 4

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff
Damage to Property

IF ESCAPE OR UAL, (A) Length of Absence (Days):  
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approx 12:00 three residents were moved over to unit 3 from unit 4. It was at this time that Mr. [redacted] and Mr. [redacted] informed residents [redacted] they were given TO for behavior towards other residents (intimidation, etc.). [redacted] complied, and they went to their rooms and proceeded to throw things around their rooms and yelling and banging. [redacted] put a cup in his sock and a pencil in his cast and threatened to use both as weapons. [redacted] smashed his plastic soap container and cut up his forehead with the pieces, he also broke the glass in his door. At approx 1420 hrs [redacted] was mechanically restrained and removed from his room and escorted to unit 2. During the restraint of [redacted] yee [redacted] was struck several times with a sock weapon, stabbed by his pencil, and punched in the face. At approx 1500 hrs [redacted] calmed down Moso [redacted] notified, Moso [redacted] said to let him out to use the washroom and then move to room 3206.

Signature of Reporting Staff: ___________________________  Date: ___________________________
SECTION "C"

Special Action Taken:
   Mechanically Restrained
   SECURE ISOLATION 3 HOURS OR MORE

Comments of M.O.S.O./Supervisor:
   Acknowledged [Redacted] to serve 48 hours minimum on unit 2 and RCMP contacted.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ________________

Further Action Required: (for administration use only)

   ___________________________
   ___________________________
   ___________________________
   ___________________________

Signature of Administrator or Designate: ___________________________ Date: ________________
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2009/11/16 Time of Incident: 02:30 PM YCMS Incident # 14419
Location of Incident: UNIT 4
Resident(s) Name and File #: [Redacted]
Staff on Duty and Deployment: [Redacted]
Witnesses: [Redacted]

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

[Redacted] was in his room serving a T/O period given to him earlier in the day. He refused to remove his mattress and personal belongings from his room. When staff attempted to enter his room to remove these items, [Redacted] attacked staff members swinging a sock in which he had placed a cup and punching at staff with his hand that was encased in a cast. He had embedded a pencil in his cast in spike like fashion and was trying to strike staff with it. He managed to strike Mr. [Redacted] in the head with the sock and cup as well as in the arm with the cast and pencil. Mr. [Redacted] also received a punch to his nose from the uncasted hand. Mr. [Redacted] received two blows to the head from the sock with the cup in it as well as some abrasions to his face and head. [Redacted] also had spread talcum powder and deodorant over the floor of his room in an attempt to have staff members slip and fall upon entering the room. These actions made for a very dangerous situation.

Signature of Reporting Staff: [Redacted] Date: [Redacted]
SECTION "C"

Special Action Taken:
   Mechanically Restrained
   Physically Restrained
   Isolated
   SECURE ISOLATION 3 HOURS OR MORE

Comments of M.O.S.O./Supervisor:
   [Redacted] was transferred to unit two. RCMP to be notified as to assault charges being pursued.

Administrative Comments:

Signature of M.O.S.O./Supervisor: __________________________ Date: ________________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: __________________________ Date: ________________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION “A”

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2009/12/21 Time of Incident: 12:40 PM YCMS Incident # 14470
Location of Incident: CAFE

Resident(s) Name and File #: 

Staff on Duty and Deployment: 

Witnesses: 

SECTION "B"

Type of Incident: Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At 12:40 while I was in the cafe eating my lunch, I noticed that unit 1 was having a verbal confrontation. Then at this point [redacted] attacked YCC [redacted] Hitting her several times in the head/face area. I responded and [redacted] was restrained physically and then handcuffed. She was then transported to unit 2 for time out.

Signature of Reporting Staff: 

Date:

SECTION "C"

Special Action Taken: Mechanically Restrained
Comments of M.O.S.O./Supervisor:

[Redacted] restrained and placed on unit 2b for 48 hours time out. Will implement a case plan for [Redacted] within the next 48 hours.

RCMP notified.
Social worker to notify parent.
B Tobin notified.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ________

Further Action Required: (for administration use only)

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_________________________________________________________________
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Signature of Administrator or Designate: ___________________________ Date: ________
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2009/12/21 Time of Incident: 12:40 PM YCMS Incident # 14471
Location of Incident: DINING HALL
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff
Injury

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At the above noted time myself and ycc [redacted] were preparing to leave the dining hall with unit 1 residents. The girls were having a verbal exchange. [redacted] & [redacted] were telling [redacted] that it was disrespectful to not clean her tray. [redacted] did not appreciate what the girls were telling her and she became upset and started cursing and swearing. At this point I instructed all girls to stop with this behavior. [redacted] continued and I again told her to stop at which point she charged at me with a closed fist and hit me in the left side of my head. Staff immediately responded and [redacted] was physically and mechanically restrained and escorted to unit 2.

Signature of Reporting Staff: __________________________ Date: ____________

SECTION "C"

Special Action Taken:
Mechanically Restrained
Physically Restrained
SECTION "C"

Special Action Taken:
Isolated
SECURE ISOLATION 3 HOURS OR MORE

Comments of M.O.S.O./Supervisor:
重生 restrained and escorted to unit 2B. Placed in time out for 48 hours at which time it will be reviewed.
A case plan will be implemented within the next 48 hours.

Notified RCMP
Social Worker will notify parent.
B Tobin notified.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ________________

Further Action Required:  (for administration use only)

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Signature of Administrator or Designate: ___________________________ Date: ________________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR  
Department of Justice YOUTH CORRECTIONS  
SECURE CUSTODY/REMAND INCIDENT REPORT  

SECTION "A"  
Name of Facility:  Newfoundland and Labrador Youth Centre  
Date of Incident:  2009/12/21  Time of Incident:  12:40 PM  
Location of Incident:  CAFETERIA  
Resident(s) Name and File #:  
Staff on Duty and Deployment:  
Witnesses:  

SECTION "B"  
Type of Incident:  
IF ESCAPE OR UAV, (A) Length of Absence (Days): 
(B) Still at Large: 

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approx. 12:40, while having lunch in the cafeteria, [redacted] started shouting and swearing, telling residents and staff to leave her alone and fuck off. Residents [redacted] and [redacted], told [redacted] that it was disrespectful to return her tray to the food cart uncleand. [redacted] took offence to being told this and told the residents to fuck off. When staff told [redacted] to stop swearing and cool down, she totally ignored us. Again YCC [redacted] told her to stop it, that she had said enough. [redacted] immediately jumped up, ran towards Ms. [redacted] and repeatedly punched her in the head area. I in turn went after [redacted] and attempted to separate her from Ms. [redacted], at which point YCC's [redacted] and [redacted] assisted and put [redacted] to the floor where she was physically and mechanically restrained. [redacted] was then escorted to unit two and placed in time out for her inappropriate behavior.

Signature of Reporting Staff:  ___________________________  Date:  ___________________________
Comments of M.O.S.O./Supervisor:

[Redacted] restrained and placed on unit 2 for 48 hour time out period and to be reviewed at that time. Case team will meet within the next 48 hours to implement a case plan for [Redacted].

RCMP notified.
Social worker to notify parents.
B Tobin notified.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________  Date: _______________________

Further Action Required:  (for administration use only)

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____________________________

Signature of Administrator or Designate: ___________________________  Date: _______________________

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SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2010/02/03
Time of Incident: 09:20 PM
YCMS Incident # 14496
Location of Incident: UNIT # 1 LOUNGE AREA

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Verbally Abuse Staff
Assault on Staff
Non Compliance With Direction

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At 9:10PM tonight was on a Phone call to her Grandmother and had to be reminded several times to be polite to her grandmother at 9:15PM hung up on her Grandmother cutting her call short.

After this was told by staff her behavior was not appropriate and was not the right way to treat her Grandmother. got a little verbal towards staff ( She said: Its My f----ing Grandmother and I will say what I want to her )and went to the washroom with a few more comments (working herself up, Arms waving in the air and pulling her hair). When left the washroom she was asked to go to her room for cool down by staff refused to do so and jumped up on the table in the lounge area!! Threatening staff to put her in her room then spit in Mr face. A CODE # 2 had already been called by staff. was taken down from the table by staff & and placed on the floor being Physically restrained by staff. Mechanical restraints were applied. Staff arrived on Unit and was placed in room # 2106 for TIME / OUT. MOSO Mr was on Unit #1 and was advised of problems with tonight.

Signature of Reporting Staff: _____________________________ Date: _____________________
SECTION "C"

Special Action Taken:
   Mechanically Restrained
   Physically Restrained
   Isolated

Comments of M.O.S.O./Supervisor:
   RCMP notified so as to pursue possibility of charges being laid against [redacted] for spitting in
   Mr. [redacted]'s face. [redacted] will serve 12 hours Time-out commencing in the morning.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ________________

Further Action Required:  (for administration use only)

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Signature of Administrator or Designate: ___________________________ Date: ________________
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2010/07/18  Time of Incident: 07:55 PM  YCMS Incident # 14726
Location of Incident: UNIT #2
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
- Verbally Abuse Staff
- Other
- Assault on Staff
- Non Compliance With Direction

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:
Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

AT 7:55PM tonight [redacted] became upset with staff who is on Suicide Watch from Unit #3. He became Verbally abusive towards Staff while punching his window and door. Staff asked what was his problem was, he would not say But did comment that he was very mad at [redacted] and threatened him Harm. Was told to calm down or he would be placed in T/O. He refused with another load of Language. Due to outburst his cell door was closed till he calmed down. MOSO [redacted] was called about [redacted] actions and his cell door. After 15 Min, he was calm and his door was opened. At 8:20PM the cell door was closed by [redacted] and it remained closed due to another outburst from him. Staff Mr [redacted] and Mr [redacted] entered his cell (Other Residents had been placed in rooms prior) was asked what was wrong, again met with a verbal abuse towards staff. Then tried to push the cell door closed with Mr. [redacted] standing in door way. When [redacted] knew the door was not going to close, he got Mad and made a swing with a fist to punch Mr [redacted] for not moving. Mr [redacted] blocked the punch and restrained, again with staff Mr [redacted], was physically and mechanically restrained on the floor with staff. Would not calm down. He began to threaten Mr [redacted], going to cut his throat if he gets a chance. MOSO [redacted] came to the Unit and spoke to [redacted]. He told Mr [redacted] and Staff he was going to kill Mr [redacted] and cut his fucking throat. Mr [redacted] asked if he was upset about his meeting today with [redacted] replied that he will burn the fucker out when he gets out. [redacted] was told by MOSO Mr. [redacted] that he would be charged with uttering threats towards staff and at assault of staff Mr. Hopkins. [redacted] was removed and was taken by escort Mr [redacted], Mr [redacted], and Mrs [redacted]. Observation was calm during the move and when placed in cell his cuffs were removed. [redacted] will remain in Observation for the Night.

Signature of Reporting Staff: [redacted] Date: [redacted]

SECTION "C"

Special Action Taken:
Mechanically Restrained
Physically Restrained
Isolated
SECURE ISOLATION 3 HOURS OR MORE
Comments of M.O.S.O./Supervisor:

RCMP were notified as was [redacted] father. [redacted] also spoke with [redacted] from Legal Aid. [redacted] will serve twelve hours (12) T/O if he returns from court tomorrow.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: _______________________

Further Action Required: (for administration use only)

[Blank lines]

Signature of Administrator or Designate: ___________________________ Date: _______________________

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SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre

Date of Incident: 2010/07/18  Time of Incident: 05:55 PM  YCMS Incident # 15032

Location of Incident: UNIT 2

Resident(s) Name and File #: [redacted]

Staff on Duty and Deployment: [redacted]

Witnesses: [redacted]

SECTION "B"

Type of Incident:
Verbally Abuse Staff
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.):

At 8:20 p.m., [redacted] closed his cell door while on suicide watch. [redacted] and myself entered his room and asked what was wrong and was met with verbal abuse. [redacted] attempted to close his door but [redacted] was standing in the doorway still being verbally abusive and very upset made a swing with his fist toward [redacted]. [redacted] and [redacted] blocked the punch and both [redacted] and myself physically restrained [redacted] and he was placed on the floor and mechanically restrained. [redacted] began to threaten [redacted] and stated "I'm going cut your throat if I get the chance," Moso [redacted] came over to the unit to speak to [redacted] and told [redacted] that he was going to kill [redacted] by cutting his fucking throat. [redacted] also spoke to [redacted] asking him if he was upset about a meeting that had earlier in the day with [redacted]. [redacted] replied, "I'll burn the fucker out when I get out." [redacted] explained to [redacted] that he would charged with assault on staff and uttering threats toward staff members. He was then escorted by [redacted]. [redacted] and myself to observation in the main building and was calm during the move and he was placed in a room where his handcuffs were removed.

Signature of Reporting Staff: [redacted]  Date: [redacted]
Comments of M.O.S.O./Supervisor:
Acknowledged

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ____________

Further Action Required: (for administration use only)
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Signature of Administrator or Designate: ________________ Date: ____________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR

Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2010/11/02 Time of Incident: 05:50 PM YCMS Incident # 14915
Location of Incident: UNIT 2
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

[Redacted] had received time out for refusal of doing her chore from Ms. [Redacted]. Myself and Ms. [Redacted] had tried to convince [Redacted] to go to her room on her own accord [Redacted] would have no part of this and she was physically escorted to room 2203. Once in her room I was backing out of the room and she spit on me, (landing on the arm of my sweater.)

Signature of Reporting Staff: __________________________ Date: __________________________

SECTION "C"

Special Action Taken:
Time Out 24 Hours
Comments of M.O.S.O./Supervisor:

Resident isolated to her room will serve 24 hrs time out for her actions. RCMP Mike Woodcock contacted and advised. He will visit the NLYC tomorrow night, pick up the file and speak with the resident.

Contacted [REDACTED] father who could not understand my message. Asked to contact his daughter who would translate and contact him. I was unable to make contact with her. Social worker to follow up.

Mr Whitten briefed.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ____________________ Date: ________________

Further Action Required: (for administration use only)

Signature of Administrator or Designate: ____________________ Date: ________________
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2010/11/15  Time of Incident: 01:45 PM  YCMS Incident # 14946
Location of Incident: COMPUTER LAB

Resident(s) Name and File #: [Redacted]
Staff on Duty and Deployment: [Redacted]
Witnesses: [Redacted]

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL,  (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

I was teaching the girls in the Computer Lab. [Redacted] was not doing her work. I asked her several times to sharpen her pencil, and she wouldn't comply. I then went and asked her again. She muttered 'fuck' under her breath, and complained about being agitation, and was refusing to do her work. I said she would have to go back to Unit 2 and be placed in a Time Out. She stood up and looked at me and was swearing and saying I am agitated, with that she cam after me directly and punched me with a closed fist to the right eye. I then proceeded to defend myself and took her to the floor until responding staff arrived and placed her in hand cuffs and escorted her back to Unit 2.

Signature of Reporting Staff: [Redacted] Date: [Redacted]

SECTION "C"

Special Action Taken:
Physically Restrained
Comments of M.O.S.O./Supervisor:
[Redacted] will serve a minimum of 24 hours T/O. The RCMP were notified as was her community worker and mother. Her T/O will be reviewed.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ______________

Further Action Required:  (for administration use only)

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________________________________________________________________________

Signature of Administrator or Designate: ___________________________ Date: ______________
SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2010/11/15  Time of Incident: 01:45 PM  YCMS Incident # 14947
Location of Incident: COMPUTER ROOM, MAIN BUILDING
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

While in class in the computer room [redacted] had broken the lead from her pencil. Mr. [redacted] told [redacted] to sharpen her pencil and she refused, saying she would do it later. Mr. [redacted] asked her again to do it and again she refused. She cursed at him and that is when he said goodbye and to take her back to the unit. [redacted] then became really mad and immediately lunged at Mr. [redacted] punching him in the head. Mr. [redacted] and myself [redacted] restrained [redacted] and a code 2 was called. We [redacted] and [redacted] were first to respond and handcuffs were applied. [redacted] was then escorted to unit 2 for time out.

Signature of Reporting Staff: ___________________________  Date: ______________________

SECTION "C"

Special Action Taken:
Mechanically Restrained
Comments of M.O.S.O./Supervisor:
Acknowledged

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: __________

Further Action Required: (for administration use only)

Signature of Administrator or Designate: ___________________________ Date: __________
GOVERNMENT OF
NEWFOUNDLAND
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Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2010/12/10   Time of Incident: 05:20 PM   YCMS Incident # 15003
Location of Incident: UNIT 3

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:
Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At 5:20pm a code two was called on unit three. I, YCC [redacted], and YCC [redacted] responded from unit two. We were the first two staff to arrive and upon trying to unlock the door to gain entry to the unit could not as there was a key broken off in the lock. Staff were not visible on the unit. We could only see resident [redacted]. We began to attempt to remove the key when other responding staff arrived behind us. When we said the key was broken off in the lock. YCC [redacted] suggested we gain entry through the classroom which can also be accessed from unit four. YCCs [redacted] and other responding staff proceeded that way. I stayed as it seemed that the broken off piece of key was starting to come loose. I was able to get the piece of key out and get in on the unit. After getting in on the unit I could hear staff yelling and see YCC [redacted] in the window of room 3108. At this time resident [redacted] was not interfering. I opened the door and both YCCs [redacted] and [redacted] were handcuffed with their hands in front and spattered with blood. I asked if either of them were cut as I uncuffed him. He said that YCC [redacted] was cut on her hand. By this time YCCs [redacted] and other responding staff were on the unit. YCC [redacted] removed the handcuffs from [redacted] and there was a very deep cut on the middle finger of her left hand on another finger. Also YCC [redacted] throat was very red and chafed. YCCs [redacted] and [redacted] told us that residents [redacted] and [redacted] had held scissors to YCC [redacted] throat and had taken their keys and radio. YCCs [redacted] and [redacted] and other responding staff then left the unit to look for residents [redacted] and [redacted], after making sure that resident [redacted] was secured in his room. I stayed with [redacted] who was very upset and exhibiting signs of being in shock: she was disoriented and shaking. I called central control to let them know that as soon as staff was available arrangements should be made to take her to the clinic. Approximatelly 10 or 15 minutes later staff were on the unit to assist YCC [redacted] and she was taken to the clinic.

Signature of Reporting Staff: ___________________________ Date: ___________________________

SECTION "C"

Special Action Taken:

Medical Treatment Required
Mechanically Restrained
Physically Restrained
Isolated
Comments of M.O.S.O./Supervisor:
acknowledged [redacted] taken to the clinic resident [redacted] and [redacted] placed on unit 2 in t/o see briefing report for further details

Administrative Comments:

Signature of M.O.S.O./Supervisor: __________________________ Date: __________________________

Further Action Required: (for administration use only)

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________________________________________________________

Signature of Administrator or Designate: __________________________ Date: __________________________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2010/12/10 Time of Incident: 05:20 PM YCMS Incident # 15009
Location of Incident: COURTYARD
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Verbally Abuse Staff
Assault on Staff
Possess Contraband
Damage to Property
Non Compliance With Direction
Frisk Search

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:
Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At the above noted time I was in the cafeteria with unit 4 when a code 2 was called on unit 3. While running to unit three, 2 residents ran out from cottage 1 heading across the courtyard. MOSO [Redacted] and I gave chase and I directed the other staff to proceed to unit 3. Residents [Redacted] and [Redacted] ran to the gate to attempt an escape. When Mr. [Redacted] and I came up on them they faced us and told us to stay back or they would cut us. It was then that I noticed that they had weapons but I could not tell in the darkness what it was.

Both residents then moved towards the main building and attempted to get into the main building through the doors by the MOSO's office but were unsuccessful and ran back into the courtyard. They then headed towards unit 6 and ran up the fire escape and attempted to open that door. They then headed towards the south end of the courtyard where staff were responding from unit 3 and we surrounded them by unit 5 where they began to swing their weapons wildly at staff saying stay back or we'll cut you. [Redacted] was waving his weapon about a foot from my face and both residents backed towards unit 5. One of the residents threw something up on the roof of cottage 3 and knocked Mr. [Redacted] down while heading towards the main building.

[Redacted] tore one of the screens off the window at central, tried to break the window and tried to climb through but backed out as staff moved in. They then moved towards the west end of the main building where staff surrounded them. Both residents were shouting don't come near us or we'll cut you, we just want to get out of here. [Redacted] had the shank in one hand and the aluminium screen frame in the other swinging both at staff in a threatening manner. Staff attempted to talk them down.

They managed to get away from staff again and headed towards the south end of the courtyard down the eastern side of the track. Both residents were saying how they wanted to get out and we responded by telling them that they had no way to get out and they responded that the ladder over there looks good.

The residents began moving back towards the main building where [Redacted] picked up a piece of broken pavement and threatened staff with it. When they reached the cafeteria windows [Redacted] tore off another screen and broke out the window with the piece of broken pavement. He tried to get in there but the hole in the window was too small. They moved towards central control again where they met staff coming towards them and attempted to run towards the basketball court when Mr. [Redacted] threw a plastic hockey net in the residents path tripping them up. When [Redacted] went to the ground Mr. [Redacted] and I jumped on him restraining him. [Redacted] attempted to come in to help and kicked MOSO [Redacted]. Mr. [Redacted] and I got the shank from [Redacted] and handcuffed him while the other staff subdued Mr. [Redacted] and I escorted [Redacted] to unit 2 and I noticed a yellow step ladder on the steps of unit 1. [Redacted] was placed in room 2211 uncuffed and frisk searched.

