# STATE OF CALIFORNIA BOARD OF STATE AND COMMUNITY CORRECTIONS



#### BOARD OF STATE AND COMMUNITY CORRECTIONS



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# **BOARD MEETING AGENDA**

May 23, 2023

Please Note - Start Time: 11:00 a.m.

2590 Venture Oaks Way Sacramento, California, 95833 First Floor, BSCC Board Room

Zoom link & instructions appear at the end of the Agenda

Instructions for remote attendance appear on the last page of this agenda

# Remote Public Participants:

To request to speak on an agenda item during the Board meeting, please email <u>publiccomment@bscc.ca.gov</u>

Please state in the subject line on which item you would like to speak

To submit written public comment on an agenda item, please email publiccomment@bscc.ca.gov

Routine items are heard on the consent calendar. All consent items are approved after one motion unless a Board member asks for discussion or separate action on any item. Anyone may ask to be heard on any item on the consent calendar prior to the Board's vote. Members of the public will be given the opportunity to give public comment during the Board's discussion of each item. There is a two-minute time limit on public comment unless otherwise directed by the Board Chair.

#### I. Call Meeting to Order

#### II. Action: Discussion Items

- A. Continuation of Determination of Suitability Los Angeles County Juvenile Halls – (Welf. & Inst. Code, § 209, subds. (a)(4) & (d).): Requesting Approval
  - Barry J. Nidorf Juvenile Hall
  - Central Juvenile Hall
    - Attachment A-1: April 3, 2023 LA County Probation Department Supplemental Corrective Action Plan
    - Attachment A-2: March 27, 2023 Notice Letter to Interim Chief Fletcher
    - Attachment A-3: March 23, 2023 BSCC Response Letter to LA County Probation Department Corrective Action Plan



- Attachment A-4: March 14, 2023 County of Los Angeles Probation Department Corrective Action Plan
- Attachment A-5: 2020-2022 Biennial Inspection Report of Los Angeles County Probation Department's Juvenile Detention Facilities
- **B.** Development of Process for Submittal of 60-Day Corrective Action Plans: Requesting Approval

#### **III. Public Comments**

Public comment about any agenda items may be heard at this time.

#### IV. Adjourn

**Next Board Meeting: June 15, 2023** 

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Board of State & Community Corrections,
2590 Venture Oaks Way, Ste 200, Sacramento CA 95833



MEETING
DATE:

May 23, 2023

AGENDA ITEM: A

TO: BSCC Chair and Members

Allison Ganter, Deputy Director, Allison.Ganter@bscc.ca.gov

FROM: Lisa Southwell, Field Representative, Lisa.Southwell@bscc.ca.gov

Aaron Maguire, General Counsel, <u>Aaron.Maguire@bscc.ca.gov</u>

**SUBJECT:** Continuation of Determination of Suitability - Los Angeles County Juvenile

Halls - (Welf. & Inst. Code, § 209, subds. (a)(4) & (d).): Requesting

Approval

Barry J. Nidorf Juvenile Hall

Central Juvenile Hall

# Summary

This agenda item is a continuation of the matter presented to the Board at the April 13, 2023 meeting regarding the determination of suitability for the Los Angeles County Central Juvenile Hall and Barry J. Nidorf Juvenile Hall. This item requests that the Board make a final determination of suitability within the meaning of Welfare and Institutions Code section 209, subdivisions (a)(4) and (d) and find both facilities unsuitable for the confinement of preadjudicated youth.

# **Background**

The Board of State and Community Corrections (BSCC) establishes the minimum standards for juvenile halls, camps, and secure youth treatment facilities (SYTF) and conducts regular inspections of those facilities. (Welf. & Inst. Code, §§ 209, 210, 875, & 885.) Regulations setting forth these minimum standards can be found in Sections 1300-1511 of Title 15 of the California Code of Regulations.

Welfare and Institutions Code section 209, subdivision (d), provides:

Except as provided in subdivision (e), a juvenile hall, special purpose juvenile hall, law enforcement facility, or jail shall be unsuitable for the confinement of minors if it is not in compliance with one or more of the minimum standards for juvenile facilities adopted by the Board of State and Community Corrections under Section 210 or 210.2, and if, within 60 days of having received notice of noncompliance from the board or the judge of the juvenile court, the juvenile hall, special purpose juvenile hall, law enforcement facility, or jail has failed to file an approved corrective action plan with the Board of State and Community Corrections to correct the condition or conditions of noncompliance of which it has been notified. The corrective action plan shall outline how the juvenile hall, special purpose juvenile hall, law enforcement facility, or jail plans to correct the issue of noncompliance and give a reasonable timeframe, not to exceed 90 days, for resolution, that the board shall either approve or deny. In the event the juvenile hall, special purpose juvenile hall, law enforcement facility, or jail fails to meet its commitment to resolve noncompliance issues outlined in its corrective action plan, the board shall make a determination of suitability at its next scheduled meeting.

# Summary of 2020 - 2022 Biennial Inspection

On January 13, 2023, following the inspection of Los Angeles County's juvenile facilities, the BSCC notified Los Angeles County's probation department of several items of noncompliance with the Board's regulations at the Barry J. Nidorf Juvenile Hall and Central Juvenile Halls. A copy of the final inspection report dated March 16, 2023, is in Attachment 5; at the time the final inspection report was issued, the facilities were out of compliance with the following regulations:

# **Barry J. Nidorf Juvenile Hall**

- 1. § 1321. Staffing.
- 2. § 1325. Fire Safety Plan.
- 3. § 1327. Emergency Procedures.
- 4. § 1328. Safety Checks.
- 5. § 1354.5. Room Confinement.
- 6. § 1357. Use of Force.
- 7. § 1360. Searches.
- 8. § 1370. Education Program.
- 9. § 1371. Programs, Recreation, and Exercise.
- 10. § 1390. Discipline.
- 11. § 1230.2.10 Security glazing
- 12. § 1230.1.7 Single occupancy sleeping rooms
- 13. § 1230.2.6 Lighting
- 14. § 1230.1.5 Living unit.
- 15. § 1230.1.11 Physical activity and recreation areas

#### **Central Juvenile Hall**

- 1. § 1321. Staffing.
- 2. § 1328. Safety Checks.
- 3. § 1354.5. Room Confinement.
- 4. § 1357. Use of Force.
- 5. § 1358.5. Use of Restraint Devices for Movement and Transportation Within the Facility.
- 6. § 1360. Searches.
- 7. § 1370. Education Program.
- 8. § 1371. Programs, Recreation, and Exercise.
- 9. § 1374. Visiting.
- 10. § 1390. Discipline.
- 11. § 1230.2.10 Security glazing
- 12. § 1230.1.7 Single occupancy sleeping rooms
- 13. § 1230.2.6 Lighting
- 14. § 1230.1.5 Living unit.
- 15. § 1230.1.11 Physical activity and recreation areas

Pursuant to Welfare and Institutions Code section 209, the agency was required to submit a corrective action plan (CAP) to the BSCC within 60 days or by March 14, 2023.

On March 14, 2023, the BSCC received the agency's CAP (Attachment 4). A CAP must outline how the agency intends to correct the issues of noncompliance and how they will come into compliance within a reasonable timeframe, not to exceed 90 days or by June 12, 2023. (Welf. & Inst. Code, § 209, subd. (d).)

After review of the CAP, BSCC staff determined that it did not provide sufficient detail about the specific plans that would be relied upon to correct the items of noncompliance and did not provide a reasonable timeframe for resolution. Due to this lack of information, the CAP was not approved by BSCC staff. The Los Angeles County Probation Department was notified of this action on March 23, 2023 (Attachment 3). On March 27, 2023, the County was notified that the BSCC Board would make a determination of suitability for the Barry J. Nidorf and Central Juvenile Halls at the April 13, 2023, BSCC Board Meeting (Attachment 2). On April 3, 2023, the department submitted a supplemental CAP (SCAP) (Attachment 1).

At the April 13, 2023 BSCC Board Meeting, after hearing testimony from Los Angeles County Representatives, the Board moved to defer further action on the Los Angeles County Juvenile Halls to a future board meeting since the county had proactively moved to make improvements to both facilities, had filed a supplemental plan, and had hired new key personnel. This deferral would also allow Board staff to take additional time to evaluate whether the county has "fail[ed] to meet its commitment to resolve noncompliance issues outlined in the corrective action plan...." (Welf. & Inst. Code, § 209, subd. (d).) The Board did not approve either the CAP or SCAP.

From April 25 through April 28, 2023, BSCC staff were on-site at the Barry J. Nidorf and Central Juvenile Halls to review any progress in implementing the strategies outlined in the CAP¹ and to determine whether the county was meeting its commitment to resolve noncompliance. BSCC staff also conducted unannounced inspections to each of the facilities during the late-night shift between April 24 to April 25, 2023. BSCC staff's inspection focused on progress towards compliance with Title 15 regulations.

BSCC staff met with Directors at Barry J Nidorf Juvenile Hall and the Senior Director at Central Juvenile Hall, and it was immediately apparent that many of the activities outlined in the CAP and SCAP were not occurring as described. Neither the Senior Director at Central Juvenile Hall nor the Directors at Barry J Nidorf Juvenile Hall had seen a copy of the CAP or SCAP prior to BSCC staff's arrival. A copy of the CAP and SCAP were provided to the facility staff during our site visit. Based on further discussion, it was determined that some steps had been taken toward compliance at each facility, but there remains a disconnect between the CAP/SCAP and the facility "action plans" to attempt to come into compliance.

# Section 1321, Staffing and Related Items of Noncompliance

As has been reported, the most serious items of noncompliance at the juvenile halls are directly linked to issues with staffing. Youth are regularly not being provided with required services because of insufficient numbers of staff on duty, and noncompliance with Section

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<sup>&</sup>lt;sup>1</sup> For example, the SCAP indicated that additional staff would be trained and redeployed into the halls by April 10, 2023.

1321, Staffing contributes to continued noncompliance with Section 1354.5, Room Confinement, Section 1357, Use of Force, Section 1360, Searches, Section 1370, Education, and Section 1371, Programs, Recreation and Exercise. Compliance with staffing will ultimately contribute towards compliance in these deficient areas.

BSCC staff discussed staffing issues with facility leadership and reviewed staffing documentation, including staffing schedules and assignments, from April 21 through April 26, 2023 for both facilities to verify evidence that the department is taking proactive steps toward fulfilling the corrective action outlined in the CAP/SCAP to bolster staffing levels in both facilities. One of the most prominent corrective actions outlined in the CAP/SCAP is the reassignment of 100 field staff, who the county had stated were to be deployed on April 10, 2023.

At this time, based on documentation provided by the county, staff could not verify that 100 deputy probation officers (DPO) have been reassigned to and working shifts at the facilities. Discussion with facility leadership indicated that, at best, 70 reassigned DPOs have completed training in anticipation of being assigned to the two facilities. However, facility leadership indicated while the DPOs show up for shift, facility leadership does not have the flexibility to deploy these staff to units that may need additional staffing the most. This limitation contributes to the inability to adequately staff the facility, provide coverage for special assignments, such as 1:1 supervision, transportation, and movement, and provide coverage for the regular callouts, sick leave, "work hardening" (light duty), and medical leave.

Evaluating the staffing needs across the facilities and deployments was difficult; BSCC staff were unable to identify minimum staffing for facilities and units to verify that posts were being filled based on the documentation, which included handwritten notes. What was clear from both review of documentation and discussions with facility leadership, however, was that staffing levels are not adequate to safely operate the facilities and provide consistent programs and services to the youth. There continue to be a significant number of callouts that require overtime, and we noted 34 staff who worked for 24 hours straight between April 10 and April 28 at Barry J Nidorf. Understandably, the staff who continue to show up for shifts are exhausted and exasperated.

During our walkthrough of the Barry J Nidorf Juvenile Hall, we reviewed documentation on each unit that outlined staff were not available for 1:1 supervision as required by policy. When we asked unit staff how they managed the unit in these situations, they indicated that they are required to regularly staff and program the unit and attempt to provide 1:1 supervision. The youth we spoke with on these units indicated that they were not regularly getting programs or time outside. Youth were typically observed gathered around televisions watching YouTube content at high volume during our walkthrough. We also observed many interior observation windows in the Compound (both in pre-disposition units and SYTF units) replaced with plywood. While we did observe two groups of Hill Unit pre-disposition youth getting outside, the pre-disposition youth we spoke with in the Hill Units reported that they are getting outside more; however, programs are not regularly occurring.

Los Angeles County Office of Education representatives provided BSCC staff with a daily report for attendance at each facility for the week of April 24 through April 28, 2023. Documentation for Barry J Nidorf that most of the youth were not brought to school either late or not at all because "probation failed to bring students . . . due to staff shortage."

Discussion with youth indicated that school attendance improved during the week of our site visit.

Documentation at Central Juvenile Hall indicates that while youth are regularly getting to school more often, "due to limited staffing . . . classes began late." Title 15 and California State Education Code both require that youth receive a minimum 240-minute school day.

Youth reported a continued lack of programs, and we observed one outside staff member in the SYTF providing a program to two SYTF youth. We did not observe any other programs in progress during our walkthroughs. It was also reported that there is no IT equipment available for secondary education and Wi-Fi is not operational throughout the units. Youth report that visits are often cancelled due to lack of staff and youth continue to report that they do not always get out of their rooms at night when they need to use the restroom and will urinate in a receptacle if they must use the restroom.

The CAP and SCAP indicated that additional program providers will be contracted, and statements of work are being submitted and solicitations are being made. We were not provided with documentation that reflects this action and facility staff are not aware of any new programming that has been implemented into the facility since the BSCC inspection. It appears the actions outlined in the plan have not been implemented.

# Other Items of Noncompliance Related to Staffing

We also observed the following:

- We reviewed safety check documentation to determine if youth are being placed on room confinement; our review of documentation at Barry J Nidorf indicates that predisposition units are being held in their rooms in excess of the time allotted for institutional operations during shift change (one hour). (§ 1354.5.)
- Documentation reviewed at Central Juvenile Hall indicates that youth are not being held in their rooms in excess of the time allotted for shift change. We did, however, observe several youth being held in their rooms in Units P and Q (intake units) for several days after they had been medically cleared to returned to housing units. BSCC staff was not provided documentation for compliant use of room confinement and were told that staffing had impacted the ability to place the youth elsewhere. There was also no documentation to show that the youth locked in their rooms received education, recreation, exercise or programming. (§ 1354.5.)
- We reviewed documentation for searches at each facility; it appears as though additional Special Enforcement Operations (SEO) staff have been deployed to the facility to assist, as per the CAP. However, our review of documentation indicates that regular facility searches, as required by regulation and policy, have not occurred due to lack of staffing. (§ 1360.)
- A review of programming and exercise documentation at Barry J Nidorf indicates that youth are not getting outdoors for exercise due to lack of staff. (§ 1371.)

• A review of programming documentation at Central shows that programs do occur; however, there are several shifts/units without programming, full units refusing participation, and programs that are being offered are basic and mundane and not relevant to the population served as indicated in regulation. We observed some staff trying to provide activities for the youth using the limited staffing at the facility. However, exercise is also routinely being moved indoors due to staffing; youth are not regularly going outside to get fresh air. (§ 1371.)

In short, discussions with facility staff and youth, and a review of documentation continue to indicate noncompliance with Section 1321, Staffing, Section 1358.5, Room Confinement, searches, Section 1360, Searches, Section 1370, Education, and Section 1371, Programs Recreation and Exercise. While there have been attempts to fulfill some steps outlined in the CAP/SCAP, there is no measurable progress toward compliance being observed.

#### Section 1328, Safety Checks

The Department's CAP included the installation of an electronic safety check system at both juvenile halls; this action has been taken and we were able to observe the equipment in both facilities. However, the corrective action outlined for meeting compliance with the regulation is not occurring in practice. The CAP/SCAP noted that Unit Supervisors would regularly audit safety checks and provide immediate correction and training to facility staff when safety checks are late. In practice, the facility staff who are assigned to the BSCC Compliance Unit at each facility have been directed to audit the safety checks a minimum of three (3) times a week. We requested documentation of these audits and were told that this review is not regularly occurring due to staff being pulled from their assigned duties to work other assignments due to lack of staffing. While the Department has an electronic system in place, there is currently no regular review of safety check documentation at the facilities to ensure that staff complete safety checks a minimum of every 15 minutes per regulation.

We reviewed available safety check documentation at both juvenile halls. At Barry J Nidorf Juvenile Hall, all but three units had late checks occurring; in some units, the time lapse between checks was excessive, in one case up to three hours late. Facility staff informed BSCC staff that these will be addressed with corrective action notice or progressive discipline.

At Central Juvenile Hall, there appears to be improvement toward meeting compliance with the regulation. However, there continue to be units where safety checks are late, sometimes up to 41 minutes.

While the electronic safety check system is one step in the plan toward meeting compliance with Section 1321, noncompliance with this section is still evident at both facilities.

#### Section 1357, Use of Force

Discussion with facility leadership indicates that staff have still not been trained in the required areas outlined in the updated policy on the use of force.

The CAP and SCAP indicate that the Department implemented a plan developed on March 5, 2023, to "address processes specific to the use of force reviews" in collaboration with the

California Department of Justice. Communication with Department staff indicates that this plan includes reviewing past use of force incidents to gather necessary documentation to complete missing information. While this review may bolster efforts towards future compliance, this review does not address compliance with future use of force and how documentation will be completed during use of force incidents.

# <u>Section 1358.5, Use of Restraint Devices for Movement and Transportation Within the Facility</u> (Central Juvenile Hall only)

BSCC staff were able to review a sampling of reports to determine whether facility staff are documenting individual assessments for the need to apply restraints for movement and restraints and documentation of supervisor review and approval. We noted progress toward compliance in this section.

# Section 1390, Discipline

Both the CAP and SCAP indicated that a revised Behavioral Management Program (BMP) manual would be approved by the California Department of Justice team during the week of April 6, 2023. We do not have documentation of a revised BMP policy being implemented; attached to the SCAP was an outdated BMP policy that is not being implemented and is noncompliant with this section.

#### **CORRECTED ITEMS**

# Section 1327, Emergency Procedures. (Barry J Nidorf)

We reviewed documentation of staff sign-off of annual review of procedures.

#### Section 1374, Visiting (Central).

We observed the child-friendly visiting room that was put in use following the inspection.

#### Summary

The Board deferred action on the determination of suitability at the April board meeting to have staff assess whether the corrective action plan and supplemental corrective action plans were implementable and to verify whether the county had, in fact, taken the steps described in the plan towards implementation. While some aspects of some parts of the plan have been implemented, no significant items of noncompliance have been corrected. Staffing remains at deficient levels and there is no indication that the remaining aspects of the plan could be timely implemented so that the facilities would come into compliance by June 12, 2023.

#### Recommendation/Action Needed

Based on the foregoing, staff recommends that the Board:

 Find that both the corrective action plan and supplemental corrective plan submitted by the County of Los Angeles cannot be approved because they do not adequately demonstrate that the items of noncompliance will be corrected in a reasonable period of time and no later than June 12, 2023.

- Find that because the county has failed to file an approved corrective action plan within 60 days following the issuance of the January 13, 2023 initial inspection report that Central Juvenile Hall and Barry J. Nidorf are unsuitable within the meaning of Welfare and Institutions Code section 209, subdivision (a)(4) and (d).
- 3. Find that even if the county had filed an approved corrective action plan, that the county has failed to meet its commitment to resolve the items of noncompliance within the meaning of Welfare and Institutions Code section 209, subdivision (d).
- 4. a) Find that the following items remain out of compliance with Title 15, California Code of Regulations:

# i. Barry J. Nidorf Juvenile Hall

- 1. § 1321. Staffing.
- 2. § 1325. Fire Safety Plan.
- 3. § 1328. Safety Checks.
- 4. § 1354.5. Room Confinement.
- 5. § 1357. Use of Force.
- 6. § 1360. Searches.
- 7. § 1370. Education Program.
- 8. § 1371. Programs, Recreation, and Exercise.
- 9. § 1390. Discipline.

# ii. Central Juvenile Hall

- 1. § 1321. Staffing.
- 2. § 1328. Safety Checks.
- 3. § 1354.5. Room Confinement.
- 4. § 1357. Use of Force.
- 5. § 1358.5. Use of Restraint Devices for Movement and Transportation Within the Facility.
- 6. § 1360. Searches.
- 7. § 1370. Education Program.
- 8. § 1371. Programs, Recreation, and Exercise.
- 9. § 1390. Discipline.
- b) Find that due to the items of noncompliance set forth in recommendation 4(a)(i) and 4(a)(ii) that both Barry J. Nidorf and Central Juvenile Hall are unsuitable within the meaning of Welfare and Institutions Code section 209, subdivision (a)(4).
- 5. Direct staff to provide electronic notice no later than close of business on May 24, 2023 to all persons within the county having authority over placement of youth in the juvenile halls that both facilities shall not be used for the confinement of youth commencing 60-days after issuance of the notice.

#### **Attachments**

- A-1: April 3, 2023 LA County Probation Department Supplemental Corrective Action Plan
- A-2: March 27, 2023 Notice Letter to Interim Chief Fletcher
- A-3: March 23, 2023 BSCC Response Letter to LA County Probation Department Corrective Action Plan
- A-4: March 14, 2023 County of Los Angeles Probation Department Corrective Action Plan
- A-5: 2020-2022 Biennial Inspection Report of Los Angeles County Probation Department's Juvenile Detention Facilities

Letter From Youth Law Center: Settlement Discussions to Avoid Litigation Regarding the Unsuitability of Los Angeles County's Central and Barry J. Nidorf Juvenile Halls





# COUNTY OF LOS ANGELES PROBATION DEPARTMENT

9150 EAST IMPERIAL HIGHWAY – DOWNEY, CALIFORNIA 90242 (562) 940-2501



April 3, 2023

Linda Penner, Chair Board of State and Community Corrections 2590 Venture Oaks Way, Suite 200 Sacramento, CA 95833

Dear Ms. Penner:

# COUNTY OF LOS ANGELES PROBATION DEPARTMENT – JUVENILE FACILITIES SUPPLEMENTAL CORRECTIVE ACTION PLAN

The Board of State and Community Corrections (BSCC) conducted inspection activities for the 2020-2022 Biennial cycle at both the Barry J. Nidorf Juvenile Hall (BJNJH) and Central Juvenile Hall (CJH) in November 2022. The BSCC's Initial Inspection Reports for both facilities were received on January 27, 2023, outlining the identified items of noncompliance. These items of noncompliance were reviewed during the Exit Briefing on January 13, 2023, at which time corrective action was immediately initiated. On February 15, 2023, the BSCC provided a checklist of the final areas of pending noncompliance required to be addressed in the Department's Corrective Action Plan (CAP). On March 14, 2023, the Los Angeles County (County) Probation Department provided a Corrective Action Plan in response to the findings of the Biennial Inspection report of 2020/2022. On March 23, 2023, the BSCC informed the County that the March 14 Corrective Action Plan was not approved and inadequate to address the ongoing and serious items of noncompliance at In addition, the County was informed that the BSCC would make a both facilities. determination of suitability at the April 13, 2023 meeting. On March 27, 2023, the BSCC informed the County of the additional deficiencies with the original corrective action plan, further detailed the suitability determination process, and provided a deadline for the County to respond with additional details to address the CAP deficiencies.

On March 29, 2023, the County met with Field Representative Lisa Southwell and your General Counsel Aaron Maguire regarding the amount of additional detail necessary for the supplemental Corrective Action Plan<sup>1</sup>. We have incorporated the technical assistance

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<sup>&</sup>lt;sup>1</sup> During the March 29, 2023 meeting, it was unclear from the BSCC representatives what standard the juvenile halls were to held to in order to comply with the Title 24 window replacements. Probation was informed that the BSCC would provide clear guidance in writing on this noncompliant issue. In past inspections, there have been broken windows and they were replaced with the same window. However, in this inspection the County was informed that they had to replace them based on 2003 Title 24 regulations which did not exist during the construction of the facilities.

BSCC Corrective Action Plan April 3, 2023 Page 2 of 16

provided in our responses. The County has provided additional information which outlines our continued plan to correct the BSCC identified areas of noncompliance and to provide additional clarification based on the March 23 letter. In response to the additional correspondence from the BSCC regarding our proposed plans to address the noncompliance findings, we set forth below, in red font, the County's supplemental plans, with additional details and further clarification, to address the areas of noncompliance. We believe this update addresses the BSCC's concerns regarding our prior CAP, and respectfully request that the Department be given 90 days to implement it, and that reinspection occur prior to a suitability hearing.

# Title 15, Section 1313(A),(B) and (E): County Inspection and Evaluation of Building and Grounds

# **County Building Inspection** (CJH Only)

The County Building Inspection was conducted at CJH on August 11, 2022. Documentation was provided by the Department of Public Works on January 9, 2023.

### **County Supplemental Response:**

The County Building Inspection item has been resolved.

#### **Fire Clearance**

The fire alarms at BJNJH were tested on March 11, 2023. Upon receipt of this report, the Fire Clearance Inspection will be scheduled.

The Fire Clearance was completed for CJH on March 3, 2023.

#### **County Supplemental Response on BJNJH and CJH:**

On March 19, 2023, the vendor conducted a test of the fire alarms at the facility. At that time, deficiencies with the system were identified. A service request was submitted to the Internal Services Department (ISD) to address one area of the deficiencies which is scheduled to be completed by April 10, 2023. ISD is working with the contractor to address the second area of system deficiencies by the end of April 2023. This noncompliance item for Central Juvenile Hall has been resolved and is still outstanding for Barry J Nidorf Juvenile Hall.

#### **Juvenile Court Inspection**

The Juvenile Court Inspection was completed for BJNJH on March 2, 2023, and for CJH on March 3, 2023.

BSCC Corrective Action Plan April 3, 2023 Page 3 of 16

### **County Supplemental Response on BJNJH and CJH:**

The Juvenile Court Inspections have been conducted and this noncompliance item has been resolved.

# Title 15, Section 1321(a) and (b): Staffing

The Department is actively recruiting and hiring staff to fill existing vacancies in the Detention Services Officer (DSO) and Group Supervisor Nights (GSN) classifications at both BJNJH and CJH. Concurrent Juvenile Correctional Officer Core (JCOC) academies are being conducted to expedite the number of new staff being deployed to the institutions. Forty-one new staff completed JCOC in January and February 2023, with another 23 and 20 scheduled to complete JCOC in April and May, respectively. Incentive pay (20% increase in base pay and double overtime pay) was implemented for select classifications between October 1, 2022 and April 1, 2023. Additionally, field staff continue to be mandatorily deployed to work in the two juvenile halls on a rotational basis. In March 2023, under emergency provisions, a minimum of 100 field staff will be temporarily reassigned from field assignments to the juvenile halls through December 31, 2023. These reassignments, coupled with volunteer overtime staff and new hires, will be continuously monitored to ensure staffing levels meet regulations and support the overall safety and security of the youth and staff.

#### **BSCC** Response:

In your, March 23, 2023, response, you indicated the following "To resolve the issues of inadequate staffing, the CAP indicates that the department is working to expedite the completion of Juvenile Correctional Officer Core academies for deployment of up to an additional 43 staff through May. In addition, the CAP references additional incentive pay, which, the CAP also notes, expires in April 2023. Finally, the CAP references the temporary reassignment of a minimum of 100 staff from the field to the juvenile halls through December 31, 2023. Unfortunately, even if we could assume the full deployment of these staff into the juvenile halls, some of which we note are not trained as juvenile correctional officers, there is insufficient information to determine what staffing plan would be in place to address the items listed above. Nor do we believe this staffing will be sustainable given the short term, emergency measures involved. Without additional details describing staffing levels across the units for which we can then inspect for compliance, this plan cannot be approved."

# **County Supplemental Response:**

Probation Departments are not immune to the hiring challenges and staffing shortages seen in many organizations nationwide. The ability to recruit and retain is even more difficult given the negative perception of law enforcement in many communities. Competition among other agencies has also grown due to the limited pool of candidates, with organizations offering bonuses and assistance with housing to name a few. The pool of qualified applicants is also further reduced because of the strong economy and younger generations being less likely to seek traditional employment that does not squarely align with the work-life balance that many desire. All of the aforementioned makes hiring and retaining quality candidates a challenge for all Probation Departments in California, with many facing

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shortages up to 30%. Probation is adding 100 staff, via reassignment, who will supplement the current juvenile hall staffing effective start date of April 10, 2023, after receiving 40 hours of training. These additional staff were notified on March 30, 2023 and will begin the 40 hours of training on April 3, 2023. The additional staff will provide adequate direct supervision and the human power to meet the requirements of education, recreation, programming, and supervision, while Probation continues to onboard new hires. Some examples of the operation factors that directly affect staffing are: required one-on-one supervision designated by the Department of Mental Health, fluctuation of population per housing unit, violence, and both racial and gang tension.

