#### BOARD OF STATE AND COMMUNITY CORRECTIONS



February 7, 2024

Guillermo Viera Rosa, Chief Probation Officer Los Angeles County Probation Department 1601 Eastlake Avenue Los Angeles CA 90033

## CORRECTIVE ACTION PLAN – VERIFICATION OF COMPLIANCE – LOS PADRINOS JUVENILE HALL

Dear Chief Viera Rosa:

The 2023-2024 Comprehensive Inspection of the Los Padrinos Juvenile Hall was conducted between August 14, 2023, and August 18, 2023. On August 18, 2023, the Board of State and Community Corrections (BSCC) provided you with an Initial Inspection Report (IIR) notifying you of the following item of noncompliance with Title 15, California Code of Regulations at the Los Padrinos Juvenile Hall:

- 1. § 1321, Staffing
- 2. § 1322, Youth Supervision Staff Orientation and Training
- 3. § 1324, Policy and Procedures Manual
- 4. § 1325, Fire Safety Plan
- 5. § 1328, Safety Checks
- 6. § 1354.5, Room Confinement
- 7. § 1357, Use of Force
- 8. § 1358.5, Use of Restraint Devices for Movement and Transportation Within the Facility
- 9. § 1360, Searches
- 10.§ 1370, Education Program
- 11.§ 1371, Programs, Recreation, and Exercise
- 12.§ 1390, Discipline

On October 16, 2023, the BSCC received an approved Corrective Action Plan (CAP) for all outstanding items of noncompliance at Los Padrinos Juvenile Hall. The CAP indicated a completion date of January 10, 2024, for corrective action and compliance with all outstanding items of noncompliance.

On December 15, 2023, BSCC staff conducted an unannounced inspection at the facility to follow up on a concern presented to the BSCC Board related to the lack of programming. We met with the facility Bureau Chief and Senior Director and visited various units and met with youth. In the units we visited, we found the youth out of their rooms, in the day rooms participating in holiday, regular unit, and recreational activities.

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Youth were questioned regarding their involvement in rehabilitational programming, and youth reported that they were participating.

On January 10, 2024, the Los Angeles County Probation Department provided written verification that the corrective action had been completed for all areas.

During January 29 and February 3, 2024, BSCC staff conducted a follow-up inspection at Los Padrinos Juvenile Hall to verify completion of the CAP and compliance with the remaining above noted sections of Title 15.

Our review of policy, processes, and documentation indicates that Los Padrinos is **in compliance** with the following sections of Title 15:

# § 1358.5, Use of Restraint Devices for Movement and Transportation Within the Facility

We reviewed numerous use of force reports and observed that facility staff is not routinely utilizing handcuffs to secure youth during or after an incident. We were provided with three (3) incident reports in which handcuffs were utilized. While we were provided with documentation that an individual assessment was done at the time of the incident; this documentation appeared to be contained on a corrected report submitted five (5) to seven (7) days after the date of the incident. This information must be included on the original incident reports for the facility to remain in compliance.

Our review of policy, processes, and documentation indicates that Los Padrinos remains **out of compliance** with the following sections of Title 15:

## § 1321, Staffing

A staffing analysis was provided to BSCC staff; this analysis indicated the minimum staffing required to carry out the overall facility operation and its programming, to provide for safety and security of youth and staff and meet established standards and regulations.

Our review of documentation indicates that these minimum staffing numbers were not consistently met. Additionally, we observed that the reassigned field staff who were assigned to the facility to bolster staffing were removed from the facility. The facility's CAP, correction of the noncompliance, and continued compliance is dependent on these staff to meet minimum staffing requirements; without this complement, we are unsure how compliance will be achieved and be maintained.

## § 1322, Youth Supervision Staff Orientation and Training

A review of documentation indicates that while Youth Supervision Staff assigned to the facility have received appropriate facility specific orientation and training, the reassigned and deployed field staff assigned to the facility have not received this training as outlined in the CAP.

## § 1324, Policy and Procedures Manual

The facility provided an updated policy and procedure manual for review; however, we did not receive a facility-specific procedure guide as identified in the CAP. We received no information on a formalized training for the updated manual as noted in the CAP, nor were we provided with documentation of staff review or acknowledgement of this document as required by regulation.