Signature of Reporting Staff: [Redacted] Date: [Redacted]

SECTION "C"

Special Action Taken:
   Police Investigation
   Mechanically Restrained
   Physically Restrained
   Isolated
   Time Out 24 Hours
Comments of M.O.S.O./Supervisor:

acknowledged both residents placed in t/o the length of t/o will be determined. parents of both residents notified. Remp contacted. T Head notified. Staff on unit 3 were seen at the clinic no medical attention required for the residents.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ___________________________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: ___________________________ Date: ___________________________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR
Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2010/12/10  Time of Incident: 05:30 PM  YCMS Incident # 15022
Location of Incident: UNIT 3
Resident(s) Name and File #: [redacted]
Staff on Duty and Deployment: [redacted]
Witnesses: [redacted]

SECTION "B"

Type of Incident:
  Assault on Staff
  Possess Contraband
  Damage to Property
  24 Hours Time Out
  Unlawful Confinement
  Hostage Taking

  IF ESCAPE OR UAL, (A) Length of Absence (Days):
  (B) Still at Large:
Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

NOTE: This Incident Report was handwritten by [redacted] and entered into the YCMS by [redacted] (Secretary to Administrator).

At approximately 5:30 p.m. on December 10, 2010 at the Newfoundland and Labrador Youth Centre on Unit Three. I, Youth Care Counsellor [redacted] and co-worker [redacted] were in conversation at the staff desk when resident [redacted] attacked me from behind, putting me in choke hold with his left arm, sternly pressing an open pair of scissors to the side of my neck with his right hand and proceeded to drag me by the neck around the front of the staff desk and pushed me to the floor, still in choke hold. As he was dragging me across the floor, he kept saying, 'Don't fight me, don't struggle, I'll cut your fucking throat, I'll cut ya, I'll cut ya, Get Down, Don't struggle.' While [redacted] was dragging me, [redacted] was attacking, jabbing him with a jagged toothbrush handle towards his head and throat area, saying 'Don't be a hero man stay down or I will cut her, we will man, stay down. [redacted] also kept saying to stop struggling man, don't be a hero, I'll cut her man, get her keys and belt. Cuff him. (Meaning me). I only saw [redacted] as I was rounding the staff desk in choke hold, because I could not move my neck in any direction as [redacted] choke was so tight that I could not breath. I was gasping for air and pulling down on [redacted] arm to loosen the tightness of his grip, it was at this point that my hand got cut. [redacted] said, 'Don't struggle or I'll cut you, Don't struggle or I'll cut you, stay down and I won't hurt you but if you struggle I'll cut your fucking throat. I didn't resist, but his hold was so tight, but not (as) tight. Only at this point could I actually breath. I told him that I was not struggling but that I could not breath. It was at this point when [redacted] saw that [redacted] had a blade to my throat that he gave up his struggle and said, 'Don't hurt her, I give up, don't hurt her, I give up, take the radio and keys, just don't hurt her man, don't hurt her.' [redacted] took [redacted] to take my hand cuffs. [redacted] took my equipment belt, took the handcuffs and told me to hold out my hands, which I did. [redacted] then handcuffed me. Only after being handcuffed did [redacted] release his choke hold on me and push myself and [redacted] across the unit to the immediate cell room adjacent to the TV and locked us in the cell. It was then that [redacted] and [redacted] left Unit Three and proceeded outside. Only seconds later did [redacted] come out of the washroom and say something to the effect of.... where's everyone or something like that. [redacted] began banging on the cell window with his cuffs and shouting out to [redacted] we're in here, we're in here call Central Control and tell them to call a code. [redacted] just stood there bewildered and said Man, I don't know how to do that. [redacted] then said call 222 and tell them to call a code. I don't know what [redacted] said, but he did not do what [redacted] asked of him right away. [redacted] again said to [redacted] call Central get a code out, and [redacted] again said I had nothing to do with this. [redacted] said I know you didn't but you got to get a code out, [redacted] is hurt she's bleeding, do the right thing. Come on Man, it's [redacted] call Central 222 and tell them to call a code on Unit 3. He replied, I had nothing to do with it, that's the last I saw of him. I assumed he made the call to Central Control because it was seconds later that a code call was made to Unit Three. Shortly after, Youth Care Counsellor [redacted] and Youth Care Counsellor [redacted] responded to Unit 3 but could not access the unit as [redacted] and [redacted] had tampered with the locks. Both workers then left the unit and entered Unit 4 to access Unit 3 from Unit 4 through the adjacent classrooms that join the two units. When [redacted] and [redacted] entered Unit Three, [redacted] began banging on the cell window alerting them as to where we were. [redacted] and [redacted] released us from the cell, [redacted] was still on the unit stating that he knew nothing of what happened and had nothing to do with it. [redacted] and [redacted] left the unit and went to assist the other staff in the situation that was now taking place in the courtyard with the above mentioned residents. [redacted] stayed with me and bandaged my finger as it was bleeding heavily. Once the residents were caught and secured on Unit 2 (the security unit), [redacted], and Shift Manager [redacted] entered Unit Three and came to my aid, as I was very distraught and still bleeding. [redacted] deployed [redacted] to escort me to the Whitbourne Clinic to seek medical attention for my hand. While there, I was treated and received five stitches to my left ring finger. I then returned to the Newfoundland and Labrador Youth Centre and informed my supervisor [redacted] that I would not be returning to work until further notice, as I was so traumatized by the attack that I would not be capable of performing my duties satisfactorily.

Signature of Reporting Staff: [redacted] Date: [redacted]
SECTION "C"

Special Action Taken:
- Police Investigation
- Charges Laid
- Medical Treatment Required
- Mechanically Restrained
- Physically Restrained
- Isolated

Comments of M.O.S.O./Supervisor:
- acknowledged

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: __________

Further Action Required:  (for administration use only)

_________________________________________________________

_________________________________________________________

_________________________________________________________

_________________________________________________________

Signature of Administrator or Designate: ___________________________ Date: __________
GOVERNMENT OF
NEWFOUNDLAND
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Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2010/12/10  Time of Incident: 05:20 PM  YCMS Incident # 15039
Location of Incident: UNIT 3 AND COURTYARD

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff
Damage to Property
Non Compliance With Direction
24 Hours Time Out
Hostage Taking

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:
Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

I was at central control when a call came in warning us of a bad situation on unit 3. I called a code 2 for unit 3, and ran over along with Mr. [redacted]. Residents [redacted] and [redacted] were running across the courtyard at this time. The supervisor told us to go to unit 3. Upon arrival to 3 staff [redacted] and [redacted] were trying to open the door. A key was broke off in the lock. We then went through unit 4 classroom. Mr. [redacted] had opened unit 3 door at this time. Some staff were attending to staff [redacted] and [redacted] who both were attacked cuffed and locked in room 3108. Other staff attended to the other resident who did not take part in this violent incident. When the resident was safely in his room, and staff [redacted] looked after miss [redacted]. Mr. [redacted], [redacted], and myself went to the courtyard to apprehend the other two residents. They were towards unit 5 - 6 for a while. We caught up to them by the main area. [redacted] broke off a piece of a window, and was swinging it towards staff. Both residents had something in their hands. They were well ready to shank staff with it. They were yelling that they were getting out of here and going to the penitentiary no matter what. Both residents took off again towards unit 5 - 6. Staff caught up again. At one point when Mr. [redacted] went for [redacted], he hit him really hard from behind, and Mr. [redacted] fell and hurt his knee. Both residents went back towards the main building broke a window with a rock, tried to get in the main building but could not. Mr. [redacted] had grabbed a hockey net at this time and threw it in front of [redacted] who lost his balance and that was the chance for staff to grab [redacted] and restrain him. When [redacted] was restrained [redacted] slowed down a bit. Staff caught up to him. [redacted] kicked Mr. [redacted] really hard on the hand. That is when we grabbed [redacted] put him to the ground and restrained him also. [redacted] did manage to hit me on both sides of the head. Both residents were brought over to unit 2 for time out.

Signature of Reporting Staff: ___________________________ Date: ___________________________

SECTION "C"

Special Action Taken:
Charges Laid
Mechanically Restrained
Time Out 24 Hours
Comments of M.O.S.O./Supervisor:
acknowledged

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ____________

Further Action Required: (for administration use only)
________________________________________________________________________
________________________________________________________________________
________________________________________________________________________

Signature of Administrator or Designate: ___________________________ Date: ____________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR
Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2011/02/10 Time of Incident: 10:15 AM YCMS Incident # 15145
Location of Incident: UNIT 1 CLASSROOM

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff
Non Compliance With Direction
24 Hours Time Out

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:
Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

Upon entering the unit, all three girls were found to be eating cereal as a snack between classes. They were told that they could not eat the cereal in class and they were asked to finish it. [Redacted] said she did not care and was going to eat her cereal anyway. At this point, she was reminded by staff that she was under zero tolerance for her behavior. Her reply while looking at me was 'She is going to put me in time out anyway.' At this point, I entered the classroom to prepare, followed shortly by the three girls. They were asked to sit at separate tables in the classroom. They did not like the idea but did comply reluctantly. Upon sitting at their tables, they each tried to get a second chair so that they could put their feet up on the second chair. They were then asked to place their feet on the floor. [Redacted] immediately put her feet down on the floor but [Redacted] and [Redacted] kept their feet on their chairs. Their individual work was assigned and they were again asked to remove their feet from their chairs. After a few minutes they were given a third warning and asked to remove their feet from their chairs. [Redacted] complied after this warning. [Redacted] remained noncompliant for a few moments, taking her feet down reluctantly. [Redacted] was then given her assigned work, at which point her comment was 'whatever' and 'I do not want to do this.' One of the other girls needed help, so [Redacted] was left to start her work. She did not start her work and continued to display a negative and disrespectful attitude. Based on the policy of zero tolerance, she was asked to leave the classroom. She became agitated and upset, got up from her table and began walking toward the front of the classroom toward the exit. Staff entered the classroom to help facilitate her exit. As she walked toward the front to exit the classroom, she shouted at me 'Fucking bitch' and assaulted me with her pencil and eraser by forcefully throwing them at me and hitting me on the chest. Her attitude toward me felt threatening and has been becoming progressively threatening over the past little while as she has made reference to her physical assault on the principal, Mr. [Redacted], to me on two separate occasions indicating that I could end up like Mr. [Redacted]. She was consequenced with 9 pts and three hours Time out is recommended.

Signature of Reporting Staff: [Redacted]  Date: [Redacted]

SECTION "C"

Special Action Taken:
   Isolated
   Time Out 24 Hours
Comments of M.O.S.O./Supervisor:

Acknowledged. [redacted] will receive 24 hours Time out. All information relayed to the R.C.M.P. Parents contacted. She is on Suicide watch, one on one supervision.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ________________

Further Action Required:  (for administration use only)

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Signature of Administrator or Designate: ___________________________ Date: ________________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR

Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2011/02/21 Time of Incident: 09:30 PM YCMS Incident # 15177
Location of Incident: UNIT 2

Resident(s) Name and File #:

[Redacted]

Staff on Duty and Deployment:

[Redacted]

Witnesses:

[Redacted]

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL,
(A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

who is on 9:30 bedtime and suicide watch was brought to unit 2 to prepare for bed. Once on this unit became very loud and argumentative. I suspect that was putting on a show for When went to her room she was asked if she had taken off her bra. She replied quite loudly that she will not be taking off her fucking bra. She was told by this staff that she would not be going to bed until her bra was given up as this was a policy for suicidal residents. She still quite loudly refused calling me a fucking bitch. belongings were about to be removed when she came out of her room punching this staff several times in the head. Both YCC's and myself managed to stop from hitting and fell to the floor. At this point YCC's and responded and was mechanically restrained. Moso on the unit.

Signature of Reporting Staff: [Redacted] Date: 

SECTION "C"

Special Action Taken:
Mechanically Restrained
SECTION "C"

Special Action Taken:
- Physically Restrained
- Isolated
- SECURE ISOLATION 3 HOURS OR MORE

Comments of M.O.S.O./Supervisor:

[Redacted] placed in her room with her door closed. Staff member sat outside her door as per suicide supervision policy. RCMP were notified at 11:01 pm. [Redacted] will serve a minimum of 24 hours time-out. This period will be reviewed by case team with expectation of being increased.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ______________

Further Action Required: (for administration use only)

Signature of Administrator or Designate: ______________________ Date: _____________
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2011/02/21  Time of Incident: 09:30 PM  YCMS Incident # 15178
Location of Incident: UNIT 2
Resident(s) Name and File #: __________________________________________________________________________

Staff on Duty and Deployment:

Witnesses: _______________________________________________________________________________________

SECTION "B"

Type of Incident: Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At the time mentioned above, Miss [Redacted] was trying to get [Redacted] ready for bed on unit 2. When [Redacted] was asked to take off her bra, [Redacted] told Miss that she would not do so. [Redacted] was asked again. She then told Miss [Redacted] to fuck off and called her a fucking bitch. Miss [Redacted] went in and took [Redacted] mattress out of her room. [Redacted] then jumped on Miss [Redacted] and started punching her. I then intervened. A code 2 was called by then. Mr [Redacted], Miss [Redacted], and Miss [Redacted] came to assist us. [Redacted] was restrained, and put back in her room.

Signature of Reporting Staff: ______________________________________________________________________
Date: _________________________________________________________________________________________

SECTION "C"

Special Action Taken: Charges Laid
Comments of M.O.S.O./Supervisor:

Acknowledged. RCMP notified to serve a minimum of 24 hours T/O. This is to be reviewed.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ____________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: ___________________________ Date: ____________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR

Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2011/04/15     Time of Incident: 09:32 PM     YCMS Incident # 15304
Location of Incident: UNIT 2
Resident(s) Name and File #: [Redacted]
Staff on Duty and Deployment: [Redacted]
Witnesses: [Redacted]

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

While working in the control room on unit 2, I could hear [Redacted] shouting threats at Ycc [Redacted]. [Redacted] was serving timeout for a previous incident. [Redacted] shouted for me to come out on the unit. As I entered the unit, [Redacted] informed me that resident [Redacted] had a T-shirt around her neck. Ycc [Redacted] called a code and we entered the room. [Redacted] was restrained and the shirt taken from her. As we were leaving the room, [Redacted] kicked me and punched me in the head. I restrained her putting her down on her mattress, while doing this I realized that she was holding [Redacted] by the hair. Ycc [Redacted] entered the room and [Redacted] was Mechanically restrained.

Signature of Reporting Staff: [Redacted]     Date: [Redacted]

SECTION "C"

Special Action Taken:
Mechanically Restrained
Comments of M.O.S.O./Supervisor:
Acknowledged.

Administrative Comments:

Signature of M.O.S.O./Supervisor: __________________________ Date: __________________________

Further Action Required: (for administration use only)

Signature of Administrator or Designate: __________________________ Date: __________________________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2011/08/02  Time of Incident: 03:15 PM YCMS Incident #15487
Location of Incident: UNIT 1

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff
Resident to Resident Assault

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:
Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At the above mentioned time resident [Redacted] became mouthy with resident [Redacted] who was in the kitchen. [Redacted] then shouted at [Redacted] and ran into the kitchen and started punching [Redacted] in the face. [Redacted] did not retaliate. I called a code 2 and went into the kitchen to remove [Redacted] with me without any resistance. [Redacted] was placed in her room without incident.

MOSO [Redacted] arrived on the unit with response staff as [Redacted] was being escorted to her room.

MOSO [Redacted] informed us that [Redacted] will be moved to Unit 2. Myself and YCC [Redacted] went into [Redacted] room to inform her that she is being escorted to unit 2 for time out and requested that she kneel to apply handcuffs for the move. [Redacted] then became very upset and started yelling and swearing and started swinging her hands with closed fists. [Redacted] was physically restrained by myself and YCC [Redacted] and YCC [Redacted]. At this point [Redacted] swung her fists at me swearing at me and punched me in the right side of my chin. YCC [Redacted] then assisted in the restraint and I removed myself as they had control. As I was exiting the room I heard [Redacted] hoark and spit.

[Redacted] was then handcuffed and escorted to unit 2.

Signature of Reporting Staff: [Redacted] Date: [Redacted]

SECTION "C"

Special Action Taken:
Mechanically Restrained
Isolated

Comments of M.O.S.O./Supervisor:

Acknowledged resident will serve 48 hrs t/o. this is several assaults on staff and residents. Terry head notified RCMP notified and they will be investigating. Parents of both girls were contacted and advised of the situation.

Administrative Comments:

Signature of M.O.S.O./Supervisor: [Redacted] Date: [Redacted]

Further Action Required: (for administration use only)

[Redacted]

Signature of Administrator or Designate: [Redacted] Date: [Redacted]
GOVERNMENT OF
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AND LABRADOR
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YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2011/08/02    Time of Incident: 03:15 PM   YCMS Incident # 15489
Location of Incident: UNIT 1 (ROOM 2101)
Resident(s) Name and File #:
Staff on Duty and Deployment:
Witnesses:

SECTION "B"

Type of Incident:

If ESCAPE OR UAL, (A) Length of Absence (Days):  
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At 3:15 pm a code 2 was called from unit 1. I responded to the code and when I arrived [redacted] was in her room calling out [redacted] stating she was going to get the "b**ch" and f**kin kill her. [redacted] was informed that she was going to unit 2 and asked to cooperate. [redacted] immediately resisted and shouted out derogatory comments toward [redacted] and [redacted] while punching toward [redacted] and myself. She was physically restrained and during the restraint tried to bite [redacted] in the arm, tried to kick myself and [redacted] and hawked at making contact. It was during this restraint that she also punched [redacted] on the side of her check. [redacted] was physically removed from her room and taken to unit 2A. During the removal and transportation [redacted] threatened to either kill [redacted] when she sees her or get someone else to do it. [redacted] was placed in cell # 2208 and shortly after settled down.

Signature of Reporting Staff: ___________________________ Date: ___________________________
Comments of M.O.S.O./Supervisor:
acknowledged [ ] to serve 48 hrs t/o see briefing report

Administrative Comments:

Signature of M.O.S.O./Supervisor: ____________________________ Date: ________________

Further Action Required: (for administration use only)

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__________________________________________

Signature of Administrator or Designate: ____________________________ Date: ________________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2011/08/02 Time of Incident: 04:00 PM YCMS Incident # 15493
Location of Incident: UNIT 1
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
  Assault on Staff
  Other Assault

IF ESCAPE OR UAL, (A) Length of Absence (Days):
  (B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At this time a code 2 was called on unit 1 and was already put in her room for an assault on . It was decided that would be transferred to unit 2 and she objected to the move . and went in the room and assaulted by punching her in the face and she tried kicking so myself and moved in to restrain her and to assist in the transport to unit 2 . At this time she attempted to bite me and then spit at in the face. Resident was mechanically restrained and moved to unit 2.

Signature of Reporting Staff: ___________________________ Date: ___________________________

SECTION "C"

Special Action Taken:
  Mechanically Restrained
Comments of M.O.S.O./Supervisor:

[Redacted] will receive 48 hrs. T/O. Her incident was Violent, in terms of her assault against a fellow resident and YCC staff, and demeaning in nature (Spitting in YCC [Redacted] face). This additional T/O was given after reading the report, and in consultation with YCC staff, and her S/Wer J.Brown.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ___________________________

Further Action Required:  

(for administration use only)

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Signature of Administrator or Designate: ___________________________ Date: ___________________________
GOVERNMENT OF
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AND LABRADOR
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SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2011/08/02 Time of Incident: 03:15 AM YCMS Incident # 15494
Location of Incident: UNIT ONE
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approximately 3:15 I was on Unit 3 when I heard a code 2 being called on Unit one. Being that I was aware it was the female unit so I immediately responded when given clearance within seconds on unit three by YCC [REDACTED] and YCC [REDACTED]. Upon my arrival on the unit Resident [REDACTED] was in the kitchen area and spoke with me about how she had just been assaulted by resident [REDACTED]. I spoke with her a few minutes, then asked her to go to her room so as I could assist in entering Resident [REDACTED] room to apply mechanical restraints and transport her to unit 2 as per MOSO [REDACTED] request. Myself and the others entered the room whereby [REDACTED] stated 'I'm not fu*king going to Unit two' we proceeded to restrain [REDACTED] and try to communicate with her at the same time to cooperate, however she exploded into a violent rage punching and kicking etc. Once we restrained her on the bed, Mr. [REDACTED] again verbally asked [REDACTED] to allow us to cuff her where she then continued to kick and scream. Once we nearly had the handcuffs on her she began to spit and try to bite staff, however a mechanical restraint was applied and we then began to escort resident [REDACTED] o Unit 2. All the way she was saying that she would slit someone's throat if they got in her face. When we entered the appropriate room on unit two she was placed on the bed where she calmed down after some time.

Written by: [REDACTED] YCC as my citrix password was not working so I have typed this document in [REDACTED] profile.

Signature of Reporting Staff: __________________________ Date: ____________
Comments of M.O.S.O./Supervisor:
acknowledged see briefing report. 48 hrs t/o referral to police parents notified

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ___________________________

Further Action Required: (for administration use only)
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________
_________________________________________________________________________________

Signature of Administrator or Designate: ___________________________ Date: ___________________________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2011/08/02 Time of Incident: 03:15 PM YCMS Incident # 15605
Location of Incident: UNIT 1

Resident(s) Name and File #: 

Staff on Duty and Deployment: 

Witnesses: 

SECTION "B"

Type of Incident:
Other Assault

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

On the above date and time I responded to an incident on unit 1 involving resident  I helped restrain and transport resident to unit 2. While restraining resident she hawked and spit at my face making contact.