# Recruitment, Hiring and Retention Supplemental Plan

In response to the daily staffing issues in our Juvenile Halls, and in addition to the reassignment of staff, the Los Angeles County Probation Department will implement a long-term recruitment, hiring, and retention plan to reduce the high number of vacancies within our institutions as outlined below:

- <u>Marketing and Recruitment</u>: Probation will engage an outside consultant to develop a long-term recruitment marketing plan based on best practices, including a digital social media campaign, to increase the application volume for qualified applicants.
- <u>Hiring Process Improvement</u>: Probation is collaborating with the Department of Human Resources to review the hiring process to identify opportunities to maximize the use of existing training resources, solutions for bottlenecks, and processes that can be streamlined to expedite the hiring of candidates and their successful completion of the academy.
- <u>Retention Strategies</u>: Probation will work collaboratively with the outside consultant
  and Department of Human Resources to improve recruitment and retention by
  understanding the factors that matter to candidates and employees that caused them
  to join and stay with the Department. Probation will enhance our onboarding process
  that will allow for the Department's more experienced staff to provide the necessary
  guidance, training and mentoring in efforts to foster a supportive culture.

Given the immediate need to fill vacant positions in the Department, the above strategies will be initiated concurrently with the below interim recruitment and hiring efforts.

- New Hires: As stated in the Department's March 14, 2023 CAP, Probation will hire and retain up to 150 employees within the Group Supervisor, Nights (GSN) and Detention Services Officer (DSO) Classifications by June 2023.
  - <u>Fiscal Year 2022-23 Academy</u>: The Department continues its significant efforts to attract and retain additional staff. As of April 7, 2023, Probation will have conducted three training academies, with three more planned, graduating more than 64 new probation officers who will provide much needed staffing in these facilities. The County is committing all necessary resources

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to continue this progress to hire an additional 70 staff by the end of June 2023. These highly focused employment efforts are fully supported by the County's Board of Supervisors.

- Interim Recruitment and Hiring Plan: Probation will continue to hire for vacancies by:
  - Building relationships with educational institutions, community-based organizations, and professional organizations;
  - Attending in-person or virtual job fairs and events, to market different populations that fit the care first, jails last model;
  - Expanding social media presence;
  - Developing marketing materials that cover a comprehensive range of mediums: flyers, opening and closing slates of a video, billboard, bus shelters, and radio spot ideas.
  - Increase the Department's recruitment budget for personnel, recruitment services, and marketing materials.
- <u>Fiscal Year 2023-24 Academy</u>: In addition to the above, and to ensure hiring is a continuing priority and that the hiring process is implemented consistently on a long-term basis, the Department plans to hold at a minimum 6 additional academy classes in Fiscal Year 2023-24. The minimum hiring target is 35 DSOs per class.

# **Supplemental Operational Changes**

In addition, in support of the Supplemental CAP, the Department will make the following operational changes to increase, sustain and stabilize the daily staffing levels in the halls as new recruits are being hired:

- Reassign Field staff to the Halls: Effective March 30, 2023, the Department reassigned 100 Field DPO IIs to the Halls.
  - The Field staff will receive a 40-hour training block with the minimal required trainings for all staff working in the institution to be held from April 3-7, 2023. A second 40-hour training block will take place later in April. Field staff will be deployed to their assigned Hall on April 9<sup>th</sup>.
  - Based on daily staffing numbers at the Halls, the current temporary field staff redeployment will continue. On average, 125 Field staff are redeployed to the Halls on a temporary basis, a minimum of 2 days a week.
  - As Hall staffing stabilizes and the emergent concerns lessen, the Department will reassess both the current redeployment and the mandatory reassignment of the 100 Field DPO IIs.

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- <u>Kilpatrick Staff 56-Hour Schedule</u>: Due to the emergency, the Department will remove the 56-hour schedule required by the Union MOU for the approximately 34 staff currently reassigned from Camp Kilpatrick to the juvenile halls and place them on a 5/40 schedule. By doing so, the Department will maximize staff availability onsite for supervision and provision of services to the youth.
- Reserve Probation Officers: The Department will deploy approximately 60 Reserve Probation Officers (PO) to assist in the Halls daily operational needs, not including direct supervision of youth. A daily schedule will be generated utilizing the Reserve POs to assist with visiting on Saturdays and Sundays at the halls and camps and to also perform perimeter monitoring 7-days a week, in pairs, to cover all institutions to reduce the entry of contraband. Additional tasks and assignments, as appropriate, will be developed. By doing so, this will allow the supervision staff to focus on providing supervision and direct services to the youth.
- SYTF Special Recruitment Notice: The Department's SYTF Recruitment bulletin was issued on February 23, 2023 and closed on March 15, 2023. A total of 80 applications were received. Interviews were conducted over a 7-day period beginning on March 23, 2023, through March 31, 2023. Successful candidates will be identified by April 3, 2023. Specialized training will be provided in cohorts beginning May 1, 2023 to minimize any disruption to operations. The training will be three weeks in length and will consist of the following: LA Model, Activating Intentional Youth Development, Motivational Interviewing, Restorative Justice, Suicide Prevention, Mental Health Training for Juvenile Justice, Child Abuse Prevention and Reporting, Enhanced and Specialized Supervision Requirements for Juvenile Institutions, HOPE Center Policy. Title 15 Regulations, Use of Force, Handcuffing, Self Defense, Control Holds, Physical Intervention Training, De-escalation Training, Peace Officer Ethics and LGBTQ+ Awareness. The Department will see an increase in staff in the Halls from this recruitment effort if those selected are currently assigned to the Camp and/or Field. Based on our review, all 80 applicants have either a Camp or Field assignment.
- Chief Executive Office Staffing Analysis: The CEO is currently conducting a staffing analysis of the Department to determine how many staff are needed to safely operate our halls, camps, and juvenile field operations. As part of this review, the CEO will determine if the Department is operating more camps than needed given the current youth population statistics, and the appropriate per officer caseload ratio for the field offices and programs. If the CEO determines that the Department can consolidate camps and/or reduce the officer per caseload ratio, and may do so safely, any identified excess staff will be reassigned to the halls. The CEO analysis is due to the Board on April 18, 2023.

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- <u>Financial Incentives</u>: Effective April 1, 2023, the Department will offer financial incentives to staff assigned to the Halls to stabilize staffing levels. Payment Eligibility Requirements are as follows:
  - Juvenile Detention staff and/or field or camp staff reporting to work at the Halls providing direct supervision of any population in the Department's care as well as programming and services, such as, but not limited to, recreation and exercise shall be entitled to a lump sum bonus payable at the end of their commitment term.
  - The commitment term shall be determined by hours worked in the Juvenile Hall:
    - ✓ 1,000 hours worked for 6 months
    - ✓ 1,500 hours worked for 9 months
    - ✓ 2,000 hours worked for 12 months
    - ✓ (Note: 2,088 working hours in a typical year)
  - Eligibility will be affected by attendance
  - All payments are subject to the discretion of the Board and may be rescinded at any time deemed necessary.

The above efforts focus on increasing the staff in the juvenile halls. The Department also plans to identify ways to reduce the current youth census.

# **Supplemental Plan for Reducing the Youth Census**

• To reduce the number of youth in our halls, the Department will collaborate with prosecutors, defense counsel and Superior Court to ensure all eligible and appropriate youth are calendared for release consideration to a more therapeutic setting or home with supportive services and supervision pending disposition.

# Title 15, Section 1325(f): Fire Safety Plan

The Fire Plan for BJNJH was signed off on February 9, 2023. The Fire Plan for CJH was signed off on March 3, 2023. The Department continues to receive technical assistance from the BSCC regarding the use of Los Padrinos Juvenile Hall for the emergency housing of youth in the event of an evacuation of one or both juvenile halls.

#### **County Supplemental Response:**

On March 30, 2023, BSCC Representative Lisa Southwell along with representatives from Probation, CEO and the Internal Services Department conducted a site visit of the Los Padrinos facility to obtain BSCC authorization to use the facility if an evacuation is necessary due to an emergency. In the event of an emergency, Probation has identified several leadership individuals with access to a county credit card who would immediately be able to reserve hotel rooms as necessary to temporarily relocate the nonprofit clients' recipients who are currently housed at Los Padrinos.

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# Title 15, Section 1327(f): Emergency Procedures (BJNJH Only)

The Building Emergency Plan and Fire Suppression Pre-Plan were disseminated to all sworn staff and non-sworn staff at BJNJH on February 10, 2023. Collection of the final signoff sheets is in process, with a due date of March 17, 2023.

# **County Supplemental Response:**

As of March 30, 2023, all staff signatures of current Detention Services Bureau assigned staff have been obtained. The only staff that have not signed off on the emergency procedures are either on medical leave, off due to an internal affairs investigation, or on vacation. A process has been established to have those individuals sign off on the procedures as they return to work. This noncompliance item, therefore, is resolved.

#### Title 15, Section 1328: Safety Checks

An electronic Safety Check System was installed in each living unit throughout both juvenile hall facilities, with a go-live date of January 23, 2023. Staff received training on the system prior to implementation and received the revised Safety Check Policy (DSB 630) issued on January 19, 2023, with a required sign-off documenting receipt of the policy.

The Senior Detention Services Officer (Sr. SDO) assigned to each unit is responsible for ensuring that safety checks are conducted within their assigned unit. Supervisors are required to regularly audit the safety check system by generating a log report to ensure compliance with the random and varied safety checks. If it is determined that a safety check is missed by more than one minute, the supervisor must initial the safety check on the log and direct the Sr. DSO to ensure that a note in the "observation" section of a room check is completed. Further, at least once per eight-hour shift, as time and circumstances permit, supervisors must conduct unannounced rounds to inspect the safety check system and inspect any posted hard copies of Safety Check Sheets.

Managers and the Quality Assurance (QA) Team are conducting random video reviews to ensure staff have a direct visual observation of youth at a minimum of every 15 minutes, at random or varied intervals, when youth are asleep or when youth are in their rooms.

The Video and In-Person Observation Log continues to be utilized by managers when conducting random video reviews of Title 15 Programming and/or walking through units. Each manager and supervisor are required to provide immediate correction and instruction when witnessing non-compliance. In the event of any potential egregious behavior, a referral for disciplinary action is required.

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### **County Supplemental Response:**

Probation continues to conduct audits and provide real time technical assistance for the RFID Safety Check systems. Personnel who are not conducting regular safety checks are being counseled and referred to Internal Affairs.

### Title 15, Section 1354.5(a) and (b)(2): Room Confinement

The Room Confinement policy, specifically addressing room confinement during transitional times such as shift change, showers and after incidents continues to be reemphasized to staff and will be redistributed to all staff at both facilities with a required sign-off documenting receipt.

Documentation will continue to be reviewed daily and if any concerns are identified, the facility will be immediately contacted to make the correction. The QA Team and BSCC Subject Matter Experts are providing immediate real-time training when corrections are required.

Managers and the QA Team at both facilities are conducting random video reviews during critical times of the day such as school, visiting, religious services and in the evenings. Additionally, all videos are reviewed after an incident has occurred to ensure room confinement is not occurring unless within policy.

The Video and In-Person Observation Log continues to be utilized by managers when conducting random video reviews of Title 15 Programming and/or walking through units. Each manager is required to provide immediate correction and instruction when witnessing non-compliance. In the event of any potential egregious behavior, a referral for disciplinary action is required.

The Compliance Unit at each facility continues to review documentation to ensure compliance with BSCC regulations, which includes but is not limited to, justification for room confinement. Any documentation requiring additional clarification is immediately referred to the Compliance Unit Supervisor who follows up and provides training.

COVID Guidelines for Hybrid Units have been modified in collaboration with Juvenile Court Health Services (JCHS) and approved by the BSCC.

#### **County Supplemental Response:**

Probation continues to conduct audits and provide real time technical assistance. Personnel who are engaging in room confinement are being counseled and referred to Internal Affairs.

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#### Title 15, Section 1357: Use of Force

The Detention Services Bureau – Physical Intervention Policy (DSB – 1000) was issued on June 22, 2022. A one-hour training specific to policy revisions has since been developed and is being provided to all sworn staff assigned to the juvenile halls.

Training on the use of force policy is ongoing at both juvenile halls. As of March 13, 2023, 446 juvenile hall staff have been trained in person. Central Juvenile Hall has trained 178 staff. Barry J Nidorf has trained 268 staff. We continue to train the remaining staff and expect to be fully in compliance with the use of force policy training by April 2023.

Staff are receiving hands on defensive tactics training and report writing in Block Weeks. Attendance in the block weeks continues to be difficult due to ongoing staffing concerns at the halls. Staff from the Staff Training Office are being deployed to the institutions to provide ongoing training in de-escalation and handcuffing. Additional staff from the Staff Training Office are being temporarily reassigned to the juvenile halls to ensure that all staff continue to receive use of force, de-escalation, handcuffing, and training in appropriate documentation.

A plan to address processes specific to the use of force reviews has been developed in collaboration with the State Department of Justice. This plan was implemented on March 5, 2023.

# **BSCC Response:**

In addition to providing an inadequate plan to resolve the issues involving staffing, there are several places in the CAP where Probation notes that a plan has been developed and will be in place, but there is no detail of these plans included. For example, on page 5 of the CAP, there is a description of a plan developed in collaboration with the California Department of Justice that was implemented on March 5, 2023 to "address processes specific to the use of force reviews" as it relates the findings of noncompliance with Section 1357, Use of Force. However, the CAP does not describe specifically what the plan entails or how compliance with Section 1357 is supported by this plan. Likewise, the details for correcting the deficiencies noted in implementing Section 1390, Discipline, are also lacking.

#### **County Supplemental Response:**

As of March 30, 2023, staff continue to be trained on the use of force. Below is the plan that has been developed to address the review of use of force incidents. Effective April 10, 2023, the facilities will begin to enforce Directive 1477 – Detention and Residential Treatment Services Bureaus Physical Intervention Policy. Any staff that is involved in or witnesses a physical intervention incident, including deployed staff, will be expected to complete all required documentation immediately or when reasonably possible, but no later than prior to the end of their assigned shift. For 30 consecutive days beginning April 10, 2023, institutions staff shall demonstrate capability of completing Use of Force incidents within five (5) days of receipt and forwarding the documents to the FIRST Team for review. As part of this plan,

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any outstanding Use of Force incidents from January 1, 2023, must be completed and reviewed. If Institutions can demonstrate that they can stay current with their Use of Force documentation for 30 days, all incidents prior to January 1, 2023, will be separated out as a backlog and will be address in the second phase of this plan.

#### Title 15, Sections 1358 and 1358.5(c): Use of Physical Restraints (CJH Only)

The Detention Services Bureau Policy (DSB-1000) is the policy section regarding the use of Mechanical Restraints and Safe Crisis Management. This policy was developed in collaboration Juvenile Court Health Services (JCHS) and the Department of Mental Health (DMH).

The use of mechanical restraints (handcuffs) at CJH is limited. However, documentation of mitigating circumstances that may preclude the use of mechanical restraints has been lacking in our Physical Intervention Report (PIR) documentation per policy. Real time training is being provided by the Probation BSCC Compliance Team to staff when writing reports post use of mechanical restraints. Policy review will be conducted with staff and sign offs will be collected. The policy review will highlight the documentation in the PIR to include the assessment of mental health, medical and trauma that would preclude the use.

## **County Supplemental Response:**

Training continues to be provided to staff on report writing after the use of mechanical restraints.

#### Title 15, Section 1360(a): Searches

The ability to conduct searches on a consistent basis has been impacted by low staffing levels. Mandatorily deployed field staff, overtime staff and continuous hiring of new staff is in process to increase staffing levels at both facilities. Staff assigned to the Department's Special Enforcement Operations (SEO) have deployed to the juvenile halls to assist with searches, as needed. K-9s assigned to these staff are frequently utilized to conduct searches. Effective March 6, 2023, a team of eight to ten SEO staff were dedicated to BJNJH Monday through Friday from 7 AM to 3 PM to assist with searches and school movements. An additional SEO Team will be assigned to conduct unannounced searches twice per week. Search teams are being deployed to CJH, as available and necessary. Additionally, the reassignment of a minimum of 100 field staff to the juvenile halls will be effectuated beginning March 20, 2023.

#### **County Supplemental Response:**

Effective April 10, 2023, staff shall search youths' room on a daily basis. In addition to daily searches, each shift shall conduct at least two thorough unit contraband searches each week to be led by the supervisor. The addition of the 100 reassigned staff will support compliance with required searches.

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### Title 15, Section 1370(b)(6) – Education

Due to low staffing levels, youth do not consistently attend school in the classrooms. When youth are not in classrooms, they are either provided instruction in the Unit and/or receive educational packets in lieu of in-person instruction. The reassignment of 100 field staff to the juvenile halls will enable more consistent movement of young people in both facilities to classrooms.

# **County Supplemental Response:**

Staff are being assigned to specifically take youth to school. The Department has deployed staff who are assigned to the Special Enforcement Operations unit to each hall to assist in providing the needed supervision to ensure the transportation of youth from the living units to the school.

#### Title 15, Section 1371: Programs, Recreation and Exercise

**Programs (CJH Only):** Written annual program reviews, to ensure content offered is current, consistent, and relevant to the population, have been submitted to the BSCC for seven of eight programs offered at CJH. In addition to community-based organizations and volunteers, Probation staff provide programming in the forms of arts and crafts and topical group discussions with youth. The Department of Mental Health (DMH) is also partnering to provide additional programming at CJH. The County's Chief Executive Office is assisting the Department with the procurement of additional services through a Master Services Agreement process that will shorten the time to identify and quality relevant service providers.

**Exercise:** Daily large muscle activity has not consistently been provided due to low staffing levels. The reassignment of 100 field staff to the juvenile halls will enable more consistent access to exercise for young people in both facilities. The Los Angeles County Office of Education has incorporated Physical Education (PE) into their school schedule, providing access to workout equipment. Badminton has been added to several dorms at CJH as a physical activity used daily.

# **County Supplemental Response:**

The Department has a Master Services Agreement in place and are currently working with approximately eight (8) agencies and community-based providers to pre-qualify them in their respective service category. In addition, Juvenile Hall operational staff are currently developing Statements of Works to meet the programmatic needs of the youth. SOWs are being submitted on a flow basis and upon completion, a competitive Work Order solicitation will be released.

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#### Services to be Provided:

- Life Skills
- Music Production
- Culinary
- Barber
- Gang Intervention
- Gender Specific

#### Title 15, Section 1374: Visiting (CJH Only)

A dedicated child-friendly visiting room has been established for the youth and their children. Staffing in the Family Resource Center has been implemented and training for this role has begun. A consistent process of documentation specific to virtual calls provided when in-person visits do not occur will provide proof of practice. Additional smart phones have been ordered for each Supervisor and Director to increase the use of virtual calls.

# **County Supplemental Response:**

Additional phones were ordered and have been distributed to each designated staff person. This noncompliance item is therefore resolved.

#### Title 15, Section 1390: Discipline

Technical assistance is being provided by the Council of Juvenile Justice Administrators (CJJA), via the Department of Justice (DOJ) Monitor, to create a robust Behavior Management Program (BMP). A draft manual will be completed by March 31, 2023 and submitted to the DOJ for review. A 16-hour training course will be implemented in April 2023 and two pilot units at each facility will be identified for a phased roll-out in May 2023. Both facilities have continued to build on their existing programs, as an interim solution.

#### **BSCC** Response:

In your March 23, 2023, letter your Board stated "Likewise, the details for correcting the deficiencies noted in implementing Section 1390, Discipline, are also lacking."

#### **County Supplemental Response:**

The County will submit a revised Behavior Management Program manual to the CA DOJ Monitoring Team for approval on April 6, 2023. The County expects the CA DOJ Monitoring Team will approve the revised BMP manual during their April 6, 2023 visit. The County is in the process of developing the training curriculum which will include 8 to 16 hours of in person training. Additionally, a training schedule is being developed to ensure full implementation of this new BMP program prior to reinspection. Pending the roll out of the new BMP program, the County will continue to use the existing BMP program. Attached is the handbook for the existing BMP program.

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### Title 24, Section 1230.2.10: Security Glazing

Per the BSCC, this regulation became effective in 2003. However, this item of non-compliance was not previously identified in prior BSCC inspections. The Department continues to work with the BSCC to identify an acceptable "detention grade" glass to serve as a replacement of the approximately eighty-one broken windows in need of replacement. The Department has submitted to the BSCC a possible solution that would not require the reframing of each of these windows to support the "detention grade" glass replacement.

### **County Supplemental Response:**

On March 29, 2023, Probation Leadership met with BSCC and sought additional clarification on the type of windows required to replace the broken windows as the building was constructed in 1998 in the absence of Title 24 regulations. The BSCC has never raised this issue before during its inspections or when the County replaced windows after the regulations were updated. BSCC representatives advised us on May 29, 2023, that they would investigate this issue and provide us a written response as to whether the County is being held to the pre-2003 standard for the halls or the post-2003 Title 24 standards. It is important to note that this investigation was not performed before the BSCC issued its noncompliance finding to the County. Since receiving the noncompliance notice, Probation received inconsistent answers from the BSCC about which standard the County is required to meet to get into compliance. In lieu of clear BSCC guidance, the County continues to pursue various options for detention grade glass replacements.

Probation's Management Services Bureau is in the process of ordering and installing Title 24 compliant windows in the juvenile halls to be completed by May 28, 2023. There are a total of 87 broken glass replacement orders that will be addressed on a phased-in basis. However, in some instances, the current frames will not accept the Title 24 compliant ¾ inch glass. Where this occurs, the department plans to temporarily install polycarbonate 3/8 or ¼ inch material (a high impact product) to eliminate blind spots which is a safety concern for staff and youth. To address the frame/glass issue, MSB is coordinating with the County's Internal Services Department (meeting held on March 31, 2023) to inspect and develop a plan to augment and/or replace the frames to accept the thicker glass. As this is completed, MSB will update the frames and glass accordingly.

#### Title 24, Section 1230.1.7: Single Occupancy Sleeping Rooms

Effective March 3, 2023, the Department's Management Services Bureau (MSB) began prioritizing work orders specific to obscured windows, providing a response within one day. MSB identified obscured windows at both BJNJH and CJH, both blurred with personal hygiene products and those that are scratched/etched. The cleaning of blurred windows is being immediately corrected. Windows with significant etching that obscures staffs' ability to monitor youth in their rooms will be prioritized for replacement.

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### **County Supplemental Response:**

The Department identified a total of 2,498 etched windows: 1,622 at BJNJH and 876 at CJH. Operational staff has conducted a review of BJNJH and determined no etched windows required servicing and/or replacement as the etching does not obscure the ability of staff to effectively perform safety checks. A review of CJH is in progress and once the number of etched glasses that require replacement are identified, MSB will initiate the procurement process.

### Title 24, Section 1230.2.6: Lighting

Staff will continue to instruct youth not to cover night lights. The Department has conducted an evaluation of technology to dim night lighting and has selected a solution. This solution will be rolled-out with homelike improvements, as a list of vendors are established. An anticipated timeline will be provided to the BSCC as the vendor procurement is completed.

# **County Supplemental Response:**

The light dimmers have been ordered. The lead time for delivery is 4 to 6 weeks with the expected arrival in early May and full installation by June 2023.

#### Title 24, Section 1230.1.5: Living Unit

The structure of the existing juvenile halls includes offices that hinder direct access and supervision of youth when staff are positioned in the office and youth are in their rooms. An Instructional Memo will be provided to staff by March 31, 2023 directing them that there must always be one staff present in the unit whether a youth is in their room or not.

### **County Supplemental Response:**

The instructional memo was provided to staff on March 31, 2023.

#### Title 24, Section 1230.1.11: Physical Activity and Recreation Areas

On March 9, 2023, MSB and an Internal Services Department (ISD) electrician supervisor/project manager met to review possible upgrades to the current field lighting at BJNJH. An engineering assessment is pending completion. If this work cannot be completed within 90 days, we will explore bringing in lights affixed to generators to remedy this finding. CJH upgraded the outdoor lighting in February 2022, however, an assessment of this lighting upgrade will be further considered to determine if the lighting is sufficient or if additional enhancements are necessary.

#### **County Supplemental Response:**

MSB is coordinating with ISD to identify vendors who can provide temporary stadium lights for both juvenile halls. ISD will provide lighting options to Management Services Bureau by

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April 4, 2023 and the most expedient option will be selected to move forward to ensure compliance by June 2023.

#### **Suitability Determination**

Lastly, in the March 29, 2023, meeting with the BSCC Representative Lisa Southwell and General Counsel Aaron Maguire, we were informed that in the event that Barry J Nidorf Juvenile Hall was deemed unsuitable that the post disposition SYTF youth that are currently housed in the facility would be allowed to remain as they reside in the hall under a separate designation. We requested further clarification as to which areas of noncompliance are being evaluated for the basis of the suitability hearing pursuant to the Welfare and Institutions Code section 209 because the County did not receive two separate documents detailing noncompliance items for the pre-disposition youth and post-disposition SYTF youth currently housed at Barry J Nidorf Juvenile Hall. It is important to note that the conditions facing the pre-disposition youth are extactly the same for SYTF youth in the halls. If the BSCC contends the halls are unsuitable, then please confirm: (1) the state will not send any additional SYTF youth to the County until these suitability concerns have been resolved; and (2) the state will accept back into its custody the SYTF youth currently in the halls until those concerns have been resolved as well.

The Department is committed to ensuring and maintaining compliance with both Title 15 and Title 24 Regulations in all of our facilities. Should you have any questions regarding this Corrective Action Plan, please do not hesitate to contact me at (562) 940-2501.

Sincerely,

Karen L. Fletcher

Karen L. Nekker

Interim Chief Probation Officer

c: Fesia Davenport, Chief Executive Officer, Los Angeles County Dawyn R. Harrison, County Counsel, Los Angeles County Celia Zavala, Executive Officer, Board of Supervisors Max Huntsman, Office of Inspector General, Los Angeles County Wendelyn Julien, Executive Director, Probation Oversight Commission Honorable Akemi Arakaki, Presiding Judge of the Juvenile Court

#### LOS ANGELES COUNTY PROBATION DEPARTMENT

DETENTION SERVICES BUREAU 9150 E. Imperial Highway, Downey, CA 90242

# JUVENILE HALLS' BEHAVIOR MANAGEMENT PROGRAM

#### INTRODUCTION

The Los Angeles County Probation Department operates three juvenile halls and houses an average of 1,600 minors per day. While the basic mission of the juvenile hall is to provide temporary custody for juveniles while they proceed through the court process, the detention time is also utilized as an opportunity to assist in redirecting delinquent minors toward a positive, more productive, law abiding lifestyle. Herein lies the ultimate goal of the juvenile hall, which is to promote and enhance public safety while attempting to increase pro-social behaviors on the part of all detained minors.

The overall program in the juvenile halls ties together many concurrent and interrelated efforts of the Detention Services Bureau and its collaborative partners (other County departments, community-based organizations and volunteers), into a cohesive strategy to reduce recidivism and influence detained minors into becoming productive citizens. This is accomplished through a **Behavior Management Program (BMP)** that identifies rules/expectations and reinforces positive behaviors through a mechanism that links rewards, incentives/privileges, and consequences to the minor's behavior, and encourages progress toward achieving identified short-term goals.

The Behavior Management Program is a collaborative effort between the Los Angeles County Probation Department (LACPD), the Los Angeles County Office of Education (LACOE), the Department of Mental Health (DMH), and Juvenile Court Health Services (JCHS). The BMP is an activity-rich and highly structured programming model that emphasizes positive reinforcement for appropriate behaviors while seeking to minimize the use of negative consequences. The program is designed to provide minors with services to meet their physical, emotional, social and educational needs that will assist them in making appropriate decisions to avoid re-offending. It also provides multiple opportunities for minors to practice new behaviors each day. The BMP holds minors accountable for carrying out the activities and practicing the skills identified in the curriculum while placing the decision to change and the effort required for change solely on the detained minor. The program is vital to the adoption of productive and pro-social behaviors by detained minors who will upon release return to their respective communities.

The BMP identifies specific activities to be performed and skills to be learned in order to mitigate criminogenic risk factors that research indicates predict future criminal behavior. Probation and its collaborative partners provide targeted programs and services to help mitigate these risk factors.

