COVID-19 in Juvenile Detention Facilities - Youth

In an effort to track COVID-19 cases within the local detention facilities, we are asking you to report COVID-19 activity within your juvenile detention facilities.

Please complete one form for each facility within your county.

The reporting period begins on Sunday at 12:00am and ends on Saturday at 11:59pm.

Please provide counts for the reporting period only. Do not provide a cumulative total.

County and Report Information

| County * |
|--|
| Please select your county. |
| Alameda ▼ |
| Reporting Person * |
| Please enter your full name. |
| |
| Email Address * |
| Please enter your email address. |
| |
| Facility Name * Please select the facility name. You may only select one facility at a time and will need to submit a separate form for each facility. |
| Select ▼ |
| Number of Youth in the Facility * |
| Total number of youth in the facility on the last day of the reporting period (Saturday). |
| |
| Reporting Period * |
| The reporting period begins on Sunday at 12:00am and ends on Saturday at 11:59pm. |
| July 19, 2020 - July 25, 2020 |

COVID-19 Rates in Youth

In this section, please report the total number of youth for each category.

Please provide one number only, do not include a range or additional narrative text.

If the number is between 1 and 10, put "<11" (including the less than symbol), do not report the actual number unless it is 0 or greater than 10.

| Youth Tested * Total number of youths who have been tested for COVID-19 during the reporting period. If the number is between 1 and 10, put "<11" (please include the less than symbol). |
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| |
| Total Youth Confirmed Positive * |
| Total number of youths who have tested positive for COVID-19 during the reporting period. If the number is between 1 and 10, put "<11" (please include the less than symbol). |
| |
| Youth Confirmed Positive at Intake (optional) |
| Of the youth confirmed, report the total number of youth whose test was administered during the intake process. If the number is between 1 and 10, put "<11". |
| |
| Youth Confirmed Positive First 14 Days (optional) |
| Of the youth confirmed, report the total number of youth whose test was administered within the first 14 days in custody, but not during intake. If the number is between 1 and 10, put "<11" (please include the less than symbol). |
| |
| Youth Confirmed Positive In Custody (optional) |
| Of the youth confirmed, report the total number of youth whose test was administered while they were already in custody. If the number is between 1 and 10, put "<11" (please include the less than symbol). |
| |

| Youth Hospitalized * Total number of youths who were hospitalized due to severity of COVID-19 symptoms. If the number is between 1 and 10, put "<11" (please include the less than symbol). |
|---|
| Estimated Youth Resolved * Total number of youth whose COVID-19 has resolved during the reporting period. If the numbe is between 1 and 10, put "<11" (please include the less than symbol). |
| Youth Deaths * Total number of youths whose death was related to COVID-19 during the reporting period. If the number is between 1 and 10, put "<11" (please include the less than symbol). |
| Additional Information (optional) If there is any additional facility-level information you would like to provide to share on our dashboard, please do so in the space provided. This may include, but is not limited to, additional information related to youth testing to provide context or a link to the county webpage where additional information about policies, procedures or additional data points related to managing COVID-19 in detention facilities may be obtained. |
| Check this box to acknowledge the data provided include only the facility indicated above. * |
| Send me a copy of my responses |