

April 9, 2025

Guillermo Viera Rosa, Chief Probation Officer
Los Angeles County Probation Department
9150 E. Imperial Hwy.
Downey, CA 90242

REINSPECTION OF THE LOS ANGELES COUNTY PROBATION DEPARTMENT LOS PADRINOS JUVENILE HALL

Dear Chief Viera Rosa:

Between March 17 - 27 and on April 4, 2025, the Board of State and Community Corrections conducted a reinspection of the Los Angeles County Probation Department's Los Padrinos Juvenile Hall (LPJH). This reinspection was conducted for multiple reasons, one being the January 21, 2025, request from your Department to determine if the facility had corrected the item of noncompliance with Title 15 sections 1321, Staffing from the October 14, 2024, determination of suitability. During this reinspection, the BSCC also monitored compliance with the outstanding item of noncompliance with section 1371, Programs Recreation and Exercise from the June 2024 targeted inspection and conducted a verification of compliance for the nine (9) remaining outstanding items of noncompliance from the October 2024 comprehensive inspection.

INSPECTION RESULTS

Section 1321, Staffing

We reviewed the following during our inspection:

- Daily Facility Report
- LPJH Shift Staffing Schedule
 - Both were replaced with an electronic schedule in mid-March (which did not provide information on when staff were coming on/off shift)
- LPJH Staffing Assessment Plan (December 2024)
- LPJH Record of School Movement
- LACOE Attendance Documentation
- LPJH Medical Appointment Documentation
- LPJH Video

Because of a recent shift to an electronic staffing system, which no longer provided information as to when staff came on/off shift, we have been unable to determine if the facility is regularly meeting their department established minimum staffing numbers according to the "LPJH Staffing Assessment Plan" dated December 2024. However, based on our assessment, the facility remains out of compliance with this section due to the continued

inability for the department to ensure that “there are an adequate number of personnel sufficient 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.” (Cal. Code Regs., tit. 15, § 1321, subd. (a).) and “ensure that no required services shall be denied because of insufficient numbers of staff on duty absent exigent circumstances.” (Cal. Code Regs., tit. 15, § 1321, subd. (b).)

Our review of documentation indicates that young people continue to be late to school due to staff shortages, sometimes by more than one hour. Documentation provided by the Los Angeles County Office of Education (LACOE) and by the department, indicates that youth continue to miss scheduled instruction time and are late to school due to lack of probation staff or a “staff shortage”. The documentation also noted classes were moved to the dayroom or were doubled up due to these same staffing issues. Documentation was received from Executive Manager Broom regarding external medical appointments, noting that the youth missed external medical appointments due to “staff shortages/transportation issues”. We noted at least nine (9) instances in February and March 2025 where youth were not taken to an outside medical appointment. Finally, we noted while reviewing documentation and correlating video that youth who were exposed to chemical agents are left unattended prior to decontamination or while still feeling the effects of chemical agents. This results in the continued finding of noncompliance for this section.

We continue to have concerns with the ability of the department to develop a long-term sustainable solution to address deficiencies with staffing. Facility staffing documentation continues to indicate that deployed staff are used to backfill youth supervision staffing, an indication that the department continues to rely on a solution that was intended to be a short-term solution as far back as 2022. While the department may use deployed staff to reach a numerical threshold, there is little question that the reliance on temporary staff that are not fully trained and serve irregularly contributes to services not being provided and a less safe facility.

The department shifted how it documented schedules and work assignments in mid-March, which contributed to our inability to properly assess whether the facility was meeting their own minimum staffing numbers. It is difficult to ascertain where staff assigned to a shift are ultimately posted from the documentation, and it is also unclear if a particular staff showed up to work that day or if they worked a partial shift.

It is clear from our review of available facility staffing documentation that ancillary posts are being left unfilled due to lack of available staff. We understand from discussions with facility supervisors that unfilled posts are often backfilled with staff that had originally been scheduled to work on a unit. This practice likely impacts the total number of available youth supervision staff on a given shift in a given unit. For instance, we reviewed documentation that indicated that “level” youth, i.e., youth that require 1:1 supervision per department policy, are being left uncovered on a shift for unit coverage elsewhere with no replacement staff being assigned to the impacted unit.