The criminogenic risk factors identified are: (1) delinquency, (2) education, (3) family, (4) peer, (5) substance abuse, and (6) individual. Delinquency includes prior arrests, significant crime in neighborhood, offenses committed while under the influence, assaultive or fighting behavior, and delinquent orientation. Education includes poor academic achievement, pattern of truancy during past year, pattern of suspension/expulsions, disruptive classroom/school history, and presently not in educational program. Family includes poor relations with parent(s), parental supervision deficiencies, chaotic family, parental criminality/ substance abuse, and runaway history. Peer includes social isolation, very few pro-social acquaintances, gang affiliation/association, delinquent friends, and no meaningful relationship with any adult. Substance Abuse includes a pattern of alcohol use, use of mood altering substances (other than alcohol), frequent use of substances, substance use that interferes with daily functioning, and early onset of substance abuses. Individual includes no pro-social interests, supportive of delinquency, anger management issues, sensation seeking, and manipulative/deceitful behaviors.

In summary, the **Behavior Management Program** is a facility-wide multi agency effort that integrates the interdependent components of the juvenile hall operation into one comprehensive approach to behavioral change. The components include educational opportunities, mental health care, medical treatment, and the provision of probation services, including recreational activities.

#### **Role of Collaborative Partners:**

The following is a description of each partner agency and their role in the execution of the BMP:

#### **Los Angeles County Office of Education**

The Los Angeles County Office of Education (LACOE) is a partner agency that provides educational services to minors detained in juvenile hall. In addition to the regular education program it provides, LACOE assists Probation in the delivery of the LEAPS (Life Excelerator - Assessment of Personal Skills) skills development program. LEAPS is an instructor-led, comprehensive library of turn-key lesson plans that trains minors in the essential coping, adapting and functioning skills they need to experience success in life. In the classroom, LACOE personnel reinforce LEAPS skills development training by having minors complete the "Discussion Points" section of the LEAPS exercise that was delivered the previous day by Probation personnel.

#### **Los Angeles County Department of Mental Health**

Mental Health is a partner agency that provides mental health services to the minors detained in juvenile hall. Mental Health staff are active in the living units of the juvenile halls and assist Probation staff with behavior management and rehabilitation-oriented programming. Mental Health's participation includes information on how to structure group activities, establishment of mechanisms for minors to practice skills, and effective methods to motivate and reward minors for building and demonstrating learned skills.

#### **Juvenile Court Health Services**

Juvenile Court Health Services (JCHS) is a partner agency that provides health related services (medical, dental, nursing, etc.) to minors detained in juvenile hall. JCHS contracts with health educators who assist Probation in the development of the curriculum for health education. JCHS currently provides medical screening, routine, non-emergency and emergency medical care to all medical minors in juvenile Hall. JCHS also provides sexually transmitted disease (STD) screening and follow up and gender-specific case management through its affiliation with the Los Angeles County Department of Health Services. The Public Health Nurse from the Public Health Prenatal Counseling Program (PCP) provides pregnant girls with medical follow up and educational information. The public health nurse also assists pregnant girls (upon release) in establishing linkages with community-based resources.

#### **POLICY**

The policy of the Los Angeles County Probation Department - Detention Services Bureau is to encourage the pro-social behavior of all minors detained in its three secured juvenile hall facilities. This is accomplished through a **Behavior Management Program** that identifies rules/expectations and reinforces positive behaviors through a mechanism that links rewards, incentives/privileges, and consequences to the minor's behavior, and encourages progress toward achieving identified short-term goals. The program incorporates a structured environment where minors can experience emotional growth and practice pro-social behaviors.

The **Behavior Management Program** serves as a blueprint for change and is central to long-term public safety.

# **BMP Objectives:**

The primary objectives of the **Behavior Management Program** are:

- ➤ To foster minors' compliance with the detention facility rules and expectations through a system of rewards, incentives/privileges and consequences:
- To provide opportunities for minors to learn and practice alternative pro-social means of meeting their needs and methods of dealing with problems;
- ➤ To promote a safe, healthy and productive approach to life, free from alcohol, substance abuse, and gang activity; and
- To celebrate diversity and encourage respect for others.

# Target Population/Groups:

The **Behavior Management Program** is designed to serve the diverse needs of 13-18 year old male and female juvenile offenders. The program uses a structured program of activities to address various criminogenic needs that numerous studies have concluded contribute to delinquent behavior.

#### RATIONALE

The **Behavior Management Program** motivates the minors to be consistent in demonstrating appropriate pro-social behaviors by providing rewards, incentives/privileges and consequences that provides them with on-going feedback concerning their behavior. To this end, the staff maintains an ongoing level of interaction with detained minors in order to provide a safe laboratory to learn better ways of analyzing problems and resolving difficulties. In short, the minor's behavior management system provides a structured environment where they can utilize their time in a positive and constructive manner.

#### PROGRAM STRUCTURE

The **Behavior Management Program** is comprised of two major components:

- 1) **Behavioral Component:** comprised of a token economy, various incentives/ privileges, and recreation programming. Collectively, they are designed to reinforce desired behaviors, including active participation in skills development training sessions.
- 2) Rehabilitative Component: designed to teach minors the emotional and social skills needed to lead healthy and productive lives. The rehabilitation component integrates two curriculums, that is, the Life Excelerator -

Assessment of Personal Skills (LEAPS) and Girls Reaching Out to Womanhood (GROW), into one comprehensive skill development training program.

#### BEHAVIORAL COMPONENT

The behavioral component of the **Behavior Management Program** is designed to increase desired behaviors through positive reinforcement. Lasting behavior change does not occur as a result of punishment. Instead, minors must be engaged in programs, motivation must be enhanced through positive reinforcement, and minors must be given skills to handle feelings and social pressures in alternative healthier ways for behavioral change to take place.

Rewards and incentives are powerful reinforcers and, therefore, a vital component of the BMP. Learning, which is a significant element in the program, is best facilitated by a reward and incentive system. These reinforcers enhance the motivation of minors to learn new behaviors and adopt new attitudes; thus, it is essential that rewards and incentives be given when they are deserved. Rewards and incentives also increase the probability that newly learned skills will be used in new settings and at later times.

The BMP utilizes rewards as tangible reinforcers (e.g., food and personal items) and incentives as privilege reinforcers (e.g., movie and healthy snacks).

#### Rewards

The following are some of the rewards that can be utilized as reinforcers to maintain and promote minors' pro-social behaviors:

<u>Verbal Rewards</u>: A kind word, gesture, or smile, can serve as a basic form of reward and should always accompany the completion of a task.

Reward Points: Staff and teachers award points to minors as recognition for their behavioral accomplishments and acknowledgement of a job well done.

<u>Special Activities</u>: Barbecues and other activities are effective forms of rewards. These activities are instrumental in providing opportunities for minors to try out new behaviors and attitudes learned through the behavior management program. Also, these activities allow staff to observe the minor's new behavior and evaluate his/her progress.

<u>Certificates of Merit</u>: The successful completion of assigned tasks, rehabilitation-oriented trainings, school programs, and other special achievements can be acknowledged with specially designed certificates. These certificates (e.g., Minor of the Week and/or Group of the Week) will be awarded during the

Community Structure. Minors will be given the opportunity to display certificates in their rooms to serve as a reminder and reinforcement of the behavior that lead to their achievement.

#### Other Rewards:

- Magazines and Books
- Games and Movies
- Healthy Snacks (low fat)
- Toiletries (toothpaste, soap, shampoo, conditioner, deodorant, lotion)
- Commendations
- Paper Rewards Letters and Certificates

#### **Incentives**

The following are incentives that will be utilized as reinforcers in the Behavior Management Program to maintain and promote pro-social behavior:

#### 1. Pro-Social Bonus Points

Staff shall award bonus points to minors observed demonstrating pro-social behaviors. Minors that demonstrate pro-social behaviors can be awarded a maximum of three bonus points per shift. For example, a minor is being provoked to fight, but instead of engaging in the fight the minor chooses to walk-away from the confrontation and/or brings the matter to the attention of staff. In the referenced situation the minor could have chosen to respond with aggression, but instead chose a response that he learned in skills development training sessions. Staff shall respond with praise and encouragement for the minor's positive actions and award points to reinforce the behavior. When staff rewards such behavior, the likelihood that that it will continue increases a great deal

LACOE teachers and Mental Health staff can also award pro-social bonus points by completing the *Pro-Social Bonus Points Notification* form. Completion and submission of the form alerts unit staff that the minor has demonstrated pro-social behaviors and should be awarded the designated number of points (maximum of three points).

Examples of pro-social behavior include:

- 1) Minor's giving encouragement to other minors not to fight.
- 2) A minor's personal items are stolen, but instead of engaging in a heated confrontation with others, the minor alerts staff to resolve the matter.
- 3) A minor becomes angry and has a verbal outburst directed at staff, but once corrected he accepts responsibility and apologizes for his actions.

## **Token Economy Point System**

Rewards and incentives are *administered* through a token economy point system. Token economies are one of the most often-used behavior management techniques, especially in settings where minors have learning and/or behavioral difficulties. A token economy system aims to increase the frequency of a minor's desirable behaviors and decrease the frequency of undesirable behaviors. This behavioral change system involves awarding tokens (or points) to minors who demonstrate desired behaviors. Minors may periodically exchange their tokens for rewards, which are items or activities desirable to them.

Token economies are often quite effective for minors who are resistant to other types of motivational and/or behavior management techniques. Among the other benefits of this system are ease of administration; the use of tokens for immediate reinforcement while teaching delayed gratification (holding tokens until trade in time); lack of boredom or satiation for the minor due to the availability of a variety of back-up reinforcers; and lack of competition between minors as they compete only against themselves.

Token economies have great flexibility and utility. In fact, they have been shown in research studies to be effective with minors having various kinds and severities of disabling conditions. Perhaps the reason why they are so effective is that tokens earned are visible evidence of progress. Token economies also remind the minor to display proper behavior, and assure that staff will notice appropriate behavior and interact with the minor in a positive manner.

The token economy of the Los Angeles County Probation Department - Detention Services Bureau works on the same premise, but utilizes points instead of tokens to reward minors for the successful completion of identified pro-social behaviors. The points earned can then be utilized to purchase items from the Al Jones Store (named in honor of a former Probation Director).

Providing minors with positive reinforcement for their demonstration of desired behavior will increase the frequency of the behavior. Therefore, staff must not wait for a desired behavior to occur on its own to provide reinforcement. Instead, staff should create contexts in which positive behavior is likely to occur and praise it. For example, if the desired behavior is for the minor to get through an 8-hour shift without engaging in disruptive behavior, the staff might first set a goal for the minor to go 3-hours without demonstrating disruptive behavior. If and when the minor meets the three-hour goal, staff would give praise for the minor's accomplishment, thereby reinforcing the behavior. The 3-hour goal provides an opportunity for the minor to begin taking incremental steps toward achieving a

desired behavior. By providing such incremental goals, staff will give the minor an opportunity to practice being successful and begin shaping the minor's behavior. Such practice will not only reinforce desired behavior, but will bolster the minor's hope for change.

## **Point Awarding Framework**

The **Behavior Management Program** is designed to furnish minors with prompt feedback regarding behavior-related performance. This feedback is accomplished through many avenues, one of which is the awarding of points for the successful demonstration of pro-social behaviors during scheduled programming activities.

Some examples of pro-social behaviors may include: 1) a minor giving encouragement to other minors not to fight; 2) a minor whose personals items are stolen by another minor alerts staff to resolve the matter rather than engaging in a heated confrontation; 3) a minor becoming angry and having a verbal outburst directed at staff, but once corrected he accepts responsibility and apologizes for his actions; and 4) a minor being provoked to fight, but instead of engaging in a fight the minor chooses to walk-away from the confrontation and/or brings the matter to the attention of staff.

Of course, in all the above mentioned situations the minors could have chosen an inappropriate/unacceptable behavior to handle the challenge, but instead chose a pro-social response that he/she probably learned in a scheduled programming activity. So, what is important is that staff responds with praise and encouragement for the minor's positive actions and award points to reinforce the behavior. The likelihood of that behavior continuing increases a great deal when staff rewards such behavior.

The successful completion of these pro-social behaviors is monitored daily by living unit and school staff. Points are awarded throughout the day in different activity periods, including school periods. Depending on the activity period, probation staff or school staff awards the minor the appropriate number of points allocated for that particular programming activity/period.

The daily maximum number of points a minor can earn is thirty (30). The daily allotment of points is divided equally between Probation and LACOE from Mondays to Fridays (i.e., 12 points from probation and 12 points from school).

Minors attend six (6) classes per school day and will be awarded two (2) points in each class for the successful completion of pro-social behaviors in the educational setting. Minors can accumulate a grand total of twelve (12) points for each day of school. School staff (i.e., teachers) will determine whether or not a minor has successfully behaved in a pro-social manner in a particular class.

When a minor fails to complete the pro-social behaviors for a particular class, the teacher shall complete a "No Points Earned Notification" form.

Although school is not in session during weekends and holidays, minors will still be able to earn thirty (30) points per day from probation staff during Saturdays, Sundays, and Holidays. The twelve (12) points that are normally allocated for school performance on weekdays will be equally divided amongst and added to the AM and PM period (6 points per period) during weekends and holidays.

Three (3) bonus points for the **AM Probation Period** and three (3) bonus points for the **PM Probation Period** can be awarded daily by probation staff to minors exhibiting pro-social behavior for a grand total of six (6) bonus points. These bonus points can be earned Monday through Fridays, weekends and holidays.

Over the course of a seven (7) day week, a minor can accumulate a grand total of two hundred and ten points (210).

The following is a description of the points that can be awarded Monday through Friday, as well as Saturday, Sunday and Holidays, during a particular period/time:

Monday through Friday			
Period	Time	Maximum Points Possible	
AM Probation Period PM Probation Period Night Probation Period	(6 AM to 2 PM) (2 PM to 10 PM (10 PM to 6 AM	•	
AM School Period PM School Period	(8:30 AM to 11:4 (1 PM to 2:45 P	, .	
Saturday, Sunday and Holidays			
Period	Time	Maximum Points Possible	
AM Probation Period PM Probation Period Night Probation Period	(6 AM to 2 PM) (2 PM to 10 PM) (10 PM to 6 AM)	11 Points + 3 Bonus points 11 Points + 3 Bonus points 2 Points	

Minors will be awarded these points based upon their successful participation and demonstration of appropriate behavior during scheduled programming activities.

# **Additional Point Awarding Guidelines**

- 1. Points can only be earned for the successful completion of pro-social behaviors during scheduled programming activities.
- 2. Minors temporarily transported to another juvenile facility for court hearings, medical/dental appointments, hospitalization, etc., will still accumulate points as long as the minor exhibits pro-social behaviors.
- 3. Minors that have already graduated from high school and are not participating in any school program will have twelve (12) points added to their daily score. These points shall be based on good behavior and the completion of assigned chores.
- 4. The number of points necessary to purchase specific items from the Al Jones Store with either reward points, Al Jones Stamps and/or E-Tickets will be clearly posted in the store.
- 5. When behavior fails to meet the required standard for a scheduled programming activity, a zero (0) shall be designated in the column that corresponds to that programming activity.
- 6. When a minor receives any of the consequences listed for *mildly disruptive*, *moderately disruptive and/or severely disruptive* behaviors by probation staff, no points will be awarded to the minor. The probation staff handling the Board will designate a zero (0) in the appropriate activity column to any minor that falls within these categories.
- 7. When a minor is suspended from school and/or is sent to the Special Handling Unit (SHU), no points shall be awarded to the minor for the activity period during which the infraction occurred or any remaining activity periods for that day.
- 8. The *Merit Ladder* weekly grading period runs from Saturday through Friday. Reward/bonus points cannot be deducted once a minor earns them and they are recorded on the merit ladder by staff. The only exception to this rule is when minors purchase items from the Al Jones Store.
- 9. Merit Ladder points shall be always treated as the minor's personal bank account.

#### **Transfer of Merit Ladder Points**

*Merit Ladder* points earned in one juvenile hall can be utilized in another juvenile hall. Therefore, minors who are transferred between juvenile halls will have their merit ladder points transferred with them.

When a minor is going to be transferred between juvenile halls, detention staff is required to record/document in the minor's behavior file both the minor's transfer and the cumulative total number of merit ladder points. The detention staff handling the minor in the receiving juvenile hall (on any shift) is responsible for adding the minor to the population record, *Daily Rating Tally Sheet*, and

*Merit Ladder*. The referenced staff is also responsible for transferring the minors' cumulative number of merit ladder points from the incoming juvenile hall to the merit ladder in the receiving juvenile hall.

# **Activity Periods Framework**

To ensure the equitable distribution of reward points and bonus points throughout the day, each day is divided into several periods. Monday through Friday is divided into five (5) periods, and weekends and holidays are divided into three (3) periods because school is not in session.

What follows is a breakdown of each period and their time span during a day:

Monday through Friday			
<u>Period</u>	<u>Time</u>		
AM Probation Period	(6 AM to 2 PM)		
PM Probation Period	(2 PM to 10 PM)		
Night Probation Period	(10 PM to 6 AM)		
AM School Period	(8:30 AM to 11:45 AM)		
PM School Period	(1 PM to 2:45 PM)		
Saturday, Sunday and Holidays			
<u>Period</u>	<u>Time</u>		
AM Probation Period	(6 AM to 2 PM)		
PM Probation Period	(2 PM to 10 PM)		

Each period is divided into one or more activities irrespective of whether it occurs on a weekday or weekend. Incorporated within each of these activities are pro-social behaviors that are specific and relevant to that activity. The successful completion of a specified number of these pro-social behaviors (see Appendix I) ultimately determines the reward points, bonus points and incentives/privileges each minor receives.

(10 PM to 6 AM)

Night Probation Period

The following is a breakdown of each period and the relevant activities, with the points assigned per activity in parenthesis: ------ Monday through Friday ------ Monday through Period Activity AM Period ---- Wake-up/Breakfast (3 points) Wake-up Grooming Movement to dining area Breakfast Unit/room Clean-up Movement to school Lunch (2 points) Movement to unit Meal Movement to school PM Period ---- After School/Skills Development Training (2 points) Movement from school Preparation for recreation Recreation/Skills Training Dinner /Skills Development Training (2 points) Meal Rehabilitation-oriented training After Dinner/Showers (1 Point) Night Behavior --- Sleep time (2 points) AM School ----- Class 1 (2 points) Class 2 (2 points) Class 3 (2 points) Class 4 (2 points) PM School ---- Class 5 (2 points) Class 6 (2 points) ------ Saturday, Sunday and Holidays -------<u>Period</u> Activity AM Period ---- Wake-up/Breakfast (3 points) Wake-up Grooming

Movement to dining area
Meal
Recreation/Skills Development Training (6 points)
Rehabilitation-oriented training
Recreation
Lunch (2 points)

PM Period ---- Recreation/Skills Development Training (6 points)
Preparation for recreation or skills development training
Recreation or skills development training
Dinner/Skills Development Training (4 points)
Meal
Rehabilitation-oriented training/Recreation
After Dinner/Showers (1 point)

Night Behavior ---- Sleep time (2 points)

#### TOKEN ECONOMY-POINT AWARDING DOCUMENTS

There are four types of point awarding documents utilized in the token economy of the Behavior Management Program:

- 1) Daily Rating Tally Sheet
- 2) Merit Ladder
- 3) No Points Earned Notification
- 4) Pro-Social Bonus Points notification

#### 1. Daily Rating Tally Sheet

This document is used by probation staff to record reward points and bonus points for the successful demonstration of pro-social behaviors. The *Daily Rating Tally Sheet is* completed by probation staff working the **6-2 pm, 2-10 pm and 10-6 am** shifts, and must include the date of completion, juvenile hall/unit, name of each staff per shift responsible for completing the form, and the name of each minor assigned to the unit.

What follows are the responsibilities of probation staff at the line and supervisory levels:

- 1. The **6-2 pm shift** is responsible for assigning reward points and bonus points in the morning section of the *Daily Rating Tally Sheet*, and forwarding the tally sheets to probation staff working the 10/6 shift at the end of each day.
- 2. The **2-10 pm shift** is responsible for assigning reward points and bonus points in the afternoon/evening section of the *Daily Rating Tally Sheet*, excluding

the category for sleeping, and forwarding the tally sheets to probation staff working the 10/6 shift at the end of each day.

# 3. The **10-6 am shift** is responsible for:

- a. Using the *Daily Rating Tally Sheet* to tally the total number of points (i.e., reward points and bonus points) a minor earned each day during the probation periods (morning shift, afternoon shift, and evening shift) and during the school periods.
  - b. Transferring the cumulative total number of points to the *Merit Ladder*.
- c. Preparing the new *Daily Rating Tally Sheet* for the **6-2 pm shift** and adding new minors as necessary.
- d. Copying and posting the *Merit Ladder* in a designated area that is in plain sight of all minors.
- 4. When a minor misses the opportunity to earn reward points and/or bonus points due to inappropriate/unacceptable behaviors, probation staff have the responsibility to reflect a zero (0) point, or point loss, on the *Daily Rating Tally Sheet* in the minor's behavior file.
- 5. To ensure that minors are participating positively in the behavior management program and that probation staff are properly documenting their progress, Sr. DSO's are also responsible for reviewing, correcting and signing the *Daily Rating Tally Sheet* on a <u>daily basis</u> and the *Merit Ladder* on a <u>weekly basis</u> before advancing them to their supervisors.

# 2. Merit Ladder

This document is used by probation staff working the **10/6 night shift** to record the number of points each minor earned each day (i.e., reward points and bonus points) and the cumulative number of merit ladder points for the week. The *Merit Ladder* shall include the juvenile hall, unit, date, name of each minor assigned to the unit, number of points accumulated by each minor for the previous day (during all probation and school periods), and the number of merit ladder points accumulated by each minor for the week.

## 3. No Points Earned Notification

LACOE teachers utilize this document to indicate a minor has failed to successfully complete pro-social behaviors in a particular class and thus has failed to earn the available reward points for that class. Unlike probation staff, LACOE teachers do not utilize a point-awarding document to award points. Instead, minors automatically receive two (2) points for each class they attend; however, when a minor fails to behave appropriately in a particular class,

the teacher completes a *No Points Earned Notification* form. The form serves as notification to probation staff that the minor failed to earn points in the class indicated.

The teacher completes and forwards the form to the school office where it is later picked up by the Probation School Post staff. The school post staff ensures delivery of the form to the appropriate unit. Once unit staff receives the form, the Board DSO or designee will record a zero (0) on the *Daily Rating Tally Sheet* for the appropriate class period. A minor can only earn a zero (0) for those classes where he/she failed to behave in a pro-social manner. When the minor's school behavior is appropriate, the minor shall receive a full complement of points for all other class periods.

## 4. Pro-Social Bonus Points Notification

LACOE, Mental Health, and JCHS personnel shall utilize this document to award bonus points to minors that demonstrate pro-social behavior.

The staff observing the pro-social behavior completes the notification and forwards it to the minor's unit staff or to the school office if the behavior was observed in the classroom. The probation school monitor picks up the notification and ensures delivery of the form to the appropriate unit.

Once unit staff receives the form, the Board DSO or designee will transfer the number of points recommended to the *Daily Rating Tally Sheet* bonus point's column. Minors can receive a maximum of three (3) bonus points per shift. In cases where multiple pro-social bonus point notifications are received, all points exceeding the 3-point maximum per shift will not be allocated. However, multiple notifications shall be attached in the minor's behavior file. A minor can only earn a zero (0) for those classes where he/she failed to behave in a prosocial manner.

#### MINORS' PARTICIPATION IN PROGRAMMING ACTIVITIES

The opportunity is available to all minors (male and female) detained in juvenile hall to participate in scheduled programming activities, which are aimed at keeping them occupied in a positive and productive manner with a variety of learning experiences. As such, minors are expected to participate in the programming activities appearing on the daily schedule. The probation staff handling a scheduled programming activity is responsible for the primary behavior management of the minors and for providing continual supervision of the minors during said activity. Programming activities will include those scheduled in the living units, school, and other areas in the detention facility.

Minors are expected to demonstrate the following appropriate behaviors during all scheduled programming activities:

- Positive attitude/cooperation.
- Good listening/communication.
- Good citizenship/sportsmanship.

Minors are assessed according to the following areas of functioning during scheduled programming activities:

- Attentiveness.
- Respectfulness.
- Ability to follow instructions.
- Participation, cooperation and effort according to ability.
- Completion of activity.

Staff is to encourage the participation of minors in all scheduled programming activities such as educational, rehabilitation, recreational, and religious. The participation of minors in scheduled programming activities is expected to help their self-awareness and self-improvement and, likewise, promote the positive interactions between minors and staff.

Scheduled programming activities are expected to be conducted and administrative decisions are expected to be made in a non-discriminatory manner without regard to race, color, sex, national origin, age, sexual orientation, religious or political opinions, or handicap.

Minors with documented medical and/or emotional/behavioral issues will be restricted from scheduled programming activities:

- 1. Only Nursing/Medical and Mental Health staff is permitted to restrict minors from participation in scheduled programming activities due to medical, mental and/or developmental limitations. These staff are responsible for documenting a minor's restriction(s) on an *Activity Gram* (green slip) that shall indicate the nature of the restriction, the length of restriction, starting date/time and ending date/time.
- 2. In all cases involving physical, mental (emotional/behavioral), and/or developmental restrictions, appropriate documentation (*SIR's*: *Special Incident Reports*; *PIR's*: *Physical Intervention Reports*; *Activity Grams* (green slip); etc.) must be attached in the minor's behavior file, with no exception.

### MINORS' NON-PARTICIPATION IN PROGRAMMING ACTIVITIES

A minor who refuses to participate in scheduled programming activities without a justifiable cause will not receive reward points and incentives/privileges for the particular period in which the inappropriate behavior(s) was (were) exhibited.

Minors that refuse to participate in scheduled programming activities including, but not limited to, education, rehabilitation, recreation/exercise, religious activities, or any other type of schedule programming activity, must receive the following consequences:

- a. Minors will not be eligible to engage in reading and/or writing activities during the time of the scheduled program activity.
- b. Minors will not be eligible to watch television during the time of a scheduled program activity.
- c. Minors will not be eligible to use the telephone during the scheduled program activity.
- d. Minors are not to engage in any other kind of activity, except for those allowed by policy and/or regulation, during the time a scheduled program activity is refused.

#### **DISCIPLINARY CONSEQUENCES**

Just as rewards must exist in any motivational program that promotes behavioral change, consequences must also exist. Many of the minors in our system come from home and community environments that are unstructured, permissive of inappropriate and disruptive behaviors, and/or are overly punitive.

Staff must give minors structure by making clear the consequences (positive or negative) that will be forthcoming if they engage in inappropriate/unacceptable behaviors. Minors must learn that compliance with rules/expectations and the demonstration of pro-social behaviors will result in positive consequences, and that manipulative, non-compliant, aggressive, and/or oppositional behavior will always be met with disciplinary consequences. Staff must remain cognizant of the fact that, in order to be effective, consequences must always be aversive to the minor. Aversive consequences decrease the probability of a behavior occurring again.

## **Continuity of Disciplinary Consequences**

Staff shall always ensure that disciplinary consequences are applied in a fair and impartial manner. Minors shall be held accountable for their actions at all times. Minors demonstrating negative behavior (defiant, disruptive, disrespectful, etc.)

shall be counseled and have appropriate sanctions immediately imposed (e.g., Modified Program, SHU Transfer, etc.).

Staff shall not, under any circumstances, reward negative behavior. Staff that reward negative behavior cause irreparable damage to the integrity of the Behavior Management Program and thus, such actions cannot be tolerated. The rewarding of negative behavior also sends a message to all minors that negative behavior is condoned and will be rewarded.

Minors who demonstrate continuous behavioral difficulty shall have a Detention Observation Report (DOR) initiated by the Board DSO by the end of the shift during which the behavior occurred. The DOR shall be attached in the minor's behavior file. Any and all subsequent violations shall be documented in the minor's behavior file and on the attached DOR.

# Managing Inappropriate/Unacceptable Behaviors

Staff must be able to identify those behaviors that are inappropriate/unacceptable and assess the need for disciplinary consequences. Staff must always remain cognizant that not every undesirable behavior requires a punishment.

When giving consequences for a minor's behavior the focus must remain on the behavior, not on the underlying issues. Minors may act out for a number of reasons, which may include beliefs and/or attitudes that are racist, sexist, or otherwise victimizing in nature. Therefore, the time to resolve issues or restructure a minor's beliefs and/or attitudes should not be done immediately following an outburst. When a minor displays a behavioral outburst, the immediate objective must be to stop the problem behavior and teach the minor alternative ways to behave.