Signature of Reporting Staff: 

Date: 

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Comments of M.O.S.O./Supervisor:
Acknowledged

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ____________

Further Action Required:  (for administration use only)
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Signature of Administrator or Designate: ___________________________ Date: ____________
GOVERNMENT OF
NEWFOUNDLAND
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Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2011/08/11  Time of Incident: 03:00 PM  YCMS Incident # 15508
Location of Incident: SALLYPORT

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

During the release process, resident [REDACTED] insisted that she get her make up and purse from her personal belongings. She was told that this would be given to the Social Worker and she would have to be advised by them as to what she can have and not have at the Group Home. At first she seemed to accept this. When the Social Worker was given the package by me [REDACTED] took it from the [REDACTED] hands and I in turn took it from [REDACTED]. She physically tried to take it back from me. I held onto it. Moso [REDACTED] was summoned by [REDACTED]. Mr. [REDACTED] arrived and [REDACTED] was using profane language against all of us there. Mr. [REDACTED] asked the Social Workers if they would prefer to leave [REDACTED] there and pick her up later on but they declined his offer. He then ordered that [REDACTED] and [REDACTED] take the parcel and place it in her car trunk. Mr. [REDACTED] [REDACTED] and I waited in admissions until this was done. The car was then brought into the sallyport to avoid further problems. We went out to the car and [REDACTED] opened the trunk to place the suitcases in it and [REDACTED] tried to once again to retrieve her purse. I blocked her way and was successful in [REDACTED] not getting the purse and the trunk was closed. When [REDACTED] walked to get in the car, she spit at me and the spit landed on my shirt and pants. She then gave us all the finger as she drove off.

Signature of Reporting Staff: [REDACTED]  Date: [REDACTED]
Comments of M.O.S.O./Supervisor:

acknowledged [Redacted] to receive a min of 12 hrs when she returns. The report will be forwarded to the RCMP.

Administrative Comments:

Signature of M.O.S.O./Supervisor: __________________________ Date: ______________

Further Action Required: (for administration use only)

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________________________________________________________________________

Signature of Administrator or Designate: __________________________ Date: ______________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2011/08/11 Time of Incident: 03:00 PM YCMS Incident # 15509
Location of Incident: ADMISSIONS/ SALLY PORT
Resident(s) Name and File #:

Staff on Duty and Deployment:

 Witnesses:

SECTION "B"

Type of Incident:
 Verbally Abuse Staff
 Other
 Non Compliance With Direction

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

During the processing of [redacted] release she requested her purse and belt. She was told that as per our policy it would be given to the escorting Social Workers who would then give it to her by the open custody workers. [redacted] appeared to accept this reason however, became very belligerent and demanding when Ms. [redacted] and Ms. [redacted] arrived. When the belongings were passed to them [redacted] grabbed the bag from Ms. [redacted]. The bag was retrieved by [redacted] and Moso [redacted] was called. During this time [redacted] was loud and obnoxious. When staff tried to address her concerns [redacted] was totally defiant and responded with comments such as, the f**k are you bitch, you can’t f**king put me in time out now bitch, I’m not in your custody. When [redacted] tried explaining the process to her, her reply was, “go f**k yourself. At no point during this process did [redacted] attempt to cooperate with staff but only only continued to everybody by calling them bitches

Signature of Reporting Staff: __________________________ Date: ____________

SECTION "C"

Special Action Taken:
 SECURE ISOLATION 3 HOURS OR MORE

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Comments of M.O.S.O./Supervisor:
acknowledged resident to receive 12 hrs t/o if she returns

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ________________

Further Action Required: (for administration use only)

Signature of Administrator or Designate: _______________________ Date: ________________
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre

Date of Incident: 2011/08/11 Time of Incident: 03:00 PM YCMS Incident # 15510

Location of Incident: ADMISSION/ SALLY PORT

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:

IF ESCAPE OR UAL, (A) Length of Absence (Days):

(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

This incident report is a continuation of the one reported by 

Moso instructed me to remove her articles and place them in the trunk of the car. As I was leaving the admission area, tried to trip me up by putting her foot out while I passed by. Once the articles were secured, was escorted to the car and enroute she spit on the floor of the admission area and while getting in the car she spit and followed by pointing her middle finger at myself and

Signature of Reporting Staff: ____________________________ Date: ____________________________
Comments of M.O.S.O./Supervisor: acknowledged

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: _____________

Further Action Required:  (for administration use only)

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Signature of Administrator or Designate: ___________________________ Date: _____________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR

Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2011/08/28 Time of Incident: 05:25 PM YCMS Incident # 15540
Location of Incident: UNIT 3 LOUNGE AREA AND RM 3

Resident(s) Name and File #: 

Staff on Duty and Deployment: 

 Witnesses: 

SECTION "B"

Type of Incident: Assaut on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large: 

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At 1850 hrs residents were asked to use the washroom before quiet hour, all residents said they were fine and didn't need to use the washroom as they were busy playing cards and video games. At 1900 on the way to their rooms residents requested to use the washroom but were told they had to wait as quiet hour had started. At 1920 [redacted] became aggressive and verbally abusive towards staff because he needed to use the washroom, however when he allowed to the washroom he was more interested in berating staff for their incompetance. After finnally using the washroom, [redacted] was told due to his behaviour he would be staying in his room for the night. At this point he refused to comply and go to his room saying that i was guttless and afraid of [redacted] therefore should be afraid of him also. When myself and Mr. [redacted] approached [redacted] to escort him to his room he spat towards my face, I turned to avoid it but still got hit on the side of my face. A code 2 was called and [redacted] was then restrained during the restraint [redacted] again tried to spit on staff but staff managed to control his head therefore the direction of spit, [redacted] was cuffed and escorted to unit 2 for t/o

Signature of Reporting Staff: 
Date: 

SECTION "C"

Special Action Taken: 
Mechanically Restrained
SECTION "C"

Special Action Taken:
- Physically Restrained
- Isolated
- Time Out 24 Hours

Comments of M.O.S.O./Supervisor:
Resident [redacted] was escorted to unit 2 and will serve 24 hours T/O. RCMP were notified regarding charges being laid. Parents were also notified of situation.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ________________________ Date: ________________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: ________________________ Date: ________________
GOVERNMENT OF
NEWFOUNDLAND
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YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2011/08/28 Time of Incident: 07:20 AM YCMS Incident # 15542
Location of Incident: UNIT 3
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

@ 7:20 when I entered the unit was pounding loudly at his door wanting to use the washroom. He was informed by Mr. that he was given every chance to use the washroom before quiet hr.
continued the banging until Mr. let him out to use the washroom. went to the washroom calling Mr. a 'maggot' several times. When was returning to his room, Mr. informed that he was staying in his room for the rest of the night.
refused to go and became upset. We escorted to his room and when Mr. opened his door spit in his face. With that Mr. and I physically restrained to the bed and then to the floor. I called a code to the unit, response came and was mechanically restrained and escorted to unit 2 as per MOSO

Signature of Reporting Staff: ________________________ Date: ________________________

SECTION "C"

Special Action Taken:
Mechanically Restrained
Physically Restrained
Isolated
Comments of M.O.S.O./Supervisor:
☐ will serve 24 hours T/O.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ___________________________

Further Action Required:  (for administration use only)

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______________________________________________________________
______________________________________________________________
______________________________________________________________

Signature of Administrator or Designate: ___________________________ Date: ___________________________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2011/09/16 Time of Incident: 10:25 AM YCMS Incident # 15582
Location of Incident: UNIT 1
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff
Attempted Suicide

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

Code 2 called on Unit 1. When I arrived from unit 4 Resident [REDACTED] had a T-Shirt wrapped around her neck. [REDACTED] was trying to restrain [REDACTED] arms and [REDACTED] was holding her legs. I held [REDACTED] ankles while [REDACTED] and [REDACTED] removed the shirt from [REDACTED] neck. During this, [REDACTED] turned over and grabbed [REDACTED] hair with her left hand and punched her in the head with her right hand. At this point I was taken to the ground by the responding staff ([REDACTED] and myself) and placed in handcuffs. Once [REDACTED] was safely restrained [REDACTED] and [REDACTED] remained in her room to talk to her while the responding staff waited by the doorway of the unit.

Signature of Reporting Staff: ____________________________ Date: ____________________________

SECTION "C"

Special Action Taken:
Mechanically Restrained
Physically Restrained
Comments of M.O.S.O./Supervisor:
Acknowledged, will serve 12 hours T/O for her actions.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ___________________________

Further Action Required: (for administration use only)
__________________________________________________________
__________________________________________________________
__________________________________________________________

Signature of Administrator or Designate: ___________________________ Date: ___________________________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2011/09/16  Time of Incident: 10:25 AM  YCMS Incident # 15583
Location of Incident: UNIT 1
Resident(s) Name and File #: [Redacted]
Staff on Duty and Deployment: [Redacted]
Witnesses: [Redacted]

SECTION "B"

Type of Incident:
Other

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:
Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

[Redacted] was on 9:30pm bedtime. [Redacted] went to bed with no problem. While [Redacted] was in her bed she sang out to me for a glass of water. I [redacted] got her the water and opened her door and passed her the water. At this time [redacted] asked me what I said about her. I [redacted] told [redacted] that I had not said anything about her, that I was out on the unit and not talking about her.

A short time after a noise like a glass hitting the floor was heard coming from [redacted] room. The other staff working unit 1 [redacted] went to [redacted] room to check on her. Upon looking into [redacted] room YCC [redacted] saw [redacted] with her shirt tied around her neck. I [redacted] told the 2 other residents to go to their rooms & I called a Code 2.

We entered [redacted] room and spoke to her to release her hands from the shirt. She would not and with the assistance of responding staff [redacted] was placed on her bed. Her grip on the shirt was loosened and removed from her neck. Then in a split second with [redacted] hands free from the shirt she punched me in the left side of the face and grabbed my hair on my right side. I got my hair free from her grip and staff put [redacted] to the floor and mechanically restrained her.

[Redacted] continued to shout at staff, the male staff left the room, myself [redacted] and YCC [redacted] stayed in [redacted] room and tried to calm her down somewhat. After some time passed and [redacted] cried and calmed down I [redacted] spoke to [redacted] about what had just taken place. I asked her why she hit me and she responded that she did not remember hitting me. [Redacted] continued to calm down and agreed to me taking off the handcuffs and her putting on her shirt and being escorted to unit 2 where she could be placed on Suicide watch for the night.

I recommend 12 hrs time out for [redacted] outburst tonight. To be served in the AM.

Signature of Reporting Staff: [Redacted] Date: [Redacted]

SECTION "C"

Special Action Taken:
Mechanically Restrained
Isolated
Comments of M.O.S.O./Supervisor:
[Redacted] will serve 12 hours for her actions.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: __________

Further Action Required: (for administration use only)

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________________________________________________________________________

Signature of Administrator or Designate: ___________________________ Date: __________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR

Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2011/09/16     Time of Incident: 10:25 PM     YCMS Incident # 15584
Location of Incident: UNIT 1
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff
Attempted Suicide
Suicide Referral

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At 10:35pm while checking on Unit 1, Y.C.C. could not see her. She was hid behind the door. The other residents were sent to their rooms at this time. This staff opened door and saw that she had her shirt tied around her neck. A code 2 was called. Staff removed the shirt from neck and placed her on the bed managed to get her hand away from Y.C.C. grasp and grabbed her hair and began punching her on the left side of her face. was then physically and mechanically restrained and placed on the floor. Y.C.C.s and stayed in the room speaking with while the male responding staff moved outside her door. settled down after some time and the handcuffs were removed. was escorted to unit 2 at 22:50 without further incident. was placed on Suicide referral and will serve 12 hours timeout starting in the a.m.

Signature of Reporting Staff:    Date:    

SECTION "C"

Special Action Taken:
Mechanically Restrained
SECTION "C"

Special Action Taken:
   Physically Restrained
   Isolated
   SECURE ISOLATION 3 HOURS OR MORE

Comments of M.O.S.O./Supervisor:
   Acknowledged. [ ] will serve 12 T / O as a result of her actions.

Administrative Comments:

Signature of M.O.S.O./Supervisor: _____________________________ Date: ____________

Further Action Required:  (for administration use only)
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__________________________

Signature of Administrator or Designate: _____________________________ Date: ____________
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2011/10/08  Time of Incident: 11:50 AM  YCMS Incident # 15625
Location of Incident: UNIT # 2 ( LOUNGE AREA & HALL WAY )
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
  Verbally Abuse Staff
  Assault on Staff
  Damage to Property
  Non Compliance With Direction
  Injury

IF ESCAPE OR UAL, (A) Length of Absence (Days):
  (B) Still at Large:
Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At 11:50 AM this Moring the call for dinner was Made and [redacted] was Told Unit # 2 was first for Dinner ( [redacted] side B is a regular Living Unit) and we need to go over to Main. [redacted] became very upset and said she was not ready to go. She then said she would not go at all. Moso [redacted] was told of problem and reminded staff she is on a regular living Unit and must take part. Staff told [redacted] to call down and get her stuff (Clothing) and because of her anxiety she could go last by her self (to Main Building). [redacted] did not like this Idea at all and started to scream at the top of her lunes and being Verbally abusive towards Mr. [redacted] (Big ungly Fucker, Son of a Bitch etc, etc) [redacted] was asked by staff to calm down and that she would loose points for her outburst. She said she wanted her fucking clothes and Stormed by staff in door way. [redacted] in this rage grabbed the (WET FLOOR SIGN) in the hallway. At this point sign was smashed and [redacted] was Restraint by staff and a CODE # 2 was called for Back up staff. [redacted] after being Physically and Mechanically restrained by staff and was placed back in her room # 2203 (Side B) for Time/Out. [redacted] still screaming, shouting swearing on Mr. [redacted]. Once [redacted] was in her room Mechanical restraints were removed. MOSO [redacted] on Unit and Spoke to [redacted] about her Actions. In the Restaint process with [redacted] Bit Mr. [redacted] on the Left Forarm Breaking the skin Area.

Signature of Reporting Staff: [redacted] Date: [redacted]

SECTION "C"

Special Action Taken:
Mechanically Restrained
Physically Restrained
Isolated
SECURE ISOLATION 3 HOURS OR MORE
Comments of M.O.S.O./Supervisor:

will serve 5 hours T/O. There is some discrepancy as whether the bite marks were intentionally made or inadvertently made. This was acknowledged by staff as well.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ____________________________ Date: __________

Further Action Required:  (for administration use only)

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Signature of Administrator or Designate: ____________________________ Date: __________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2011/10/08 Time of Incident: 11:50 AM YCMS Incident # 15626
Location of Incident: UNIT 2 HALLWAY

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Verbally Abuse Staff
Assault on Staff
Damage to Property
Non Compliance With Direction
Injury

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approximately 11:50, [redacted] was told to get ready to go over for brunch. She said she did not want to go and thought meals would be sent over. She was told that unit 2b was a regular living unit and that she had to go to dining hall. She became very upset and said that she needed a shower first and would not go over without one. Mr. [redacted] called the MOSO and it was decided that she would be going over by herself and not with another unit. All the while she was being verbally assaultive to Mr. [redacted]. Finally, she agreed to get a shower and so on our way to get clean clothes in the laundry, she grabbed the wet floor sign and slammed it on the floor breaking it. At that time staff physically restrained [redacted] on the floor. I called a code 2 and proceeded to help with the restraint. [redacted] was mechanically restrained and staff responded to the unit. MOSO [redacted] came over to speak with her afterwards.

Signature of Reporting Staff: ___________________________ Date: __________________
SECTION "C"

Special Action Taken:
   Mechanically Restrained
   Physically Restrained

Comments of M.O.S.O./Supervisor:
   Acknowledged

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ____________

Further Action Required:  (for administration use only)
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________________________________________________________________________
________________________________________________________________________

Signature of Administrator or Designate: ___________________________ Date: ____________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2011/10/24 Time of Incident: 02:45 PM YCMS Incident # 15671
Location of Incident: 2B

Resident(s) Name and File #: [Redacted]
Staff on Duty and Deployment: [Redacted]
Witnesses: [Redacted]

SECTION "B"

Type of Incident:
Assault on Staff
Attempted Suicide

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.):

At approximately 2:45 pm, [Redacted] was already being in time out, proceeded by putting her shirt around her neck. Staff quickly noticed this and intervened. A code 2 was also called, and myself quickly pulled the shirt off and held [Redacted]. However, [Redacted] managed to punch miss [Redacted] in the face and kicked her on the legs several times, while shouting I am going to fucking kill you. We then managed to put [Redacted] on the floor. This is when assistance arrived. [Redacted] was then put in room #2204 to settle down.

Signature of Reporting Staff: [Redacted] Date: [Redacted]

SECTION "C"

Special Action Taken:
Mechanically Restrained
SECURE ISOLATION 3 HOURS OR MORE
Comments of M.O.S.O./Supervisor: acknowledged will serve 48 hrs t/o

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ______________

Further Action Required: (for administration use only)

__________________________________________________________

__________________________________________________________

__________________________________________________________

Signature of Administrator or Designate: ___________________________ Date: ______________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2011/10/25 Time of Incident: 02:25 PM YCMS Incident # 15670
Location of Incident: DINING HALL
Resident(s) Name and File #: 

Staff on Duty and Deployment: 

Witnesses: 

SECTION "B"

Type of Incident:
Verbally Abuse Staff
Other
Non Compliance With Direction

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At the above noted time we were in the dining hall for art class with Ms. [REDACTED] to decorate for Halloween. Ms. [REDACTED] had brought a number of different art pictures from other residents to hang up in the dining hall. [REDACTED] picked one of the pictures and continuously stared at it questioning the name of the fictional character on the tombstone drawn. All of a sudden [REDACTED] ripped the picture into many pieces swearing loudly as she did. Ms. [REDACTED] told [REDACTED] to return to the unit. [REDACTED] was escorted back to unit 2 by myself and YCC [REDACTED]. All the way she was swearing at the person who had drawn the picture and saying that it was meant to offend her and that she [REDACTED] was going to stab the person that drew the picture.

Once on the unit [REDACTED] was given simple instructions to put her outside cloths away properly in the porch. She refused swearing at me calling me a fucking bitch. [REDACTED] was directed to her room and asked to remove her bedding as she will be serving time out. [REDACTED] threw each blanket out of her room and her pillow hitting me in the face as she did so.

MOSO [REDACTED] was notified. Points were adjusted.

Signature of Reporting Staff: 

Date: 

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Comments of M.O.S.O./Supervisor:
acknowledged [ ] will serve a min of 3 hrs t/o

Administrative Comments:

Signature of M.O.S.O./Supervisor: ________________ Date: ____________

Further Action Required: (for administration use only)

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____________________________________________________________________________________
____________________________________________________________________________________

Signature of Administrator or Designate: ________________ Date: ____________
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2011/10/25  Time of Incident: 02:45 PM  YCMS Incident # 15672
Location of Incident: UNIT 2
Resident(s) Name and File #:
Staff on Duty and Deployment:
Witnesses:

SECTION "B"

Type of Incident:
    Verbally Abuse Staff
    Assault on Staff
    Attempted Suicide

IF ESCAPE OR UAL, (A) Length of Absence (Days):
    (B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

[redacted] was in her room serving a time out for a previous incident. I noticed on the camera that it appeared she had something tied around her neck. A code 2 was called and YCC [redacted] and myself entered [redacted] room as she did have a sweatshirt tied around her neck and her face was red. Upon entering the room [redacted] began kicking this staff in the legs as I attempted to restrain her with Mr. [redacted]. While waiting for response to arrive Mr. [redacted] and myself did the best we could to restrain [redacted]. During this time [redacted] also punched me in the face 3 times shouting 'I am going to fucking kill you!' [redacted] was removed from her room and physically and mechanically restrained when extra staff arrived. She was then placed in room 2204 to calm down.

Signature of Reporting Staff: ___________________________ Date: ___________________________

SECTION "C"

Special Action Taken:
    Mechanically Restrained
    Physically Restrained
SECTION "C"

Special Action Taken:
SECURE ISOLATION 3 HOURS OR MORE

Comments of M.O.S.O./Supervisor:
acknowledged will serve 48 hrs t/o. The nurse saw her on the unit. Social contacted the parents. Rcmp were notified and will investigate

Administrative Comments:

Signature of M.O.S.O./Supervisor: __________________________ Date: __________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: __________________________ Date: __________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR

Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2011/10/25 Time of Incident: 02:50 PM YCMS Incident # 15675
Location of Incident: UNIT TWO
Resident(s) Name and File #: [Redacted]
Staff on Duty and Deployment:
Witnesses: [Redacted]

SECTION "B"

Type of Incident:

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

A code was called on unit two and I responded as soon as I could safely leave unit 4. I was the first to enter side 2b where I seen YCC [Redacted] and YCC [Redacted] physically restraining [Redacted]. I approached and proceeded to hold [Redacted] legs to prevent her from kicking anyone and I told YCC Innes to take a break as she informed me she had received a few punches to the face before we arrived. Myself and [Redacted] and [Redacted] then continued the restraint and to verbally communicate with [Redacted]. The communication seemed to calm her down and therefore we decided along with the permission of Mr. [Redacted] to not use mechanical restraints as she was already on Unit two and foot away from her own bedroom door. She had already calmed and we deemed it unnecessary to escalate the situation further and handcuff her to move her one foot when it was not deemed appropriate and she was no longer resisting. At this time however she did verbally express that when she gets out she is going to stab/kill a lot of people, but did not name anyone particularly. She did request to speak to myself YCC [Redacted] and Moso [Redacted] in which she stated she was very upset. Once she stabilized she was left in the supervision of YCC [Redacted] and YCC [Redacted].