Section 1371, Programs, Recreation and Exercise

We reviewed the following during our inspection:

- Unit Activity Logs with backup documentation for March 5-19, 2025
 - Service Sign In Sheets (internal and external programs)
 - Large Muscle Exercise Refusal Forms
 - Special Incident Reports
- Quality Control Documentation (Tracker implemented December 2024)
 - Quality Control Process for Activity Logs.
 - Daily Activity Log Audits for time period reviewed
 - Los Padrinos Quality Control Tracker March 3-5, 2025(Activity Log)
- Video Review with Quality Control Team
 - An initial conversations were held with the Quality Control auditors who conduct the reviews and to ensure their process was understood.
 - Reviewed video footage to ensure consistency with notes.

During our review, we found that documentation for activities (Programs, Recreation, and Exercise) has improved and that youth are receiving the required time for each of these activities. We also spoke with youth who indicated that they were receiving opportunities for activities. This item has been corrected and is no longer noncompliant.

Nine (9) Items of Noncompliance from October 2024 Comprehensive Inspection

Section 1354.5 Room Confinement

Inspection Results: We observed multiple occurrences of youth being placed in their rooms for periods of time without documentation or adequate justification as to the circumstances. Several examples are as follows:

- 1. Uninvolved youth remain in their rooms after an incident such as a fight or an assault on staff for an extended period of time with no documentation of the time they were placed in their rooms or let back out. We also noted incidents which lacked documentation to reasonably justify the amount of time youth spent in their rooms.*
- 2. Youth routinely are held in their rooms for more than an hour at shift change (i.e., in excess for what is required for normal institutional operations).*
- 3. Youth are routinely sent to their room before 8pm for showers and are not brought back out for programming.*

We also noted that when there is a lack of staffing, there is an increase in room confinement. For instance, we found some instances where youth dined in their rooms or unit operations were delayed due to lack of unit staff in the building. Additionally, we found youth were kept in their rooms and were delayed being brought to medical.

We reviewed the following during our inspection:

- Daily Schedule Audit

- Room Confinement Tracking and Audit Log
- Supervisor Checklist (Includes Room Confinement)
- Training Sign in Sheets
 - Director/Supervisor Meeting:
 - January 29, 2025, January 29, 2025, February 26, 2025, and February 26, 2025
 - Unit Training Records
 - Unit B: February 25, 2025, and Unit X: February 27, 2025,
- Identified Room Confinement Subject Matter Expert
- Room Confinement Standard Operating Procedure
- Use of Force Reporting writing STC Course Curriculum
- 2025 Room Confinement Tracking Form
- Daily Unit Schedule
- Incident Report Log
- Self-Separation Log March 5, 2025-March 12, 2025
- Room Confinement Documentation
 - February Room Confinement Incident
 - March Room Confinement Incidents (March 3 – 12, 2025)

Our review indicates that youth continue to be placed in their rooms without clear documentation as required by department policy and Title 15. We reviewed several Supplemental Incident Reports (SIR) that indicated that youth were placed in their rooms without documentation to justify placement. In one instance, when a youth was placed in room confinement according to policy, the documentation for both self-separation and room confinement were completed after the room confinement had occurred and the youth had been returned to program. There appears to be continued misunderstanding about the difference between voluntary self-separation (that is not room confinement) and staff ordering a youth to “self-separate” in a locked room.

This item has not been corrected and remains out of compliance.

Section 1355. Institutional Assessment and Plan

Previous inspection results: Assessments are being conducted between five (5) and 13 days after admission; case plans are being completed before the assessment and do not consistently outline objectives and timeframes; and periodic reviews are being completed the same day that case plans are developed; policy requires that they are completed one week after the plan is completed and 30 days thereafter.

We reviewed the following during our inspection:

- Assessment and Orientation Recruitment
 - Emails to successful recruitment candidates for Assessment Orientation Officer
- Training Sign in Sheets

- Directors, Supervisors, and Assessment Orientation Officers Trainings, dated February 13, 2025, and February 26, 2025.
- Documents from Units A,B, C, D, E, F, G, U, S and Y2. Trainings are held February 27, 2025, March 2, 2025, and March 5, 2025.
- Youth Packets from March 5, 2025 to March 12, 2025.
- Additional packets from March 13, 2025- March 22, 2025.

Our review of the documentation and conversations with staff indicate that this item has been corrected and is no longer out of compliance. Assessments are now being completed within the timeframe required by both policy and regulation; case plans and periodic reviews are also being completed in compliance with policy and regulation.