Addressing the question of *why* a minor did something should only be done after a "cooling off" period. Asking a minor to defend or analyze his behavior in the moment may risk reinforcing the behavior by giving it attention. Rather, staff should calmly give the designated consequence for the behavior, stating clearly to the minor what the problem behavior is, with no further attention to the question of *why*. If the question of *why* needs to be addressed, it should be done later, and only if the minor has the skills to cope with thoughts and emotions that may emerge as a result of such introspection.

The Board DSO is the staff responsible for responding to a minor's specific question regarding their participation in the behavior management program. He/she and the Sr. DSO are responsible for reviewing all the necessary

documentation on a minor when considering the disciplinary consequence required in a particular situation.

The following conditions must be met prior to consequences being applied to any minor for inappropriate/unacceptable behavior:

- 1. The minor must understand the rules and expectations for his behavior.
- 2. The minor must know how to perform the expected behavior. If the minor cannot perform the behavior, staff must attempt to teach each skill or provide assistance when and where necessary.
- 3. Minors should understand why they are expected to behave or perform in a certain manner. Staff must respond to any questions a minor may have in a professional manner.
- 4 Minors must understand that they may not earned some or all of their reward points and incentives/privileges for a particular day based on inappropriate/unacceptable behaviors, including any threat that they may have posed to the safety, order and security of minors and/or staff in the detention facility.
- 5. Minors must not only understand the disciplinary consequence associated with inappropriate/unacceptable behavior, but also the reward points and incentives/privileges that are available if they are in compliance exhibiting pro-social behaviors.
  - a. Each staff administering discipline is responsible for informing the minor of the consequences of their behavior at the time of the infraction.
  - b. At the time of the infraction, attempts should also be made to re-establish a rapport with the minor by discussing the incident.
  - c. If attempts fail at re-establishing rapport, the staff must continue to make efforts to communicate effectively with the minor throughout the shift.
- 6. Staff should not limit themselves to correcting inappropriate/ unacceptable behaviors of those minors in their direct supervision because they are responsible for overall behavior management in the juvenile halls. Inappropriate/unacceptable behaviors must be corrected immediately whenever they are observed in the juvenile hall.

# Categories of Inappropriate/Unacceptable Behaviors

Inappropriate/unacceptable behaviors are classified into three categories: *mildly disruptive*, *moderately disruptive* and *severely disruptive*. Each category has its own consequences, which follow a level of progression based on the seriousness of the behavior violation. The severity of the behavior determines the disciplinary consequences.

# 1. Mildly Disruptive Behavior

Mildly disruptive behavior is a category of behavior where minimal disruption is expected to occur to the safety, order and security of minors and/or staff in the detention facility.

Mildly disruptive behavior can occur unexpectedly and must be corrected immediately. Management of these behaviors does not tend to impact facility staffing and deployment of staffing resources.

The violations under mildly disruptive behavior include:

- 1. Profanity
- 2. Name Calling
- 3. Lying
- 4. Excessive Noise
- 5. Demanding/Ordering
- 6. Excessive Complaining
- 7. Littering
- 8. Misleading
- 9. Improper Dress Appearance
- 10. Trading Food/Property
- 11. Horseplay
- 12. Possession of Extra Clothing
- 13. Losing County Property (e.g., clothing, towels, school books, tools, etc.)
- 14. Other (as deemed by Probation Director or designee)

The consequences for mildly disruptive behaviors are:

- Verbal warning.
- Re-clarification of the rules and expectations.

## 2. Moderately Disruptive Behavior

Moderately disruptive behavior is a category of behavior that may cause disruption to the orderly management of the detention facility and thus requires

staff intervention to avoid compromising the safety and security of minors and/or staff.

Moderately disruptive behavior can occur unexpectedly and must be corrected immediately. Management of these behaviors may impact facility staffing and deployment of staffing resources.

The violations under moderately disruptive behavior include:

- 1. Failure to follow instructions
- 2. Racial remarks/slurs
- 3. Damaging property of minor(s) and/or staff
- 4. Damaging County property
- 5. Instigating
- 6. Theft
- 7. Verbal and/or physical vulgarity
- 8. Verbal and/or physical abuse
- 9. Failure to participate in facility scheduled programming
- 10. Possession/distribution of contraband
- 11. Flooding toilets or sinks
- 12. Unauthorized telephone usage
- 13. Entering unauthorized areas without permission
- 14. Tattooing
- 15. Moving out of staff supervision
- 16. Falsifying information
- 17. Repetitious acts of misconduct
- 18. Gang behavior
- 19. Gambling
- 20. Runs own program
- 21. Other (as deemed by Probation Director or designee)

The consequences for moderately disruptive behaviors are:

- Modified program.
- Referral/transfer to the Special Handling Unit (SHU) per approval of Sr. DSO.
- Detention Observation Report (DOR).
- Administrative Hold pending filing of additional charges with administrative approval (e.g., 1111, 602, 777, etc.).

## 3. Severely Disruptive Behavior

Severely disruptive behavior is a category of behavior that usually causes a major disruption in the orderly management of the detention facility and thus requires staff intervention to avoid compromising the safety and security of minors and/or staff.

Severely disruptive behaviors are considered <u>zero tolerance behaviors</u> because they are blatant acts of defiance and will not be tolerated.

Severely disruptive behaviors can occur unexpectedly and must be corrected immediately. Management of these behaviors certainly impacts facility staffing and the deployment of staffing resources.

The violations under severely disruptive behavior include:

- 1. Participation in major disturbance
- 2. Creating a disturbance after lights out
- 3. Self-injurious/suicidal behavior
- 4. Fighting
- 5. Gassing
- 6. Threats
- 7. Inciting/Participating in riotous behavior
- 8. Tampering with security equipment
- 9. Exchanging medication(s)
- 10. Group Disturbance
- 11. Intimidation/Bullying
- 12. Inappropriate/unacceptable sexual behavior
- 13. AWOL/Attempted AWOL
- 14. Individual assault on minor and/or staff
- 15. Group assault on minor and/or staff
- 16. Need for physical, chemical and/or mechanical restraint
- 17. Possession of drugs and/or alcohol
- 18. Smoking
- 19. Other (as deemed by Probation Director or designee)

The consequences for severely disruptive behaviors are:

- Suspension (during the rating week in which the violation occurred)
  of all BMP rewards/bonus points and incentives, including
  Al Jones Stamp, E-Ticket, and Al Jones Store visitation privileges.
- Contact parent and minor's probation officer.
- Referral/transfer to the Special Handling Unit (SHU) per approval of Sr. DSO.
- Referral to the Individualized Behavior Management Plan (IBMP).
- Administrative Hold pending filing of additional charges with administrative approval (e.g., 1111, 602, 777, etc.).

## **Restrictions Due to Behavior**

#### Phone Calls

Minors that engage in inappropriate/unacceptable behaviors and/or fail to earn at least 17 points per day shall be restricted from making any phone calls above and beyond the <u>one call per week</u> that is afforded to each minor detained in juvenile hall.

#### Housekeeping

Minors that engage in inappropriate/unacceptable behaviors and/or fail to earn at least 17 points per day shall also be restricted from engaging in housekeeping duties and other operational functions, that is, making shower rolls, messenger duty, sweeping, mopping, cleaning, etc. Rewarding these minors by allowing them to engage in such functions reinforces their behavior, undermines the positive efforts of other minors in the unit, and creates a negative perception amongst minors.

## **Documentation of Disciplinary Consequences**

The staff handling a scheduled programming activity is responsible for applying disciplinary consequences to minors engaging in unacceptable/inappropriate behaviors and completing all necessary documentation.

If the scheduled activity is a probation activity, probation staff are responsible for disciplining minors. If the scheduled activity is a school activity, school staff are responsible for disciplining minors.

When a minor receives any of the consequences listed for *mildly disruptive*, *moderately disruptive* and/or *severely disruptive* behaviors and/or when a minor is suspended from school, a *SIR* must be completed by probation staff and reviewed by the living unit's Sr. DSO and approved by the building SDSO, or Officer of the Day (OD). A copy of the *SIR* must be placed in the minor's behavior file.

#### REHABILITATION COMPONENT

The rehabilitation component of the **Behavior Management Program** integrates the gender-specific Girls Reaching Out to Womanhood (GROW) curriculum and the Life Excelerator - Assessment of Personal Skills (LEAPS) curriculum into one comprehensive skills development training program.

The integrated curriculum is comprised of both interactive skill development activities/exercises and related reinforcement components that work in collaboration to motivate participation and personal growth. The goal of the skills training curriculum is to replace ineffective and maladaptive emotional and behavioral responses with more effective and socially appropriate behaviors.

Skills development training is the backbone of any effective rehabilitation program. It provides minors with information to better manage their lives. Unlike the traditional subjects taught in school to minors such as math, history and geography, skills development training employs a curriculum, which if utilized, can assist in improving an individual's life circumstances. The curriculum does not tell minors how to live their lives, but rather ensures they have good information to develop a clear, eyes-open plan for the life THEY desire to live.

The BMP's skills development training curriculum is delivered daily (except Wednesdays and Thursdays) by detention staff (DSO's and Sr. DSO's) over a twenty-one (21) day rotational period (most exercises are repeated every twenty-one days). The curriculum utilizes interactive group presentations and a variety of communication strategies such as demonstrations, modeling, role-playing, and handouts. Each minor detained in juvenile hall for at least 21 days, which is the average detention stay, receives a minimum of 15 hours of skills development training instruction.

A Monthly Activity Calendar is utilized to schedule all skills development training sessions and is custom-developed for each living unit by the facility BMP Coordinator. To ensure the consistency of programming at all three juvenile halls, the calendar lists the days and times of the skills development training sessions and other supporting activities/exercises conducted in each unit. Compliance with the schedule is mandatory for all staff.

Although detention staff is the primary provider of instruction for the rehabilitation curriculum, LACOE and Mental Health staff have significant supporting roles in the delivery of the curriculum. In the classroom, LACOE personnel reinforce LEAPS training by having minors complete the "Discussion-Points" section of the LEAPS activity/exercise that was presented the previous night by probation personnel. This requires significant coordination and collaboration between LACOE and Probation, which is effectively accomplished through the Monthly Activity Calendar of the Behavior Management Program that is distributed to both organizations. Mental Health personnel provide training to probation staff and others on identifying and dealing with minors' mental health issues and effective handling of inappropriate/unacceptable behaviors on the part of minors.

## Girls Reaching Out to Womanhood (GROW) Curriculum

GROW is a gender-specific curriculum designed to provide females minors detained in juvenile hall with information and resources that will assist them in their transition to camp, placement and/or their return to the community.

The **GROW** curriculum is delivered in three phases:

## 1) Orientation Phase

--- Minors are introduced to the particulars of this gender-specific program.

## 2) Educational Component Phase

--- Minors receive skills development training that addresses the areas identified as risk factors that contribute to juvenile delinquency.

## 3) On My Own Phase

--- Minors are introduced to skills development training and tools that will aid them in their transition back into the community.

The **GROW** curriculum is comprised of the following instructional categories:

- A Woman's Sexuality
- Violence
- Personal and Family Relationships
- Healthy and Unhealthy Relationships
- Parenting Requires Sacrifices
- How to Balance Your Checkbook

The GROW curriculum creates multiple learning opportunities for female minors.

## Life Excelerator - Assessment of Personal Skills (LEAPS) Curriculum

LEAPS is an instructor-led, comprehensive library of turn-key lesson plans that train minors in the essential coping, adapting and functioning skills they need to experience success in life. The LEAPS program utilizes an individualized assessment tool that possesses the capacity to create automated profiles that aggregate and indicate functionality, categorizes strengths and weaknesses, and prescribes specific skills development training regimens to intervene in inappropriate/unacceptable behaviors, prevent the onset of maladaptive behaviors, and support the maturation process. Overall, the LEAPS curriculum is designed to enhance the personal, interpersonal, and social-cognitive skill levels of minors with the purpose of ensuring their pro-social behavior.

The LEAPS approach consists of a series of social learning instructional procedures. Through LEAPS, groups of delinquent adolescents are:

- a. Shown several examples of expert use of the behaviors that constitute the skills in which they are deficient (i.e., modeling);
- b. Given several guided opportunities to practice and rehearse these competent behaviors (i.e., role-playing);

- c. Provided with praise, reinstruction and related feedback on how well their role-playing skill enactments match the facilitator model's portrayals (i.e., feedback); and
- d. Encouraged to engage in a series of activities and discussions designed to increase the chances that skills learned in the training setting will endure and be available when needed in home, school, community, institutional, or other real-world settings (i.e., discussion points).

The LEAPS curriculum is comprised of 89 low maturity skill lessons and 109 high maturity skill lessons grouped into the following ten (10) modules:

- 1. Friends
- 2. School Rules
- 3. Stress and Anxiety
- 4. Respecting Self and Others
- 5. Anger and Emotional Management
- 6. Communication and Presentation
- 7. Decisions and Consequences
- 8. Hygiene
- 9. Managing Time and Attention
- 10. Social Life

The skills selected for the LEAPS program are pre-determined and reflected on the Monthly Activity Calendar of the Behavior Management Program. The large number of skills available allows the facilitator/trainer some flexibility to substitute some skill lessons for others.

Each lesson of the program is structured in the following format.

- 1. Goal a statement of why the skill is necessary.
- 2. Objective what the lesson will do for the student.
- 3. <u>Exercise</u> a comprehensive step-by-step instruction guide on how to teach, assimilate and organize the skills development training session.
- 4. <u>Discussion Points</u> probing questions to help determine comprehension and assimilation as well as the beginning points for group discussions.
- 5. <u>I Pledge</u> a self-affirming statement which the student repeats as a pledge to use this skill.
- 6. <u>Compliments and Pack-Pats</u> congratulatory and affirming statements for the students.
- 7. Right Ways and No Ways scenarios that offer the appropriate and inappropriate use of the skill and ask the student(s) to determine which.
  - 8. Summary a wrap up statement of the lesson.

## **Monthly Activity Calendar**

The Monthly Activity Calendar of the **Behavior Management Program** is the official schedule for all the program skills development training sessions, meetings, and other related activities. In short, it provides staff with the dates and times that specific activities and/or programs are to be conducted.

The calendar ensures the consistency of BMP programming at all three juvenile halls and is custom designed to fit the needs of each individual unit. The facility BMP Coordinator produces and distributes the calendar before the beginning of each month. The coordinator ensures that scheduled activities do not conflict with one another. LEAPS training courses are scheduled to ensure that minors who remain in juvenile hall for at least 21 consecutive days receive a minimum of 15 hours of skills development training instruction. The BMP Coordinator will meet monthly with each building SDSO to discuss special needs and programming preferences.

All activities listed on the calendar are in abbreviated form. The following legend of abbreviations is located at the bottom of the calendar:

- (CS) Community Structure
- (CBO) Community Based Organization
- (LEAPS) Life Excelerator Assessment of Personal Skills
- (GP) Group Presentation
- (ATE) Abstract/Lateral Thinking Exercises
- (BMSC) BMP Sponsored Competition
- (BMG)-BMP Sponsored Games

The calendar is also utilized to conduct observational audits once per week. During these unannounced audits, units are observed for their compliance in conducting skill development training sessions as scheduled.

#### **Reinforcement Practices**

The reinforcement practices of the **Behavior Management Program** intend to keep information alive in the mind of the detained minor. These supplementation and strengthening practices create a total learning environment that maintains program focus, aiding in the development of a therapeutic community that minimizes negative peer pressure and allows individual and group positive change.

Reinforcement consists of the following components.

- Periodic Reviews
- Learning Opportunities
- Rituals
- Community Structure

#### Recreation

All of these components are integrated into the normal juvenile hall unit schedule. The minor's continuous exposure and practice of these components will enable him/her to internalize and apply them to situations they encounter on a daily basis.

#### **Periodic Reviews**

The Periodic Review is a one-on-one counseling session that provides minors detained in juvenile hall with routine, but meaningful communication with staff. This communication is intended to furnish staff with information regarding the minor's adjustment in the unit and to provide information to the minor to ease his time in detention.

Short-term counseling sessions can significantly reduce stress, anxiety and enhance communication between staff and minors. By using these reviews, minors will be easier to work with, staff and minors will establish rapport, staff will feel better about their contributions, and juvenile hall can provide a more structured and safe environment leading to an overall positive and caring detention environment.

All periodic reviews shall be documented on the official *Periodic Review* form. Periodic Reviews that are written on a Daily Behavior Record in a minor's behavioral file will not be accepted and will not receive audit credit.

Periodic Review forms must be fully completed to receive audit credit. Forms that are incomplete, missing, or have been completed by minors, are unacceptable and will not receive audit credit.

## Periodic Review Criteria:

- Each minor must receive an initial Periodic Review within the first seven (7) days of being admitted to a unit. If the minor's assigned DSO is not available, another DSO shall be assigned to conduct the review.
- Periodic Reviews shall be documented on an official Periodic Review form and must be fully completed to receive audit credit. Staff are the only persons allowed to complete the periodic review form. The completed form must be securely attached in the minors behavior file. Audit credit will not be granted for any missing form.
- Each DSO shall be assigned a fluctuating number of minors to what is referred to as a Periodic Review caseload.
- Periodic Review assignments shall be equally distributed amongst all DSO's.

- Periodic Review assignments shall not be allocated alphabetically as this will lead to an unequal workload for some DSO's. For example, if the AM shift were assigned all minors having last names beginning with A-I and two of that shifts DSO's become injured, one or two DSO's is/are then responsible for reviewing a large number of minors.
- Equity in the Periodic Review assignment process is essential.
- Each DSO is required to meet at least once per week with each of the minors assigned to them.
- A list of staff and minors assigned to them shall be maintained in the unit office on the periodic review board.
- Sr. DSO's will be responsible for assigning minors to each DSO based upon the number of minors in each unit. Ideally, this should be completed following the orientation process.
- Sr. DSO's will be responsible for the daily maintenance of the periodic review board and shall update the board to reflect the names of minors admitted to or released from the unit.
- Sr. DSO's shall audit the minors' behavioral files on a weekly basis for the presence of periodic reviews completed by staff on their shift.
- SDSO's shall audit the work of all subordinate staff.
- If a staff is on vacation, his/her minors shall be temporarily assigned to other DSO's.
- When staff is on I.A. or long-term illness, they shall not be listed on the periodic review board.

# **Guidelines for Conducting Periodic Reviews:**

- 1. Periodic Reviews shall be conducted similar to one-on-one counseling sessions.
- 2. The official *Periodic Review* form is the only form to be used when conducting Periodic Reviews; all other forms are unacceptable.
- 3. The form must be fully completed by the Periodic Review counselor, not the minor.
- 4. Staff shall review a minor's behavior file before conducting a Periodic Review. Any problems the minor may have experienced during the week (e.g., school referrals, medical problems, SIR's, etc.) shall be noted.
- 5. Staff should explain to the minor the benefits of a Periodic Review and how it is intended to improve communication between staff and minors.
- 6. Periodic Reviews are not an account of a minor's behavior on a particular day, but are instead a review and acknowledgement of the minor's needs, concerns, and well-being (physical and mental).
- 7. Always end the Periodic Review session on a positive note
- 8. The staff and minor must sign the Periodic Review form.
- 9. The date of the review must be written in the space provided on the form (essential for audit credit).

10. The completed *Periodic Review* form is to be securely attached in the minor's behavioral file

# Listed below are a few relevant topics that can be discussed during a Periodic Review:

- Ask the minor about any problems he/she may be experiencing, including the use of phone privileges.
- Ask the minor about adjustments he/she has made or needs to make.
- Ask the minor about his/her relationship with staff, parents, friends, and peers.
- Ask about achievements, interests, and hobbies.
- Ask about objectives and goals during and after confinement.
- Discuss any problems or concerns relating to recent court appearances, but do not discuss their specific cases.
- Discuss participation in skills development training sessions.
- Review school performance.
- Discuss the BMP Orientation Checklist.

# **Learning Opportunities**

Learning opportunities are interactive group discussions that are conducted by staff throughout the day. Learning opportunities are nothing more than the application of skills development training information to normal unit functions. For example, dining periods become opportunities to discuss proper nutrition/diet; shower periods become opportunities to discuss personal hygiene; etc.

Staff shall conduct learning opportunities by asking questions related to nutrition, substance abuse, LEAPS information, etc. For example, during the meal period, staff may ask the group, "Can somebody tell me a few of the nutritional characteristics of an apple?" That question could be followed by the question, "How does an apple aid in digestion?."

It is important that the topic of discussion have some relevance to the present or preceding activity; so, they should never conflict. That is, staff should not utilize a meal period to talk about personal hygiene, as this would be inappropriate; nutrition and/or diet would be suitable topics of discussion at mealtime.

#### Rituals

Rituals, common to all institutions, are the methods utilized to conduct everyday unit routines. Rituals formalize repetitive functions, such as movements,

restroom calls, meals, showers, etc. Formalization of these functions clearly defines to the minor how each activity is to be conducted allowing the minor to quickly learn how to operate in the unit. Thereafter, minors have to think less about the normal mechanics of functioning in the unit and can focus on their behavior management objectives and goals.

Rituals also create a sense of safety and comfort among the minors. When minors feel safe in their environment, the need to maintain safety is met. Therefore, delinquent behavior (e.g., fighting to maintain status, being disruptive, concealing weapons or contraband, gang affiliation for protection), which historically has met these needs, is not necessary. Individuals feel more secure when they are aware of what's going on around them. A program that uses rituals (i.e., consistent procedures) helps provide this security.

It is incumbent upon each building SDSO to ensure that the rituals (i.e., methods) by which all routine activities are conducted on each shift are done consistently. For example, each shift should conduct restroom calls in the same manner, whether they are conducted from the dayroom or the hallway. Further, building SDSO's shall ensure all building staff utilizes the established methods in their daily operational routines.

With staff direction, rituals will free minors' minds to reflect on topics that reinforce their behavior management objectives and goals.

# **Community Structure**

This is a form of community meeting that is designed to develop and support a sense of family among unit members/peers. They are conducted during each shift, usually at the Board DSO's first opportunity to address the entire unit face-to-face.

Community structure is similar to traditional juvenile hall structuring in that it requires:

- Getting the groups undivided attention;
- Informing minors of all scheduled activities and the roles they play to ensure a successful outcome;
- Reinforcing positive behavior during the activity; and
- Being clear and concise about the consequences or sanctions that will follow any inappropriate behavior.

During community structure, staff must recognize each minor's progress towards responsible and acceptable behavior. Inclusion of behavior management terminology, philosophy, and slogans during the community structure period is critical to the success of the program.

Community structure meetings shall commence with staff reciting the "Assurance of Quality Care" pledge.

#### Recreation

Recreation is a vital component of the overall behavior management program. Every attempt is made to ensure minors are continuously involved in active and non-active recreational activities each and every day.

Recreational activities are conducted afternoons, evenings, and weekends. They are always structured and scheduled for each unit by the Program Services Coordinator via a weekly recreation schedule, which is also integrated into the Monthly Activity Calendar of the Behavior Management Program. Basketball, soccer, kickball, volleyball, swimming, board games, etc., are some of the activities minors can engage in during scheduled recreation activities.

For the sake of variety, each unit is rotated between available recreation fields on a daily basis. Periodically, inter-unit competitions are also scheduled to help build unit/group cohesiveness and pride. The facility Program Services Coordinator monitors participation in all recreation activities. The Officer of the Day (OD) ensures that all units participate in scheduled activities.

#### STAFF TRAINING

All staff are required to participate in comprehensive training in order to familiarize themselves with the **Behavior Management Program**. The training is designed to ensure that staff are:

- Knowledgeable of program components;
- Understand the curriculum;
- Able to properly apply program content in the unit;
- Able to effectively deliver program content; and
- Understand the role of collaborative partners.

A training manual/handbook is issued to each participant and is retained by the employee. Probation staff, which includes Probation Directors, Division Supervisors, Sr. DSO's, DSO's, and GSN's are required to take the training.

LACOE, Mental Health and Medical personnel are also provided with training to familiarize them with the program, specifically the behavioral and rehabilitation components and its relevance to their particular areas of endeavor.

All detention staff participates in Intensified Format Training (IFT) sessions to strengthen their knowledge and understanding of skills development training content and presentation techniques. Additionally, all staff will be continuously assessed on their service delivery skills based on performance measures to ensure they are adept at facilitating/leading groups, modeling pro-social behaviors, redirecting inappropriate behaviors, and reinforcing pro-social behaviors.

Professional trainers provide training to staff on the principles of effective interventions and cognitive behavioral theory/techniques.

#### **ROLE OF STAFF**

involvement on the part of staff.

In spite all of the valuable information and services the **Behavior Management Program** provides, its effectiveness is entirely dependent upon staff. Staff set the stage for change in the lives of minors involved in the program. Staff must realize people are inclined to do only that which is in their best interest, and for change to occur, they must view the change as being in their best interest. A minor's beliefs, attitudes, values, and norms can only be changed if they perceive staff as being sincere and acting positively on their behalf. Staff, therefore, must demonstrate care and sensitivity in accomplishing this task.

Staff must remain cognizant that their behavior should exemplify those behaviors exhorted in the Behavior Management Program curriculum, and can be no less than the behavioral expectations they hold for the minors under their care. Staff are models of leadership and must strive to set a good example. Like it or not, staff must realize they *lead by example* and that their actions are being constantly scrutinized by the minors under their care.

The staff relationship with minors, peers, team leaders (Sr. DSO's), supervisors, and directors alike, shall reflect a positive and cooperative tone. Staff shall never use sarcasm, ridicule, profanity, or threats. Praise and encouragement is what actually promote desired behavior. Staff exhibiting crass, immature, and unprofessional behavior, will unwittingly undermine the behavior management program's philosophy and the contributions of their co-workers. These behaviors could destroy any positive impact previous efforts may have accomplished. Care must be taken to avoid scolding or directing personalized criticism that may embarrass or antagonize a minor. When it is necessary to reprimand minors or to lower their daily conduct grades, it should be done without personal

Staff involved in the program must understand there are several roles they must play, but none more important than the roles of teacher, counselor and disciplinarian. The role of teacher involves instructing the minor in appropriate behavior and responsible living. The role of counselor provides guidance and insight, reinforcing lessons learned throughout the detention experience. The role of disciplinarian maintains the minor's compliance with institutional rules and program expectations.

It is important that staff remains flexible in all of their roles and act appropriately as situations dictate. All staff must execute the program with consistency. Consistency, especially within the same living unit, will demonstrate to the minors the seriousness of institutional rules and program expectations. If staff does not take the program seriously, why should the minors?

Staff shall be held accountable for conducting the program each and every day in their assigned unit. Ultimately, the success or failure of the Behavior Management Program will fall squarely on the shoulders of detention staff.

#### **BMP ORIENTATION**

All new minors admitted to juvenile hall (excluding those charged with 187 P.C./murder) are initially housed in the Intake Unit where they are assessed and given an orientation regarding rules, expectations, programs and services available in the juvenile hall. In addition to the facility orientation, minors are given a BMP Orientation that includes a BMP Orientation Guide.

The BMP Orientation is designed to provide minors with a clear understanding of the rules, expectations, activities/programs and services available at each juvenile hall and to facilitate the positive interaction between staff and minors. The BMP Orientation Guide is a reference booklet that contains written information of the juvenile hall rules, expectations for appropriate behavior, rewards, incentives, consequences for inappropriate/unacceptable behaviors, as well as activities/programs and services available to minors.

Further, minors are given an in-depth overview of the behavioral and rehabilitation components of the Behavior Management Program and a LEAPS Self-Assessment.

#### **QUALITY ASSURANCE**

The BMP Coordinators in each juvenile hall are primarily responsible for the quality assurance of the **Behavior Management Program**. The quality assurance process is founded upon the concept of continuous improvement, while focusing on *processes*, *outcomes* and *costs* directed toward achieving the objectives of the behavior management program. Failing to evaluate processes, outcomes and costs will provide an incomplete picture of the effectiveness of the program.

A basic principle of total quality management states that it is more cost effective to improve a current program, if possible, than to re-create a program. Often, if root problems are not identified and solved, merely creating a new service or program will result in the same problem.

The quality assurance efforts of the behavior management program are aimed at evaluating the internal *processes* in the program, assessing the program's impact through *outcome* measures, and determining the overall *cost* of the program to determine the level of performance and the quality of the services being provided to the minors.