Signature of Reporting Staff: [Redacted] Date: [Redacted]
Comments of M.O.S.O./Supervisor: acknowledged

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ____________

Further Action Required: (for administration use only)

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_________________________________________________________

_________________________________________________________

Signature of Administrator or Designate: ______________________ Date: ____________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2012/03/18  Time of Incident: 11:20 PM  YCMS Incident # 16189
Location of Incident: UNIT 2A
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff
Attempted Suicide

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

Resident [Redacted] is on 9:30pm bedtime as per BES. At this time, resident [Redacted] became agitated and verbally abusive to staff when told that her foul language would result in 6 points not earned on the BES. Resident [Redacted] went to her room without further incident but remained agitated and restless until 10:30pm at which point she seemed to settle down. At approximately 11:15pm, resident [Redacted] once again began tossing and turning in bed and then got up to pace around her room, crying and screaming for someone to 'make it go away.' At this time, staff [Redacted] and [Redacted] entered her room to try and calm her down. Resident [Redacted] continued screaming and tied her shirt around her neck. At this time a code 2 was called and [Redacted] and [Redacted] removed the shirt and mechanically restrained resident [Redacted]. During this restraint resident [Redacted] spit in this staff's face and scratched her hand. Resident [Redacted] made several threats toward this staff saying that she would 'slit my throat' and 'cut me up in tiny pieces.' She also claimed that she would do 'whatever it took to get raised.' Resident [Redacted] made several comments about not wanting to be alive anymore and killing herself the first chance she gets. Staff [Redacted], [Redacted] and MOSO [Redacted] remained in resident [Redacted] room and counsellor her until she settled down and agreed to wear the suicide gown. Mechanical restraints removed at approximately 12:15am.

Signature of Reporting Staff:  

Date:  


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SECTION "C"

Special Action Taken:
- Mechanically Restrained
- Physically Restrained
- Isolated

Comments of M.O.S.O./Supervisor:
- Acknowledged.
- [Redacted] will start time out at 8am on March 19/12 for the remainder of the day.
- Notified Cpl. Bourque of RCMP of assault.
- Notified Rick Whitten.
- Emailed Gina Woolfrey regarding incident and to contact [Redacted] parents in the morning.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ________________

Further Action Required: (for administration use only)

Signature of Administrator or Designate: ___________________________ Date: ________________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR
Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2012/03/18  Time of Incident: 11:15 PM  YCMS Incident # 16190
Location of Incident: UNIT 2A ROOM 2208

Resident(s) Name and File #: [redacted]

Staff on Duty and Deployment: [redacted]

Witnesses: [redacted]

SECTION "B"

Type of Incident: Attempted Suicide

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approximately 2315 Resident [redacted] became upset and agitated. She began yelling out in which staff tried to calm her down by talking to her. She seemed to become even more agitated in which she jumped off her bed pulled off her shirt and wrapped it around her neck. Myself and [redacted] immediately entered her room and removed the shirt from her neck. Resident [redacted] was uncompliant which lead to being mechanically restrained to avoid further harm. At this time a CODE 2 was called by YCC [redacted]. Resident [redacted] then was face down into the mattress with her hands handcuffed behind her back still putting up a struggle. She began assaulting YCC [redacted] by spitting in her face and delivering threats to [redacted]. Assistance came which at this time YCC [redacted] was relived from her post. Myself, YCC [redacted] and Moso [redacted] remained in Resident [redacted] room counselling her and trying to calm her. At Approximately 2415 a suicide gown was placed on the resident and the cuffs were removed. The resident settled down shortly thereafter.

Signature of Reporting Staff: [redacted]  Date:

SECTION "C"

Special Action Taken:
Mechanically Restrained
Comments of M.O.S.O./Supervisor:

Acknowledged.

[Redacted] will start time out at 8am on March 19th for the remainder of the day.

Notified RCMP Cst. Bourque.

Notified Rick Whitten.

Emailed Gina Woolfrey and Jocelyn Brown to contact parents in the morning.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ___________________________

Further Action Required:  (for administration use only)

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_____________________________________________________________

Signature of Administrator or Designate: ___________________________ Date: ___________________________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR

Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2013/07/30      Time of Incident: 01:35 AM     YCMS Incident # 16794
Location of Incident: SJYDC

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses: YCC

SECTION "B"

Type of Incident:
Verbally Abuse Staff
Assault on Staff
Damage to Property
Admission - NEW - SECTION 1.9
Frisk Search

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

On the above noted date and time, [redacted] was being admitted to the SJYDC in the admissions area computer room when he stood up and stated he was leaving the facility. I, Youth Care Counsellor [redacted], attempted to counsel [redacted] into sitting back down and finishing the admissions process. He sat down and proceeded to kick at the computer desk and tipped it over. The slide out for the keyboard was separated from the desk and all the contents on the desk fell to the floor with one key being removed from the keyboard. I immediately restrained [redacted] and escorted him to a cell. In the process he spat in my face and stated that he is HIV positive. Once in the cell [redacted] continued to act out banging on the door and stating that he would harm both myself and Youth Care Counsellor [redacted] when he gets an opportunity. [redacted] was also placed on suicide watch due to stating he would harm himself while being transported from the RNC building to SJYDC and as a result of comments he made during the suicide assessment. [redacted] had been frisk searched in our presence at the RNC station in Mount Pearl by a RNC officer but had not been by us prior to acting out. Moso [redacted] was informed of the incident and stated [redacted] would remain in his cell with the door closed.

Signature of Reporting Staff:  ___________________________  Date: ___________________________
SECTION "C"

Special Action Taken:
Physically Restrained
Isolated

Comments of M.O.S.O./Supervisor:
RNC contacted and advised that we would want charges laid for assault and property damage. Was advised that an officer would be sent to SJYDC to take statement from Mr. [REDACTED] and Ms. [REDACTED]. Staff advised to keep constant supervision on youth as he is on suicide watch.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ___________________________

Further Action Required:  
(for administration use only)

Signature of Administrator or Designate: ___________________________ Date: ___________________________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2013/09/03  Time of Incident: 08:15 PM  YCMS Incident # 16869
Location of Incident: UNIT 1
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

[Redacted] was having a telephone call with her mother and was warned by staff to lower her voice and stop cursing. After speaking to her mother for approximately 10 minutes she suddenly flung the receiver striking this staff in the chest. [Redacted] was told to go directly to her room. She screamed and yelled, threw a spray bottle and tried to push a resident chair before finally complying to go to her room. MOSO [Redacted] informed of incident.

Signature of Reporting Staff: ____________________________ Date: ____________________

SECTION "C"

Special Action Taken:
Isolated
Comments of M.O.S.O./Supervisor:
[Redacted] will serve 3 hours time-out. She was also counselled on her behavior both concerning the phone incident and the way she speaks to her mother. Further swearing and disrespect while on the phone will result in the termination of the call.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ____________________________ Date: ______________

Further Action Required: (for administration use only)

________________________________________________________________________
________________________________________________________________________
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________________________________________________________________________

Signature of Administrator or Designate: ____________________________ Date: ______________
 GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR
Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2013/09/22  Time of Incident: 11:00 AM  YCMS Incident # 16934
Location of Incident: UNIT 4
Resident(s) Name and File #: [Redacted]
Staff on Duty and Deployment: [Redacted]
Witnesses: [Redacted]

SECTION "B"

Type of Incident:
Verbally Abuse Staff
Assault on Staff
Non Compliance With Direction

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approximately 1100 hrs I found a note in one of the resident chairs intended for resident [Redacted]. The note was very vulgar and profane in nature. I questioned resident [Redacted] as to why he wrote the note and his reply was... 'cause'. I then directed resident [Redacted] to go to his room. He proceeded to go to his room and began banging the door against the wall. I then directed him to put his belongings outside of his room. He refused and was became verbally abusive towards me. I then started removing his belongings from his room when he began throwing school books and other objects towards myself and [Redacted]. [Redacted] was struck with a hard cover school book. At this point I closed his door until we could get another staff on the unit as we had a resident that was on suicide watch. I recommend that this resident receive 24 hrs T/O for his actions.

Signature of Reporting Staff: [Redacted]  Date: [Redacted]

SECTION "C"

Special Action Taken:
Isolated
Comments of M.O.S.O./Supervisor:
  Acknowledged. Resident to serve 24 hrs T/O. RCMP to be notified.
  P. Mahoney

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: __________

Further Action Required:  (for administration use only)

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Signature of Administrator or Designate: ___________________________ Date: __________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR
Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2013/09/22 Time of Incident: 12:00 AM YCMS Incident # 16935
Location of Incident: UNIT 4
Resident(s) Name and File #: [redacted]

Staff on Duty and Deployment:

Witnesses: [redacted]

SECTION "B"

Type of Incident:

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

Resident [redacted] was going to his room for time out, when he was asked to remove his belongings he started throwing things. He was very verbally abusive towards staff. A hard cover book hit me in the leg as I was holding the door open. Moso notified.

Signature of Reporting Staff: [redacted] Date: [redacted]
Comments of M.O.S.O./Supervisor:
Acknowledged.
P.Mahoney

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ____________

Further Action Required:  (for administration use only)
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_________________________________________________________

Signature of Administrator or Designate: ______________________ Date: ____________
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2013/12/15     Time of Incident: 10:25 PM     YCMS Incident # 17105
Location of Incident: UNIT 1
Resident(s) Name and File #: [Redacted]
Staff on Duty and Deployment: [Redacted]
Witnesses: [Redacted]

SECTION "B"

Type of Incident:
- Verbally Abuse Staff
- Assault on Staff
- Non Compliance With Direction

IF ESCAPE OR UAL, (A) Length of Absence (Days):
   (B) Still at Large:
Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approximately 2225 the residents of unit 1 were reminded of the time and told to get ready for bed. All three girls ignored staff's request and began yelling, cursing and swearing at staff while sat there and laughed. Staff then instructed them all to go to their rooms; at which time we went to the bathroom while the other two stood defiantly and refused. A phone call was made to unit 3 for assistance (Did not want to call a code as there was a snowstorm on the go and staff's safety was being considered) MOSO was also contacted and went to their rooms and when arrived we went to the bathroom to get refused to leave the bathroom on her own and when staff tried to escort her out she started kicking and tried to bite YCC. A Code 2 was then called and after a struggle staff got her out of the bathroom and into her room. had to be mechanically restrained as she was trying to hit her head off the wall and floor. She kicked near the groin area and spit on him twice all the while cursing and swearing on every staff member present had to be mechanically and physically restrained numerous times as she would bang her head every time staff left her alone. At approximately 2330 she was left alone in her room and was first kicking at her door but eventually started head banging again. Unit 4 was called for assistance and staff once again went in her room, restrained her and waited for her to agree to stop banging her head; this finally happened at approximately 0040.

Signature of Reporting Staff: ___________________________  Date: ________________

SECTION "C"

Special Action Taken:
Mechanically Restrained
Physically Restrained
Isolated
SECURE ISOLATION 3 HOURS OR MORE

Comments of M.O.S.O./Supervisor:
Acknowledged. Will serve six (6) hours time-out.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________  Date: ________________

Further Action Required:  (for administration use only)

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Signature of Administrator or Designate: ___________________________  Date: ________________
2014
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/01/14   Time of Incident: 05:35 PM   YCMS Incident # 17142
Location of Incident: UNIT #1
Resident(s) Name and File #:
Staff on Duty and Deployment:
Witnesses:

SECTION "B"

Type of Incident:

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

I arrived on Unit #1 to find YCCs [Redacted] and [Redacted] at desk requesting [Redacted] to go to her room. [Redacted] remained sitting at desk refusing to move. After several attempts to talk the youth into her room YCCs [Redacted] [Redacted] removed [Redacted] from the chair. The youth lost all control - before they reached Room #6 [Redacted] bit [Redacted] and [Redacted]. As staff tried to contain the youth in the cell [Redacted] continued to scream curse and attempted to further bite staff.

Signature of Reporting Staff: ___________________________   Date: ___________________________
Comments of M.O.S.O./Supervisor: acknowledged

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: __________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: ___________________________ Date: __________
SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/01/14  Time of Incident: 05:30 PM  YCMS Incident # 17143
Location of Incident: UNIT 1
Resident(s) Name and File #: [Redacted]
Staff on Duty and Deployment: [Redacted]
Witnesses: [Redacted]

SECTION "B"

Type of Incident:
  Verbally Abuse Staff
  Assault on Staff
  Non Compliance With Direction
  Injury

  IF ESCAPE OR UAL, (A) Length of Absence (Days):
  (B) Still at Large:
Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At the above stated date and time resident   was on the telephone with her mother. She was told that if she started yelling at her mother I would end the phone call. She was spoken to a couple times about yelling at her mom. I turned to speak to YCC   and the phone receiver was tossed over the desk. It just missed me. I told   that her actions were not appropriate and that I thought she should go to her room to cool down for a bit. She said I am not going to my fucking room. We instructed all others to go to their room and tried several times to talk   into going to her room. When she refused several times we telephoned central control to have assistance on the unit. YCC's   ,   , and   arrived and we again tried to persuade her to go to her room. When she refused we each held her arms and legs. Mr. held her right arm and I held her right leg,   held her left arm and   held her left leg. YCC   held the door. She began calling us pedophiles, and as we were carrying her to the door I saw that bit Mr. arm. During the restraint in the room I was bitten twice on the upper leg. was bitten on the hand and she kicked at staff.

Signature of Reporting Staff: ___________________________ Date: _________________

SECTION "C"

Special Action Taken:
Physically Restrained
Isolated
SECURE ISOLATION 3 HOURS OR MORE

Comments of M.O.S.O./Supervisor:
acknowledged resident to remain in t/o for tonight and remain in her room until case team meets in am to discuss her case. I contacted T Head and mom and left a message with her community social worker to call J Brown in am. RCMP contacted to start an investigation

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: _________________

Further Action Required: (for administration use only)

Signature of Administrator or Designate: ___________________________ Date: _________________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR

Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre

Date of Incident: 2014/01/14 Time of Incident: 05:45 PM YCMS Incident # 17144

Location of Incident: UNIT 1

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident: Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):

(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At ~ 1745 I was in the main building on my break when there was a call on the radio for assistance on unit 1. When I arrived on the unit the above mentioned resident was refusing a directive to go to her room stemming from an upsetting phone call. This resident continued to refuse the directive so it was decided to escort her to her room. During the escort the resident became combative and in the ensuing struggle the said resident kicked me in the stomach area and bit the other staff ( , , and ) all the while being verbally abusive toward the staff.

Signature of Reporting Staff: ______________________ Date: ______________________

SECTION "C"

Special Action Taken:

Isolated
Comments of M.O.S.O./Supervisor:
acknowledged see briefing report [redacted] in t/o for tonight case team will review her situation in am

Administrative Comments:

Signature of M.O.S.O./Supervisor: ______________________________ Date: ________________

Further Action Required: (for administration use only)

Signature of Administrator or Designate: ___________________________ Date: ________________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/01/14 Time of Incident: 05:00 PM
Location of Incident: UNIT 1
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident: Verbally Abuse Staff
Assault on Staff
Non Compliance With Direction
Injury

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

[Redacted] had an upsetting call to her mother. She ended the call and threw the receiver at the desk. She was told to go to her room to calm down. She refused. Myself and [Redacted] tried to coax her several times to walk to her room. She refused. Other residents were asked to go to their rooms and assistance was called.

[Redacted] was directed to her room by YCCs. She resisted and was restrained and carried to room 2106. She bit YCCs [Redacted], [Redacted] and [Redacted]. She kicked at staff and was verbally abusive. When [Redacted] was safely in her room all staff left the room and started dieter checks.

Signature of Reporting Staff: ______________________ Date: ______________________
SECTION "C"

Special Action Taken:
Physically Restrained
Isolated
SECURE ISOLATION 3 HOURS OR MORE

Comments of M.O.S.O./Supervisor:
acknowledged see briefing report

Administrative Comments:

Signature of M.O.S.O./Supervisor: __________________________ Date: ____________________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: __________________________ Date: ____________________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/01/14 Time of Incident: 05:45 PM YCMS Incident # 17146
Location of Incident: UNIT ONE
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

While transporting resident [redacted] to her room during a restraint, she bite me on my right forearm with both upper and lower teeth. She drew blood so I went to the clinic where I was given a tetanus shot and some anti-biotics to prevent possible infection.

Signature of Reporting Staff: ___________________________ Date: _______________________

SECTION "C"

Special Action Taken:
Medical Treatment Required
Mechanically Restrained
Isolated
SECURE ISOLATION 3 HOURS OR MORE
Comments of M.O.S.O./Supervisor:
acknowledged

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: __________________

Further Action Required: (for administration use only)

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____________________________________________________________________________

Signature of Administrator or Designate: ___________________________ Date: __________________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR

DEPARTMENT OF JUSTICE YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre

Date of Incident: 2014/01/17 Time of Incident: 05:35 PM YCMS Incident # 17161

Location of Incident: UNIT 2 A

Resident(s) Name and File #: [Redacted]

Staff on Duty and Deployment: [Redacted]

Witnesses: [Redacted]

SECTION "B"

Type of Incident:

Other

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approximately 17:35 resident [Redacted] was transferred from unit 1 to unit 2 A for time out. Resident [Redacted] is on suicide watch, and was upset and physically acting out; being un-cooperative. When she was placed in her room (room 2208) for supervision, she continued to try to inflict self harm by tapping her head against the wall and attempted to prevent staff from entering the room by pushing and closing the room door. Resident [Redacted] ignored all counselling to the point that the only alternative for her safety was to physically prevent self injury by restraining her.

Once staff left her room, resident [Redacted] once again attempted to cover her head with her shirt with the intention of self injury. Staff entered the room again, and the shirt was removed by female staff, at which point resident [Redacted] bit Ycc. [Redacted] on the arm. Resident [Redacted] was restrained, and continued to try to physically act out in an attempt to hurt herself. Once she calmed down, staff again left the room. She was again banging her head on the door and would as she had previously, push back against the door to prevent staff from entering the room.

The door to room 2208 was damaged, and for her safety resident [Redacted] was told she would have to move to room 2209. She refused, and when staff tried to get her to stand to move, she began to act out. She was restrained, and a call for assistance was made by Ycc. [Redacted] at approximately 18:45 and during the move to room 2209, she bit Ycc. [Redacted] on the hand, as well as kicked at staff.

Upon exiting room 2209, I noticed blood on Ycc. [Redacted] upper lip from either a kick or punch from Resident [Redacted].

Signature of Reporting Staff: [Redacted] Date: [Redacted]
SECTION "C"

Special Action Taken:
   Other (specify in Comments)
   Mechanically Restrained
   Physically Restrained

Comments of M.O.S.O./Supervisor:
   Resident will serve three hours time-out disposition tomorrow. RCMP were contacted regarding the injuries to staff. Ms. T. Smith and Mr. Head notified.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ________________

Further Action Required: (for administration use only)

Signature of Administrator or Designate: __________________ Date: ________________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR
Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/01/17 Time of Incident: 05:35 PM YCMS Incident # 17162
Location of Incident: UNIT 1 AND UNIT 2
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)
Continuation of my previous incident report. At approximately 17:35 resident [redacted] was physically and mechanically escorted to unit 2 and placed in room 2208. Resident [redacted] is on S/W. She was physically acting out and being very un-cooperative. While under supervision, she continued to inflict self harm by hitting her head against the wall and tried to prevent staff from entering the room by pushing and closing the room door. Resident [redacted] ignored all counselling which led to her having to be mechanically restrained to prevent self harm. The door to room 2208 was damaged due to [redacted] excessive banging on the door and for her safety resident [redacted] was told she would have to move to room 2209. She refused, and when staff tried to get her to stand to move, she again started to act out. She was again restrained, and a call for assistance was made by YCC [redacted]. During the move to room 2209 she bit YCC [redacted] hand as well as kicking other staff. When staff exited the room, Staff noticed there was blood on YCC [redacted] upper lip. When Resident [redacted] Calmed down the restraints were removed and she was continually monitored.

Signature of Reporting Staff: [redacted] Date: [redacted]
Comments of M.O.S.O./Supervisor:

Resident eventually settled at approximately 19:20. She will serve time-out disposition of three hours tomorrow morning.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ________________

Further Action Required: (for administration use only)

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__________________________________________________________

Signature of Administrator or Designate: _______________________ Date: ________________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR
Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/01/17 Time of Incident: 05:35 PM YCMS Incident # 17163
Location of Incident: UNIT 2
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Verbally Abuse Staff
Other
Non Compliance With Direction
Injury
24 Hours Time Out

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:
Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

I was called to assist on unit 2 with resident [redacted] When I arrived on unit two resident [redacted] was behind room 2209 open door with her T-Shirt over her head, [redacted] was non-responsive to staff request to show her face & to come from behind her open door.

Staff spoke to [redacted] again and she did not respond, therefore staff ( [redacted] ) made sure that she was not hurting herself they slowly made sure that she had underclothing on and started to remove her T-shirt.

[redacted] suddenly yanked the shirt from staffs grip ( [redacted] ) and pushed herself further behind her opened bedroom door throwing me ( [redacted] ) off balance falling to the floor. While I struggled to keep the T-Shirt away from [redacted] she leaned forward & bit my upper front right arm, I quickly got her off my arm and than she went for my right leg to bit me again I moved my leg away from her mouth without her been able to get her teeth into me again.

I shortly after went to the clinic where my wound was seen by a doctor & I given a Tetanus shot, also my right arm & shoulder is very stiff and sore I applied ice when I got home & is still bothering me at this time.

Signature of Reporting Staff: [redacted] Date: [redacted]

SECTION "C"

Special Action Taken:
- Police Investigation
- Physically Restrained
- Isolated
- SECURE ISOLATION 3 HOURS OR MORE

Comments of M.O.S.O./Supervisor:

Resident will serve three hours time out tomorrow. RCMP notified.

Administrative Comments:

Signature of M.O.S.O./Supervisor: [redacted] Date: [redacted]

Further Action Required: (for administration use only)

[Blank lines]

Signature of Administrator or Designate: [redacted] Date: [redacted]
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR

Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/01/17   Time of Incident: 06:25 PM   YCMS Incident # 17164
Location of Incident: UNIT 2A-ROOMS 2208/2209

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff
Damage to Property

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

Resident [REDACTED] was isolated in room 2208, due to her behavior earlier on unit 1. At this time, [REDACTED] was banging her head against the room wall-staff intervened to prevent injury to the resident. During this course of action, YCC [REDACTED] was bitten on the hand.