## § 1325, Fire Safety Plan

The facility has provided a fire safety plan that includes the Department's three (3) East Region Camps as the sites for emergency evacuation. These camps, Camp Rockey, Camp Paige and Camp Afflerbaugh have a combined current bed capacity that is less than the total population of Los Padrinos, rendering this plan insufficient. We have provided technical assistance noting that there must be enough emergency beds at evacuation sites to house the entire population. A plan that includes the emergency housing for the entire population of Los Padrinos must be in place.

## § 1328, Safety Checks

A review of safety check documentation between January 11 and January 18, 2024 indicates that many safety checks were not completed in compliance with regulation or policy. Specifically, safety checks are not being conducted within 15 minutes of one another and are not random and varied. We found no evidence of that the Quality Assurance Team actions outlined in the CAP are occurring. Documentation of safety check audits were provided; however, they do not provide notice of policy violations or Special Incident Report documentation of the late checks or documentation of corrective action as indicated in the CAP and in policy.

#### § 1354.5, Room Confinement

There was no room confinement documentation available for our review for the dates between January 11 and 18, 2024. Through observations and interviews with youth and staff, we found that room confinement continues to occur, although it is not documented and remains out of compliance.

Interviews with youth indicate that youth continue to be placed in their rooms for various periods of time for a "cool down" after an incident; however, this room confinement is not documented, and we are unable to determine compliance. This practice, as described, is noncompliant with regulation.

Staff and youth report that youth are also routinely placed in their rooms following an incident while waiting to be transported to medical. This practice is documented; however, a review of available documentation indicates that the time that youth are in their rooms is not compliant with regulation and often exceeds the brief period of time necessary for "institutional operations."

Finally, during our walk-through of the facility, we observed in Units C and D (Intake) that several youth were in their rooms while only one youth was present in the

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dayroom. We were informed that the youth in the dayroom was 20 years old and could not be out with other youth on the unit. The youth in intake are routinely placed on these modified programs and are placed in room confinement while other youth are allowed out on the dayroom. This practice constitutes room confinement and is noncompliant with regulation. Staff responded to this observation by noting that they struggle with the physical plant and classification issues and in getting youth cleared to the housing units, so the youth are placed in their rooms on modified program.

We requested to review documentation of the audits of the CCTV that were required by the CAP to determine if room confinement was occurring but not being documented; this audit documentation was not provided to us.

It is significant to note that the facility's CAP included that the Department would send an updated instructional memo to include examples of room confinement and ensure that staff, supervisors, directors, and facility management were aware of room confinement and the procedures. We were provided with a memo that was distributed to staff on January 10, 2024, the final day of the corrective action period, that simply reiterates the room confinement policy but does not include in detail examples of noncompliant room confinement that continues to occur at the facility.

## § 1357, Use of Force

A review of documentation indicates that not all staff assigned to the facility have received the required training.

Policy Section 1002 States "All sworn officers that are authorized to utilize physical intervention techniques in the performance of their duties shall receive department-approved training (initial training and annual refresher training) on de-escalation, physical intervention, and chemical intervention/decontamination techniques prior to being authorized to utilize force."

The approved CAP indicated that updated training would conform to policy requiring 24-hour training: eight (8) hours on policy and 16 hours on hands-on techniques, further noting "The Department will determine that all staff have had appropriate training on use of force either the initial or refresher that conforms to the policy and § 1357." The CAP also stated the Department will implement a two (2) hour training on the appropriate use of OC Spray for all staff that have previously not had the training.

We reviewed use of force reports for the purpose of determining compliance for incident debriefs, parent contacts and for decontamination expectations; while parent contacts are routinely being made, supervisor review for the purposes of training is not occurring. Incident reports lack consistency and in some cases, clarity, regarding whether all required elements are being met.

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## § 1360, Searches

Special Incident Reports (SIRs) and the Facility Search Log for January 11 through 19, 2024, were provided for our review.

Facility policy requires that youth rooms and units are searched each shift. Two facility searches are to be conducted weekly, which should include the youths' rooms and property. Policy also requires that facility perimeters (inside and outside), the school, and other areas of the facility shall be routinely searched for any contraband, including weapons, as directed by the Assistant Superintendent. The documentation we reviewed indicates that K9, general facility, school, and perimeter searches are occurring; however, room and unit searches are not consistently being conducted each shift.