The quality assurance process is comprised of an evaluation of the following:

- 1. Compliance Audits
  - Observational
  - Periodic Review
  - Recreational
  - Daily Rating Tally Sheet / Merit Ladder
  - Logbook Documentation
- 2. Safe Crisis Management (SCM) Incidents
- 3. Youth-on-Youth Violence Incidents
- 4. Number of Disciplinary SHU Referrals
- 5. Number of Disciplinary School Referrals

An analysis of the staff compliance with programming processes which is assessed through the compliance audits and how those compliance impacts an increase or decrease in outcome measurements statistics will provide the reviewer with an objective assessment of the guality of the BMP.

## **GLOSSARY**

<u>Active Behavior Management</u>: This is the supervision process by which staff is directly and actively responsible for managing the minors' individual and/or group behaviors in order to avoid problem situations and create a safe and secure environment.

<u>Al Jones Stamps</u>: These are stamps designed to maintain the minors' motivation and participation in all rehabilitation-oriented activities/programs. Minors can use them as privileges/incentives in the unit (e.g., phone calls) and purchase items at the Al Jones Store, which have been designated for purchase with stamps.

<u>Al Jones Store</u>: This is a store full of items that minors may purchase with the reward points earned in the units and the school of the juvenile hall. The store is only opened on Saturday mornings between the hours of 9:00 am and 4:00 pm. There is a store in each of the three juvenile halls (Central, Los Padrinos, Barry J. Nidorf).

<u>Board Counselor</u>: This is the probation staff assigned individual caseload and group supervision responsibilities of minors in a unit.

<u>Categories of Behavior</u>: These are the levels of severity in which minors' inappropriate/unacceptable behaviors are classified for disciplinary purposes. The categories of behavior follow a level of progression based on the severity of a minor's behavioral infraction. That is, the severity of the behavior determines the disciplinary consequence.

- 1. <u>Mildly Disruptive Behavior</u>: This is a type of behavior that usually creates minimal disruption in and out of a unit and/or a juvenile hall. These inappropriate/unacceptable behaviors are always followed by immediate correction from staff to ensure the safety, order and security of minors and/or staff.
- 2. <u>Moderately Disruptive Behavior</u>: This is a type of behavior that usually causes disruption in the orderly management of a unit and/or a juvenile hall. These inappropriate/unacceptable behaviors are immediately followed by staff intervention to avoid jeopardizing the safety and/or security of minors and staff.
- 3. <u>Severely Disruptive Behavior</u>: This is a type of behavior that usually causes a major disruption in the orderly management of a unit and/or a juvenile hall. These inappropriate/unacceptable behaviors are immediately followed by staff intervention to avoid jeopardizing the safety and/or security of minors and staff.

<u>Certificate of Merit</u>: This is a document specially designed to recognize the minor's successful completion of assigned tasks, rehabilitation-oriented activities/programs, school programs and other special achievements.

<u>Community Structure</u>: This is an information meeting conducted on each shift where the Board Counselor provides minors with information on all scheduled activities/programs and the roles minors play to ensure a successful outcome.

<u>Consequence</u>: This is an action taken by probation staff to either reward minors based on their pro-social behaviors or discipline minors based on their inappropriate/unacceptable behaviors.

<u>D.H.S.</u>: This abbreviation stands for Department of Health Services.

<u>D.M.H.</u>: This abbreviation stands for Department of Mental Health.

<u>E-Ticket</u>: These are tickets specially designed as awards for minors who have earned a specified number of reward points (210) on the Merit Ladder. Minors can use these tickets to purchase any item at the Al Jones Store, which have been specifically designated as items allowed to be bought with reward points, Al Jones Stamps and/or E-Tickets. Also, minors can exchange these tickets for participation in available special activities/programs that they

might not otherwise be able to participate due to seating and/or participant limitations.

<u>Game Room</u>: This is an area where a minor can go to play games and enjoy movies because he/she has gained the privilege for his/her good behavior. The game room is among the incentives meant to motivate or induce minors to display positive behavior.

<u>GROW</u>: This is the acronym for <u>Girls Reaching Out to Womanhood</u>, a gender-specific curriculum designed to provide females minors detained in juvenile hall with information and resources that will assist them in their transition to camp, placement and/or their return to the community.

<u>Incentives</u>: These are privileges that urge minors to make an effort (or take action) toward something they want to get or experience.

<u>L.A.C.O.E.</u>: This abbreviation stands for Los Angeles County Office of Education.

<u>LEAPS</u>: This is the acronym for the <u>Life Excelerator - Assessment of Personal Skills</u> training program. It is an instructor-led, comprehensive library of turnkey lesson plans that train minors in the essential coping, adapting and functioning skills they need to experience success in life.

<u>Learning Opportunities</u>: These are interactive group discussions that are conducted throughout the day. They are nothing more than short discussions that reinforce skills training information during normal unit functions. For example, dining periods become opportunities to discuss proper nutrition/diet and shower periods become opportunities to discuss hygiene.

Merit Ladder: This is the form where the reward/bonus points earned by each minor are recorded daily and the cumulative number of reward/bonus points is summarized weekly. Reward/bonus points cannot be deducted once a minor earns them and they are recorded on the merit ladder by staff. The reward/bonus points recorded next to each minor's name on the merit ladder are always treated as his/her personal bank account. The Merit Ladder form is commonly displayed in the dayroom of every unit. The form is prepared by the staff working the night shift (10-6 am), and is available to view by all minors in a unit at the beginning of the morning shift (6-2 pm). The minors' names are listed from the higher number of points to the lowest number of points.

<u>Orientation Guide</u>: This is the pamphlet/booklet that describes the behavior management program in the juvenile halls.

Other Rewards: These are the other forms of recognition given to minors who demonstrate pro-social behaviors while detained in the juvenile halls. They include: magazines and books; games and movies; healthy low fat snacks;

toiletries (toothpaste, soap, shampoo, conditioner, deodorant, lotion); plaques and trophies; and commendations.

<u>Periodic Review</u>: This is a one-on-one counseling session that provides minors detained in juvenile hall with routine, but meaningful communication with staff. This communication is intended to furnish staff with information regarding the minor's adjustment in the unit and provide information to the minor to ease his time in detention.

<u>Prize Patrol</u>: This is a group of BMP Coordinators that visit units during various times of the day to award prizes to minors that can correctly answer questions that relate to rehabilitation-oriented activity/programs in which they have participated earlier in the week.

<u>Pro-social Bonus Points</u>: These are bonus points awarded to minors that demonstrate pro-social behavior. Three (3) bonus points for the **AM Probation Period** and three (3) bonus points for the **PM Probation Period** can be awarded daily by probation staff to minors exhibiting pro-social behavior for a grand total of six (6) bonus points. These bonus points can be earned Monday through Fridays, weekends and holidays.

<u>Recreation</u>: These are the organized and structured exercises and play activities offered to the minors on a daily basis as refreshments of strength and spirit after school days and during weekends and holidays.

<u>Reward Points</u>: These are the points awarded to minors in recognition of their behavioral accomplishments and acknowledgement of a job well done.

Rituals: These are the methods staff utilized to conduct everyday unit routines. Rituals formalize repetitive functions such as movements, restroom calls, meals, showers, etc. Formalization of these functions clearly defines to the minor how each activity is to be conducted allowing the minor to quickly learn how to operate in the unit. Thereafter, minors have to think less about the normal mechanics of functioning in a unit and can focus on their behavior management objectives and goals.

<u>Skill Behaviors</u>: These are specifically designated behaviors described in objective and measurable terms, which require minimal interpretation by minors and staff. The successful completion of a specified number of these skill behaviors (**listed in Appendix I**) ultimately determines the reward points, bonus points and incentives/privileges each minor receives.

<u>Special Activities/Programs</u>: These are activities/programs that are not part of the regular schedule of activities in a juvenile hall unit. They include, among others, barbecues and other organized extracurricular activities.

<u>Transfer</u>: This is the process by which a minor is moved from one living unit or juvenile hall to another living unit or juvenile hall.

<u>Unit</u>: This is the housing/living unit where minors reside while detained in the juvenile hall. Each unit is made up of the following areas: bedrooms (used for sleeping, dressing, and private/personal matters), bathroom (used for grooming, restroom calls, and showering), and dayroom (used for dining and in-house recreation).

<u>Verbal Rewards</u>: These are the kind gestures and/or words that provide a basic form of reward to minors who exhibit pro-social behaviors while detained in the juvenile hall.

#### APPENDIX I

## DAILY ACTIVITIES AND SKILL BEHAVIORS

#### DAILY ACTIVITY PERIODS

The following is a list of the daily activity periods and their relevant skill behaviors:

## **AM PERIOD - PROBATION**

## Wakeup/Breakfast

- Wake-up and out of bed within five minutes of being instructed to do so.
- Get dressed. Put on underwear, shirt, pants, socks, and shoes. Comply with any additional instructions (e.g., wear coat or sweatshirt in cold weather).
- Groom as appropriate to personal needs, which includes washing face, combing hair and brushing teeth with toothbrush and paste.

- Cleanup of room, which includes, making bed, depositing dirty laundry in proper place, and removing all trash and debris from room.
- Come to the dayroom when instructed to do so quietly and fully dressed.
- Pick up your meal tray from the cart when instructed to do so and be seated quietly at your assigned table.
- Remain seated during breakfast.
- Use appropriate table manners.
- Do not trade or give food away.
- Clean your surrounding area following the meal and take your meal garbage to the trash can as instructed.
- Prepare for AM school.
- Make movement to school quietly.
- No looking around during movements.
- Exit the line quietly when instructed to do so.
- No gang activity.
- No disruptive activity.

## Lunch

- Pick up your meal tray from the cart when instructed to do so and be seated quietly at your assigned table.
- Remain seated during lunch.
- Use appropriate table manners.
- Do not trade or give food away.
- Clean your surrounding area following the meal and take your meal garbage to the trash can as instructed.
- Prepare for PM school.
- Make movement to school guietly.
- No looking around during movements.
- Exit the line guietly when instructed to do so.
- No gang activity.
- No disruptive activity.

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#### **AM PERIOD - SCHOOL**

- Students are expected to check in with the teacher.
- Students are expected to follow all directions promptly.
- Students are expected to show respect for all persons and property.
- Students are expected to leave all personal items in the living unit.
- Students are expected to do their best to learn and allow others to learn.
- Students are expected to obey all school rules.
- Students are expected to participate in all assignments.
- Students are expected to remain in their seat unless otherwise directed.

- Students are expected not to receive a student behavior report.
- Students are expected to remain in the classroom for duration of class.

#### PM PERIOD - SCHOOL

- Students are expected to check in with the teacher.
- Students are expected to follow all directions promptly.
- Students are expected to show respect for all persons and property.
- Students are expected to leave all personal items in the living unit.
- Students are expected to do their best to learn and allow others to learn.
- Students are expected to obey all school rules.
- Students are expected to participate in all assignments.
- Students are expected to remain in their seat unless otherwise directed.
- Students are expected not to receive a student behavior report.
- Students are expected to remain in the classroom for duration of class.

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#### **PM PERIOD - PROBATION**

# After School/Skills Development Training

- Participate in afternoon activity / Skills Development Training
- No gang activity.
- No disruptive activity.

#### Dinner

- Follow all staff instructions.
- Come to the dayroom when instructed to do so quietly and fully dressed.
- Pick up your meal tray from the cart when instructed to do so and be seated quietly at your assigned table.
- Remain seated during dinner.
- Use appropriate table manners.
- Do not trade or give food away.
- Clean your surrounding area following the meal and take your meal garbage to the trash can as instructed.
- Complete homework.
- Participate in evening activity / Skills Development Training
- No gang activity.
- No disruptive activity.

#### **Showers**

- Follow all staff instructions.
- Shower appropriately to maintain hygienic needs.

- No gang activity
- No disruptive activity.

#### **PRO-SOCIAL BONUS POINTS**

- Must demonstrate pro-social behaviors at all times.
- Must not engage in disruptive activity.
- Must not engage in gang activity.
- Must participate in all applicable skills development trainings.
- Must participate in sessions/meetings with mental health therapist as needed.
- Must demonstrate effort in meeting mental health and/or medical treatment objectives as needed.
- Must take medication as prescribed.

### **NIGHT BEHAVIOR**

- No gang activity.
- No disruptive activity.
- Must follow all staff instructions.





#### BOARD OF STATE AND COMMUNITY CORRECTIONS



March 27, 2023

Karen Fletcher Interim Chief Probation Officer Los Angeles County Probation Department 1601 Eastlake Avenue Los Angeles, California 90033

# \*\*\*PLEASE TAKE NOTICE\*\*\*

#### Dear Interim Chief Fletcher:

This letter is to provide you with written notice that the California Board of State and Community Corrections will make a determination of suitability of the Barry J. Nidorf Juvenile Hall and the Los Angeles County Central Juvenile Hall at its next scheduled board meeting on **April 13, 2023** pursuant to Welfare and Institutions Code section 209, subdivision (d).<sup>1</sup>

The Board of State and Community Corrections establishes the minimum standards for juvenile halls and camps and conducts biennial inspections of those facilities. (Welf. & Inst. Code, §§ 209, 210, & 885.) Regulations setting forth these minimum standards can be found in Sections 1300-1511 of Title 15 of the California Code of Regulations.

[A] juvenile hall, special purpose juvenile hall, law enforcement facility, or jail shall be unsuitable for the confinement of minors if it is not in compliance with one or more of the minimum standards for juvenile facilities adopted by the Board of State and Community Corrections under <a href="Section">Section</a> 210 or 210.2, and if, within 60 days of having received notice of noncompliance from the board or the judge of the juvenile court, the juvenile hall, special purpose juvenile hall, law enforcement facility, or jail has failed to file an approved corrective action plan with the Board of State and Community Corrections to correct the condition or conditions of noncompliance of which it has been notified. The corrective action plan shall outline how the juvenile hall, special purpose juvenile hall, law enforcement facility, or jail plans to correct the issue of noncompliance and give a reasonable timeframe, not to exceed 90 days, for resolution, that the board shall either approve or deny. In the event the juvenile hall, special purpose juvenile hall, law enforcement facility, or jail fails to meet its commitment to resolve noncompliance issues outlined in its corrective action plan, the board shall make a determination of suitability at its next scheduled meeting.

<sup>&</sup>lt;sup>1</sup> Welfare and Institutions Code section 209, subdivision (d), provides:

# Summary of 2020-2022 Biennial Inspection

On January 13, 2023, following the inspection of the county's juvenile facilities, we notified your agency of several items of noncompliance with the Board's regulations. A copy of the initial inspection report and final inspection can be found here:

https://drive.google.com/drive/folders/1W\_HwQLU98Q5pgsateq-KBO1ZA5ww3B5h

Pursuant to Welfare and Institutions Code section 209, the county was required to submit a corrective action plan (CAP) to our agency within 60 days or by March 14, 2023.

On March 14, 2023, we received the county's corrective action plan. This corrective action plan does not provide enough detail about the specific plans that will be relied upon to correct the items of noncompliance and does not provide a reasonable timeframe for resolution. Many of the items of noncompliance at the juvenile halls can be directly linked to issues with staffing; in addition to the inability to carry out the overall facilities operations and programming, and providing for the safety and security of youth and staff, youth are regularly not being provided with required services because of insufficient staff on duty. The corrective action plan fails to provide sufficient information that the BSCC would rely on to determine what staffing plan would be in place to address these issues of noncompliance during an inspection.

Corrective action plans for items of noncompliance not directly related to staffing also fail to provide sufficient detail. The corrective action plan does not describe the specific details for correction of other items of noncompliance, including Section 1357, Use of Force and Section 1390, Discipline.

In the absence of an approved corrective action plan, the Board is required to make a determination of suitability at its next scheduled board meeting, April 13, 2023. Based on the final inspection report, the county's juvenile halls remain out of compliance with the following regulations:

# Barry J. Nidorf

- § 1321. Staffing.
- § 1325. Fire Safety Plan.
- § 1327. Emergency Procedures.
- § 1328. Safety Checks.
- § 1354.5. Room Confinement.
- § 1357. Use of Force.
- § 1360. Searches.
- § 1370. Education Program.
- § 1371. Programs, Recreation, and Exercise.

Fletcher, Karen Page 3

- § 1390. Discipline.
- § 1230.2.10 Security glazing
- § 1230.1.7 Single occupancy sleeping rooms
- § 1230.2.6 Lighting
- § 1230.1.5 Living unit.
- § 1230.1.11 Physical activity and recreation areas

### **Central Juvenile Hall**

- § 1321. Staffing.
- § 1328. Safety Checks.
- § 1354.5. Room Confinement.
- § 1357. Use of Force.
- § 1358.5. Use of Restraint Devices for Movement and Transportation Within the Facility.
- § 1360. Searches.
- § 1370. Education Program.
- § 1371. Programs, Recreation, and Exercise.
- § 1374. Visiting.
- § 1390. Discipline.
- § 1230.2.10 Security glazing
- § 1230.1.7 Single occupancy sleeping rooms
- § 1230.2.6 Lighting
- § 1230.1.5 Living unit.
- § 1230.1.11 Physical activity and recreation areas

In addition to the above-items of noncompliance, during an unannounced inspection at the Barry J. Nidorf Juvenile Hall on March 8, 2023, BSCC staff found that there had been no progress made towards access to outdoor exercise and programming pursuant to Section 1371, Recreation, Programs and Exercise and also observed that youth were eliminating urine in receptacles in their rooms during the night shifts due in part to continued lack of staffing.

Please note that if the Board finds that either juvenile hall is not being operated and maintained as a suitable place for the confinement of minors, the Board shall give notice of its findings to all persons having authority to confine youth pursuant to Chapter 2 of Part 1 of Division 2 of the Welfare and Institutions Code and commencing 60 days thereafter the juvenile hall shall not be used for confinement of minors until the time the Board finds, after reinspection of the juvenile hall, that the conditions that rendered the facility unsuitable have been remedied, and the facility is a suitable place for confinement of minors. (Welf. & Inst. Code, § 209, subd. (a)(4).)

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# **County Response**

The county may, but is not required to, participate at the April 13, 2023 board meeting as part of the Board's determination of suitability. If the county wishes to respond in writing, we request that a response be submitted no later than April 3, 2023. This response will be included as part of the Board's 10-day agenda, which will also be posted on April 3, 2023. The response should include specific facts articulating to what extent the county is, in fact, in compliance with the Board's regulations and may include any evidence or testimony rebutting staff's preliminary findings of noncompliance included in the links to the reports above. To the extent you anticipate that the county facilities will be in compliance prior to the board meeting or soon thereafter, please provide estimated dates of completion of any further corrective actions. The Board may also consider additional information submitted as part of a supplemental corrective action plan explaining how the county will come into compliance no later than 90 days, which the Board may also approve or deny.

While participation is not mandatory, the Board formally requests that you appear in person to discuss the corrective action plan and any outstanding issues of noncompliance.

# **Determination of Suitability**

The determination of suitability is a quasi-judicial process in which the Board will determine whether the county facilities are or are not in compliance with the Board's regulations. The proceeding is part of the Board's meeting agenda and is not a formal adversarial hearing. Oral testimony, if provided, will not be subject to cross-examination. Board staff will present its findings and recommendations to the Board, which will be followed by questioning by board members through the Chair. The county will be given the opportunity to provide rebuttal evidence or testimony followed by questioning by board members through the Chair.

Following the presentation of the staff report and county response, the Board will issue a written decision regarding any items of noncompliance with the Board's minimum standards and the suitability of each juvenile facility. If the Board is unable to make a determination of suitability based on the information provided, the Board may, in its discretion, continue the proceedings to a future board meeting.

The proceedings will be open to the public and is subject to the Bagley-Keene Open Meeting Act. (Gov. Code, §§ 11120-11132.)

Fletcher, Karen Page 5

If you have any questions about this process, please contact our general counsel, Aaron.Maguire@bscc.ca.gov.

Sincerely,

LINDA PENNER

Chair

CC:

Board Members, Board of State and Community Corrections
Kathleen T. Howard, Executive Director, Board of State and Community Corrections
Aaron R. Maguire, General Counsel, Board of State and Community Corrections
Allison Ganter, Deputy Director, Board of State and Community Corrections
Lisa Southwell, Field Representative, Board of State and Community Corrections
Fesia Davenport, Chief Executive Officer, Los Angeles County
Honorable Eric C. Taylor, Presiding Judge Los Angeles County Superior Court
Honorable Akemi Arakaki, Presiding Judge of the Juvenile Court
Celia Zavala, Executive Officer, Board of Supervisors
Dawyn R. Harrison, County Counsel, Los Angeles County
Max Huntsman, Office of Inspector General, Los Angeles County
Wendelyn Julien, Executive Director, Probation Oversight Commission





#### BOARD OF STATE AND COMMUNITY CORRECTIONS\_



March 23, 2023

Karen Fletcher, Interim Chief Probation Officer Los Angeles County Probation Department 1601 Eastlake Avenue Los Angeles, California 90033

# SUBJECT: RESPONSE TO LOS ANGELES COUNTY'S CORRECTIVE ACTION PLAN FOR BARRY J. NIDORF AND CENTRAL JUVENILE HALLS

Dear Interim Chief Fletcher:

The Board of State and Community Corrections (BSCC) is in receipt of the Corrective Action Plan (CAP) submitted by the Los Angeles County Probation Department for the items of noncompliance identified in the January 13, 2023 initial inspection report that was part of the 2020/2022 Biennial Inspection of the Central and Barry J. Nidorf Juvenile Halls. After careful review, we have determined that this CAP is inadequate to address the ongoing and serious items of noncompliance at both facilities. Consequently, this CAP cannot be approved and the Board will make a determination of suitability at the next scheduled board meeting on April 14, 2023.

Pursuant to Welfare and Institutions Code section 209, subdivision (d), the County of Los Angeles was required to "file an approved corrective action plan" with the BSCC within 60 days following the notice of noncompliance. This corrective action plan was required to "outline how the juvenile hall... plans to correct the issue of noncompliance and give a reasonable timeframe, not to exceed 90 days, for resolution, that the [BSCC] shall either approve or deny." (Emphasis added.) On March 14, 2023, the BSCC received the department's corrective action plan. As explained in more detail below, the information provided in the corrective action plan does not provide enough detail about the specific plans that will be relied upon to correct the items of noncompliance and does not provide a reasonable timeframe for resolution.

It is important to note at the outset that many of the items of noncompliance at the juvenile halls can be directly linked to issues with staffing. Both facilities are currently out of compliance with Section 1321<sup>1</sup> of Title 15 of the California Code of Regulations, Staffing, due to the inability to carry out the overall facility operation and programming and provide for the safety and security of youth and staff.<sup>2</sup> Moreover, youth are regularly

Each juvenile facility shall:

(a) have 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;

<sup>&</sup>lt;sup>1</sup> All citations are references to Title 15 of the California Code of Regulations unless otherwise noted.

<sup>&</sup>lt;sup>2</sup> Section 1321 provides, in pertinent part,

not being provided with required services because of insufficient numbers of staff on duty. This ongoing and consistent lack of staffing also contributes to the noncompliance with several other sections of Title 15, including the following:

- 1. Section 1354.5, Room Confinement
- 2. Section 1357, Use of Force
- 3. Section 1360, Searches
- 4. Section 1370, Education
- 5. Section 1371, Programs, Recreation and Exercise

To resolve the issues of inadequate staffing, the CAP indicates that the department is working to expedite the completion of Juvenile Correctional Officer Core academies for deployment of up to an additional 43 staff through May. In addition, the CAP references additional incentive pay, which, the CAP also notes, expires in April 2023. Finally, the CAP references the temporary reassignment of a minimum of 100 staff from the field to the juvenile halls through December 31, 2023. Unfortunately, even if we could assume the full deployment of these staff into the juvenile halls, some of which we note are not trained as juvenile correctional officers, there is insufficient information to determine what staffing plan would be in place to address the items listed above. Nor do we believe this staffing will be sustainable given the short term, emergency measures involved. Without additional details describing staffing levels across the units for which we can then inspect for compliance, this plan cannot be approved.

In addition to providing an inadequate plan to resolve the issues involving staffing, there are several places in the CAP where Probation notes that a plan has been developed and will be in place, but there is no detail of these plans included. For example, on page 5 of the CAP, there is a description of a plan developed in collaboration with the California Department of Justice that was implemented on March 5, 2023 to "address processes specific to the use of force reviews" as it relates the findings of noncompliance with Section 1357, Use of Force. However, the CAP does not describe specifically what the plan entails or how compliance with Section 1357 is supported by this plan. Likewise, the details for correcting the deficiencies noted in implementing Section 1390, Discipline, are also lacking. As such, the CAP for these sections cannot be approved.

At the BSCC's February 2023 board meeting, the Board considered the county's initial inspection report and, given the seriousness of the items of noncompliance, had approved a motion to invite Chief Gonzales to the April board meeting to provide an interim update on what had been expected to be the implementation of the county's corrective action plan. Given that the department has failed to provide a corrective action plan that can be approved within the timeframe specified in Welfare and Institutions Code section 209, the Board will now be required to make a formal determination of suitability for both juvenile halls at the April 13, 2023. Please consider this letter as the preliminary notice for a determination of suitability; a second notice will

<sup>(</sup>b) ensure that no required services shall be denied because of insufficient numbers of staff on duty absent exigent circumstances;

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follow. As a reminder, if the Board determines that the facilities are not suitable for the confinement of youth, the county must vacate the juvenile halls within 60 days following the determination.

If you have any questions regarding the disapproval of the county's corrective action plan, please feel free to contact me at Allison.Ganter@bscc.ca.gov.

Sincerely,

ALLISON E. GANTER

**Deputy Director** 

Cc:

Fesia Davenport, Chief Executive Officer, Los Angeles County
Honorable Eric C. Taylor, Presiding Judge Los Angeles County Superior Court
Honorable Akemi Arakaki, Presiding Judge of the Juvenile Court
Celia Zavala, Executive Officer, Board of Supervisors
Dawyn R. Harrison, County Counsel, Los Angeles County
Max Huntsman, Office of Inspector General, Los Angeles County
Wendelyn Julien, Executive Director, Probation Oversight Commission





# COUNTY OF LOS ANGELES PROBATION DEPARTMENT

9150 EAST IMPERIAL HIGHWAY – DOWNEY, CALIFORNIA 90242 (562) 940-2501



March 14, 2023

Board of State and Community Corrections Attention: Lisa Southwell, BSCC, Field Representative 2590 Venture Oaks Way, Suite 200 Sacramento, CA 95833

# COUNTY OF LOS ANGELES PROBATION DEPARTMENT – JUVENILE FACILITIES CORRECTIVE ACTION PLAN

Dear Ms. Southwell:

The Board of State and Community Corrections (BSCC) conducted inspection activities for the 2020-2022 Biennial cycle at both the Barry J. Nidorf Juvenile Hall (BJNJH) and Central Juvenile Hall (CJH) in November 2022. During this inspection process, the BSCC identified the following items of non-compliance:

#### Title 15

Section 1313: County Inspection and Evaluation of Building Grounds

Section 1321: Staffing

Section 1325(f): Fire Safety Plan

Section 1327(f): Emergency Procedures

Section 1328: Safety Checks

Section 1354.5: Room Confinement

Section 1357: Use of Force

Section 1358.5: Use of Restraint Devices - Movement and Transportation within

**Facility** 

Section 1360(a): Searches

Section 1370(b)(6): Education Program

Section 1371: Programs, Recreation and Exercise

Section 1374: Visiting Section 1390: Discipline

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# Title 24

Section 1230.2.10: Security Glazing

Section 1230.1.7: Single Occupancy Sleeping Rooms

Section 1230.2.6: Lighting Section 1230.1.5: Living Unit

Section 1230.1.11: Physical Activity and Recreation Areas

The BSCC's Initial Inspection Reports for both facilities were received on January 27, 2023, outlining the identified items of noncompliance. These items of noncompliance were reviewed during the Exit Briefing on January 13, 2023, at which time corrective action was immediately initiated. On February 15, 2023, the BSCC provided a checklist of the final areas of pending noncompliance required to be addressed in the Department's Corrective Action Plan (CAP).

In response to these findings, the Department has addressed each of these items with the following solutions:

# Title 15, Section 1313(A),(B) and (E): County Inspection and Evaluation of Building and Grounds

# **County Building Inspection** (CJH Only)

The County Building Inspection was conducted at CJH on August 11, 2022. Documentation was provided by the Department of Public Works on January 9, 2023.

# **Fire Clearance**

The fire alarms at BJNJH were tested on March 11, 2023. Upon receipt of this report, the Fire Clearance Inspection will be scheduled.

The Fire Clearance was completed for CJH on March 3, 2023.

#### **Juvenile Court Inspection**

The Juvenile Court Inspection was completed for BJNJH on March 2, 2023, and for CJH on March 3, 2023.