After a few moments, and seeing that the door of room 2208 was damaged, it was decided that [REDACTED] be moved to room 2209 to ensure a better camera angle and continue to prevent her from injuring herself.

It was during the transfer from room 2208 to room 2209 that [REDACTED] began acting out again. This writer received a bite on the left hand and was also struck in the face as she was flaying at staff in an out of control manner. A second code2 was called. [REDACTED] was once again physically restrained.

Signature of Reporting Staff: ___________________________  Date: ___________________________
SECTION "C"

Special Action Taken:
   Mechanically Restrained
   Physically Restrained

Comments of M.O.S.O./Supervisor:
   Resident will serve three hours time out tomorrow.

Administrative Comments:

Signature of M.O.S.O./Supervisor: _______________________________ Date: ________________

Further Action Required:  (for administration use only)

________________________________________________________________________

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________________________________________________________________________

Signature of Administrator or Designate: ______________________ Date: ________________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/02/07  Time of Incident: 09:55 AM  YCMS Incident # 17948
Location of Incident: UNIT 2A

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approximately 9:55pm myself and YCC let out of her room to use the washroom. On the way back she glared at me then punched me in the face one time. She was quickly escorted to her room and went with no problems.

Signature of Reporting Staff: ___________________________ Date: ___________________________

SECTION "C"

Special Action Taken:
Other (specify in Comments)
Comments of M.O.S.O./Supervisor:
This report should be dated 14/11/27

Administrative Comments:

Signature of M.O.S.O./Supervisor: ____________________________ Date: __________

Further Action Required: (for administration use only)

Signature of Administrator or Designate: ____________________________ Date: __________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/02/07  Time of Incident: 09:55 PM  YCMS Incident # 17954
Location of Incident: 2A
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happpened, etc.)

I, YCC [redacted] and YCC [redacted] were letting resident [redacted] out to the washroom from Secure Isolation on unit 2A. When [redacted] came out of the washroom she glared at me then suddenly punched me in the face! She was quickly escorted to her room without further incident, and the door was shut. She then shouted out telling me to 'go kill myself' and 'fuck off' because 'I was useless' and that 'I should die'. Moso [redacted] notified.

Signature of Reporting Staff: __________________________  Date: ___________________

SECTION "C"

Special Action Taken:
Other (specify in Comments)
Comments of M.O.S.O./Supervisor:
  Report should be dated 14/11/27

Administrative Comments:

Signature of M.O.S.O./Supervisor: __________________________  Date: ______________

Further Action Required:  (for administration use only)  

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Signature of Administrator or Designate: __________________________  Date: ______________
GOVERNMENT OF 
NEWFOUNDLAND 
AND LABRADOR

Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/02/24 Time of Incident: 10:30 PM YCMS Incident # 17281
Location of Incident: UNIT 2 ROOM 2212

Resident(s) Name and File #: 

Staff on Duty and Deployment: 

Witnesses: 

SECTION "B"

Type of Incident: 
Assault on Staff 

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approx 22.40 heures, showed me a pen that he had smuggled down from unit 3 in his 
underwear. At this same time, was acting up and other staff were busy dealing with her. I 
made aware of the situation and suggested when she calms down we would get it from him. 
At approximately 22.30 he began to poke himself in the arm and stabbed the mattress. While this was 
happening he was threatening to stab staff. At this point I requested assist me in taking the 
pen from As I entered the room first, he struck at my face, missing, I stepped back. YCC stepped forward and he struck out toward YCC face with the pen as well. At this point, was successfully restrained physically and mechancially. MOSO was present and assisted in the

Signature of Reporting Staff: 

Date:

SECTION "C"

Special Action Taken: 
Mechanically Restrained 
Physically Restrained
Comments of M.O.S.O./Supervisor:
Acknowledged. [ ] has 3 hours ...time out to bed reviewed in the AM.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ______________

Further Action Required:  (for administration use only)

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________________________________________________________________________

Signature of Administrator or Designate: ___________________________ Date: ______________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR

Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility:  Newfoundland and Labrador Youth Centre
Date of Incident:  2014/02/24   Time of Incident:  09:30 PM
YCMS Incident # 17290
Location of Incident:  COURTYARD

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Other
Non Compliance With Direction
Frisk Search

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

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Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At 21:30 a code two was called in the courtyard by YCC [REDACTED]. YCC [REDACTED] had just left unit 3 and was escorting residents [REDACTED] and [REDACTED] to unit 2. 1. YCC [REDACTED], responded from unit 3. As I approached unit 2, I could see resident [REDACTED] walking away from unit 2 and toward units 5 and 6 across the courtyard. I could hear YCC [REDACTED] confirm entry into unit 2 as we both pursued resident [REDACTED]. YCCs [REDACTED] and [REDACTED] had also responded and we all made our way toward [REDACTED] encouraging him to make his own way back to unit 2. We followed him as far in front of the walkway in front of unit 6. We counselled him further that the better course of action was to just come to unit 2. At this point, he began to throw snow at me. He may have been throwing snow at other staff as well, but of this I cannot be certain, as I was trying to block the snow being thrown at me and get closer to resident [REDACTED]. Resident [REDACTED] was then restrained physically and mechanically. YCC [REDACTED] and I, YCC [REDACTED], began to escort him back to unit 2. He began to kick YCC [REDACTED] and it became necessary to further restrain [REDACTED]. We explained to him if he did not comply we would have to carry him. He complied until we go to the porch on unit 2. When we arrived in the porch area, [REDACTED] kicked his boots off at me. I stated that this was unnecessary and unacceptable. As we were going through the doors, he tried to lunge past me and intentionally bumped into me. He was again restrained physically, until he calmed down and agreed to go to his room. We escorted [REDACTED] to room 2212. His restraints were removed and he was then frisk searched for contraband. None was found. Moso [REDACTED] notified.

Signature of Reporting Staff: ___________________________ Date: ___________________________

SECTION "C"

Special Action Taken:
Mechanically Restrained
Physically Restrained

Comments of M.O.S.O./Supervisor:
Acknowledged

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ___________________________

Further Action Required: (for administration use only)

Signature of Administrator or Designate: ___________________________ Date: ___________________________
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/03/14 Time of Incident: 08:00 AM
Location of Incident: UNIT 4

Resident(s) Name and File #: [Redacted]

Staff on Duty and Deployment:

Witnesses: [Redacted]

SECTION "B"

Type of Incident:

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

While residents were preparing for the day’s activities, [Redacted] was asked to do whatever he needed to do to prepare for school, etc. at this point he started calling me a bald headed prick. I told him I would discuss this with him after school and for him to continue on and prepare for class. At approximately 0910 we were informed that school wouldn’t be starting till after lunch. At this point all the resident were asked to go to their rooms to allow maintenance workers to repair a magnet in room 4. [Redacted] became frustrated and threw his breakfast plate across the kitchen and started swearing again at myself. I then informed him he was to get an hours cool down for his impulsive behaviour. He at first refused to go to his room but was guided to room 2202 by myself and Mr. [Redacted]. As he entered the room he turned and kicked his slipper towards my head, just missing my head and Ms. [Redacted] head as well. He then kicked his other slipper at my head causing me to duck to avoid getting hit. He was restrained and placed on his bed till he became calm. Staff then exited the room and then I informed [Redacted] that I would be requesting that he receive 3 hrs t/o for his behaviour. [Redacted] was still cursing and threatening myself and my family with harm 5 minutes after he was placed in his room.

Signature of Reporting Staff: [Redacted] Date: [Redacted]
Comments of M.O.S.O./Supervisor: 
acknowledged

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ______________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: ___________________________ Date: ______________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR
Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/03/14 Time of Incident: 04:12 PM YCMS Incident # 17350
Location of Incident: UNIT 3
Resident(s) Name and File #: [Redacted]
Staff on Duty and Deployment: [Redacted]
Witnesses: [Redacted]

SECTION "B"

Type of Incident: Other

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)
At approx 2:40pm upon returning from Gym Residents were asked to go to their rooms. All complied except resident [Redacted]. [Redacted] began cursing and saying he wasn't going to his room. He then began cursing at YCC [Redacted] and calling names. [Redacted] was counseled about his behaviour but to no avail did he calm down. [Redacted] then became more angry, took the tv remote and through it with force at [Redacted], missing him and striking me the above writer in the lower back. moso [Redacted] informed.

Signature of Reporting Staff: [Redacted] Date: __________________________

SECTION "C"

Special Action Taken:
SECURE ISOLATION 3 HOURS OR MORE
Comments of M.O.S.O./Supervisor:
acknowledged 3 hrs t/o rcmp notified parents notified T Smith notified

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: __________

Further Action Required: (for administration use only)

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________________________________________________________

Signature of Administrator or Designate: ___________________________ Date: __________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR

Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/03/14 Time of Incident: 03:40 PM YCMS Incident # 17351
Location of Incident: GYM AND UNIT 3

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
- Verbally Abuse Staff
- Assault on Staff
- Damage to Property
- Non Compliance With Direction

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

While supervising residents in the gym I refused unit 1 admission to the gym as the residents of unit 3's behaviour didn't warrant them mixing with unit 1. When I told unit 3 this, [redacted] and [redacted] all became upset and started acting out. After calming them down we proceeded to exit the gym, as we were exiting the gym, [redacted] kicked the basketball at us, missing us by mere feet. He apologized with a giggle and kicked the ball again down the gym. We then proceeded back to unit 3, when we arrived back on the unit both [redacted] and [redacted] went to their rooms to cool down. As [redacted] was going to his room I told him to go to and empty room as he would be serving t/o due to his impulsive behaviour (kicking the ball and cursing and swearing on staff). When I told him this he grabbed the TV remote from in front of the TV and threw it at myself and the other staff, the remote struck yec [redacted] in the back (kidney area) and caused a bruise. [redacted] was placed in his room and frisked to make sure he had no contraband on him. [redacted] calmed down and was informed he would be isolated till he realized the seriousness of what he had done.

Signature of Reporting Staff: ____________________________ Date: ____________________________
SECTION "C"

Special Action Taken:
  Police Investigation
  Isolated
  SECURE ISOLATION 3 HOURS OR MORE

Comments of M.O.S.O./Supervisor:
  acknowledged 3 hrs t/o approved report will be sent to RCMP parents to be notified t smith notified

Administrative Comments:

Signature of M.O.S.O./Supervisor: ________________________  Date: ____________________

Further Action Required:  (for administration use only)

Signature of Administrator or Designate: ________________________  Date: ____________________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR

Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/07/04 Time of Incident: 06:45 PM YCMS Incident # 17654
Location of Incident: UNIT FOUR
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses: YCC [redacted]

SECTION "B"

Type of Incident:
Verbally Abuse Staff
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

On the above noted date and time I, Youth Care Counsellor [redacted], observed [redacted] spit across the table situated in front of the unit control desk and between residents [redacted] and [redacted]. I ordered [redacted] to his room and at first he refused. The second time I ordered him he threw a roll of paper towel at me hitting me in the lower legs and upon entering his room he spit at me hitting me in the stomach area with spit. While in the room he went on to say he would burn my house down, take me hostage and kill my family. Moso [redacted] informed of incident.

Signature of Reporting Staff: [redacted] Date: ________________________
Comments of M.O.S.O./Supervisor:
Acknowledged-- moved to unit 2 (no audience) for this evening.

R Braye

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ____________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: ___________________________ Date: ____________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR
Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/08/14  Time of Incident: 06:50 PM  YCMS Incident # 17708
Location of Incident: UNIT 1

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Verbally Abuse Staff
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

Resident [Redacted] had been disagreeable all day and had lost some privileges as a result. She had the remote and changed the TV to a music station (one of the privileges lost). She was told to change it. She did after several requests but threatened to throw the remote so staff approached her to retrieve it. She began to take it apart, laughing all the while. She then called YCC [Redacted] a rapist and pervert. At this point she was told to go to her room. She threw the remote and refused to go. YCC [Redacted] started to escort her to her room when she began to hit him in the chest area several times. She also grabbed him by the head A code 2 was called. Staff responded and [Redacted] put in her room. SI to follow.

Signature of Reporting Staff: ___________________________ Date: ___________
Comments of M.O.S.O./Supervisor:

[Redacted] will remain in S.I for the rest of the night and will stay in her room in the morning until the case team have an opportunity to review the incident and determine if any further action is required. YCC [Redacted] was sent to the hospital to be checked out for what appears to be a broken finger from the struggle.
Mr. Head contacted and advised of the incident.
E-Mail to J.Brown for case team review of the incident and copied to Mr. Head and Ms. T.Smith

Administrative Comments:

Signature of M.O.S.O./Supervisor: __________________________ Date: ________________

Further Action Required: (for administration use only)

[Blank lines]

Signature of Administrator or Designate: __________________________ Date: ________________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR

Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/08/14  Time of Incident: 06:40 PM
Location of Incident: UNIT 1
Resident(s) Name and File #: [redacted]
Staff on Duty and Deployment: [redacted]
Witnesses: [redacted]

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approximately 1840 YCC [redacted] requested [redacted] to turn the TV off as a consequence to her misbehaviour toward staff earlier in the day. [redacted] refused. YCC [redacted] requested that I turn the TV off as she was tending to some center business. I went to the tv and turned it off. [redacted] was not pleased and started to make gestures as if she were going to throw the remote and saying slanderous comments. I then attempted to retrieve the remote [redacted] began to remove the back of the remote and batteries. After which she was instructed to hand over the remote. She refused. Staff attempted to take the remote from her hand and she would pass it back between hands. Once YCC [redacted] was position on the right side of [redacted]. I went to the left. As I did she passed the remote to her right hand and I took a hold of her left wrist, [redacted] threw the remote and began to struggle from my hold on her wrist. I lost my grip as she managed to get to her feet from her sitting position. She started to come toward me and I backed off until a code was called and we were in a better position to physically restrain her. Once YCC called the code and [redacted] grabbed a hold of my hair, push me and brought her knee to my chest. At that time she noticed response was coming and she went to her room door. While waiting for response to come in I was attempting to open the lock to the room. As the door opened to admit response, YCC [redacted] unlocked the room door (7) from the panel. Once response came [redacted] was over by her door and was backed into her room by [redacted] and [redacted] followed behind. [redacted] was in her room at that point. It was then I noticed that my left ring finger was bent up. I was instructed by MOSO [redacted] to head to the clinic.

Signature of Reporting Staff: [redacted]  Date: [redacted]
SECTION "C"

Special Action Taken:
   Isolated
   SECURE ISOLATION 3 HOURS OR MORE

Comments of M.O.S.O./Supervisor:
   Acknowledged.
   Resident [redacted] is placed in her room (S.I) for the remainder of the night and case team to review in the morning

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: __________________

Further Action Required: (for administration use only)

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_________________________________________________________

Signature of Administrator or Designate: ______________________ Date: __________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR

Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre

Date of Incident: 2014/08/16 Time of Incident: 05:07 PM YCMS Incident # 17718

Location of Incident: UNIT 1

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Verbally Abuse Staff
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

Resident [redacted] was disrespectful and rude while in the cafeteria it was decided to leave right away. She was disrespectful on the way back as well. Once inside the unit she was asked to go to her room, she refused. YCC [redacted] tried to talk to her, she would not listen and threw her milk and hit him with it. She then ran towards the bathroom screaming and crying, staff followed and tried to speak to her to no avail. Again she was asked to go to her room to calm down she said no she wanted to call her lawyer and went towards the phone. YCC [redacted] assured her she could place a call once she calmed down. She ran at him striking him. A code 2 was called and [redacted] was physically restrained. In trying to get her mechanically restrained she hit YCC [redacted] on the arm and grabbed YCC [redacted] shirt. Once the handcuffs were applied [redacted] began kicking out at staff. She called YCC [redacted] who said she hated in the cafeteria a rapist and pervert. She also shouted insults at other staff. To note some of [redacted] ramblings; some staff were rapists, she received a hickey from a staff while she was sleeping and she asked YCCs [redacted] and [redacted] to smell and lick her ass. Finally [redacted] calmed down, the handcuffs were removed and she was placed in her room. MOSO aware of incident.

Signature of Reporting Staff: ______________________ Date: ______________________
SECTION "C"

Special Action Taken:
- Mechanically Restrained
- Physically Restrained
- Isolated
- SECURE ISOLATION 3 HOURS OR MORE

Comments of M.O.S.O./Supervisor:
acknowledged 3 hrs i/o start over tomorrow am with case plan

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ____________

Further Action Required: (for administration use only)

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________________________________________________________________________

Signature of Administrator or Designate: ___________________________ Date: ____________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/08/16 Time of Incident: 05:05 PM YCMS Incident # 17719
Location of Incident: UNIT 1
Resident(s) Name and File #: [Redacted]
Staff on Duty and Deployment: [Redacted]
Witnesses: [Redacted]

SECTION "B"

Type of Incident:
Assault on Staff
Suicide Referral

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approximately 17:05, a code 2 was called on unit 1. I responded from the cafeteria and upon entering unit 1, observed that Ycc [Redacted] and [Redacted] had resident [Redacted] on the floor, physically restrained. She continued to act out so mechanical restraints were applied. I observed that Ycc [Redacted] had been bitten on his right forearm, and went to the office to get some hand sanitizer to help disinfect his arm. [Redacted] continued to scream abuse and continued to attempt to physically act out, and Ycc's present continued to counsel her to calm down.

After many minutes, she calmed enough to agree to go to her room. While she was being escorted to her room, she started to say that she would be putting all of our names on Facebook; in regard that we abused her, and that she was going to shoot herself in front of her mother. When she was asked to face the room corner, or to kneel down so the handcuffs could be removed, she turned and kicked myself ([Redacted]) in the right shin with her right foot. She was again restrained and placed on the mattress in her room. After approximately 10 minutes of counselling, she calmed to the point where she agreed to have the handcuffs removed.

Signature of Reporting Staff: [Redacted] Date: [Redacted]
SECTION "C"

Special Action Taken:
   Mechanically Restrained
   Physically Restrained
   Suicide Assessment Referral

Comments of M.O.S.O./Supervisor:
   she will be placed on suicide referral. she will also receive 3 hrs t/o for her behavior. Her case plan can start over again in am

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ___________________________

Further Action Required: (for administration use only)

Signature of Administrator or Designate: ___________________________ Date: ___________________________
GOVERNMENT OF
NEWFOUNDLAND
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YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/08/16   Time of Incident: 06:30 PM
Location of Incident: UNIT #1
Resident(s) Name and File #: [redacted]

Staff on Duty and Deployment:
Witnesses: [redacted]

SECTION "B"

Type of Incident:

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

Code 2 on Unit #1 was called around 5:05
As I entered the Unit [redacted] had [redacted] on the floor
[redacted] was verbally/physically abusive and threatening towards staff
Numerous attempts were made to calm the youth down but the abuse continued
[redacted] was mechanically restrained and eventually escorted to her room
While entering her room she made statements regarding putting staff hurting her on Facebook and shooting herself in front of her Mother

Signature of Reporting Staff: [redacted]   Date: [redacted]

SECTION "C"

Special Action Taken:
Suicide Assessment Referral
Comments of M.O.S.O./Supervisor:
acknowledged resident placed on suicide referral

Administrative Comments:

Signature of M.O.S.O./Supervisor: ____________________________ Date: ________________

Further Action Required:  (for administration use only)

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________________________________________________________________________
________________________________________________________________________

Signature of Administrator or Designate: ________________________ Date: ________________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/08/16   Time of Incident: 05:05 PM   YCMS Incident # 17721
Location of Incident: UNIT 1
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Verbally Abuse Staff
Assault on Staff
Non Compliance With Direction
Injury

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:
Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approximately 5pm I relieved YCC [redacted] for a coffee break in the cafeteria. While sitting at the table with resident [redacted] she was making nasty and rude comments about staff and just being unruly. As soon as she finished her supper we left to return to the unit. She continued to be nasty and and was calling staff perverts and rapists and that staff had gone into her room at night and gave her a hickey on her neck.

Upon entering the unit she was asked to go to her room to calm down. She proceeded to walk towards the tv and turned it on, I walked over and opened her door and asked her again to go in her room to calm down. She then began screaming at me and threw her container of milk at me hitting me on my left upper back. She then ran towards the washroom screaming at YCC [redacted] and I that she wasn't going to her room and saying DON'T PUT ME IN MY ROOM! She then began to cry. I explained that we were not going to put her in her room but she was going to go in on her own and clam down and she could come out again when she was calm. She then said I wanna call my Lawyer and walked towards the phone. I followed and was explaining to [redacted] that she had to go to her room to calm down and could call her lawyer when she was calm.

It was at that point that she began screaming at me and started to punch me hitting me in the sholders and chest area just missing my face. YCC [redacted] called a code and I attempted to get a hold of one of her arms to restrain her but couldn't. I just held on to her and we both fell to the floor. YCC [redacted] and I then turned her on her stomach and while trying to get her right arm out from under her head she bit me on the right forearm. I pulled my arm away and again tried to get her arm out when she bit me on my right middle finger breaking the skin. I did get her arm out and behind her back but as Ms. [redacted] was attempting to get her left arm out [redacted] was trying to bite her so we just held [redacted] in that position until assistance arrived.

Mr. [redacted], Ms. [redacted], Ms. [redacted] and MOSO [redacted] arrived shortly after. Mechanical restraints were applied but [redacted] continued to act out and verbally abused staff. Staff were trying to counsel the resident to calm down so she could go in her room. A couple of times she seemed as though she was calming but when we would release her she attempted to kick at staff.

[redacted] continued to yell at staff calling them rapists and perverts, and saying we were hurting her. It was explained to [redacted] that if she would calm down she could go in her room and we would take her restraints off and leave her alone.