Section 1357. Use of Force

Previous inspection results: The agency's comprehensive quality assurance and review process, including the Facility Compliance Team and the Force Intervention Response Support Team (FIRST) was disrupted in July 2024. The FIRST team, despite being required by policy, has been disbanded. The debriefs documented by supervisors at the time of the incident are being "corrected" several weeks after the initial reports had been written; we are unable to determine if debriefs are being conducted at the time of the incident due to the inconsistency in documentation.

Youth were left unattended prior to being fully decontaminated or prior to the one hour of constant visual as required by policy. Additionally, the facility routinely fails to follow departmental decontamination policy.

We reviewed the following during our inspection:

- Decontamination Kit Information
 - Decontamination Kits consisting of a spray bottle, cleaning towels and 4 Sudecon wipes. 1 kit has been provided per control center.
- QC Monthly Audit
 - Guides
 - Physical Intervention Packet Review Checklist
 - Policy
 - Directive 1536: Detention Services Bureau Issue Date: 3/4/25
- Training Sign in Sheets
 - Director/Supervisor Meeting:
 - February 26, 2025 (19 Signatures)
 - Other Trainings:
 - Use of Force (10 signatures)
 - Use of Force SME's

During our review, we found that the Department has corrected the issues with debriefing use of force incidents with staff and/or youth and has an active administrative review process.

The facility has implemented a proper decontamination protocol and has improved practices related to decontamination; however, our review indicated that youth continue to be left unattended prior to decontamination as required by regulation or one hour of constant review, as required by policy. We also attribute this deficiency to a lack of adequate staffing (§ 1321).

This item has not been corrected, and the facility remains out of compliance with this section.

Section 1358.5. Use of Restraint Devices for Movement and Transportation Within the Facility

Previous inspection results: Individual assessments are not being completed consistently; of the seven (7) uses of restraints for movement and transportation within the facility, only two (2) had a completed assessment specific to this section.

We reviewed the following during our inspection:

- Training Sign in Sheets
 - Director/Supervisor Meeting:
 - February 26, 2025 (19 Signatures)
- Physical Intervention Reports (PIR)

Our review of the documentation and operations indicates that when handcuffs are used for escort within the facility when there is no precipitating incident, there is no documentation that an individual assessment has been completed for that youth. When there is an incident that requires a youth to be placed in handcuffs for immediate movement, the PIR will contain the assessment. There is no assessment, however, for those youth who are handcuffed as a matter of practice for regular escort within the facility.

This item has not been corrected, and the facility remains out of compliance with this section.

Section 1361. Grievances

Previous inspection results: Documentation of the initial grievance response, while timely, was not completed on the grievance form or attached to the provided grievance documentation. Youth are not receiving written responses.

We reviewed the following during our inspection:

- Training Sign in Sheets
 - Director/Supervisor Meeting:
 - January 15, 2025, January 30, 2025, February 20, 2025, February 22, 2025, February 26, 2025, and March 5, 2025.
 - Unit Training Records
 - Unit CD: January 21, 2025, Unit NO: January 22, 2025, Unit X, B: February 25, 2025, Unit LM: January 28, 2025, and Unit R: February 10-11, 2025,

- Reference Materials
 - Grievance Reference Guide 2/24/2025
 - Grievance Supervisor Checklist
 - Email from the Grievance Officer that she had trained supervisors.
 - Memorandum dated July 7, 2024, regarding the discontinued use of the Grievance Management System and overview of paper grievances.
- LPJH Grievance Log from March 5, 2025, to March 12, 2025
- Grievances from March 5, 2025, to March 15, 2025

Our review of documentation and conversations with staff and youth indicate that this section has been corrected and is no longer out of compliance. Responses to grievances are made within a timely manner as required by policy and regulation, and youth are offered a copy of grievances.

Section 1374. Visiting

Inspection results: Youth have not received the opportunity for a minimum of two hours of visitation per week.

We reviewed the following during our inspection:

- March 2025 Visiting Logs
- March 2025 Visiting Schedule
- On Site Reviews of both Saturday and Sunday Visits

Our review of the documentation and conversations with youth and staff indicate that this section has been corrected and is no longer out of compliance. Youth are receiving the opportunity for two-hour visits per week. We offered technical assistance related to the documentation and recommended that facility management conduct ongoing quality assurance to ensure continued compliance.