#### Title 15, Section 1321(a) and (b): Staffing

The Department is actively recruiting and hiring staff to fill existing vacancies in the Detention Services Officer (DSO) and Group Supervisor Nights (GSN) classifications at both BJNJH and CJH. Concurrent Juvenile Correctional Officer Core (JCOC) Academies are being conducted to expedite the number of new staff being deployed to the institutions. Forty-one new staff completed JCOC in January and February 2023, with another 23 and 20 scheduled

BSCC Corrective Action Plan March 14, 2023 Page 3 of 8

to complete JCOC in April and May, respectively. Incentive pay (20% increase in base pay and double overtime pay) was implemented for select classifications between October 1, 2022 and April 1, 2023. Additionally, field staff continue to be mandatorily deployed to work in the two juvenile halls on a rotational basis. In March 2023, under emergency provisions, a minimum of 100 field staff will be temporarily reassigned from field assignments to the juvenile halls through December 31, 2023. These reassignments, coupled with volunteer overtime staff and new hires, will be continuously monitored to ensure staffing levels meet regulations and support the overall safety and security of the youth and staff.

# Title 15, Section 1325(f): Fire Safety Plan

The Fire Plan for BJNJH was signed off on February 9, 2023. The Fire Plan for CJH was signed off on March 3, 2023. The Department continues to receive technical assistance from the BSCC regarding the use of Los Padrinos Juvenile Hall for the emergency housing of youth in the event of an evacuation of one or both juvenile halls.

# Title 15, Section 1327(f): Emergency Procedures (BJNJH Only)

The Building Emergency Plan and Fire Suppression Pre-Plan were disseminated to all sworn staff and non-sworn staff at BJNJH on February 10, 2023. Collection of the final signoff sheets is in process, with a due date of March 17, 2023.

# Title 15, Section 1328: Safety Checks

An electronic Safety Check System was installed in each living unit throughout both juvenile hall facilities, with a go-live date of January 23, 2023. Staff received training on the system prior to implementation and received the revised Safety Check Policy (DSB 630) issued on January 19, 2023, with a required sign-off documenting receipt of the policy.

The Senior Detention Services Officer (Sr. SDO) assigned to each unit is responsible for ensuring that safety checks are conducted within their assigned unit. Supervisors are required to regularly audit the safety check system by generating a log report to ensure compliance with the random and varied safety checks. If it is determined that a safety check is missed by more than one minute, the supervisor must initial the safety check on the log and direct the Sr. DSO to ensure that a note in the "observation" section of a room check is completed. Further, at least once per eight-hour shift, as time and circumstances permit, supervisors must conduct unannounced rounds to inspect the safety check system and inspect any posted hard copies of Safety Check Sheets.

Managers and the QA Team are conducting random video reviews to ensure staff have a direct visual observation of youth at a minimum of every 15 minutes, at random or varied intervals, when youth are asleep or when youth are in their rooms.

BSCC Corrective Action Plan March 14, 2023 Page 4 of 8

The Video and In-Person Observation Log continues to be utilized by managers when conducting random video reviews of Title 15 Programming and/or walking through units. Each manager and supervisor are required to provide immediate correction and instruction when witnessing non-compliance. In the event of any potential egregious behavior, a referral for disciplinary action is required.

# Title 15, Section 1354.5(a) and (b)(2): Room Confinement

The Room Confinement policy, specifically addressing room confinement during transitional times such as shift change, showers and after incidents continues to be reemphasized to staff and will be redistributed to all staff at both facilities with a required sign-off documenting receipt.

Documentation will continue to be reviewed daily and if any concerns are identified, the facility will be immediately contacted to make the correction. The Quality Assurance (QA) Team and BSCC SMEs are providing immediate real-time training when corrections are required.

Managers and the QA Team at both facilities are conducting random video reviews during critical times of the day such as school, visiting, religious services and in the evenings. Additionally, all videos are reviewed after an incident has occurred to ensure room confinement is not occurring unless within policy.

The Video and In-Person Observation Log continues to be utilized by managers when conducting random video reviews of Title 15 Programming and/or walking through units. Each manager is required to provide immediate correction and instruction when witnessing non-compliance. In the event of any potential egregious behavior, a referral for disciplinary action is required.

The Compliance Unit at each facility continues to review documentation to ensure compliance with BSCC regulations, which includes but is not limited to, justification for room confinement. Any documentation requiring additional clarification is immediately referred to the Compliance Unit Supervisor who follows up and provides training.

COVID Guidelines for Hybrid Units have been modified in collaboration with Juvenile Court Health Services (JCHS) and approved by the BSCC.

### Title 15, Section 1357: Use of Force

The Detention Services Bureau – Physical Intervention Policy (DSB – 1000) was issued on June 22, 2022. A one-hour training specific to policy revisions has since been developed and is being provided to all sworn staff assigned to the juvenile halls.

Training on the use of force policy is ongoing at both juvenile halls. As of March 13, 2023, 446 juvenile hall staff have been trained in person. Central Juvenile Hall has trained

BSCC Corrective Action Plan March 14, 2023 Page 5 of 8

178 staff. Barry J Nidorf has trained 268 staff. We continue to train the remaining staff and expect to be fully in compliance with the use of force policy training by April 2023.

Staff are receiving hands on defensive tactics training and report writing in Block Weeks. Attendance in the block weeks continues to be difficult due to ongoing staffing concerns at the halls. Staff from the Staff Training Office are being deployed to the institutions to provide ongoing training in de-escalation and handcuffing. Additional staff from the Staff Training Office are being temporarily reassigned to the juvenile halls to ensure that all staff continue to receive use of force, de-escalation, handcuffing, and training in appropriate documentation.

A plan to address processes specific to the use of force reviews has been developed in collaboration with the State Department of Justice. This plan was implemented on March 5, 2023.

# Title 15, Sections 1358 and 1358.5(c): Use of Physical Restraints (CJH Only)

The Detention Services Bureau Policy (DSB-1000) is the policy section regarding the use of Mechanical Restraints and Safe Crisis Management. This policy was developed in collaboration Juvenile Court Health Services (JCHS) and the Department of Mental Health (DMH).

The use of mechanical restraints (handcuffs) at CJH is limited. However, documentation of mitigating circumstances that may preclude the use of mechanical restraints has been lacking in our Physical Intervention Report (PIR) documentation per policy. Real time training is being provided by the Probation BSCC Compliance Team to staff when writing reports post use of mechanical restraints. Policy review will be conducted with staff and sign offs will be collected. The policy review will highlight the documentation in the PIR to include the assessment of mental health, medical and trauma that would preclude the use.

#### Title 15, Section 1360(a): Searches

The ability to conduct searches on a consistent basis has been impacted by low staffing levels. Mandatorily deployed field staff, overtime staff and continuous hiring of new staff is in process to increase staffing levels at both facilities. Staff assigned to the Department's Special Enforcement Operations (SEO) have deployed to the juvenile halls to assist with searches, as needed. K-9s assigned to these staff are frequently utilized to conduct searches. Effective March 6, 2023, a team of eight to ten SEO staff were dedicated to BJNJH Monday through Friday from 7 AM to 3 PM to assist with searches and school movements. An additional SEO Team will be assigned to conduct unannounced searches twice per week. Search teams are being deployed to CJH, as available and necessary. Additionally, the reassignment of a minimum of 100 field staff to the juvenile halls will be effectuated beginning March 20, 2023.

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# Title 15, Section 1370(b)(6) – Education

Due to low staffing levels, youth do not consistently attend school in the classrooms. When youth are not in classrooms, they are either provided instruction in the Unit and/or receive educational packets in lieu of in-person instruction. The reassignment of 100 field staff to the juvenile halls will enable more consistent movement of young people in both facilities to classrooms.

# Title 15, Section 1371: Programs, Recreation and Exercise

**Programs (CJH Only):** Written annual program reviews, to ensure content offered is current, consistent, and relevant to the population, have been submitted to the BSCC for seven of eight programs offered at CJH. In addition to community-based organizations and volunteers, Probation staff provide programming in the forms of arts and crafts and topical group discussions with youth. The Department of Mental Health (DMH) is also partnering to provide additional programming at CJH. The County's Chief Executive Office is assisting the Department with the procurement of additional services through a Master Services Agreement process that will shorten the time to identify and quality relevant service providers.

**Exercise:** Daily large muscle activity has not consistently been provided due to low staffing levels. The reassignment of 100 field staff to the juvenile halls will enable more consistent access to exercise for young people in both facilities. The Los Angeles County Office of Education has incorporated Physical Education (PE) into their school schedule, providing access to workout equipment. Badminton has been added to several dorms at CJH as a physical activity used daily.

### Title 15, Section 1374: Visiting (CJH Only)

A dedicated child-friendly visiting room has been established for the youth and their children. Staffing in the Family Resource Center has been implemented and training for this role has begun. A consistent process of documentation specific to virtual calls provided when in-person visits do not occur will provide proof of practice. Additional smart phones have been ordered for each Supervisor and Director to increase the use of virtual calls.

# Title 15, Section 1390: Discipline

Technical assistance is being provided by the Council of Juvenile Justice Administrators (CJJA), via the Department of Justice (DOJ) Monitor, to create a robust Behavior Management Program (BMP). A draft manual will be completed by March 31, 2023 and submitted to the DOJ for review. A 16-hour training course will be implemented in April 2023 and two pilot units at each facility will be identified for a phased roll-out in May 2023. Both facilities have continued to build on their existing programs, as an interim solution.

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# Title 24, Section 1230.2.10: Security Glazing

Per the BSCC, this regulation became effective in 2003. However, this item of non-compliance was not previously identified in prior BSCC inspections. The Department continues to work with the BSCC to identify an acceptable "detention grade" glass to serve as a replacement of the approximately eighty-one broken windows in need of replacement. The Department has submitted to the BSCC a possible solution that would not require the reframing of each of these windows to support the "detention grade" glass replacement.

# Title 24, Section 1230.1.7: Single Occupancy Sleeping Rooms

Effective March 3, 2023, the Department's Management Services Bureau (MSB) began prioritizing work orders specific to obscured windows, providing a response within one day. MSB identified obscured windows at both BJNJH and CJH, both blurred with personal hygiene products and those that are scratched/etched. The cleaning of blurred windows is being immediately corrected. Windows with significant etching that obscures staffs' ability to monitor youth in their rooms will be prioritized for replacement.

# Title 24, Section 1230.2.6: Lighting

Staff will continue to instruct youth not to cover night lights. The Department has conducted an evaluation of technology to dim night lighting and has selected a solution. This solution will be rolled-out with homelike improvements, as a list of vendors are established. An anticipated timeline will be provided to the BSCC as the vendor procurement is completed.

### Title 24, Section 1230.1.5: Living Unit

The structure of the existing juvenile halls includes offices that hinder direct access and supervision of youth when staff are positioned in the office and youth are in their rooms. An Instructional Memo will be provided to staff by March 31, 2023 directing them that there must always be one staff present in the unit whether a youth is in their room or not.

#### Title 24, Section 1230.1.11: Physical Activity and Recreation Areas

On March 9, 2023, MSB and an Internal Services Department (ISD) electrician supervisor/project manager met to review possible upgrades to the current field lighting at BJNJH. An engineering assessment is pending completion. If this work cannot be completed within 90 days, we will explore bringing in lights affixed to generators to remedy this finding. CJH upgraded the outdoor lighting in February 2022, however, an assessment of this lighting upgrade will be further considered to determine if the lighting is sufficient or if additional enhancements are necessary.

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The Department is committed to ensuring and maintaining compliance with both Title 15 and Title 24 Regulations. Should you have any questions regarding this Corrective Action Plan, please do not hesitate to contact my office at (562) 940-2501.

Sincerely,

Karen L. Fletcher

Karen Hetcher

Interim Chief Probation Officer

c: Fesia Davenport, Chief Executive Officer, Los Angeles County
Honorable Eric C. Taylor, Presiding Judge Los Angeles County Superior Court
Honorable Akemi Arakaki, Presiding Judge of the Juvenile Court
Celia Zavala, Executive Officer, Board of Supervisors
Dawyn R. Harrison, County Counsel, Los Angeles County
Max Huntsman, Office of Inspector General, Los Angeles County
Wendelyn Julien, Executive Director, Probation Oversight Commission





#### BOARD OF STATE AND COMMUNITY CORRECTIONS.



March 16, 2023

Karen Fletcher, Interim Chief Probation Officer Los Angeles County Probation Department 9150 E. Imperial Hwy. Downey, CA 90242

# RE: 2020-2022 BIENNIAL INSPECTION PURSUANT TO WELFARE AND INSTITUTIONS CODE SECTION 209 AND 885

#### Dear Chief Fletcher:

This letter is to advise you that the 2020-2022 biennial inspection of the Los Angeles County Probation Department's Juvenile Detention Facilities has been completed. This includes Barry J. Nidorf Juvenile Hall (BJN), Central Juvenile Hall (CJH), and all RTSB Facilities, including Campus Kilpatrick, Dorothy Kirby Center, Camp Scott, Camp Rockey, Camp Afflerbaugh, and Camp Paige.

All of your facility administrators, managers, BSCC coordinators, supervisors, line staff, and facility partners were a pleasure to work with during the inspection process. All were positive and helpful, and we appreciate all the hard work and time spent preparing for, organizing, and making themselves available during the onsite visits.

The complete Board of State and Community Corrections (BSCC) inspection report is enclosed and consists of the following: This transmittal letter; a Title 15 Procedures Checklist, outlining applicable minimum standards for juvenile detention facilities; a Physical Plant Evaluation, outlining applicable Title 24 minimum standards; and the Living Area Space Evaluation (LASE), summarizing the physical plant configuration and outlining the rated capacity for each facility.

Please refer to the Title 15 Procedures checklist for a summary of all relevant minimum standards, indicators of compliance or noncompliance, and information that was used to determine compliance.

#### MANDATORY LOCAL INSPECTIONS

In addition to the biennial inspection, Title 15, section 1313 and its authorizing statute also require local inspections conducted by the following local authorities:

- county building inspector or person designated by the Board of Supervisors
- fire authority having jurisdiction
- local health officer
- County Superintendent of Schools
- Juvenile Court
- Juvenile Justice Commission

Karen Fletcher Interim Chief Probation Officer Page 2

The results of those inspections are considered a part of this report. The dates of the local inspections may be found in the accompanying Procedures Checklist.

# **Scope of the Inspection**

The inspection consisted of a review of the Los Angeles County Probation Department's Policy and Procedure Manual<sup>1</sup> and verification that the manual is compliant with Regulation 1324, Policy and Procedures Manual. After the review of the manual, we reviewed documentation to ensure that practice and policies are consistent with Title 15. Examples of documentation include incident reports, admission, classification and release documentation, room confinement, separation documents, grievances, screenings, and assessments. A site visit was conducted to review operations, view the physical plant, view video and other relevant documentation, and conduct interviews with administration, facility staff, youth, and collaborative partners. During the inspection, we evaluated consistency between policy and practices to confirm operational compliance.

#### **BSCC INSPECTION RESULTS**

### <u>Title 15, CCR Minimum Standards</u>

Upon final review of all documentation received, the specific areas of noncompliance remain below. All areas of noncompliance corrected while onsite or since the out-brief have been reflected in this report. Please refer to each facility's Procedures Checklist for detailed information.

	1313(A)	1313(B)	1313(E)	1321(a)	1321(b)	1325(f)	1327(f)	1328	1354.5(a)
BJN		Х	Х	Х	Х	Х	Χ	Х	Х
CJH			Х	Х	Х	Х		Х	X
RTSB									
	1354.5(b)2	1357(a)	1357(a)6	1357(a)7	1357(b)3	1357(b)5	1357(c)	1357(c)1	1357(c)2
BJN		X	X			X	X	X	X
CJH	X	X	X	X	X	X	X	X	X
RTSB									
	1357(c)3	1357(c)4	1357(c)5	1357(c)6	1358	1358.5(c)	1360(a)	1370(b)6	1371
BJN	X	X	X	X	X		X	X	
CJH	X	X	X	X	X	X	X	X	X
RTSB									
	1371	1371(a)	1371(c)	1374	1374	1390			
BJN	X		X			X			
CJH	X	X	X	X	X	X			
RTSB									

<sup>&</sup>lt;sup>1</sup> BSCC reviews only those policies and procedures required by, and applicable to, Title 15, CCR. BSCC staff do not "approve" policies and procedures or assess them for constitutional or legal issues. Agencies should seek review through their legal advisor, risk manager, and other persons deemed appropriate for such evaluation.

Karen Fletcher Interim Chief Probation Officer Page 3

# **Title 24, CCR Minimum Standards**

The following Title 24 areas are noncompliant.

	Central Juvenile Hall	Barry J. Nidorf Juvenile Hall			
1230.2.10	Security Glazing	1230.2.10	Security Glazing		
1230.1.7	Single Occupancy Sleeping Rooms	1230.1.7	Single Occupancy Sleeping Rooms		
1230.2.6	Lighting	1230.2.6	Lighting		
1230.1.5	Living Unit	1230.1.5	Living Unit		
1230.1.11	Physical Activity and Recreation Areas	1230.1.11	Physical Activity and Recreation Areas		

# **Corrective Action Required**

A Corrective Action Plan (CAP) was required by March 14, 2023, informing the Board how the agency intends to correct the areas of noncompliance. The CAP was received on March 14, 2023, and is being reviewed by BSCC Staff. Correspondence related to the CAP will be under separate cover.

# Title 24, CCR Physical Plant

There were changes made to the physical plants and your rated capacity for some facilities. Your Living Area Space Evaluations have been updated and your facility-rated capacities have been adjusted, including your Secure Youth Track Facilities. Please see the attached documents for the specifics of these changes. The current rated capacity for each facility is as follows:

	Living Area Space - Rated Capacity											
								SYTF @DKC				
20/22 Cycle	Rated Capacity	337	403 523*	105	116	125	80	15	96	184	24	5

CJH \*with double bunks

Please see individual Physical Plant Evaluations for more information.

# **Training**

According to the most recent Standards and Training for Corrections audit, Los Angeles County Probation Department is in compliance with all relevant regulations and mandates with mitigating circumstances for both the 2020-2021 and the 2021-2022 training year.

Karen Fletcher Interim Chief Probation Officer Page 4

# Juvenile Justice and Delinquency Prevention Act (JJDPA) Compliance Monitoring

We reviewed all facilities operated by Los Angeles County Probation and found no violations of the JJDPA. Please refer to the Title 15 Procedures checklist for detailed information.

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This concludes the 2020-2022 biennial inspection report. I am available to assist as needed and happy to provide technical assistance when requested. I look forward to continuing to work together and am happy to make myself available to respond to any questions you may have. Please do not hesitate to email me at <a href="mailto:lisa.southwell@bscc.ca.gov">lisa.southwell@bscc.ca.gov</a> or call (916) 838-9132.

Sincerely,

Lisa Southwell

Field Representative

him Enthwell

Facilities Standards and Operations Division

#### **Enclosures**

cc: Presiding Judge, Juvenile Court, Los Angeles County\*
Chair, Juvenile Justice Commission, Los Angeles County\*
Chair, Board of Supervisors, Los Angeles County\*
County Administrator, Los Angeles County\*

\*Copies of the full inspection are available online at www.bscc.ca.gov.

# JUVENILE HALLS, SPECIAL- PURPOSE JUVENILE HALLS AND CAMPS Board of State and Community Corrections PROCEDURES CHECKLIST<sup>1</sup>

BSCC Code: 7198

FACILITY NAME: Central Juvenile Hall (CJH)  FACILITY TYPE: Juvenile Hall									
PERSON(S) INTERVIEWED: John Baima, Sr. Director; Edie Thompson BSCC Coordinator, Karen Streich and Juan Aguirre, DMH, David Oh, JCHS, Principal Scott Bastian, Facility Directors, and Supervisors, 4-line staff, and 4 female youth ages 13, 15, 16, and 17 and several male youth, from each unit.									
FIELD REPRESENTATIVE: Lisa Southwell				DATE: November 21-22, 2022, and December 12- 16, 2022					
TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS					
1313 COUNTY INSPECTION AND EVALUATION OF BUILDING AND GROUNDS On an annual basis, or as otherwise required by law, each juvenile facility administrator shall obtain a documented inspection and evaluation from the following:  (A) County building inspection by agency designated by				Section 203: County Inspections of Buildings					
the Board of Supervisors to approve building safety;				and Grounds  2021 The building inspection was completed by Tenneson D'Sena on August 11, 2021.  Exit signs were found to be nonfunctioning in the chapel, in administration, in Unit C, and in Unit S. There were some exposed wires which needed correction and electrical cover plates were needed in the kitchen. No proof of corrections was provided.  2022 An email was received from the inspector noting the inspection occurred on August 11, 2022, with no issues found and all areas of previous concern being remedied.  The report was requested multiple times and was not received at the time of the initial inspection report. Since that time, we have received the report and it was noted there were no issues. This area has been corrected.					

<sup>&</sup>lt;sup>1</sup> This document is intended for use as a tool during the inspection process; this worksheet may not contain each Title 15 regulation that is required. Additionally, many regulations on this worksheet are SUMMARIES of the regulation; the text on this worksheet may not contain the entire text of the actual regulation. Please refer to the complete California Code of Regulations, Title 15, Minimum Standards for Local Facilities, Division 1, Chapter 1, Subchapter 5 for the complete list and text of regulations.

(5) 5: 11 1: 1 1: 1 1: 1 1: 1 1: 1 1: 1 1			
(B) Fire authority having jurisdiction, including a fire			Section 203: County Inspections of Buildings
clearance as required by Health and Safety Code			and Grounds
Section 13146.1 (a) and (b);			The facility was inspected by the Schools Churches and Institutions Unit of the Los Angeles Fire Department (LAFD) on May 19, 2020, and fire clearance was granted.
			2022: No current fire clearance provided. This section is non-compliant.
			In 2021, the facility received notification from Inspector Alejandro Medina noting "to approve the regulation 4 fire protection systems at your facilities. In response to the Corona Virus (Covid-19), you will be working to get all these fire protection systems in order. You will be the responsible party for getting these systems compliant. LAFD reserves the right to visit your facility to validate compliance and ensure a continued safe environment."
	⊠		Additional documentation was provided on January 27, 2022, from Captain Samuel Galvan, Los Angeles Fire Department, which notes negligent violations for fire alarms, emergency power generators, stored electrical energy systems, elevators, and sprinkler systems.
			A follow-up phone conversation was held during the inspection with the LA County fire inspector and this inspector to inquire about any additional updates. The fire inspector noted obtaining the clearance has been problematic as the clearance is tied to the courthouse. Probation has been working to get the clearance, but it is still outstanding. He stated the facility is on fire watch and they continue to work towards obtaining their clearance.
			2022: No current fire clearance was provided at the time of inspection; however, on March 3, 2023, we were provided with fire clearance documentation from Inspector Medina. This area has been corrected.

(C) Local health officer, inspection in accordance with Health and Safety Code Section 101045;	lacktriangle		Section 203: County Inspections of Buildings and Grounds  2021  Medical Mental Health: Completed March 12, 16-17, 2021 by Tia Mao, PHN. Areas of concern was reinspected in November 2021 and were noted to be corrected with the exception of one area that would be reviewed at the next inspection per the inspecting body.  Nutrition: Completed March 16-17, 2021, by David Kornoff, EHS III. Areas of concern were reinspected in May 2021 and were noted to be corrected.  Environmental Health: Completed March 16-17, 2021, by David Kornoff, EHS III. Areas of concern were reinspected in May 2021. There were items of noncompliance; these items were corrected in 2022 inspection.  2022  Medical: Completed January 27, 2022, February 22, and March 8-9, 2022, by Tia Mao, PHN. No deficiencies were found.  Nutrition: Completed June 29, 2022, by YiJen Wendy Chen REHS. Areas of concern were reinspected in August 2022 and found not to be corrected. Areas were reinspected in January 2023, prior to the finalization of this report and the areas were found to be corrected.  Environmental Health: Completed March 23, 2022, by Nicolas Martinez, Chief EHS; Antonio Valera, EHS III and Susan Xue, EHS III.
			III.  Areas of concern were reinspected in June 2022 and were corrected.

(D) County superintendent of schools on the adequacy of educational services and facilities as required in Section 1370;		Section 203: County Inspections of Buildings and Grounds  Education for the facility is provided by Los Angeles County Office of Education  2021  On December 21, 2021, the facility was inspected by Jonathan Raymond, Special Education Director and Scott Turner, SELPA Director, Charter Oak Unified School District found the school program to meet regulatory expectations.  See Section 1370 for specific comments made.  2022  On November 22nd, 2022, the facility was inspected by Maribel Martinez, Ed.D. Lynwood USD, Jose Jauregui, Coordinator of Student Services, Lynwood USD and Flavio Gallarzo, Coordinator of Student Services, Lynwood USD.
(E) Juvenile court as required by Section 209 of the Welfare and Institutions Code		Section 203: County Inspections of Buildings and Grounds  2021  Commissioner Robert Totten inspected CJH on December 9, 2021. The facility was found to be in full compliance and operated and maintained as a suitable place for the confinement of minors.  2022  The 2022 inspection occurred on February 12, 2023, by Judge Miguel Espinosa. The report is pending.  It is important to note the misunderstanding that occurred this year. The process for inspections was clarified with the new Judicial Officers in that the expectation is that an inspection occurs annually each calendar year. It was previously believed and communicated to them that the inspection should occur at the beginning of the new year for the past year. This was clarified and will be corrected moving forward.

(F) Juvenile Justice Commission as required by Section 229 of the Welfare and Institutions Code or Probation Commission as required by Section 240 of the Welfare and Institutions Code.			Section 203: County Inspections of Buildings and Grounds  The Probation Oversight Commission conducts annual inspections of the facility.
			<b>2021</b> The facility was inspected in October 2021.
			2022 The facility was inspected on October 14, 2022. Reports can be found at http://file.lacounty.gov/SDSInter/bos/supdocs/POC21-0136.pdf
1320 APPOINTMENT AND QUALIFICATIONS BSCC Note: Compliance with this section is determined by receipt of the Chief Probation Officer's certification letter confirming that all elements of regulation are met.	×		Appointment and qualification certification letters, dated December 20, 2021, and January 26, 2022, were received from Chief Probation Officer Adolfo Gonzales, certifying all staff appointments are pursuant to the applicable laws and that all staff present at the facility meet all required qualifications.
(a) Appointment In each juvenile facility there shall be a superintendent, director or facility manager in charge of its program and employees. Such superintendent, director, facility manager and other employees of the facility shall be appointed by the facility administrator pursuant to applicable provisions of law.			All non-employees also receive appropriate clearances prior to entering.
(b) Employee Qualifications			
Each facility shall:  (1) recruit and hire employees who possess knowledge, skills and abilities appropriate to their job classification and duties in accordance with applicable civil service or merit system rules;	$\boxtimes$		
<ul> <li>(2) require a medical evaluation and physical examination including tuberculosis screening test and evaluation for immunity to contagious illnesses of childhood (i.e., diphtheria, rubeola, rubella, and mumps);</li> </ul>	X		
(3) adhere to the minimum standards for the selection and training requirements adopted by the Board pursuant to Section 6035 of the Penal Code; and	X		
(4) conduct a criminal records review, on each new employee, and psychological examination in accordance with Section 1031 et seq. of the Government Code.	×		
(c) Contract personnel, volunteers, and other non- employees of the facility, who may be present at the facility, shall have such clearance and qualifications as may be required by law, and their presence at the facility shall be subject to the approval and control of the facility manager.	☒		

1321 STAFFING	Staffing documents were requested and received for the weeks of September 22-30,
Each juvenile facility shall:	2023, and October 10-17, 2023. Detention Services Bureau Daily Information Sheet (AM, PM, LN shift breakdowns), Shift Staffing Schedules and Constant Supervision of Minors (One of One Levels). These documents provide a plethora of information. Comments are based on documentation reviewed and conversations held with staff and youth.

a) have an adequate number of personnel sufficient to		Section 206: Staffing Requirement and Ratios
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;		We noted there is an excessive number of staff callouts, staff no-shows, and staff otherwise not reporting for work per shift.
		We noted an excessive number of staff who have resigned or left their positions with difficulty backfilling either due to the County hiring freeze or the inability to recruit and retain an adequate candidate sampling to meet the demand.
		Staff who come to work, report they are held over regularly and forced to work back-to-back shifts, sometimes up to or beyond 24 hours.
		Central Juvenile Hall (CJH) routinely has several units open, generally 15 or 16. CJH is also the hub for services such as all major medical procedures for all Camp youth or youth from Barry J. Nidorf Juvenile Hall. Youth are transported daily for services. This impacts staffing at admission, holding, and medical.
	⊠	There are several units that house youth in a small group model due to their mental health needs. Certain units also require more staff due to the physical plant needs or the unit tone. We noted some unit functions require more staffing than others, and extra staff were not assigned or were not available to safely operate the units and the facility, to ensure that full operations can be accomplished and to ensure both the officer's and youth's safety.
		On paper, it appears there is enough staff, but when these staff are not counted in the overall calculation as they are assigned to a non-unit child supervision assignment, these numbers are not true reflections of child supervision. Those staff left in the unit may or may not be meeting the agency's self-imposed ratio or operating in a safe manner for the physical plant or for the safe operation of the facility.
		Interviews with both youth and staff noted that both are concerned for their ongoing safety. There have been multiple incidents where both youth and staff have been assaulted. Required functions of the facility are routinely canceled due to staffing such as outdoor exercise or activity, programming, and visitation to name a few. Schooling has also been impacted. Back-up staff are assigned to units for proper supervision but are often
		pulled. Regular staff who were interviewed

		noted they are tired but don't want to leave their peers or the kids alone, so they continue to report. The toll is obvious.  Deployed field staff have been utilized in both an ordered and voluntary status to fill staffing vacancies in the facility. We noted there to be so many deployed, that consistency is an issue. Technical assistance was provided to both facilities to potentially identify or assign deployed staff to regular units so a relationship could be formed with the youth or that the unit program could be learned for repetition purposes. Overall, we found that all functions of the facility have been impacted by the lack of staffing.  We have offered technical assistance in this area however, without adequate resources, the facility continues to staff the units and the facility in the same manner, continuing to operate in the same manner which creates an unsafe environment for both the staff and the youth.  This section is non-compliant.
b) ensure that no required services shall be denied because of insufficient numbers of staff on duty absent exigent circumstances;		Section 206: Staffing Requirement and Ratios Staffing has been a consistent concern over the course of the cycle despite the agency's efforts to utilize deployed field staff, mandatory holdovers, and overtime including overtime with additional stipend pay to fill the gaps in the staffing profiles for all shifts.  Youth are noted to be in their rooms later and later than when the day should be starting as extra staff is being called in to report. Additionally, shift change times should be clarified as to when it is required that staff be at their post ready to start work and to get the youth started for the shift. As staff is not at their post at their start time, this impacts other regulatory noncompliance.  There have been instances noted due to exigent circumstances and an unsafe staffing level where youth have been held in their rooms for long periods of time or were unable to be brought out due to an unsafe number of staff reporting for work.  The agency administration is working on hiring additional staff. Technical assistance has been provided; however, without proper staffing, it will be very difficult for the facility to address all regulatory requirements.