[redacted] eventually calmed enough for us to escort her to her room but when she was in her room we asked her to kneel so we could remove her restraints she began kicking YCC [redacted] hitting him in the leg. [redacted] was again restrained this time on her mattress and continued to act out verbally and physically.

[redacted] eventually calmed and her restraints were removed.

Mr. [redacted] sent me to the clinic where I received a tetanus shot and a prescription for antibiotics.

Signature of Reporting Staff: __________________________ Date: __________

SECTION "C"

Special Action Taken:
Mechanically Restrained
Physically Restrained
Isolated
SECURE ISOLATION 3 HOURS OR MORE
Comments of M.O.S.O./Supervisor:
acknowledged to receive 3 hrs s/i

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ____________

Further Action Required: (for administration use only)
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____________________________________________________________

Signature of Administrator or Designate: ______________________ Date: ____________
SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/10/21  Time of Incident: 11:05 AM  YCMS Incident # 17838
Location of Incident: UNIT 3
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Non Compliance With Direction

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approximately 11:05 unit 3 was about to go to the main bldg for gym class. Resident [REDACTED] was asked to take his jacket as he was going to be escorted to St. John's. He took his jacket but upon exiting the unit he threw it in the porch. Ha was asked again by YCC [REDACTED] to take his jacket with him. He picked it up but again threw it in the porch. I approached him and was about to explain why he should take it when he called me a f'n idiot and flicked my ballep off me head. The other residents were directed to return to the unit. When I unlocked the unit door resident [REDACTED] entered first then turn and attempted to intimidate me by taking a punch towards my face. He was directed to go to his room. He was verbally abusive towards staff but did go to his room where he was locked in. All residents were locked down and Moso notified of the incident. It is recommended that resident [REDACTED] serve some secure isolation upon his return to NLYC.

Signature of Reporting Staff: ________________________________  Date: ________________________________

SECTION "C"

Special Action Taken:
Isolated
Comments of M.O.S.O./Supervisor:
Acknowledged.
P. Mahoney (for T. Bartlett)

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: __________________

Further Action Required: (for administration use only)
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____________________________________________________
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____________________________________________________

Signature of Administrator or Designate: ___________________________ Date: __________________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR

Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/10/21 Time of Incident: 11:05 AM YCMS Incident # 17839
Location of Incident: UNIT 3

Resident(s) Name and File #: [Redacted]

Staff on Duty and Deployment: [Redacted]

Witnesses: [Redacted]

SECTION "B"

Type of Incident:
Verbally Abuse Staff
Non Compliance With Direction

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At 11:05 unit 3 was leaving the unit to go to gym class. Resident [Redacted] was asked to take his jacket as he was going to St. John's for an appointment. At first he was arguing with staff saying that he didn't want to, but he did take it in his hands but threw it back in on the unit as he was exiting. I picked up the jacket and passed it back to him and told him he needed to take his jacket. As he was exiting the porch he again threw his jacket back in the porch. YCC [Redacted] was attempting to explain to him why he needed to take his jacket when [Redacted] called him a fucking Idiot and then flicked Mr. [Redacted] cap off his head and jeered at him.

We then asked all the residents to return to the unit and instructed Resident [Redacted] to go to his room. Upon entering the unit Resident [Redacted] made a motion to punch Mr. [Redacted] and laughed at him.

The resident went into his room and slammed the door behind him.

MOSO [Redacted] was notified and it was felt that escort staff should come over and apply the restraints for the escort here on the unit.

When staff entered his room to apply the restraints he became disruptive and and verbally abusive to staff and at one point kicked me in the leg.

Once the escort restraints were applied resident [Redacted] was escorted to St. John's.

Recommend 3 hours secure isolation.

Signature of Reporting Staff: [Redacted]  Date: [Redacted]
SECTION "C"

Special Action Taken:
  SECURE ISOLATION 3 HOURS OR MORE

Comments of M.O.S.O./Supervisor:
  acknowledged

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ____________

Further Action Required:  (for administration use only)

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Signature of Administrator or Designate: __________________ Date: ____________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR

Department of Justice

YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/10/21
Time of Incident: 04:40 PM
YCMS Incident # 17840
Location of Incident: UNIT 3

Resident(s) Name and File #: 

Staff on Duty and Deployment: 

Witnesses: 

SECTION "B"

Type of Incident:
Verbally Abuse Staff
Assault on Staff
Damage to Property

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:
Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)
At 16:40 I went to room 3107 to talk to resident [redacted] about the incident this morning. Upon entering his room I noticed his clothes were torn up and his belongings scattered around the room. I asked resident [redacted] if he was ok to which he replied get the fuck out of my room...and you can take the torn clothes with you. I exited the room and notified YCC's [redacted] & [redacted] of the situation.
The other unit 3 residents were asked to go to their rooms and MOSO [redacted] was contacted. YCC [redacted] went to look in at Resident [redacted] and saw that he was wrapping his clothes around his hands in preparation for staff coming in to get his things.
YCC's [redacted], [redacted] & MOSO [redacted] arrived on the unit. Staff entered resident [redacted] room and began removing his belongings [redacted] was cooperative at first but when we started to remove his bedding he became combative and had to be restrained. During the restraint he was verbally abusive towards staff and lashing out at staff. He attempted to punch Mr. [redacted] in the ribs and did kick him in the same area after. Mechanical restraints were applied until the resident calmed down a short time later.
Resident [redacted] had destroyed his glasses and most of his clothes. A screw was found in his belongings as well.
I injured my index finger on my left hand during the restraint.
At 18:00 [redacted] asked to use the washroom and when he came out I asked if he was ok. He said he was a bit sore and showed me 2 marks on his right side and another mark on the inside of his right arm. [redacted]

Signature of Reporting Staff: ___________________________ Date: ___________________________

SECTION "C"

Special Action Taken:
Mechanically Restrained
Physically Restrained
Isolated
SECURE ISOLATION 3 HOURS OR MORE
Comments of M.O.S.O./Supervisor:
acknowledged will remain in his room for an additional 3 hrs which means that he will be there for tonight. Hi mom was contacted and briefed on the situation.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: __________________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: ___________________________ Date: __________________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR

Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/10/21 Time of Incident: 06:00 PM YCMS Incident # 17842
Location of Incident: UNIT 3
Resident(s) Name and File#: [Redacted]
Staff on Duty and Deployment:
Witnesses: [Redacted]

SECTION "B"

Type of Incident:
Verbally Abuse Staff
Damage to Property

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

@ approx. 1650 hrs myself, [Redacted], [Redacted], and [Redacted] entered [Redacted] room to remove his belongings as he had torn up his clothing. At first he was compliant but then began to get more and more aggressive. We told him he could keep his mattress but he picked it up and began pushing it towards the door and staff. At this time he had to be restrained as he was pushing it against staff in the door way. It took a few minutes to get resident [Redacted] down and secured. Once he stopped struggling and calmed a little he was turned on his side. During this restraint I received a kick to my left rib cage. Once calmed he was uncuffed and staff left his room.

Signature of Reporting Staff: [Redacted] Date: __________

SECTION "C"

Special Action Taken:
Mechanically Restrained
Physically Restrained
Isolated
Comments of M.O.S.O./Supervisor:
acknowledged he will serve an additional 3 hrs time out which will leave him in his room for the night
Contacted his mom and briefed her on his situation

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ________________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: ___________________________ Date: ________________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/10/21 Time of Incident: 07:20 PM YCMS Incident # 17843
Location of Incident: ROOM 3107
Resident(s) Name and File #: [REDACTED]
Staff on Duty and Deployment: [REDACTED]
Witnesses: [REDACTED]

SECTION "B"

Type of Incident: Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At 7:20pm while doing room checks I could not see into [REDACTED] room because he had his mattress against his door. I tried to open his door but [REDACTED] had the door jammed from the inside. MOSO [REDACTED] was called and came to the unit. After forcing his door open and trying to counsel [REDACTED], it was decided that [REDACTED] would have to be restrained and his mattress taken. While restraining [REDACTED] he bit Mr. [REDACTED] on the arm. Mr. [REDACTED] arm was bleeding.

[REDACTED] said that he would continue to bang on his light and walls until he was moved to another unit.
It was decided to move [REDACTED] to observation at 8:10.

Signature of Reporting Staff: [REDACTED] Date: ________________

SECTION "C"

Special Action Taken:
Mechanically Restrained
Isolated
Comments of M.O.S.O./Supervisor:
Acknowledged.
P. Mahoney

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ____________

Further Action Required: (for administration use only)
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________________________________________________________________________

Signature of Administrator or Designate: ___________________________ Date: ____________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR  
Department of Justice  
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre  
Date of Incident: 2014/10/21  
Time of Incident: 07:25 PM  
Location of Incident: UNIT 3  
Resident(s) Name and File #:  
Staff on Duty and Deployment:  
Witnesses:  

YCMS Incident # 17844

SECTION "B"

Type of Incident:  
Non Compliance With Direction  
IF ESCAPE OR UAL, (A) Length of Absence (Days):  
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At 19:25 Unit 2 received a call stating that assistance would be required on Unit 3. YCC [redacted] and me made our way to Unit 3, where YCC [redacted], [redacted], [redacted] and Moso [redacted] were already present speaking to resident [redacted]. Attempts were made to have resident [redacted] give up his mattress. He refused to do so and sat on it. Staff attempted to remove the mattress by force and at this point resident [redacted] became aggressive towards staff. He was restrained on the ground and while being restrained he bit YCC [redacted] and drew blood.

During the restraint, he was verbally abusive to staff. Upon having calmed down and having retrieved the mattress, he was released and instructed staff to 'Get the fuck out of the room.' Staff attempted to leave the room however resident [redacted] proceeded to close the door on MOSO [redacted]. Staff rationalized with resident [redacted] and he released the pressure applied to the door which permitted MOSO [redacted] to exit the room.

Signature of Reporting Staff:  
Date:  

SECTION "C"

Special Action Taken:  
Mechanically Restrained
Comments of M.O.S.O./Supervisor:
Acknowledged.
P.Mahoney

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ________________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: ___________________________ Date: ________________
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/10/21 Time of Incident: 07:20 PM YCMS Incident # 17845
Location of Incident: UNIT 3 ROOM 3107
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff
Damage to Property
Non Compliance With Direction

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

[Redacted] was in secure isolation from the previous shift. During routine room checks Mr. [Redacted] observed putting his mattress up to his window making it impossible to see him. MOSO was notified and arrived on the unit with YCCs [Redacted], [Redacted], and [Redacted]. Several attempts were made to calm the youth down but he escalated to the point where a restraint was needed. During this restraint the youth bit Mr. [Redacted], breaking the skin. When the resident was calmer, YCCs left the youth's room. At 19:50 [Redacted] began to punch at the light in his room. Once again assistance arrived and we entered [Redacted] room. He was somewhat quicker to calm at this point and YCCs were able to leave the resident's room after some counselling. At 20:10 the youth was observed tearing his t-shirt in two pieces. YCCs [Redacted] and [Redacted] arrived with MOSO [Redacted] and the youth was mechanically restrained and escorted to the observation cells.

Signature of Reporting Staff: ___________________________ Date: ___________________________
SECTION "C"

Special Action Taken:
  Mechanically Restrained
  Physically Restrained
  Isolated

Comments of M.O.S.O./Supervisor:
  Resident escorted to the observation cells to complete his SI.
  P. Mahoney

Administrative Comments:

Signature of M.O.S.O./Supervisor: _______________________________ Date: __________________

Further Action Required:  (for administration use only)

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________________________________________________________

Signature of Administrator or Designate: ______________________ Date: __________________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR

Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/10/21 Time of Incident: 07:25 PM YCMS Incident # 17862
Location of Incident: UNIT 3--ROOM 3107
Resident(s) Name and File #: 

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff
Non Compliance With Direction

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

Unit 2 received a call from MOSO [REDACTED] for myself and ycm [REDACTED] to go to unit 3 to provide assistance.

Resident [REDACTED] was in his room with his mattress against the back wall—the mattress needed to be removed for supervision. Staff requested several times for [REDACTED] to pass out his mattress.

The resident was non-compliant—staff then entered the room to take out the mattress [REDACTED] then approached staff in a aggressive and threatening manner. Resident [REDACTED] was then physically restrained—the mattress was removed.

During the restraint, the writer of this report was bitten by resident [REDACTED] on the left arm—this bite punctured the skin and drew blood.

Staff then attempted to exit the room [REDACTED] closed the door on Mr [REDACTED] [REDACTED] eventually relieved the pressure on the door freeing Mr.

Signature of Reporting Staff: ___________________________ Date: ___________________________
SECTION "C"

Special Action Taken:
  Physically Restrained

Comments of M.O.S.O./Supervisor:
  Acknowledged.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ____________________________ Date: ____________________

Further Action Required: (for administration use only)

Signature of Administrator or Designate: ____________________ Date: ____________________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/10/21 Time of Incident: 07:25 PM YCMS Incident # 17869
Location of Incident: UNIT 3 ROOM 3107
Resident(s) Name and File #: [Redacted]

Staff on Duty and Deployment:

Witnesses: [Redacted]

SECTION "B"

Type of Incident:
Assault on Staff
Non Compliance With Direction

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:
Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

Received a call regarding [Redacted]. He was blocking the door of his room making it impossible for staff to visually check him. Since [Redacted] reported earlier that [Redacted] had marks on him from an earlier restraint the camera was taken to the unit.

[Redacted] and I forced the door of room 3107 open because [Redacted] refused to move away from the door and allow us to enter the room. He was questioned about marks from the earlier restraint and showed staff the marks on his rib area. He refused to allow staff to photograph the marks.

Staff explained to [Redacted] that to ensure his safety they needed to see into the room in order to complete room checks. He argued saying he had spent enough time in his room. He also said that he put the mattress against his door so he could punch it as exercise. Staff told him he could do that by putting the mattress against the wall. He then argued that he did not want the other residents to see him in his room while they were watching tv and enjoying themselves on the unit.

[Redacted] and [Redacted] arrived on the unit to assist. [Redacted] demeanor became more aggressive and his tone became more threatening as time passed. At times he would swear on staff and insist that they get out of his room. He clenched his fist and motioned as if he was going to punch staff. When he was told that the mattress was going to be removed from his room he said he was not going to allow that. When an attempt was made to retrieve the mattress he moved in towards staff in a threatening manner. Staff restrained him. He fought aggressively against staff as he was held in place on the floor.

[Redacted] yelled he was having difficulty breathing and staff eased off a little. At this point he bit [Redacted] on the arm breaking the skin and drawing blood. [Redacted] medic alert bracelet broke and fell on the floor.

It was retrieved by staff.

While [Redacted] was held on the floor he yelled at staff to leave his room. He was told that staff would leave his room when he calms down. He agreed to remain calm as staff left his room. As I was leaving the room (the last to leave) [Redacted] pushes against the door jamming me between the door and door frame. He was yelling for me to leave the room. I told him that I could not if he was jamming me in the door. He backed away and I left the room. He pushed the door shut. Staff asked why he bit [Redacted] on the arm and he said because some one was choking him. He was told that there was a number of staff in the room and no one choked him. [Redacted] insisted that some one did.

All staff returned to their regular deployment until [Redacted] called to say [Redacted] was standing on his bed punching at the light. It was decided to move [Redacted] to an observation cell in the main building where he would not be able to reach the light.

Staff [Redacted] applied handcuffs and along with [Redacted] and myself escorted [Redacted] to the observation cell.

Once in the observation cell [Redacted] settled down. He continued to say that some one choked him. He made no comment about being punched (as he claimed the next day).

During the restraint staff did what they could to ensure [Redacted] safety. No one choke or punched him.

Signature of Reporting Staff: ___________________________ Date: ___________________________
Comments of M.O.S.O./Supervisor:

Rcmp notified.
P. Mahoney

Administrative Comments:

Signature of M.O.S.O./Supervisor: ________________________ Date: ________________________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: ________________________ Date: ________________________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR
Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre

Date of Incident: 2014/10/21 Time of Incident: 07:27 PM

Location of Incident: UNIT 3.

Resident(s) Name and File #: [Redacted]

Staff on Duty and Deployment: [Redacted]

Witnesses: YOUTH CARE COUNSELLORS [Redacted]

SECTION "B"

Type of Incident:

Other

Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approximately 1927 on the above noted date, Youth Care Counsellor [Redacted] arrived on Unit 3 to provide assistance due to resident [Redacted] acting out in his room. Attempts were made by staff to counsel [Redacted] and calm him down but his behaviour persisted and when his demeanor became more aggressive and he made threatening motions toward staff he was restrained. I entered [Redacted] room as other Youth Care Counsellors and Moso [Redacted] were restraining [Redacted] to the floor of his room and I restrained his legs once he was moved to the floor. [Redacted] aggressively resisted the restraint and in the process he bit Youth Care Counsellor [Redacted] on the arm drawing blood. In short order, when he appeared to have calmed down, staff released him and began to back out of his room. At this time [Redacted] pushed the door of his room through on Moso [Redacted] jamming him between the door and the door frame and at the same time yelling for Mr. [Redacted] to leave his room. When Mr. [Redacted] informed [Redacted] that he could not leave while he pushed on the door, [Redacted] backed off and let him exit. [Redacted] appeared to have settled down at this point and staff returned to their assigned positions in the facility.

Signature of Reporting Staff: [Redacted] Date: [Redacted]
SECTION "C"

Special Action Taken:
   Isolated

Comments of M.O.S.O./Supervisor:
   Acknowledged.
   P. Mahoney

Administrative Comments:

Signature of M.O.S.O./Supervisor: ____________________________ Date: ____________________________

Further Action Required:  *(for administration use only)*

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Signature of Administrator or Designate: ____________________________ Date: ____________________________
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre

Date of Incident: 2014/10/03   Time of Incident: 08:05 PM   YCMS Incident # 17805

Location of Incident: UNIT /CLINIC

Resident(s) Name and File #: [Redacted]

Staff on Duty and Deployment:

[Redacted]

Witnesses:

SECTION "B"

Type of Incident:
- Verbally Abuse Staff
- Assault on Staff
- Non Compliance With Direction

IF ESCAPE OR UAL. (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

- At 20:05 [Redacted] stated that he was having trouble breathing
- He began to stiffen up in the chair and proceeded to the floor
- At this point [Redacted] called a code 2.
- [Redacted] along with [Redacted] and [Redacted] responded.
- At this point an ambulance was called to ensure the safety of [Redacted]
- Once at the clinic [Redacted] began to misbehave and on several occasions he tried to run away from staff.
- Myself and [Redacted] had to physically restrain [Redacted] in order to prevent him from trying to run away again.
- Once we brought [Redacted] back into the examining room he spit on me twice.
- [Redacted] then called the Moso, [Redacted] for further assistance.
- [Redacted] and [Redacted] arrived within a couple of minutes.
- At approx 21:30 we arrived back at the facility.

Signature of Reporting Staff: [Redacted]   Date: [Redacted]
SECTION "C"

Special Action Taken:
Medical Treatment Required
Physically Restrained

Comments of M.O.S.O./Supervisor:
acknowledged

Administrative Comments:

Signature of M.O.S.O./Supervisor: ____________________________ Date: ____________

Further Action Required: (for administration use only)


Signature of Administrator or Designate: ____________________________ Date: ____________
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/10/03 Time of Incident: 08:05 PM YCMS Incident # 17806
Location of Incident: UNIT 2B/WHITBOURNE CLINIC
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Verbally Abuse Staff
Assault on Staff
Non Compliance With Direction

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At the above noted time and date resident [redacted] was sitting at the table eating his snack for bed. He fell to the floor, breathing heavily, stiffened up and began shaking. I called a Code 2 and staff responded. The ambulance was called and [redacted] was taken to the clinic, escorted by myself and [redacted]. While at the clinic [redacted] attempted to run away from staff on several occasions. He had to be physically restrained in the hallway and carried back to the examining room. While being restrained [redacted] spit on [redacted] twice and attempted to kick and bite us. He was not cooperative with the doctor at the clinic. We contacted NLYC and asked for assistance. [redacted] and [redacted] arrived and [redacted] was escorted back to NLYC.

Signature of Reporting Staff: ___________________________ Date: ___________________________
Comments of M.O.S.O./Supervisor:
I spoke with staff [REDACTED] and he does not want to press charges due to the child mental health state.
Resident to serve 1 hour S.I in the am

Administrative Comments:

Signature of M.O.S.O./Supervisor: ________________________ Date: ________________________

Further Action Required: (for administration use only)

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________________________________________________________________________

Signature of Administrator or Designate: ________________________ Date: ________________________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR
Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/10/22    Time of Incident: 05:40 PM    YCMS Incident # 17850
Location of Incident: DINNING HALL

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

1740 a code 2 was called in the dinning hall I yec: was placed the boys on unit 3 in there room and I ran to the dinning hall. When I arrived there yec: was on the floor cuffed. Yec: was on the floor bleeding from over the eye she was then taken for the dinning hall. Yec: and I helped up off the floor and placed her in a chair. From there yec: became once again aggressive toward staff and resident, she stood up from the chair and started to move towards me and where was sitting I told her to sit back down a few times but she would not comply she just just shouted back at staff and moved forward she was then placed back on the floor to clam down. From there she was moved to unit 2 and place in her room

Signature of Reporting Staff: ________________________________ Date: ____________________

SECTION "C"

Special Action Taken:
Mechanically Restrained
Isolated
Comments of M.O.S.O./Supervisor:
Acknowledged.