## § 1370, Education Program

Documentation of current attendance records from both Probation and Los Angeles County Office of Education (LACOE) was reviewed for the period of January 11 through 18, 2024. Attendance records were received from Probation and LACOE has been providing weekly attendance records by email for our review.

The documentation we reviewed indicated that youth are still routinely late to class and missing instruction time. Youth were "On Time" 51% of the time during the period reviewed and noted as "Late" 49% of the time. Late arrival was due to facility staff 76% of the time and due to school personnel 24% of the time.

Assistant Principal Wang confirmed that attendance has improved; however, the facility remains out of compliance with this regulation.

#### § 1371 Programs, Recreation and Exercise

We reviewed the Facility Activity Logs and sign in sheets for the units and Recreation Accountability Logs.

Activity logs and sign in sheets are not consistently documented and lack details to discern whether programming is routinely occurring. We found multiple occurrences where rehabilitational programs were not provided in some units or where the programming schedule was inconsistent with the proof of practice. Interviews with youth and staff indicate that youth are not always being provided with their full required hours of Title 15 mandated programing and activities.

There continues to be a lack of availability and lack of consistency of recreational activities. While a few activities have been added, we were informed that outside bureaus have been responsible for "adopting" a housing unit and developing recreational activities for the youth in that unit. This results in inconsistency in the types of activities available across the facility. For example, some units have pickleball or basketball courts, while others have no visible activities available. Most units do have access to gaming systems provided by probation; however, there are still a few units where staff have brought in systems or televisions on their own accord.

The activities offered at the facility appear to be the same as those that were previously offered. We understand that the facility is actively working on this issue; however, as of the inspection date, youth still do not have access to live or recorded television, they cannot watch live sports events or other pro-social television programming. All units can view movies on DVD; however, it was noted that some units did have access to either current movies through other means dependent on what staff or managers were willing to do for the youth. All youth should have equal access to an age-appropriate recreational program. Because of this, it is not possible to determine compliance with this regulation at this time; this is an ongoing issue and remains noncompliant.

We provided technical assistance on the recently implemented activity log; the log does not accurately document compliance with the regulation or align with the programs that are actually occurring. Updating this form will help meet and maintain compliance.

## § 1390, Discipline

The facility has implemented a new Behavior Management Process (BMP) in which most staff appear to be meeting the basic documentation expectations. However, the new program appears to have been implemented prematurely, without all planned incentives implemented. The facility and BMP team appear to be committed to working with the youth and building a successful program but are tied to the bureaucratic processes of the department and the procurement process. We were told items for incentives have been ordered but have not been received. For example, the program notes the Gold level youth will have access to electronics, yet there are none available beyond what the unit has for all level youth. The program notes there are stay-ups, work programs and other rewards and incentives available; however, these were not seen consistently across the facility. Most youth noted that they are put in their rooms at 830 for bedtime regardless of level.

The BMP process needs more time for proper implementation before the facility can be found compliant with this regulation.

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As you are aware, because Los Padrinos remains out of compliance with items of Title 15 following the corrective action plan period, the BSCC is required to make a determination of suitability at its next scheduled board meeting, February 15, 2024. (Welf. & Inst. Code, § 209, subd. (d).) Notice will be provided under separate cover.

Please email me at lisa.southwell@bscc.ca.gov or call (916) 322-1638 if you have any questions.

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Sincerely,

LISA SOUTHWELL Field Representative

Facilities Standards and Operations Division

## **Enclosures**

Cc: Presiding Judge, Los Angeles County Juvenile Court Chair, Juvenile Justice Commission, Los Angeles County

Chair, Board of Supervisors, Los Angeles County

County Administrator, Los Angeles County

Jocelyn Roman Senior Director, Superintendent Los Padrinos

Steven Cuevas, Director, Assistant Superintendent Los Padrinos

Dawyn Harrison, County Counsel, Los Angeles Office of the County Counsel

Tyson Nelson, Senior Deputy County Counsel, Los Angeles Office of the County

Counsel

Fesia Davenport, Los Angeles County Executive Officer