			ı	T 000 0: # P :
c)	have a sufficient number of supervisory level staff to			206: Staffing Requirement and Ratios
	ensure adequate supervision of all staff members;	⊠		Central Juvenile Hall has a full complement of supervisory staff. Technical assistance has been provided and it is noted that supervisors should be in their units as much as possible to supervise and monitor staff and their unit and to provide an extra hand. We have also suggested that when staffing is short, appropriate supervisory staff should be considered to be pulled and placed on the line with the exception of the duty supervisor and duty director.
d)	have a clearly identified person on duty at all times			Section 206: Staffing Requirement and Ratios
	who is responsible for operations and activities and has completed the Juvenile Corrections Officer Core Course and PC 832 training;	×		The Officer of the Day (OD) is responsible for the operations of the facility. Facility staff is responsible for the unit activities of the youth.
e)	have at least one staff member present on each			Section 206: Staffing Requirement and Ratios
	living unit whenever there are youth in the living unit;	$\boxtimes$		There is always a staff present where youth are present. TA provided that we did note that sometimes staff goes to the office and there is no staff in the dayroom or in the hallway when youth are present or in their rooms.
f)	have sufficient food service personnel relative to the number and security of living units, including staff qualified and available to: plan menus meeting nutritional requirements of youth; provide kitchen supervision; direct food preparation and servings; conduct related training programs for culinary staff; and maintain necessary records; or, a facility may serve food that meets nutritional standards prepared by an outside source;	×		Section 206: Staffing Requirement and Ratios Youth eat all meals in the living units. Meals are prepared by a third-party contractor and delivered to and heated in the facility kitchen. The food is then delivered to the units on meal carts that are temperature-controlled. All meals are served to the youth in the unit. Cooks do not supervise youth for any reason. There is no culinary program or work program that occurs in the kitchen.
g)	have sufficient administrative, clerical, recreational, medical, dental, mental health, building maintenance, transportation, control room, facility security and other support for the efficient management of the facility, and to ensure that youth supervision staff shall not be diverted from supervising youth; and,			Section 206: Staffing Requirement and Ratios The facility has staff identified for the individual areas as outlined in the regulation. The intent and purpose is for other facility staff who are tasked with youth supervision to not be diverted from their task.  Juvenile Court Health Services provides medical services to the youth in Central Juvenile Hall. There is 1 Nurse Manager, 1 Supervising Clinical Nurse, 12 RN's, 3 LVN's 2 ITC's, 2 Dentists, 4 Physicians, and 1 Optometrist. The medical clinic operates 24 hours a day, 7 days a week. Medical staff are responsible for all youth health issues.

h)	assign sufficient youth supervision staff to provide			Section 206: Staffing Requirement and Ratios
	continuous wide-awake supervision of youth, subject to temporary variations in staff assignments to meet special program needs. Staffing shall be in compliance with a minimum youth-staff ratio for the following facility types:	⊠		Staff are assigned 24 hours a day through 3 shifts: AM Shift: 6:00AM- 2:00 PM, PM Shift: 2:00 PM -10:00PM and 10:00 PM to 6:00 AM. Staff are required to always remain awake.
(1)	Juvenile Halls (minimum youth-staff ratio)			Section 206: Staffing Requirement and Ratios
(A)	during the hours that youth are awake, one wide- awake youth supervision staff member on duty for each 10 youth in detention:	X		Ratio met
	during the hours that youth are confined to their room for the purpose of sleeping, one wide-awake youth supervision staff member on duty for each 30 youth in detention;	×		Section 206: Staffing Requirement and Ratios Ratio met
(C)	at least two wide-awake youth supervision staff members on duty at all times, regardless of the number of youth in detention, unless an arrangement has been made for backup support services which allow for immediate response to emergencies; and,	X		Section 206: Staffing Requirement and Ratios Staff are always wide awake; they are not to be asleep.
(D)	at least one youth supervision staff member on duty			Section 206: Staffing Requirement and Ratios
	who is the same gender as youth housed in the facility.	×		There are always male and female staff on duty.
(E)	personnel with primary responsibility for other duties			Section 206: Staffing Requirement and Ratios
	such as administration, supervision of personnel, academic or trade instruction, clerical, kitchen or maintenance shall not be classified as youth supervision staff positions.	⊠		Only youth supervision staff provide supervision of the youth.
(F)	personnel with primary responsibility for other duties such as administration, supervision of personnel, academic or trade instruction, clerical, farm, forestry, kitchen or maintenance shall not be classified as youth supervision staff positions.	×		
132				Section 205: Youth Supervision Staff
	<b>IENTATION AND TRAINING</b> Prior to assuming any responsibilities each youth supervision staff member shall be properly oriented to their duties, including:	⊠		Orientation and Training  Each new staff is assigned to a facility-specific, 40-hour training module that includes sections 1-6.  The last 5 officers' training documents were provided for review. All were signed off. See note below.
	(1) youth supervision duties;	$\boxtimes$		Section 205: Youth Supervision Staff Orientation and Training
	(2) scope of decisions they shall make;	×		Section 205: Youth Supervision Staff Orientation and Training
	(3) the identity of their supervisor;	$\boxtimes$		Section 205: Youth Supervision Staff Orientation and Training
	(4) the identity of persons who are responsible to them;	×		Section 205: Youth Supervision Staff Orientation and Training
	(5) persons to contact for decisions that are beyond their responsibility; and	$\boxtimes$		Section 205: Youth Supervision Staff Orientation and Training
	(6) ethical responsibilities.	$\boxtimes$		Section 205: Youth Supervision Staff Orientation and Training

(b)	Prior to assuming any responsibility for the			Section 205: Youth Supervision Staff
` '	supervision of youth, each youth supervision staff member shall receive a minimum of 40 hours of facility-specific orientation, including:	×		Orientation and Training
	(1) individual and group supervision techniques;	$\boxtimes$		Section 205: Youth Supervision Staff Orientation and Training
	(2) regulations and policies relating to discipline and rights of youth pursuant to law and the provisions of this chapter;	X		Section 205: Youth Supervision Staff Orientation and Training
	(3) basic health, sanitation and safety measures;	$\boxtimes$		Section 205: Youth Supervision Staff Orientation and Training
	(4) suicide prevention and response to suicide attempts	×		Section 205: Youth Supervision Staff Orientation and Training  Suicide prevention was not initially found to be signed off and was noted as non-compliant. After further review, it was noted the trainers did not feel qualified to sign off on this section. Additional documentation was provided of a suicide training roster; it was found that staff were in fact trained in suicide prevention.
	<ul><li>(5) policies regarding use of force, de-escalation techniques, chemical agents, mechanical and physical restraints;</li></ul>	×		Section 205: Youth Supervision Staff Orientation and Training
	<ul><li>(6) review of policies and procedures referencing trauma and trauma-informed approaches;</li></ul>	×		Section 205: Youth Supervision Staff Orientation and Training
	(7) procedures to follow in the event of emergencies;			Section 205: Youth Supervision Staff Orientation and Training  As part of the training program, the Juvenile Hall Building Emergency Plan is provided for officer review and signed off; however, the current Emergency Plan had not been signed off by the Fire Department. Attempts were made prior to the inspection period but the plan was still pending approval.  As of the date of this report, we were able to contact the fire inspector and found the document has been signed and all officers completed their sign-offs as part of this section. This issue has been corrected and is no longer noted as non-compliant.
	(8) routine security measures, including facility perimeter and grounds;	$\boxtimes$		Section 205: Youth Supervision Staff Orientation and Training
	(9) crisis intervention and mental health referrals to mental health services;	$\boxtimes$		Section 205: Youth Supervision Staff Orientation and Training
	(10) documentation; and	$\boxtimes$		Section 205: Youth Supervision Staff Orientation and Training

(11) fire/life safety training	X		Section 205: Youth Supervision Staff Orientation and Training  As part of the training program, the Juvenile Hall Building Emergency Plan is provided for officer review and sign-off; however, the current Emergency Plan had not been signed off by the Fire Department and therefore, has not been approved for review. Attempts had been made, but the plan approval was still pending approval.
			This section is now compliant as it was corrected prior to the completion of this report. Contact was made with the fire inspector who confirmed the document is completed.
(c) Prior to assuming sole supervision of youth, each youth supervision staff member shall successfully complete the requirements of the Juvenile Corrections Officer Core Course pursuant to Penal Code Section 6035.	$\boxtimes$		Section 205: Youth Supervision Staff Orientation and Training  All LA County Institutional Staff complete CORE before reporting to an institution.
(d) Prior to exercising the powers of a peace officer youth supervision staff shall successfully complete training pursuant to Section 830 et seq. of the Penal Code.	×		Section 205: Youth Supervision Staff Orientation and Training  All LA County Institutional Staff complete 832 before reporting to an institution.
1323 FIRE AND LIFE SAFETY  Whenever there is a youth in a juvenile facility, there shall be at least one wide awake person on duty at all times who meets the training standards established by the Board for general fire and life safety which relate specifically to the facility.	X		Section 206: Staffing Requirement and Ratios  All staff always remain awake. All staff were again trained in Fire and Life Safety in August, September, October, and November 2020.
All facility administrators shall develop, publish, and implement a manual of written policies and procedures that address, at a minimum, all regulations that are applicable to the facility. Such a manual shall be made available to all employees, reviewed by all employees, and shall be administratively reviewed at a minimum every two years, and updated, as necessary. Those records relating to the standards and requirements set forth in these regulations shall be accessible to the Board on request.  The manual shall include:	$\boxtimes$		Policy Last reviewed: March 2022 Policy Last Updated: March 2022 The policy manual is provided to all staff on PROBNET for review. Staff are notified of the new policy sections to review by email.  Room Confinement Memo: April 15, 2022  Directive 1477: Detention and Residential Treatment Services Bureaus Manual-Physical Intervention Policy (Section DSB-1000/RTSB-1700) Issued 06/22/2022. This policy was implemented but not trained. This is addressed under Section 1357.

com	le of organization, including channels of nmunications and a description of job ssifications;	×		Section 201: Administrative Structure and Chain of Command Section 202: Administrative Structure and Responsibilities Section 208: Duty Statement – Supervising Detention Services Officer Section 209: Duty Statement – Senior Detention Services Officer Section 210: Duty Statement: Detention Services Officer Section 211: Group Supervisor Nights Section 212: Organizational Chart
of p Juve Com staff	ponsibility of the probation department, purpose programs, relationship to the juvenile court, the renile Justice/Delinquency Prevention mmission or Probation Committee, probation of, school personnel and other agencies that are plived in juvenile facility programs;	X		Section 103: Role of the Juvenile Halls Section 1801: Ancillary Programs
(c) resp	ponsibilities of all employees;	$\boxtimes$		Section 202: Administrative Structure and Responsibilities Section 208: Duty Statement – Supervising Detention Services Officer Section 209: Duty Statement – Senior Detention Services Officer Section 210: Duty Statement: Detention Services Officer Section 211: Group Supervisor Nights Section 212: Organizational Chart
(d) initia	al orientation and training program for ployees;	×		Section 205: Youth Supervision Staff Orientation and Training See Section 1322 for Sworn Staff

(e)	initial orientation, including safety and security issues and anti-discrimination policies, for support staff, contract employees, school, mental/behavioral health and medical staff, program providers and volunteers;			Section 2400: Non-Sworn Personnel and Partner Agencies Handbook  Non-sworn partner staff are required to complete an initial orientation and to complete a review of the Building Emergency Plan prior to entry into the facility.  The documentation provided and reviewed included proof of signoffs from various partner agencies but did not include the Building Emergency Plan as it had not yet been signed.  Technical assistance was provided to ensure all appropriate sign off documents from all agencies. Los Angeles County Office of Education, Juvenile Court Health Services, Los Angeles County Department of Mental Health, Management Services Bureau and Community Based Organizations and Religious Providers. We also suggested that both Juvenile Halls, Central and Barry J. Nidorf, develop and implement a consistent process and practice for collection for clarity.  Prior to the finalization of the report, the Building Emergency Plan and all outstanding signoffs were completed and submitted. This section was corrected.
(f)	maintenance of record-keeping, statistics and communication system to ensure:	X		Section 1900: Reports and Records (Group to include): Section 1902: Probation Case Management System (PCMS) Section 1903: Daily Reports Section 1904: Behavior Record Section 1905: Charting Section 1909: Detention Observation Report Form
	(1) efficient operation of the juvenile facility;	$\boxtimes$		Section 1900: Reports and Records (Group to include all the above)
	(2) legal and proper care of youth;	×		Section 1900: Reports and Records (Group to include all the above)
	(3) maintenance of individual youth's records;	X		Section 1900: Reports and Records (Group to include all the above)
	(4) supply of information to the juvenile court and those authorized by the court or by the law; and,	X		Section 1900: Reports and Records (Group to include all the above)
	(5) release of information regarding youth.	$\boxtimes$		Section 1900: Reports and Records (Group to include all the above)
(g)	ethical responsibilities;	$\boxtimes$		Section 2349: Employee Honesty
(h)	trauma-informed approaches;	$\boxtimes$		Section 207: General Staff Responsibilities
(i)	culturally responsive approaches;	$\boxtimes$		Section 207: General Staff Responsibilities
(j)	gender responsive approaches;	×		Section 632: Promoting Dignity for Female Youth

(k)	a non-discrimination provision that provides that all youth within the facility shall have fair and equal access to all available services, placement, care, treatment, and benefits, and provides that no person shall be subject to discrimination or harassment on the basis of actual or perceived race, ethnic group identification, ancestry, national origin, immigration status, color, religion, gender, sexual orientation, gender identity, gender expression, mental or physical disability, or HIV status, including restrictive housing or classification decisions based solely on any of the above mentioned categories;	×		Section 402: Non-Discrimination
(1)	storage and maintenance requirements for any chemical agents related security devices, and weapons and ammunition, where applicable;	⊠		Directive 1477 Section 1006: OC Spray Section D. OC Spray Issuance and Accountability Security of OC Spray Canisters: Maintenance of Canisters:
(m)	establishment of procedures for collection of Medi- Cal eligibility information and enrollment of eligible youth; and,	$\boxtimes$		Section 1716: Medi-Cal Administrative Activities
(n)	establishment of a policy that prohibits all forms of sexual abuse, sexual assault and sexual harassment. The policy shall include an approach to preventing, detecting and responding to such conduct and any retaliation for reporting such conduct, as well as a provision for reporting such conduct by youth, staff or a third party.			Section 1500: Prison Rape Elimination Act (PREA)
dep Sta whi	e facility administrator shall consult with the local fire partment having jurisdiction over the facility, or with the te Fire Marshal, in developing a plan for fire safety ch shall include, but not be limited to:			
a)	a fire prevention plan to be included as part of the manual of policy and procedures;	$\boxtimes$		Section 911: Fire Prevention and Suppression
b)	monthly fire and life safety inspections by facility staff with two- year retention of the inspection record;	×		Section 911: Fire Prevention and Suppression  Provided proof of inspections required for July 1-December 31, 2020, 2021, and 2022. Noted that in most cases, it appears that the inspections are not completed until the following month for the month prior.  Technical assistance provided for review of this practice. It is understood that due to the size of the report that it may take a little extra time for the report to be completed; however, the report should be completed in the current month in which it is due.
c)	fire prevention inspections as required by Health and Safety Code Section 13146.1(a) and (b);		⊠	Agency does not have a current fire clearance and will remain noncompliant until a clearance is obtained. Noncompliance captured in Section 1313.

d)	an evacuation plan;	X		Section 920: Emergency Evacuation and County of Los Angeles Building Emergency Plan of County Buildings  Each unit has an assigned evacuation location on the facility grounds. Evacuation maps were noted to be posted in the units.
e)	documented fire drills not less than quarterly;			Section 911: Fire Prevention and Suppression
		X		Fire Drills for 2021 and 2022 have been completed as required by regulation. The facility building emergency plan requires drills to be completed on each shift and with partner agencies. Facility managers were reminded regarding completing drills at various times on different shifts to ensure all staff are trained accordingly how to handle an emergency. This will be re-reviewed in the new year to confirm compliance.
f)	a written plan for the emergency housing of youth in the case of fire; and,		X	Section 921: Operation FLEE and County of Los Angeles Building Emergency Plan of County Buildings  If the facility were to evacuate, they would normally evacuate to Barry J. Nidorf Juvenile Hall. The facility has the rated capacity available to hold the youth but, due to the myriad of construction projects, may not have available space necessary. Technical assistance provided to develop a plan as soon as possible for emergency planning for a full evacuation. At this time, until a plan is fully developed, the facility is noncompliant in this area.
g)	development of a fire suppression pre-plan In cooperation with the local fire department.	×		Section 911: Fire Prevention and Suppression  At inspection, the fire suppression pre-plan was not complete. After inspection but before finalizing the report, the pre-plan was signed off by the fire department in January 2023 and the issue corrected.

1326 SECURITY REVIEW			Section 516: Security Procedures
			•
Each facility administrator shall develop policies and procedures to annually review, evaluate, and document security of the facility. The review and evaluation shall include internal and external security, including, but not limited to, key control, equipment, and staff training.			A Security Review was completed for 2021 on May 13, 2021. The review was completed but did not have all the required elements. All management and responsible people are no longer present or responsible for the facility operations.
	×		The security review was completed for 2022 in February and again in May 2022.
			Technical assistance was provided and discussed that these reviews should be thorough and technical and include full reviews to look for security breaches and concerns and must include all areas of the regulation requirements. We will be following up with the facility in the next few months to provide onsite TA for their security review.
1327 EMERGENCY PROCEDURES			Section 900: Emergency Procedures
The facility administrator shall develop facility-specific policies and procedures for emergencies that shall include, but not be limited to:	×		
(a) escape, disturbances, and the taking of hostages;	×		Section 906: Escapes (Code Green) Section 908: Major Disturbances (Code Red) Section 916: Hostages
(b) civil disturbance, active shooter and terrorist attack;	×		Section 907: Outside Intruder (Code Yellow) Section 917: Active Shooter Section 918: Terrorist Attack Section 919: Civil Disturbance
(c) fire and natural disasters;	×		Section 911: Fire Prevention and Suppression Section 913: Power Failure Section 915: Earthquakes
(d) periodic testing of emergency equipment;	$\boxtimes$		Section 910: Testing of Emergency Equipment
(e) emergency evacuation of the facility; and	×		Section 920: Emergency Evacuation
(f) a program to provide all youth supervision staff with an annual review of emergency procedures.	×		Section 920: Emergency Evacuation  At inspection, the annual review was not completed due to the Building Emergency Plan not being completed. The plan has now been signed off and all staff have completed their review and sign offs throughout the month of January 2023. This section has been corrected.

1328 SAFETY CHECKS		
The facility administrator shall develop and implement policy and procedures that provide for direct visual observation of youth at a minimum of every 15 minutes, at random or varied intervals during hours when youth are asleep or when youth are in their rooms, confined in holding cells or confined to their bed in a dormitory. Supervision is not replaced, but may be supplemented by, an audio/visual electronic surveillance system designed to detect overt, aggressive or assaultive behavior and to summon aid in emergencies. All safety checks shall be documented with the actual time the check is completed.	$oxed{f x}$	Section 209: Duty Statement-Senior Detention Services Officer Section 210: Duty Statement-Detention Services Officer Section 211: Group Supervisor Nights Section 630: Safety Checks  We requested and reviewed random blocks of dates and times of documented safety checks for Central Juvenile Hall. We selected 1 random day, all shifts, for a camera review.  We found safety checks are not being documented according to regulations and policy. Checks are not random and varied. The video review did not corroborate the written documentation. We noted that staff is not consistently documenting late checks as discrepancies for supervisor review and, when they do, they are not consistently being reviewed or followed up on by the supervisors. While there is an expectation to conduct quality assurance (QA), it is unknown what that is and directors and supervisors have not been trained to do so.  We found a wide variety of safety check outcomes, from staff conducting perfect safety checks being completed as we viewed video with staff stopping to look in each window to ensure the safety of the youth, completed at random and varied times and documented correctly, to checks that were documented despite a check not even being completed, documented in advance or the youth potentially not being viewed in the room due to the inability to adequately see him. Most of these discrepancies were on the late-night shifts although there were some instances during awake hours as well. We noted in some cases large blocks of time missing. It is believed that this is a documentation issue but without reviewing every single check facility-wide, we are unable to determine if checks were actually made.  It was also difficult to determine for the purposes of QA when youth were in their rooms for Self-Separation to ensure room checks were being conducted on these youth as required. Technical assistance is suggested for this area as well as the utilization of a randomization timer to assist staff in the provision of random and varied safety checks. S
		utilization of a randomization timer to assist staff in the provision of random and varied

		electronic safety check tracking tool. The tool tracks each check electronically and reports this information in real-time to supervisory staff. The Pilot and training began with full implementation planned for the coming weeks. The goal is that this system will solve the problem of safety checks in the facility. TA has been provided to ensure a strong process of QA and review of downloads.
The facility administrator, in collaboration with the healthcare and behavioral/mental health administrators, shall plan and implement written policies and procedures which delineate a Suicide Prevention Plan.  The plan shall consider the needs of youth experiencing past or current trauma.  Suicide prevention responses shall be respectful and in the least invasive manner consistent with the level of suicide risk.  The plan shall include the following elements:		Section 1601: Suicide Prevention-Introduction  We spoke to Juan Aguirre, Manager, LMFT with the Department of Mental Health (DMH). Mr. Aguirre stated there is a good, collaborative relationship between DMH and Probation. We discussed the current status and operation of the mental health program as well as future plans and the vision Mr. Aguirre has for the facility in the future.  There are approximately 60-plus mental health staff. 35 clinical staff, 6 supervisors, 4 clericals, 4 clinical psychologists, and various other supporting staff. Staff provides services between 7:30 AM- 10:00 PM, 7 days a week. After hours, there are always doctors on call to address any issue or problem that may arise.  On any given weekday, AM shift, there are generally about 10 clinicians available in the facility. Evenings, there are 6-7 in the facility. On weekends, there are generally at least 4 mental health staff on duty.  Most youth are assigned to a clinician by unit. There is an on-duty clinician assigned 7 days a week to respond. Each youth is assigned a clinician unless they decline. The youth is offered therapy based on their individual case plans. They may have group therapy, family phone therapy and/or psychiatric services, and medication management.  Probation, mental health, and medical work together in MDT's and case conferences and collateral work to meet the needs of the youth to ensure the youth's safety. If a youth is placed on a level by a DMH staff, the youth must be cleared by a DMH staff.  Youth we spoke to spoke highly of their therapists and noted that it was relatively easy to reach them or to be seen.  All individual regulatory requirements have been met.

(a) Quinida provention training as required in	1		Section 1604: Training
<ul> <li>(a) Suicide prevention training as required in Section 1322, Youth Supervision Staff Orientation, and Training and the Juvenile Corrections Officer Core Course.</li> </ul>	⊠		Section 1604: Training  All staff are trained in suicide prevention training at CORE and upon arrival to their facility for facility specific training. Additionally, staff receive a 4-hour refresher training during block week.
(b) Screening, Identification Assessment and Precautionary Protocols (1) All youth shall be screened for risk of suicide at intake and as needed during detention.	×		Section 1606: Identification and Referral of At-Risk Youth 1608: Intervention to Prevent Self-Harming or Suicidal Behavior  Intake admission documents were provided and reviewed. All included a mental health screening at intake by probation. Every youth is screened at intake for risk of suicide. Youth are asked about the history of hospitalization, mental health treatment, medication, if suicide has been considered, and current emotional status.
(2) All youth supervision staff who perform intake processes shall be trained in screening youth for risk of suicide.	⊠		Section 1604: Training  All youth supervision staff are trained in screening processes for the risk of suicide. This is a part of the initial and ongoing training that staff receive at CORE, upon arrival at the facility, and during refresher training at block week.
(3) All youth who have been identified during the intake screening process to be at risk of suicide shall be referred to behavioral/mental health staff for a suicide risk assessment.	⊠		Section 1606: Identification and Referral of At-Risk Youth  17 youth Special Incident Reports (SIR's) were initiated for intake processes and appropriate referrals. All youth reviewed were identified as being at-risk for suicide either through previous behaviors or current ideation. All were referred to mental health, placed on a level 3, and on either a small group or a one-on-one direct supervision until seen by behavioral health staff.  Youth are also screened by medical during their admission process and again no later than 72 hours by mental health who conduct the full MAYSI on each youth. Youth are triaged based on risk level.

(4) Precautionary protocols shall be developed to ensure the youth's safety pending the behavioral/mental health assessment.	×		Section 1606: Identification and Referral of At-Risk Youth  Any youth who is found to be at-risk is placed on a Level II or a Level III and supervised accordingly. These levels can be either a probation level or a mental health-initiated level. If a youth is placed on a mental health level, he or she must be removed by mental health staff.  We noted while reviewing documentation that in some circumstances, youth were placed on a lower-level watch based on the lack of staff or a "critical staffing level". While this was not an ongoing, consistent issue, this did occur. When this occurs, this is noncompliant. This noncompliance is captured under staffing noncompliance.
(c) Referral process to behavioral/mental health staff for assessment and/or services.	×		Section 1607: Interagency Communication Regarding Self-Harming Youth  Officers submit mental health referrals to DMH for services. Referrals are submitted for all major actions. Issues are triaged for care by action and if the youth is assigned to a clinician.
(d) Procedures for monitoring of youth identified at risk for suicide.	⊠		Section 1405: Level 2 Enhanced Supervision Requirements Section 1406: Level 3 Enhanced Supervision Requirements  Youth are placed on levels dependent on their level of risk. Procedures are specific to the level.
(e) Safety Interventions  (1) Procedures to address intervention protocols for youth identified at risk for suicide which may include, but are not limited to:	×		Section 1601: Suicide Prevention- Introduction Section 1608: Intervention to Prevent Self- Harming or Suicidal Behavior
A. Housing consideration	×		Section 1403: Procedure Section 1601: Suicide Prevention- Introduction  Youth are generally housed in their regular housing unit if placed on any level or could be housed in the HOPE Center, if necessary, on a SSP. (currently, CJH does not have a HOPE Center)
B. Treatment strategies including trauma-informed approaches	⊠		Section 1600: Suicide Prevention Section 1608: Intervention to Prevent Self-Harming or Suicidal Behavior  Youth are seen based on mental health's treatment guidelines.