See comments on author [redacted] Oct 22/14

Administrative Comments:

______________________________________ Date: ______________________

Signature of M.O.S.O./Supervisor:

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: ______________________ Date: ______________________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/10/22  Time of Incident: 05:30 PM  YCMS Incident # 17851
Location of Incident: CAFETERIA

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days): 
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

After supper, I was retrieving the night lunch box for unit 2 at the kitchen counter [redacted] who was very angry at and arguing with Miss [redacted], threw a plate towards her, [redacted] then picked up a chair and threw it at Miss [redacted] then attacked her I along with Miss [redacted] and Mr [redacted] went to assist [redacted] I had [redacted] by her hands as we put her on the ground, however, I could not pull very hard because she was pulling on [redacted] hair. [redacted] also managed to scratch miss [redacted] eye area before we managed to pull her arms off and have miss [redacted] towards safety [redacted] was then mechanically restrained and escorted to unit 2 and put in Isolation.

Signature of Reporting Staff: ___________________________ Date: ___________________________

SECTION "C"

Special Action Taken:
Mechanically Restrained
Comments of M.O.S.O./Supervisor:
Acknowledged.

See comments under author: Oct 22/14

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ____________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: _______________________ Date: _____________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR

Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/10/22  Time of Incident: 05:40 PM  YCMS Incident # 17853
Location of Incident: DINING HALL
Resident(s) Name and File #:
Staff on Duty and Deployment:
Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:
Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approximately 1730 after resident [redacted] was finished eating supper, the kitchen passed out the night lunch container. Resident [redacted] kept taking the container and placing it in the way of another resident who was trying to eat her supper. YCC [redacted] took the container and placed it on the floor by her chair. [redacted] then proceeded to go up to the doors leading into the cafeteria. YCC [redacted] went up by the doors telling [redacted] to come and sit down at the table. [redacted] told me to go away so I proceeded back to the table and kept telling her to sit down. Around 1740 [redacted] was back at the table and shouted out you fucking whore, I'm going to punch you. At first I wasn't sure if it was meant for me or YCC [redacted]. Then [redacted] looked at YCC [redacted] and said she hated her. [redacted] picked up a plate and threw it at YCC [redacted], a code 2 was called as [redacted] was throwing the kitchen chair at YCC [redacted]. [redacted] also threw a radio at YCC [redacted]. I YCC [redacted] went around the table to grab [redacted] but by this time [redacted] was on top of YCC [redacted] and YCC [redacted] and [redacted] were trying to get [redacted] off YCC [redacted]. YCC [redacted] was pulling on [redacted]'s hair which made it more difficult for staff to get her off. At this point [redacted] yelled 'she's gouging my eyes out' I, YCC [redacted] managed to get the handcuffs on [redacted] while some staff assisted YCC [redacted]. Moso [redacted] and YCC [redacted] came into the dining hall while [redacted] was being restrained. Staff helped [redacted] up and sat her on a chair. [redacted] continued to say that [redacted] is a bitch and that she hates her. [redacted] then proceeded to go after resident [redacted] but was taken down before she got a chance to do so. [redacted] was then escorted to Unit 2, side A and placed in room 2209.

Signature of Reporting Staff: __________________________ Date: __________________________

SECTION "C"

Special Action Taken:
Mechanically Restrained
Physically Restrained
Isolated
SECURE ISOLATION LESS THAN THREE HOUR
Comments of M.O.S.O./Supervisor:

Acknowledged.

Resident [redacted] was escorted to Unit Two, and when calm returned to her unit. She had another incident enroute to her living. The Police were notified. All attempts were made to contact her Parent’s and social workers.

The incident was very serious. Resident [redacted] was given Eight hours secure isolation. YCC staff did a good job with the situation. The nurse was asked to check resident [redacted] out. She had to be restrained.

Administrative Comments:

Signature of M.O.S.O./Supervisor: _______________________________ Date: __________________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: ________________________ Date: __________________
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/10/22 Time of Incident: 05:40 PM
Location of Incident: CAFETERIA MAIN BUILDING

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:
Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

While at the cafeteria, resident [redacted] was getting agitated. She was verbally abusive to YCC [redacted] and then left the table to head to the cafeteria exit. She continued to utter words under her breath and ripped a poster off the door and stuck it in the window of the cafeteria door. YCC [redacted] went over and told resident [redacted] to remove the poster from the window. She complied but kept uttering words under her breath.

She then returned to the table where YCC [redacted], YCC [redacted] and resident [redacted] were sitting. She sat in front of YCC [redacted] and continued to be verbally abusive to her. YCC [redacted] attempted to reason with resident [redacted] and understand the reason of her frustration. At this point resident [redacted] stood up, picked up a plate that was on the table, and threw it at YCC [redacted]. I grabbed my radio to call a code 2. In that time, resident [redacted] picked up a chair and threw it at YCC [redacted] striking her. She then proceeded to to push the table that separated her from YCC [redacted] YCC [redacted] attempted to prevent resident [redacted] to reach YCC [redacted] however her momentum was such that she was able to knock YCC [redacted] down. Resident [redacted] then grabbed a hold of YCC [redacted] hair, YCC [redacted], YCC [redacted] and me were able to control resident [redacted] hands and mechanical restraints were applied, but not before she was able to pull some of YCC [redacted] hair. I noticed a cut on YCC [redacted] head and she was bleeding.

While resident [redacted] was on the ground YCC [redacted] arrived as well as MOSO [redacted] Resident [redacted] was instructed to sit down on a chair which she did initially. She then began being verbally abusive towards resident [redacted] she began posturing up. YCC [redacted] intervened and told her to sit down, she refused and began being verbally abusive to YCC [redacted]. When she came towards him, he used a slew-foot to but her back on the ground. MOSO [redacted] then instructed us and YCC [redacted] to escort resident [redacted] back to the unit.

Signature of Reporting Staff: [redacted] Date: [redacted]

Comments of M.O.S.O./Supervisor:

Acknowledged. Report is duplicated for the same date. See comments under author [redacted] Oct 22/14

Administrative Comments:

Signature of M.O.S.O./Supervisor: [redacted] Date: [redacted]

Further Action Required: (for administration use only)

Signature of Administrator or Designate: [redacted] Date: [redacted]
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR

Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/10/22 Time of Incident: 07:00 PM YCMS Incident # 17857
Location of Incident: OUTSIDE UNIT #1
Resident(s) Name and File #: [Redacted]

Staff on Duty and Deployment: [Redacted]

Witnesses: [Redacted]

SECTION "B"

Type of Incident:
Verbally Abuse Staff
Assault on Staff
Non Compliance With Direction

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

AT 7:00PM While escorting [Redacted] to Unit # 1 . [Redacted] agreed to walk willingly with out problem . When we got outside she decided to kick the football around then tried to run from staff . Staff blocked [Redacted] from running and she then turned on Mr [Redacted] Grabbing him by the Chest . Both staff and [Redacted] fell to the ground Code #2 was called Staff responded . [Redacted] was Mechanically restrained and brought to Unit #1 ,Placed in room # 2106.

Signature of Reporting Staff: [Redacted] Date: [Redacted]

SECTION "C"

Special Action Taken:
Mechanically Restrained
SECTION "C"

Special Action Taken:
  Isolated
  Time Out 24 Hours

Comments of M.O.S.O./Supervisor:
  Acknowledged.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ________________________ Date: ____________

Further Action Required:  (for administration use only)

Signature of Administrator or Designate: ________________________ Date: ____________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR
Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/10/22 Time of Incident: 07:00 PM
Location of Incident: COURTYARD
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Verbally Abuse Staff
Assault on Staff
Non Compliance With Direction
24 Hours Time Out

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approximately 1900 [REDACTED] was being escorted from unit 2 back to unit 1. [REDACTED] had agreed to walk over willingly but when she got outside she started to kick at a football and then tried to run. Staff tried to block [REDACTED] and she turned around grabbing YCC [REDACTED] in the chest area causing the two of them to fall to the ground. A Code 2 was called, staff responded and [REDACTED] was mechanically restrained. [REDACTED] was escorted to unit 1 and placed in her room, all the while she was cursing at staff in English and in her own language.

Signature of Reporting Staff: ___________________________ Date: ___________________________

SECTION "C"

Special Action Taken:
Mechanically Restrained
SECTION "C"

Special Action Taken:
Physically Restrained
Isolated
Time Out 24 Hours

Comments of M.O.S.O./Supervisor:
Acknowledged.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ____________

Further Action Required: (for administration use only)

Signature of Administrator or Designate: ___________________________ Date: ____________
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/10/26     Time of Incident: 06:20 PM
Location of Incident: UNIT 1
Resident(s) Name and File #: [Redacted]
Staff on Duty and Deployment:
[Redacted]
Witnesses: [Redacted]  [Redacted] UNIT 1 RESIDENT

SECTION "B"

Type of Incident:
Non Compliance With Direction

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.):

[Redacted] was given her Ipod to listen to so that she could walk around the unit which she is allowed to do for exercise. She became very loud, spinning her body around and crying out loud repeatedly. I approached her 3 times and spoke to her and explained that she had to change the song she was listening to and walk around the unit and quiet down or she would lose the Ipod. She continued to do the above therefore I approached her and asked for the ipod. She gave it to me and went to the TV.

[Redacted] than said she wanted to call her Mom. Mr [Redacted] put a call through and spoke to someone who informed him than [Redacted] Mom wasn't there [Redacted] when told this tried to grab the phone out of Mr [Redacted] hand. She was told to go to her room than she started to throw items off the unit table, code 2 called, [Redacted] pushed Mr [Redacted], & tried to punch him. Mr [Redacted] physically restrained [Redacted] and got her to the floor where she tried to kick him and myself. Staff responded and [Redacted] put in a vacant room.

[Redacted] was handcuffed and escorted to unit 2 for the night. While been escorted by Mr [Redacted] & Mr [Redacted] she tried to kick Mr [Redacted]. Once on unit 2 in a room while staff was removing her handcuffs she spit at staff several times.

Signature of Reporting Staff:  [Redacted]  Date:  [Redacted]
SECTION "C"

Special Action Taken:
Mechanically Restrained
Isolated

Comments of M.O.S.O./Supervisor:
[Redacted] to serve eight hours secure isolation due to her unprovoked violent outburst toward staff.

R Braye

Administrative Comments:

Signature of M.O.S.O./Supervisor: ____________________________ Date: ____________________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: ____________________________ Date: ____________________
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/10/26       Time of Incident: 06:25 PM       YCMS Incident # 17876
Location of Incident: UNIT 1

Resident(s) Name and File #:  

Staff on Duty and Deployment:  

Witnesses:  

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At 1825 [redacted] demanded to use the phone to call her mother, call was placed by me. At that time mother not home so the phone call was ended. I tripped to grab the phone from me as I put the phone down and became very upset, she started to throw her water bottle and all the paper and pens form a table toward me and around the unit, code 2 called at that time. [redacted] then proceeded to attack me, grabbing and punching at me and she succeeded in scratching my upper and lower lip causing some bleeding, at that time she was taken down to the floor by me and continued to kick and punch until staff responded to the code 2 and restrained her and placed her in her room. It was then decided to move her to unit 2. Hand cuffs was applied and [redacted] was then escorted to unit 2.

Signature of Reporting Staff: ___________________________ Date: ___________________________

SECTION "C"

Special Action Taken:
SECURE ISOLATION 3 HOURS OR MORE
Comments of M.O.S.O./Supervisor:

[Redacted] will serve eight hours secure isolation for her violent and assaultive behavior towards staff.

R Bray

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ________________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: ___________________________ Date: ________________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR

Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre

Date of Incident: 2014/10/26 Time of Incident: 06:49 PM

Location of Incident: UNIT 1 AND COURT YARD

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

a code 2 on 1 As we, Mr. [redacted] and I [redacted], were escorting Mr. [redacted] back to unit 2 for the night, As we were walking over to unit 2 [redacted] made a kick at me (Mr. [redacted]). Also as we were releasing the handcuffs, Mr. [redacted] spat on me and also at Mr. [redacted] twice.

Signature of Reporting Staff: [redacted] Date: [redacted]

SECTION "C"

Special Action Taken:
Other (specify in Comments)
Comments of M.O.S.O./Supervisor:

[Redacted] will serve eight hours secure isolation for her violent and assaultive behavior towards staff. I would also suggest that [redacted] be prohibited from the dining hall—she was overheard making threats towards resident [redacted].

R Brayc

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________ Date: ____________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: ___________________ Date: ____________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR
Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/10/26        Time of Incident: 06:50 PM         YCMS Incident # 17874
Location of Incident: UNIT 2
Resident(s) Name and File #: [Redacted]

Staff on Duty and Deployment: [Redacted]

Witnesses: [Redacted]

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At the above time, Mr. [Redacted] called me on unit 3 to assist in mechanically and physically restraining resident [Redacted] and moving her from unit 1 to unit 2 after her incident. On the way to the unit she kicked Mr. [Redacted] in the leg. After getting her into room 2212, we began to remove her handcuffs. She then spat on Mr. [Redacted] back. She also tried to spit on me twice.

Signature of Reporting Staff: ___________________________ Date: ___________________________
Comments of M.O.S.O./Supervisor:

Resident will serve eight hours secure isolation for her unprovoked violent outburst towards staff members.

R Braye

Administrative Comments:

Signature of M.O.S.O./Supervisor: ____________________________ Date: ____________________________

Further Action Required:  (for administration use only)

Signature of Administrator or Designate: ____________________________ Date: ____________________________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR
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YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/11/27 Time of Incident: 08:45 PM YCMS Incident # 17947
Location of Incident: COURTYARD

Resident(s) Name and File #: 

Staff on Duty and Deployment: 

Witnesses: 

SECTION "B"

Type of Incident: Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approximately 2045 while Unit 1 was in the courtyard, resident asked YCC could we go back inside. YCC said that they should walk another while. said no so we started to proceed to back to unit 1. On the way back to the unit changed her mind and said she didn't want to go back in. YCC said that we were going back inside and kept saying no she didn't want to. I, YCC told that we were going back inside and she continued to argue. grabbed YCC and starting punching her in the face and head, and put her on the ground. YCC called a code and ran to help YCC. I removed from and punched me twice, in the nose and in the head. Then attacked YCC again. Staff responded, was mechanically and physically restrained. She was escorted to Unit 2A and placed in room 2209.

Signature of Reporting Staff: ________________________________ Date: ________________________________

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SECTION "C"

Special Action Taken:
  Mechanically Restrained
  Physically Restrained
  Isolated

Comments of M.O.S.O./Supervisor:

Resident [Redacted] was escorted to unit two by Ms. [Redacted] and Mr. [Redacted] and placed in secure isolation on side 'B'. Ms. [Redacted] was taken to the main building and than taken to the Newhook Clinic by Ms. [Redacted]. Mr. Head and the RCMP were notified of the situation. Resident [Redacted] will remain in secure isolation until her case team can review the situation on Friday, November 28th.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ______________________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: ______________________ Date: ______________________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR

Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/11/27 Time of Incident: 08:45 PM YCMS Incident # 17949
Location of Incident: COURTYARD NEAR UNIT 1 FRONT ENTRANCE

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approximately 2045 1 YCC [REDACTED] was walking towards unit 1 from unit 3 when a code 2 was called in the courtyard. I immediately ran for assistance in which I seen resident [REDACTED] on top of YCC [REDACTED] on the ground near the unit 1 entrance of the courtyard. I immediately removed [REDACTED] off of [REDACTED] onto her back to the ground. YCC [REDACTED] and [REDACTED] responded shortly thereafter and both myself and YCC [REDACTED] mechanically restrained [REDACTED] and escorted her to unit 2 room 2209.

Signature of Reporting Staff: ____________________________ Date: ____________________________

SECTION "C"

Special Action Taken:
Mechanically Restrained
Physically Restrained
Isolated
Comments of M.O.S.O./Supervisor:

Resident [redacted] placed in secure isolation on unit two. Ms. [redacted] taken to the Newhook Clinic. Resident to remain in secure isolation on unit two until case plan meets tomorrow.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ___________________________

Further Action Required: (for administration use only)

Signature of Administrator or Designate: ___________________________ Date: ___________________________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/11/27 Time of Incident: 09:55 PM YCMS Incident # 17951
Location of Incident: UNIT 2A
Resident(s) Name and File #: 
Staff on Duty and Deployment: 
Witnesses: 

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)
At approximately 21:55, resident [redacted] was out to the washroom. Upon exiting the washroom, as she passed yce [redacted], she swung her fist at yce [redacted] and struck her in the face. Resident was escorted to her room, and the door was closed. [redacted] then started with verbal abuse. Moso [redacted] was informed.

Signature of Reporting Staff: 
Date: 

SECTION "C"

Special Action Taken:
Isolated
Comments of M.O.S.O./Supervisor:
Acknowledged. RCMP will be informed of this assault as well. Resident to remain in secure isolation pending case team decisions.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________  Date:  ____________

Further Action Required:  (for administration use only)

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________________________________________________________________________

Signature of Administrator or Designate: ___________________________  Date:  ____________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR
Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/11/27  Time of Incident: 08:45 PM  YCMS Incident # 17953
Location of Incident: COURTYARD

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff
Injury

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At aprox 2045 unit 1 was outside , wanted to go in , suggested that we walk a little more , wasn't content to do that she wanted to go in . So the unit & staff started to walk towards unit 1. Stated she wanted to stay out I said No and that it was decided that we go in . With that flicked her glove in my face and started to punch , grab , and push me to the ground punching me numerous of times while grabbing my hair. As I was trying to keep her off me I heard say something to in which than left me alone and started to attack punching her also . As I was getting up off the ground left and came back at me pushing me back down on the ground on my back where she continued to pound on me punching me in the head delivering a major punch to my left eye.
I was seen by a Doctor at the Newhook clinic regarding this vicious attack and punch to my left eye as I am seeing floaters and the bridge of my nose is swollen.

Signature of Reporting Staff: ____________________________ Date: ______________
SECTION "C"

Special Action Taken:
- Mechanically Restrained
- Physically Restrained
- Isolated

Comments of M.O.S.O./Supervisor:
Resident placed in secure isolation on unit two. Ms. [redacted] taken to the Newhook Clinic. Mr. Head and RCMP contacted. Resident to remain in secure isolation until case team meets tomorrow.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ___________________________

Further Action Required: (for administration use only)

Signature of Administrator or Designate: ___________________________ Date: ___________________________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/11/27 Time of Incident: 08:55 PM YCMS Incident # 17955
Location of Incident: 2A
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Other
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approximately the above date and time YCC and YCC the writer, left out to use the washroom from Secure Isolation on unit 2A. When she came out of the washroom she glared at me then punched me in the face. She was escorted to her room quickly and her door was closed without further incident. She then called me various names and said I should die. Most notified.

Signature of Reporting Staff: ___________________________ Date: ___________________________

SECTION "C"

Special Action Taken:
Other (specify in Comments)
Comments of M.O.S.O./Supervisor:
Resident to remain in secure isolation until decision by her case team.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ___________

Further Action Required: (for administration use only)

Signature of Administrator or Designate: ___________________________ Date: ___________
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/12/08 Time of Incident: 09:03 PM YCMS Incident # 17974
Location of Incident: UNIT 2B
Resident(s) Name and File #: [Redacted]
Staff on Duty and Deployment: [Redacted]
Witnesses: [Redacted]

SECTION "B"

Type of Incident:
Assault on Staff
Injury

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approximately 2100 I, YCC [Redacted], was sitting on Unit 2A when I heard screams coming from side B. Staff instructed side A resident to go to his room and I immediately ran to Side B through the adjoining door where I saw Resident [Redacted] attacking YCC's [Redacted] and [Redacted]. I attempted to pull [Redacted] away from them and screamed for her to stop. I felt like I was stumbling as I tried to restrain her and YCC's [Redacted] and [Redacted] came to my aid and we all fell to the floor while [Redacted] continued to fight and would not let go of [Redacted] hair. A code 2 was called in the midst of this and staff responded successfully restraining her and putting her in her room.

Signature of Reporting Staff: [Redacted] Date: [Redacted]
SECTION "C"

Special Action Taken:
  Physically Restrained
  Isolated

Comments of M.O.S.O./Supervisor:
  See Briefing Note

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ___________________________

Further Action Required:  (for administration use only)
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Signature of Administrator or Designate: ___________________________ Date: ___________________________
GOVERNMENT OF  
NEWFOUNDLAND  
AND LABRADOR  
Department of Justice 
YOUTH CORRECTIONS  

SECURE CUSTODY/REMAND INCIDENT REPORT  

SECTION "A"  

Name of Facility: Newfoundland and Labrador Youth Centre  
Date of Incident: 2014/12/08  
Time of Incident: 09:00 PM  
Location of Incident: UNIT 2B  
Resident(s) Name and File #:  
Staff on Duty and Deployment:  
Witnesses:  

SECTION "B"  

Type of Incident:  
Assault on Staff  
Injury  

IF ESCAPE OR UAL, (A) Length of Absence (Days):  
(B) Still at Large:  

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)  
At the above noted date and time, I was sitting on Side 2A. I heard screams coming from Side B. I immediately put the resident in his room and then went to Side B through the adjoining door. When I arrived YCC's [Redacted], [Redacted], and [Redacted] were in a struggle with [Redacted].  
Through the struggle we all fell to the floor. [Redacted] was restrained and placed in her room. [Redacted] sustained severe injuries to the point that the manager felt it was necessary to call an ambulance.  

Signature of Reporting Staff:  
Date:  

SECTION "C"  

Special Action Taken:  
Mechanically Restrained
Comments of M.O.S.O./Supervisor:
See Briefing Note

Administrative Comments:

Signature of M.O.S.O./Supervisor: ____________________________ Date: ____________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: ____________________________ Date: ____________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR
Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/12/08  Time of Incident: 09:00 PM  YCMS Incident # 17976
Location of Incident: UNIT 2B
Resident(s) Name and File #: [redacted]
Staff on Duty and Deployment: [redacted]
Witnesses: [redacted]

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

Responded to code 2 unit 2. When I arrived on the unit [redacted] was held on the floor by staff. I assisted [redacted] in applying mechanical restraints. Once the restraints were applied [redacted] and I moved the resident to room 2205. Mechanical restraints were removed.