Section 1390. Discipline

Inspection results: The facility lacks a fair, accessible, age-appropriate behavior management program that is tangible with meaningful rewards to encourage and promote acceptable behavior and that includes positive behavior interventions and supports.

We reviewed the following during our inspection:

- Behavior Management Program (BMP) Manual
- BMP Facility Calendars
- Daily Reward Documentation
 - 10-6 BMP Enforcement Protocol
- Events
 - Cesar Chavez Essay, Culinary Life Skills S1/S2, St. Patrick's Day Floats

- Forms/Other Documents
 - BMP Youth Guide
 - BMP Youth Reward Levels
 - LPJH Program Sign in Sheet
 - Tally Sheets
 - Weekly Store
 - BMP SME/Team
 - SIR/PIR Database
- BMP Refresher Training Excel
 - Training Sign In Documents: January 18, 21, 23, 25, 28, and 30. February 11, 13, 18, 19, 20, 25, 26, and 27.

During our review of the documentation and conversations with staff and youth, we found no meaningful changes to the facility's BMP since the comprehensive inspection. The BMP does not appear to have been fully implemented, and the facility continues to lack a fair, accessible behavior management program with meaningful rewards to encourage and promote acceptable behavior. We noted that electronic devices, such as MP3 players, have been removed from the list of incentives from the youth guide and other incentives such as work programs, late bedtimes, and special facility events as written were not being offered to youth who had reached the appropriate level for such incentives.

This item has not been corrected and remains out of compliance.

Section 1391. Discipline Process

Previous inspection results: The majority of the disciplinary documents reviewed are not being completed per agency policy or were not completed or provided for our review. We noted that all but a few youths refused to sign the document.

We reviewed the following during our inspection:

- SIR Sanctions and Appeals
- Training Documents
- LPJH Directors and Supervisors Meeting Agenda
 - February 26, 25: 19 staff completed the sign-off
- Discipline Process Training Sign Offs
 - February 26, 2025

During our review of the documentation, we found that when a Sanctions/Appeal form is completed with a Physical Incident Report, the majority were completed correctly. Those that were attached to a Special Incident Report were not completed correctly and as required by policy and regulation.

This item has not been corrected and remains out of compliance.

Section 1480. Standard Facility Clothing Issue

Previous inspection results: Youth are provided new underwear at intake; however, there is no process in place for them to receive their own underwear back daily.

We reviewed the following during our inspection:

- Directive 1441: Youth Undergarments-Issued 08/18/2020
- Undergarments Work Instruction – Dated March 3, 2022
- Youth Laundry Job Email - One youth per unit to be selected to assist in laundry duties
- Documentation
 - Laundry Service Documentation
 - Probation Unit Documentation

Our review of the documentation, laundry practices, and conversations with staff and youth indicate that not all youth are getting their own underwear back. An onsite laundry review was completed, and we found many pairs of underwear to be loose, and not secured in an individual laundry bag. We found only a few units with enough individual bags for compliance. We noted the practice had only recently been implemented.

This item has not been corrected and remains out of compliance.

* * *

Sincerely,



LISA SOUTHWELL
Field Representative
Facilities Standards and Operations Division

Enclosures

Cc: Gabriela Aguilera, Deputy Director, Los Angeles County Probation
Sheila Williams, Deputy Director, Los Angeles County Probation
Vicky Waters, Director of Communications, Los Angeles County Probation
Aaron Broom, Executive Manager, Los Angeles County Probation
Honorable Samantha P. Jessner, Presiding Judge, Los Angeles County Superior Court
Honorable Akemi Arakaki, Presiding Judge of the Juvenile Court
Honorable Miguel Espinoza, Los Angeles County Superior Court Los Angeles County
Dawyn R. Harrison, County Counsel, Los Angeles County
Fesia Davenport, Chief Executive Officer, Los Angeles County
Max Huntsman, Office of Inspector General, Los Angeles County

April 9, 2025

Guillermo Viera Rosa, Chief Probation Officer

Page 10

Wendelyn Julien, Executive Director, Probation Oversight Commission

Tyson Nelson, Compliance Monitor, County Executive Office, County of Los Angeles

Aaron R. Maguire, Executive Director, Board of State and Community Corrections

Steven Wicklander, Deputy Director (A) Board of State and Community Corrections

*Copies of the inspection are available upon request or online at www.bscc.ca.gov