Signature of Reporting Staff: [redacted]  Date: [redacted]

SECTION "C"

Special Action Taken:
Mechanically Restrained
Comments of M.O.S.O./Supervisor:
See Briefing note

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: __________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: ___________________________ Date: __________
SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/12/08    Time of Incident: 09:00 PM    YCMS Incident # 17977
Location of Incident: UNIT 2
Resident(s) Name and File #: ...
Staff on Duty and Deployment:
Witnesses: ...

SECTION "B"

Type of Incident: Other

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

In addition to my previous incident report, let it be noted that YCC sustained severe injuries which required an ambulance being called to escort her to the local clinic. YCC also sustained injury and went along in the ambulance to be examined at the clinic.

Signature of Reporting Staff: ___________________________ Date: ______________
Comments of M.O.S.O./Supervisor:
See Briefing Note
Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ___________________________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: ___________________________ Date: ___________________________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/12/08 Time of Incident: 09:00 PM YCMS Incident # 17978
Location of Incident: UNIT 2B

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)
At approximately 2100 hrs I, YCC [redacted], was on break in the main building when I heard a code 2 called on unit 2. When I arrived on unit 2 [redacted] was physically restrained by YCC [redacted] and I and YCC [redacted] assisted in putting the handcuffs on her. [redacted] was then placed in room 2105. YCC [redacted] sustained injuries so severe that an ambulance was called to take her to the clinic. YCC [redacted] also sustained injuries and went in the ambulance.

Signature of Reporting Staff: __________________________ Date: __________________________

SECTION "C"

Special Action Taken:
Mechanically Restrained
Physically Restrained
SECTION "C"

Special Action Taken:  
Isolated

Comments of M.O.S.O./Supervisor:  
See Briefing Note

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ___________________________

Further Action Required:  (for administration use only)

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Signature of Administrator or Designate: ___________________________ Date: ___________________________
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2014/12/08       Time of Incident: 09:00 PM  YCMS Incident # 17979
Location of Incident: UNIT 2B
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:
Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approx. 21:00 hrs a code 2 was called but the call was not clear and it wasn’t clear where to respond to the emergency. I immediately headed for the units from the main building and before I reached cottage one the code was recalled and it was clear the assistance was needed on unit 2. I could hear screams over the portable radio while on route to unit 2. By the time I arrived to unit 2b YCC staff had resident [redacted] on the floor and were placing cuffs on her. Ms. [redacted] was leaning against the unit wall, visibly beaten and dazed. I immediately went to her aid and after a very quick observation I contacted central control and requested an ambulance be sent to the facility ASAP. Ms. [redacted] was by Ms. [redacted] side and YCC [redacted] came over to assist Ms. [redacted]. By this time resident [redacted] was in cuffs. I then moved over to assist Mr. [redacted] move resident [redacted] to her room. Mr. Head was contacted as was the RCMP. Due to the various issues that ad to be delt with resident [redacted] Guardian was not contacted as it was too late by the time everything was straightened away.

Two staff were injured during the incident, Ms. [redacted] reported hurting her hand and was sent to the clinic and YCC [redacted] went to the clinic in an ambulance, she was beaten up bad and in my view needed immediate medical attention.

Signature of Reporting Staff: [redacted] Date: [redacted]

SECTION "C"

Special Action Taken:
- Medical Treatment Required
- Physically Restrained
- Isolated

Comments of M.O.S.O./Supervisor:
- Acknowledged
- Briefing Report forwarded to Sr. Management on chronological listing of actions taken.
- Resident physically and mechanically restrained and Isolated.
- Case team to review incident in the morning and determine course of action to be taken.

Administrative Comments:

Signature of M.O.S.O./Supervisor: [redacted] Date: [redacted]

Further Action Required: (for administration use only)

Signature of Administrator or Designate: [redacted] Date: [redacted]
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2015/02/17 Time of Incident: 10:05 AM YCMS Incident # 18079
Location of Incident: CHAPEL MAIN BUILDING
Resident(s) Name and File #: 
Staff on Duty and Deployment: 
Witnesses: OTHER YCC'S ATTENDING PRESENTATION

SECTION "B"

Type of Incident: Assault on Staff
Non Compliance With Direction

IF ESCAPE OR UAL, (A) Length of Absence (Days): 
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At the above noted time and date, the above resident was attending a dietary presentation with her peers and appropriate staffing in the chapel of the main building. was not paying attention. She started to pick at Miss ; touching her hair, hands and was with a fist banging on the arm of her chair. The writer asked her to pay attention which she did for a few minutes and then began repeating the same behaviors. went over to her and in a professional and courtious manner began to ask to refrain from her behaviour and pay attention. Before completed his sentence, Res with fisted hand punched him in the face, at which time, his glasses made a cut in his nose. Resident was physically and mechanically restrained by YCC and YCC and returned to unit 2 and placed in secure isolation. MOSO notified. Maximum SI recommended as this is several incidents involving staff assault

Signature of Reporting Staff: 
Date: 
SECTION "C"

Special Action Taken:
Mechanically Restrained
SECURE ISOLATION 3 HOURS OR MORE

Comments of M.O.S.O./Supervisor:
Acknowledged. [Redacted] to serve 12 hours SI.
P. Mahoney

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ____________

Further Action Required: (for administration use only)

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__________________________________________________________
__________________________________________________________

Signature of Administrator or Designate: _____________________ Date: ____________
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2015/02/17 Time of Incident: 10:05 AM YCMS Incident # 18080
Location of Incident: MAIN BUILDING, CHAPEL
Resident(s) Name and File #: [redacted]

Staff on Duty and Deployment: [redacted]
Witnesses: [redacted] UNIT 6 STAFF.

SECTION "B"

Type of Incident:
Verbally Abuse Staff
Assault on Staff
Non Compliance With Direction

IF ESCAPE OR UAL,
(A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

On this noted date and time while in the chapel listening to a dietary presentation, [redacted] was asked to behave on a couple of occasions First by YCC [redacted] second by YCC [redacted]. She began to play with Ms. [redacted] hair to which Ms. [redacted] had addressed. She began banging on the chair with her fist. YCC [redacted] asked [redacted] to behave or she would have to go back to the unit, before his sentence was finished, with a list she hit YCC [redacted] in the face [redacted] was mechanically restrained and escorted back to unit 2b and placed in room 2205. She was verbally abusive as well. When back on the unit [redacted] realized his nose had been cut by his glasses when [redacted] punched him. Moso [redacted] notified. Maxium S/I recommended.

Signature of Reporting Staff: [redacted] Date: 

SECTION "C"

Special Action Taken:
Mechanically Restrained
SECTION "C"

Special Action Taken:
   Physically Restrained
   SECURE ISOLATION 3 HOURS OR MORE

Comments of M.O.S.O./Supervisor:
   Acknowledged.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ________________________ Date: ____________________

Further Action Required: (for administration use only)

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__________________________________________________________

Signature of Administrator or Designate: ________________________ Date: ____________________
Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2015/02/17  Time of Incident: 10:05 AM  YCMS Incident # 18081
Location of Incident: CHAPEL AND COURT YARD
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Verbally Abuse Staff
Assault on Staff
Non Compliance With Direction

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

while supervising the group in the chapel i noticed [redacted] wasn't being very cooperative and continued to talk during the presentation. she was constantly picking at Ms. [redacted] and rocking her chair back and forth, and speaking out loud, after staff asked her to pay attention i approached [redacted] and tapped on her shoulder to get her attention she turned to look at me and as i was asking her to stop talking and pay attention or she would lose points for her behaviour she punched me in the eye. where i was wearing glasses it resulted in a small cut on the bridge of my nose. along with [redacted] i restrained her and she was handcuffed and escorted to unit 2. as we were escorting her back to unit 2 she tried to spit at me so she was further restrained and then escorted to unit 2. once on unit 2 she was placed in her room without further problems. recommend a minimum of 3 hrs s/i.

Signature of Reporting Staff:  

Date:  

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SECTION "C"

Special Action Taken:
  Mechanically Restrained
  Physically Restrained
  Isolated

Comments of M.O.S.O./Supervisor:
  Acknowledged.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ____________

Further Action Required:  (for administration use only)

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Signature of Administrator or Designate: ___________________________ Date: ____________
GOVERNMENT OF  
NEWFOUNDLAND  
AND LABRADOR  
Department of Justice  
YOUTH CORRECTIONS  

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre  
Date of Incident: 2015/02/17  
Time of Incident: 10:05 AM  
YCMS Incident # 18082  

Location of Incident: CHAPEL  

Resident(s) Name and File #:  

Staff on Duty and Deployment:  

Witnesses:  

SECTION "B"

Type of Incident:  
Assault on Staff  

IF ESCAPE OR UAL,  (A) Length of Absence (Days):  
(B) Still at Large:  

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)  

[Redacted] was talking during the Kids Eat Smart presentation by [Redacted] [Redacted] approached [Redacted] from the left side to whisper to her to be quiet. He gave her a fright. He backed away for a second then proceeded to tell her to be quiet. She screamed 'I hate you' and reached up with her left hand and back slapped him on the right side of his face. At this point she was physically restrained to prevent and further injury to anyone. Once handcuffed she left the chapel without incident telling [Redacted] that she didn't like him. [Redacted].  

Signature of Reporting Staff:  

Date:  

SECTION "C"

Special Action Taken:  
Mechanically Restrained  
SECURE ISOLATION 3 HOURS OR MORE  

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Comments of M.O.S.O./Supervisor:

Acknowledged.
P. Mahoney

Administrative Comments:

Signature of M.O.S.O./Supervisor: __________________________ Date: __________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: __________________________ Date: __________
SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre

Date of Incident: 2015/02/17       Time of Incident: 10:05 AM       YCMS Incident # 18083

Location of Incident: CHAPEL

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

Resident was talking during a presentation by from Kids Eat Smart and YCC leaned in to speak to . Resident seemed a little startled and YCC backed away for a moment and when he leaned in a second time to speak to resident she back-handed YCC in the face. YCC restrained resident along with assistance from YCC's, , and . Resident exited the chapel without further incident. Report written at the request of MOSO.

Signature of Reporting Staff: ___________________________ Date: ___________________________
Comments of M.O.S.O./Supervisor:
Acknowledged
P. Mahoney

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________  Date: __________

Further Action Required:  (for administration use only)
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Signature of Administrator or Designate: ___________________________  Date: __________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR

Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2015/02/17
Time of Incident: 10:05 AM
Location of Incident: CHAPEL

Resident(s) Name and File #: [Blanked]

Staff on Duty and Deployment:

[Blanked]

Witnesses: [Blanked]

SECTION "B"

Type of Incident:
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

During a presentation in the chapel by Kids Eat Smart, resident [Blanked] continuously spoke aloud disrupting the group. Staff asked her to be quiet repeatedly. YCC [Blanked] then moved to her left side and tapped her on the shoulder and politely asked her to stop talking. Resident [Blanked] turned to her left and told him to get away while at the same time punching him in the face with the back of her left fist. Resident [Blanked] was restrained and handcuffed before being escorted from the room.

Signature of Reporting Staff: [Blanked]
Date: [Blanked]

SECTION "C"

Special Action Taken:
Mechanically Restrained
SECURE ISOLATION 3 HOURS OR MORE
Comments of M.O.S.O./Supervisor:

Acknowledged.
P. Mahoney

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ___________________

Further Action Required:   (for administration use only)

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Signature of Administrator or Designate: ___________________________ Date: ___________________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR
Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2015/02/23 Time of Incident: 04:00 PM
Location of Incident: UNIT 6

Resident(s) Name and File #: 

Staff on Duty and Deployment: 

Witnesses: 

SECTION "B"

Type of Incident:
Other
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:
Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

I was asked by MOSO to go to unit 6 as a few residents were going in S/I. We removed the items in resident room. We then proceeded to Move Resident from room 6108 to room 6106. During that process, resident became very upset with staff when we asked that he put his belongings out. He threw his bag of belongings at YCC, and he then made a move to attack him punching him in the face. A code was called and YCC's responded. Mechanical restraints were applied. Resident calmed down shortly after and the restraints were taken off. After a short while resident was shouting threats. When I get out of here and he's working I'm kicking his ass & snapping his neck.

He was banging on the door and attempted to pull his door open from the bottom.
He eventually calmed down and came out at 17:20 to use the washroom and get his supper.

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SECTION "C"

Special Action Taken:
- Mechanically Restrained
- Physically Restrained
- Isolated

SECURE ISOLATION 3 HOURS OR MORE

Comments of M.O.S.O./Supervisor:

Resident will be consequence as per BES and serve secure isolation until bedtime for a total of six(6) hours.

Administrative Comments:

Signature of M.O.S.O./Supervisor: ______________________ Date: ______________________

Further Action Required: (for administration use only)

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Signature of Administrator or Designate: ______________________ Date: ______________________
GOVERNMENT OF NEWFOUNDLAND AND LABRADOR
Department of Justice YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2015/02/23 Time of Incident: 04:00 PM YCMS Incident # 18101
Location of Incident: UNIT 3

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Verbally Abuse Staff
Assault on Staff

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

[Redacted text]

Signature of Reporting Staff: ___________________________ Date: ____________
SECTION "C"

Special Action Taken:
  Mechanically Restrained
  Isolated
  SECURE ISOLATION 3 HOURS OR MORE

Comments of M.O.S.O./Supervisor:
  Will serve six (6) hours secure isolation

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ____________

Further Action Required:  (for administration use only)

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Signature of Administrator or Designate: ___________________________ Date: ____________
SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2015/02/25 Time of Incident: 09:25 PM YCMS Incident # 18104
Location of Incident: UNIT 6
Resident(s) Name and File #: [Redacted]
Staff on Duty and Deployment: [Redacted]
Witnesses: [Redacted]

SECTION "B"

Type of Incident:
Verbally Abuse Staff
Other
Assault on Staff
Non Compliance With Direction
Suicide Referral

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:
Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

Resident [redacted] was told by staff that he was on 9:30 bedtime as he is on 1-1 level and had not advanced a level due to an incident he had earlier in the week. He began to be beligerant and said he was told he was on 10:30 bedtime. He said that he wasn’t going to bed at 9:30 and there wasn’t enough staff in the building, not even ten staff that could put him there. Moso [redacted] was notified. At this noted date and time Moso [redacted] arrived to speak with Resident [redacted] at the same time YCC [redacted] and YCC [redacted] were here to escort Res. [redacted] and Res. [redacted] to unit 2 for the night. Res. [redacted] was told to go to his room as it was 9:30 and he went there cursing. Due to res. [redacted] behaviour at this time, all other residents were ask to go to their rooms. Res. [redacted] then asked to go to the washroom. When he came back to the room he slammed the door in YCC [redacted] face. He was cursing and yelling at staff. I YCC [redacted] was standing in Res. [redacted] Door as he is on S/W when Moso [redacted] went into Res. [redacted] room. Res. [redacted] was calling staff names as they were trying to council him on his behaviour. He told Moso [redacted] to get the fuck out of his room you slut”. Res. [redacted] was calling all staff names and still cursing. He said when he gets out he will kill him refering to Mr. [redacted] by slashing his throat and burning his house down. Res. [redacted] said he was going to kill himself and he was then placed on suicide referral.

Signature of Reporting Staff: [redacted] Date: [redacted]

SECTION "C"

Special Action Taken:
- Charges Laid
- Physically Restrained
- Isolated
- Suicide Assessment Referral

Comments of M.O.S.O./Supervisor:
[redacted] is referring to resident [redacted] in this incident report.

Administrative Comments:

Signature of M.O.S.O./Supervisor: [redacted] Date: [redacted]

Further Action Required: (for administration use only)

Signature of Administrator or Designate: [redacted] Date: [redacted]
SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2015/02/25 Time of Incident: 09:25 PM YCMS Incident # 18105
Location of Incident: UNIT 6, ROOM 6105

Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
Verbally Abuse Staff
Other Assault

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

At approximately 21:20, I, Yce [redacted], received a phone call from unit 6 requesting assistance. Myself and Yce [redacted] responded, and upon entering unit 6 were informed by unit staff that resident [redacted] had made comments that he would be refusing to go to his room at bedtime. I approached resident [redacted] and began counselling him; told resident [redacted] that he would have to go to his room. All residents of unit 6 were told to go to their rooms by Moso [redacted] and resident [redacted] became verbally abusive before he went to his room.

Approximately 5 minutes later, Resident [redacted] asked to go to the washroom, and upon returning to his room became verbally abusive and when let into his room, resident [redacted] slammed the door on Yce [redacted] right arm. Resident [redacted] was restrained and once calm, staff exited his room. A large mark / bruise is present on Yce [redacted] right forearm.

Signature of Reporting Staff: ___________________________ Date: ___________________________
SECTION "C"

Special Action Taken:
   Physically Restrained

Comments of M.O.S.O./Supervisor:
   3 hrs secure isolation in the am

Administrative Comments:

Signature of M.O.S.O./Supervisor: __________________________ Date: __________________

Further Action Required:  (for administration use only)

Signature of Administrator or Designate: __________________________ Date: __________________
SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2015/02/25  Time of Incident: 09:30 PM  YCMS Incident # 18106
Location of Incident: UNIT 6
Resident(s) Name and File #: [redacted]

Staff on Duty and Deployment:

Witnesses: [redacted]

SECTION "B"

Type of Incident:
verbally Abuse Staff
Assault on Staff
Suicide Referral

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:
Narrative Description of incident (specific concise amount of persons involved, location, what happened, etc.)

At approximately 2120hrs YCC [redacted] contacted me in the MOSO's office she said that she informed resident [redacted] that he was on 9:30 bedtime. I could hear [redacted] yelling in the background. She said he was refusing to go to bed and was being very disrespectful. I told her I was on my way with medication and I would speak to him when I got there. Because he was so agitated I called unit 2 and requested they send someone over to unit six, as resident [redacted] can be very volatile. When we arrived on the unit I asked him what was going on, he began yelling at me that he was not on 930 bedtime and that I was nothing but a bitch. I explained that he shouldn't be talking to staff in this way, and he would have to go to his room. I then told the other residents to go to their rooms. Because there was 2 residents on suicide watch, [redacted] watched [redacted] in room 2209, and [redacted] watched [redacted] in room 2206. [redacted] went to his room and his belongings were removed. [redacted] asked to go to the washroom, while he was in there he was yelling and cursing on staff. When he returned to his room he tried to slam the door in YCC [redacted] face, Mr [redacted] put up his arm to protect his face and the door hit him in the right forearm. [redacted] was then physically restrained by YCC [redacted] and YCC [redacted]. When [redacted] calmed down he began yelling again and cursing on staff. He said that Mr [redacted] assaulted him and he wanted the police called into the building this minute. I explained that the police would be called, but probably would not be coming tonight. He then said that he was going to kill himself and showed myself and YCC [redacted] scratches on his left arm and said 'I have cut myself before and I can do it again.' He again began yelling and screaming calling me a 'shut.' and demanding we leave his room. He then put his head under his blankets. I offered him his medication he said he wasn't taking it until the police arrived. He began yelling at us to get out of the room. We left the room and closed the door, YCC [redacted] stayed in his window.

Signature of Reporting Staff: ___________________________ Date: ___________________________

SECTION "C"

Special Action Taken:
Physically Restrained
SECURE ISOLATION 3 HOURS OR MORE
Comments of M.O.S.O./Supervisor:
3 hrs secure isolation to be served in the AM

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ___________________________

Further Action Required: (for administration use only)

Signature of Administrator or Designate: ___________________________ Date: ___________________________
GOVERNMENT OF
NEWFOUNDLAND
AND LABRADOR
Department of Justice
YOUTH CORRECTIONS

SECURE CUSTODY/REMAND INCIDENT REPORT

SECTION "A"

Name of Facility: Newfoundland and Labrador Youth Centre
Date of Incident: 2015/02/25  Time of Incident: 09:30 PM  YCMS Incident # 18107
Location of Incident: UNIT 6
Resident(s) Name and File #:

Staff on Duty and Deployment:

Witnesses:

SECTION "B"

Type of Incident:
- Verbally Abuse Staff
- Other
- Non Compliance With Direction
- Suicide Referral

IF ESCAPE OR UAL, (A) Length of Absence (Days):
(B) Still at Large:

Narrative Description of Incident (specific concise amount of persons involved, location, what happened, etc.)

While on my break, [redacted] advised me of resident [redacted] refusing to do 21:30 bed time. I returned to the unit and staff [redacted] and [redacted] along with miss [redacted] followed me on the unit. We locked down the unit and went to his room. Asked to use the washroom a short while later. Still agitated as he returned to his room, he slammed the door as Mr. [redacted] was walking behind. Striking Mr. [redacted] in the process. Staff [redacted] along with Mr. [redacted] grabbed [redacted] and put him on the bed. [redacted] then threatened to charge Mr. [redacted] with assault. Became very verbally agressive towards Mr. [redacted] and also miss [redacted] for not calling the police at that time. [redacted] threatened to slash staff [redacted] throat. [redacted] also threatened to kill himself if things were not done according to him. When the time was right, [redacted] was then escorted to unit 2 for the night, and is now on watch.

Signature of Reporting Staff: __________________________  Date: __________________________
SECTION "C"

Special Action Taken:
  Mechanically Restrained
  SECURE ISOLATION 3 HOURS OR MORE

Comments of M.O.S.O./Supvisqr:
  3 hrs secure isolation to be served in the am

Administrative Comments:

Signature of M.O.S.O./Supervisor: ___________________________ Date: ________________

Further Action Required:  (for administration use only)

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________________________________________

________________________________________

Signature of Administrator or Designate: ___________________________ Date: ________________