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(2) Procedures to instruct youth supervision staff how to respond to youth who exhibit suicidal behaviors.	×		Section 1601: Introduction Section 1608: Intervention to Prevent Self-Harming or Suicidal Behavior Section 1403: Procedure  Mental Health staff provides unit staff with instruction through verbal and also with written communication in the form of the Mental Health Recording Form. This form provides all information for staff, including the recommendations to keep youth safe.
(f) Communication  (1) The intake process shall include communication with the arresting officer and family guardians regarding the youth's past or present suicidal ideations, behaviors or attempts.	×		Section 1607: Interagency Communication Regarding Self-Harming Youth  The documentation reviewed was compliant.
(2) Procedures for clear and current information sharing about youth at risk for suicide with youth supervision, healthcare, and behavioral/mental health staff.	×		Section 1607: Interagency Communication Regarding Self-Harming Youth  Any issues that arise as a result of communication with arresting officers or staff are shared with mental health staff.
<ul> <li>(g) Debriefing of Critical Incidents Related to Suicides or Attempts</li> <li>(1) Process for administrative review of the circumstances and responses proceeding, during and after the critical incident.</li> </ul>	×		Section 1913: Critical Incident Review Process  No documentation was provided. No incidents to report per facility staff.
(2) Process for a debriefing event with affected staff.	$\boxtimes$		Section 1913: Critical Incident Review Process
(3) Process for a debriefing event with affected youth.	$\boxtimes$		Section 1913: Critical Incident Review Process
(h) Documentation         (1) Documentation processes shall be developed to ensure compliance with this regulation	×		Section 1912: Preliminary and Follow Up Incident Notification Procedures Section 1913: Critical Incident Review (CIR) Process
Youth identified at risk for suicide shall not be denied the opportunity to participate in facility programs, services and activities which are available to other non-suicidal youth, unless deemed necessary for the safety of the youth or security of the facility. Any deprivation of programs, services or activities for youth at risk of suicide shall be documented and approved by the facility manager.	×		Section 1606: Identification and Referral of At- Risk Youth  We did not note any situations where youth on Level 3 were denied programming other youth were taking part in. Youth choose what they participate in.
1340 REPORTING OF LEGAL ACTIONS  Each facility shall submit to the Board a letter of notification on each legal action, pertaining to conditions of confinement, filed against persons or legal entities responsible for juvenile facility operation.	⊠		Section 202: Administrative Structure and Responsibilities  Request made to Executive Management.

<ul> <li>1341 DEATH AND SERIOUS ILLNESS OR INJURY OF A YOUTH WHILE DETAINED</li> <li>(1) Death of a Youth.</li> <li>(a) The facility administrator, in cooperation with the health administrator and the behavioral/mental health director, shall develop written policies and procedures in the event of the death of a youth while detained, which include notifications to necessary parties, which may include the Juvenile Court, the parent, guardian or person standing in loco parentis and the youth's attorney of record.</li> </ul>	×		There have been no deaths in the facility. Sections b, c and d are marked as yes, for compliance with policy.
(b) The health administrator, In cooperation with the facility administrator, shall develop written policies and procedures to assure there is a medical and operational review of every in-custody death of a youth. The review team shall include the facility administrator and/or facility manager, the health administrator, the responsible physician and other health care and supervision staff who are relevant to the incident.	⊠		Section 2002: Deaths
(c) The administrator of the facility shall provide to the Board a copy of the report submitted to the Attorney General under Government Code Section 12525. A copy of the report shall be submitted to the Board within 10 calendar days after the death.	×		Section 2002: Deaths
(d) Upon receipt of a report of the death of a youth from the administrator, the Board may within 30 calendar days inspect and evaluate the juvenile facility, jail, lockup or court holding facility pursuant to the provisions of this subchapter. Any inquiry made by the Board shall be limited to the standards and requirements set forth in these regulations.	×		Section 2002: Deaths
(2) Serious Illness or Injury of Youth  (a) The facility administrator, In cooperation with the health administrator, shall develop written policies and procedures for the notification to necessary parties, which may include the Juvenile Court, the parent, guardian or person standing in loco parentis and the youth's attorney of record in the case of a serious illness or injury of a youth.	X		Section 922: Serious Illness or Injury of a Youth While Detained  Section 1912: Preliminary and Follow Incident Notification Procedures  Section 1900: Parent/Guardian/Caregiver Notification and Court/Attorney Notification  Section 1909: Detention Observation Report Form  Serious incidents are defined in policy but are in no means an exhaustive list. Facility PINS provided for review. Notifications completed as required.
1342 POPULATION ACCOUNTING  Each juvenile facility shall submit required population and profile survey reports to the Board within 10 working days after the end of each reporting period, in a format to be provided by the Board.	×		Section 202: Administrative Structure and Responsibilities.  All population reports have been provided as required.

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1343 JUVENILE FACILITY CAPACITY				Section 202: Administrative Structure and
When the number of youth detained in a living unit of a juvenile facility exceeds its rated capacity for more than fifteen (15) calendar days in a month, the facility administrator shall provide a crowding report to the Board in a format provided by the Board.	⊠			Responsibilities.  The facility has not exceeded its rated capacity this cycle.
The facility administrator shall develop and implement written policies and procedures for admittance of youth that emphasize respectful and humane engagement with youth, and reflect that the admission process may be traumatic to youth who may have already experienced trauma. Policies shall be trauma-informed, culturally relevant, and responsive to the language and literacy needs of youth. In addition to the requirements of Sections 1324 and 1430 of these regulations:	⊠			Section 403: Procedures for Newly Admitted Youth  40 individual admission CJH packets were randomly selected and reviewed for the timeline provided. All individual regulatory requirements have been met.
<ul> <li>(a) the admittance process shall include:</li> <li>(1) Access to two free phone calls within one hour of admittance in accordance with the provisions of Welfare and Institution Code Section 627;</li> </ul>	⊠			Section 403: Procedures for Newly Admitted Youth  Samples of case notes were provided documenting phone calls made to the youth's parents upon entry into the facility.
(2) Offer of a shower;	×			Section 403: Procedures for Newly Admitted Youth  All youth interviewed confirmed being offered a shower upon entry.
(3) Documented secure storage of personal belongings;	X			Section 403: Procedures for Newly Admitted Youth  Property is inventoried and stored securely. Random property receipts were viewed. Some are documented more thoroughly than others. TA provided to ensure that all items are documented, specifically valuable items.
(4) Offer of food upon arrival;	×			Section 403: Procedures for Newly Admitted Youth  All youth interviewed confirmed being offered something to eat upon arrival.
(5) Screening for physical and behavioral health and safety issues, intellectual or developmental disabilities;	X			Section 403: Procedures for Newly Admitted Youth Section 404: Special Needs screening Procedures Section 405: Accommodation Procedures for Heating Impaired Youth Section 414: Identification, referral, collaborative Care, Habilitative Treatment, Management, and discharge of Youth's with or suspected of Having a Developmental Disability Admitted to Juvenile Hall  Screenings for medical and mental health are completed by Probation staff, by medical staff, and by mental health staff.

	(6) Screening for physical and developmental disabilities in accordance with Sections 1329, 1418, and 1430 of these regulations;	×		Section 403: Procedures for Newly Admitted Youth Section 404: Special Needs screening Procedures Section 405: Accommodation Procedures for Heating Impaired Youth Section 414: Identification, referral, collaborative Care, Habilitative Treatment, Management and discharge of Youth's with or suspected of Having a Developmental Disability Admitted to Juvenile Hall  Screenings are completed by Probation staff, by medical staff, and by mental health staff. Every youth is screened for Regional Center upon entry. Each packet reviewed contained a screening form.
	(7) Contact with Regional Center for the Developmentally Disabled for youth that are suspected of or identified as having a developmental disability, pursuant to Section 1418; and,	×		Section 414: Identification, Referral, Collaborative Care, Habilitative Treatment, Management and Discharge of youths with or Suspected of Having a Developmental Disability Admitted to Juvenile Hall  Central Juvenile Hall has several units that house youth with developmental disabilities or mental health issues. Youth are identified and classified into the various specialty units where additional services can be provided to meet the youth's individual needs.
	(8) Procedures consistent with Section 1352.5.	×		Section 403: Procedures for Newly Admitted Youth Section 631: Supervision of Lesbian, Gay, Bisexual, Transgender, Questioning and Intersex (LGBTQI) Youth Intake  At the time of inspection, there were no transgender youth in custody to interview.
(b)	juvenile hall administrators shall establish written criteria for detention that considers the least restrictive environment.	X		Section 407: Los Angeles County Detention Screening (LADS) Assessment Tool  The facility uses both the Krisberg Scale and the Los Angeles County Screening Tool to ensure only youth who require detention remain detained.
(c)	juvenile camps and post-dispositional programs in juvenile halls shall develop policies and procedures that advise the youth of the estimated length of stay, inform them of program guidelines and provide written screening criteria for inclusion and exclusion from the program.		×	Section 421: Estimated Length of Stay  Per BSCC Coordinators, there are no post- dispositional programs at Central JH.

(d) invente hells shall develop religion and	1	1	Continue 404: Fotiments of Longton of Ctore
(d) juvenile halls shall develop policies and procedures that advise any committed youth of the			Section 421: Estimated Length of Stay
estimated length of his/her stay.		×	Per BSCC Coordinators, Central Juvenile Hall youth generally are committed to a Camp facility, to placement, or are released home. If committed to one of these programs, youth would be notified by either their Probation Officer or by the Camp Assessment Unit. The Placement Unit will provide this information to the youth.
1350.5. SCREENING FOR THE RISK OF SEXUAL			1509: Screening for Risk of Sexual
ABUSE The facility administrator shall develop and implement written policies and procedures to reduce the risk of sexual abuse by or upon youth. The policy shall require facility staff to assess each youth within 72 hours of admission based on the following information:	⊠		Victimization and Abusiveness.  Admission packets were reviewed for those youth who remained detained and were screened for risk of sexual abuse. These screenings are completed as part of the admission process and are documented in PEMRS - the facility medical/mental health electronic system. All screenings were completed as required.
(a) Prior sexual victimization or abusiveness;	$\boxtimes$		Section 1509: Screening for Risk of Sexual Victimization and Abusiveness.
(b) Gender nonconforming appearance or manner; or identification as lesbian, gay or bisexual, transgender, queer or intersex, and whether the youth may, therefore, be vulnerable to sexual abuse;	×		Section 1509: Screening for Risk of Sexual Victimization and Abusiveness.
(c) Current charges and offense history;	×		Section 1509: Screening for Risk of Sexual Victimization and Abusiveness.
(d) Age;	$\boxtimes$		Section 1509: Screening for Risk of Sexual Victimization and Abusiveness.
(e) Level of emotional and cognitive development;	×		Section 1509: Screening for Risk of Sexual Victimization and Abusiveness.
(f) Physical size and stature;	×		Section 1509: Screening for Risk of Sexual Victimization and Abusiveness.
(g) Mental illness or mental disabilities;	$\boxtimes$		Section 1509: Screening for Risk of Sexual Victimization and Abusiveness.
(h) Intellectual or developmental disabilities;	$\boxtimes$		Section 1509: Screening for Risk of Sexual Victimization and Abusiveness.
(i) Physical disabilities;	$\boxtimes$		Section 1509: Screening for Risk of Sexual Victimization and Abusiveness.
(j) The youth's perception of vulnerability; and,	$\boxtimes$		Section 1509: Screening for Risk of Sexual Victimization and Abusiveness.
(k) Any other specific information about the individual youth that may indicate heightened needs for supervision, additional safety precautions, or separation from certain other youth.	⊠		Section 1509: Screening for Risk of Sexual Victimization and Abusiveness.

Staff shall ascertain this information through conversations with the youth during the admittance process, medical and behavioral health screenings; during classification assessments; and by reviewing court records, case files, facility behavioral records, and other relevant documentation from the youth's files.	×		Section 1509: Screening for Risk of Sexual Victimization and Abusiveness.  Documentation noted information gathered based on PCMS. TA provided to ensure to document thoroughly all areas reviewed and to include conversations with the youth and any other person as well as any review of other documentation outside of PCMS.
The facility administrator shall implement appropriate controls on the dissemination of information within the facility relative to responses received pursuant to this assessment in order to ensure that sensitive information is not exploited to the youth's detriment by staff or other youth.	×		Section 1509: Screening for Risk of Sexual Victimization and Abusiveness.  The screening tool is completed within PEMRS which requires an additional level of security.
1351 RELEASE PROCEDURES  The facility administrator shall develop and implement written policies and procedures for release of youth from custody which provide for:	⊠		25 release documents were reviewed for regulatory compliance.
(a) verification of identity/release papers;	×		Section 309: Release Procedures  Parents were notified and signed the release documents.
(b) return of personal clothing and valuables;	×		
(c) notification to the youth's parents or guardian;			Section 309: Release Procedures
	×		Parents are notified by the probation officer, the court, and the facility.
(d) notification to the facility health care provider in accordance with Sections 1408 and 1437 of these regulations, for coordination with outside agencies; and,	X		Section 309: Release Procedures  Nursing staff are specifically identified and noted as a notification on the release form.
(e) notification of school staff;	$\boxtimes$		School staff were not found to be listed in any notification. School staff are notified telephonically of all releases. Depending on the time the youth spent in custody, the school prepares information i.e., transcripts with credits, grades etc. and forwards it on to the youth's home school. Proof of this practice was provided to us and we reviewed several transcripts of released youth.  Discussions were held of the need to formalize the telephonic process to have documentation of that phone call either through a case note or an email etc. for proof of practice reasons. This was immediately rectified.

(f) notification of facility mental health personnel.			Section 309: Release Procedures
	$\boxtimes$		Mental health staff were not found to be listed in the notification. Mental health staff are notified telephonically if they are not present during the youth's release. Medical sees all youth and the youth will see Mental health if they are present in the facility. If they are not, Mental Health release or referral documents are completed and sent to the parent. Youth receive any medication through the clinic staff. Documentation of this process was provided but this too was not a formalized notification with proof of practice. This was immediately addressed.
The facility administrator shall develop and implement policies and procedures for post-disposition youth to coordinate the provision of transitional and reentry services including, but not limited to, medical and behavioral health, education, probation supervision and community-based services.	×		Section 309: Release Procedures  There are no post dispositional programs at Central Juvenile Hall.
The facility administrator shall develop and implement written policies and procedures for the furlough of youth from custody.	×		Section 309: Release Procedures
1352 CLASSIFICATION  The facility administrator shall develop and implement written policies and procedures on classification of youth for the purpose of determining housing placement in the facility.	×		
Such procedures shall:  (a) provide for the safety of the youth, other youth,			Section 412: Classification and Assignment of
facility staff, and the public by placing youth in the appropriate, least restrictive housing and program settings. Housing assignments shall consider the need for single, double or dormitory assignment or location within the dormitory;	⊠		Youth  All rooms in Central Juvenile Hall are utilized as single room. Each youth is classified upon entry. Each classification form was found to be completed in its entirety.
(b) consider facility populations and physical design of the facility;	×		Section 412: Classification and Assignment of Youth  Any overrides must be approved by the OD. We did not view many overrides.
(c) provide that a youth shall be classified upon admittance to the facility; classification factors shall include, but not be limited to: age, maturity, sophistication, emotional stability, program needs, legal status, public safety considerations, medical/mental health considerations, gender and gender identity of the youth;	X		Section 412: Classification and Assignment of Youth  New intakes are currently classified to the Medical Housing due to the COVID testing protocols. Once a youth tests negative, they are reclassified and moved to their actual appropriate living unit within the facility. Youth are moved as soon as their test results are available. The facility has significantly reduced their testing result time in the last 6 months.

(d) provide for periodic classification reviews, including provisions that consider the level of supervision and the youth's behavior while in custody; and,	⊠		Section 412: Classification and Assignment of Youth  Periodic classifications are completed during the periodic review of the case plan. Staff are trained to ask weekly during the periodic review if the youth is experiencing any problems or concerns and to update the classification as appropriate. They are also trained to update any classification changes if it has not already been done. All documents reviewed were found to be compliant.
(e) provide that facility staff shall not separate youth from the general population or assign youth to a single occupancy room based solely on the youth's actual or perceived race, ethnic group identification, ancestry, national origin, color, religion, gender, sexual orientation, gender identity, gender expression, mental or physical disability, or HIV status. This section does not prohibit staff from placing youth in a single occupancy room at the youth's specific request or in accordance with Title 15 regulations regarding separation.	×		Section 412: Classification and Assignment of Youth
(f) facility staff shall not consider lesbian, gay, bisexual, transgender, questioning or intersex identification or status as an indicator of likelihood of being sexually abusive.	×		Section 412: Classification and Assignment of Youth
1352.5 TRANSGENDER AND INTERSEX YOUTH.  The facility administrator shall develop written policies and procedures ensuring respectful and equitable treatment of transgender and intersex youth. The policies shall provide that:			Section 631: Supervision of Lesbian, Gay, Bisexual, Transgender, Questioning and Intersex (LGBTQI) Youth  Facility administration reported there have been transgender youth held in the facility during the inspection cycle; however, there were none currently in detention to discuss compliance with regulation or treatment while in custody.  All individual regulatory requirements have been met.  There were no grievances noted regarding treatment of transgender youth.
(a) Facility staff shall respect every youth's gender identity, and shall refer to the youth by the youth's preferred name and gender pronoun, regardless of the youth's legal name. Facilities may prohibit the use of gang or slang names or names that otherwise compromise facility operations as determined by the facility manager or designee, and shall document any decision made on this basis.	⊠		Section 631: Supervision of Lesbian, Gay, Bisexual, Transgender, Questioning and Intersex (LGBTQI) Youth

(b) Facility staff shall permit youth to dress and present themselves in a manner consistent with the gender identity, and shall provide youth with the institution's clothing and undergarments consistent with their gender identity.	r 🗵		Section 631: Supervision of Lesbian, Gay, Bisexual, Transgender, Questioning and Intersex (LGBTQI) Youth
(c) Facility staff shall house youth in the unit or root that best meets their individual needs, an promotes their safety and well-being. Staff may not automatically house youth according to the external anatomy, and shall document the reason for any decision to house youth in a unit that does not match their gender identity. In making a housing decision, staff shall consider the youth preferences, as well as any recommendations from the youth's health or behavioral health provider.	d bt s s s s s s s s s s s s s s s s s s		Section 631: Supervision of Lesbian, Gay, Bisexual, Transgender, Questioning and Intersex (LGBTQI) Youth
(d) Facility administrators shall ensure the transgender and intersex youth have access medical and behavioral health providers qualified provide care and treatment to transgender an intersex youth.	o ⊠		Section 631: Supervision of Lesbian, Gay, Bisexual, Transgender, Questioning and Intersex (LGBTQI) Youth
(e) Consistent with the facility's reasonable and necessary security considerations and physic plant, facility staff shall make every effort to ensure the safety and privacy of transgender and interse youth when the youth are using the bathroom of shower, or dressing or undressing.	al e ⊠ x		Section 631: Supervision of Lesbian, Gay, Bisexual, Transgender, Questioning and Intersex (LGBTQI) Youth
Facility staff shall not conduct physical searches of ar youth for the purpose of determining the youth anatomical sex. Whenever feasible, the facility sharespect the youth's preference regarding the gender the staff member who conducts any search of the youth	s II of		Section 631: Supervision of Lesbian, Gay, Bisexual, Transgender, Questioning and Intersex (LGBTQI) Youth
	$\boxtimes$		Youth are asked at admission for their preference of the gender of the staff member to conduct their searches. Admission documentation noted this information was asked of all youth at admission.
			Youth are not searched to determine anatomical sex.

1353 ORIENTATION			Section 416: Orientation Process for Detained
The facility administrator shall develop and implement written policies and procedures to orient a youth prior to placement in a living area. Both written and verbal information shall be provided and supplemented with video orientation if feasible. Provision shall be made to provide accessible orientation information to all detained youth including those with disabilities, limited literacy, or English language learners. Orientation shall include information that addresses:	$\boxtimes$		Youth  40 individual admission CJH packets were randomly selected and reviewed for the timeline provided. Youth are provided with a primary, initial orientation when in the admission process that addresses all orientation areas required by regulation and a secondary, more thorough orientation as part of the actual admission/facility orientation process once in either Mental Health Unit or Boys Receiving or Unit C.  All individual regulatory requirements have been met.  Youth interviewed stated they were oriented twice: once upon entry and again with a longer process where they signed several documents.  Some youth noted that they were given the option of a new orientation if they were a returnee, suggesting that youth are given the option if they want an orientation or not. TA provided and a discussion held that all youth should be orientated to be sure all you have a full understanding of the facility expectations.  There are several bilingual staff who are able to conduct orientation and the agency has access to a language interpreter service if necessary.
(a) facility rules including contraband and searches and disciplinary procedures;	$\boxtimes$		Section 416: Orientation Process for Detained Youth
(b) facility's system of positive behavior interventions and supports, including behavior expectations, incentives that youth will receive for complying with facility rules, and consequences that may result when youth violate the rules of the facility;	⊠		Section 416: Orientation Process for Detained Youth
(c) age appropriate information that explains the facility's policy prohibiting sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment;	×		Section 416: Orientation Process for Detained Youth
(d) identification of key staff and their roles;	$\boxtimes$		Section 416: Orientation Process for Detained Youth
(e) the existence of the grievance procedure, the steps that must be taken to use it, the youth's right to be free of retaliation for reporting a grievance, and the name of the person or position designated to resolve the issue;	⊠		Section 416: Orientation Process for Detained Youth
(f) access to legal services and information on the court process;	×		Section 416: Orientation Process for Detained Youth

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(g) access to routine and emergency health and mental health care;	$\boxtimes$		Section 416: Orientation Process for Detained Youth
(h) access to education, religious services, and recreational activities;	×		Section 416: Orientation Process for Detained Youth
(i) housing assignments;	×		Section 416: Orientation Process for Detained Youth
(j) opportunity for personal hygiene and daily showers including the availability of personal care items	$\boxtimes$		Section 416: Orientation Process for Detained Youth
(k) rules and access to correspondence, visits and telephone use;	$\boxtimes$		Section 416: Orientation Process for Detained Youth
(I) availability of reading materials, programming, and other activities;	$\boxtimes$		Section 416: Orientation Process for Detained Youth
(m) facility policies on the use of force, use of restraints, chemical agents and room confinement;	$\boxtimes$		Section 416: Orientation Process for Detained Youth
(n) immigration legal services;	×		Section 416: Orientation Process for Detained Youth
(o) emergencies including evacuation procedures;	×		Section 416: Orientation Process for Detained Youth
<ul> <li>(p) non-discrimination policy and the right to be free from physical, verbal or sexual abuse and harassment by other youth and staff;</li> </ul>	×		Section 416: Orientation Process for Detained Youth
(q) availability of services and programs in a language other than English if appropriate;	$\boxtimes$		Section 416: Orientation Process for Detained Youth
(r) the process for requesting different housing, education, programming and work assignments;	×		Section 416: Orientation Process for Detained Youth
(s) a process for which parents/guardians receive information regarding the youth's stay in the facility that at a minimum includes answers to frequently asked questions and provides contact information for the facility, medical, school and mental health; and,	×		Section 416: Orientation Process for Detained Youth  There is a parent handbook that is specific to DSB and one for RTSB for youth to review.
(t) a process by which youth may request access to Title 15 Minimum Standards for Juvenile Facilities.	×		Section 416: Orientation Process for Detained Youth
1354 SEPARATION			
The facility administrator shall develop and implement written policies and procedures that address:	$\boxtimes$		

(a) separation of youth for reasons that include, but are not be limited to, medical and mental health conditions, assaultive behavior, disciplinary consequences and protective custody.			Section 1301: Separation Room Confinement Memo: April 15, 2022  The types of separation that occur in the facility are as follows:  Room Confinement Cool Down Specialized Supervision Plan (SSP) Self-Separation  All separations except for self-separation were to occur in the HOPE Center. CJH no longer has a HOPE Center. All separations now occur in the units. In April 2022, the Bureau changed policy noting that separations no longer were required to occur in the HOPE Center, that separations could occur in the youth's living unit with proper notification and documentation.
			Youth may self-separate from the group and remain in his or her room. When this occurs, the youth signs off his/her separation on the safety hall check sheet. It was noted that in some cases, youth did not sign the document and subsequent occurrences were not always signed off by the youth either. Policy Addendum Memo dated June 8, 2022, specific to policy direction for Self-Separation. Youth are to sign off on safety check sheet their request for Self-Separation. The inconsistencies found were brought to the attention of managers.
			Separation and, to ensure compliance moving forward, we will review through targeted inspection to ensure this issue has been addressed and does not drift into noncompliance.
(b) consideration of positive youth development and trauma-informed care.	$\boxtimes$		Section 1301: Separation
(c) separated youth shall not be denied normal privileges available at the facility, except when necessary to accomplish the objective of separation.	×		Section 1301: Separation
(d) when the objective of the separation is discipline, Title 15 Section 1390 shall apply.	⊠		Section 1301: Separation
(e) when separation results in room confinement, the separation shall occur in accordance with Welfare and Institutions Code Section 208.3 and Section1354.5 of these regulations.	×		Section 1301: Separation

Attachment 5

(f) policies and procedures shall ensure a daily review of separated youth to determine if separation remains necessary.		X	Section 1306: HOPE Center Daily Audit Report  Until the HOPE Center is reopened, this audit is no longer applicable. SSP's are not occurring without the use of the HOPE Center. If a youth is in room confinement and paperwork is completed, the youth are being
			reviewed every two hours to determine if the separation is still appropriate. Self-Separation youth are documented on the safety hall check sheets and are reviewed 3 times a day by supervisors. BSCC coordinator is aware of this issue.

40545 DOOM CONFINENT	1	1	0ti 4000- D 0ti
1354.5 ROOM CONFINEMENT			Section 1303: Room Confinement Section 608: Transition Periods
(a) The facility administrator shall develop and implement written policies and procedures			Room Confinement Memo: April 15, 2022
addressing the confinement of youth in their room that are consistent with Welfare and Institutions Code Section 208.3. The placement of a youth in room confinement shall be accomplished in accordance with the following guidelines:			We requested and reviewed room confinement documentation for incidents that occurred from September 22-30, 2022, and October 10-17, 2022. For these dates and times, we were provided with 7 incident packets for the September dates and 6 incident packets for the October dates. All room confinement occurred in the youth's unit.
			These packets, other than not completing the Behavior Chain Analysis requirement (see below), met agency policy and procedure requirements. Safety check documentation was problematic for some youth as noted in the safety check section.
			Technical assistance has been provided and will continue to be provided to enhance documentation. See below.
			Room confinement per policy has historically been required to occur in the HOPE Center. As policy was revised, directive memos were clear in that all procedures previously required were to continue unchanged. We found tracking notifications were not being made as required as CJH did not reopen the HOPE Center upon return from BJNJH. This issue was brought to the attention of the compliance team for review and consideration. This issue has been brought to the attention of the BSCC Compliance team for review; this issue must be resolved as soon as possible to address these issues. Policy will need to be addressed as soon as possible and can be addressed through this section.
			It was noted through the review of other inspection documentation that in some units, youth were placed in rooms for early bed contrary to policy directives and some were found to be in their room after incidents confirmed through either regular safety checks or were noted through self-separation checks. There were few
			instances in which youth were in their rooms for periods beyond what is allowable for transitions i.e., shift change. These practices seem to occur sporadically throughout the documentation viewed and do not appear to be widespread throughout the full facility but is still room confinement. Technical

Assistance has been provided in that, throughout the PM and weekend shift, supervisory staff should be in the facility providing a heavy presence and inquiring about the status of youth who are in their rooms and ensuring that all regulatory and policy functions are adhered to. We also noted some self-separation incidents were not thoroughly and consistently documented by the youth as required by policy.

Several of the youth interviewed confirmed the above actions, but noted that although incidents still occur, they reported the facilities continue to do better than from what has occurred in the past. Youth stated any long-term room confinement is the result of lack of staff. For instance, when oncoming relief staff are late, youth spend more time in their rooms.

We noted, through video review and while onsite, many oncoming staff to be routinely late to their posts resulting in the on-duty unit staff not being relieved timely. Youth are kept in their rooms while staff wait to be relieved, until staff are called in or they make it to the unit. There were also circumstances that occurred where the facility suffered significant staffing events which kept youth in their room longer as well as exigent circumstances that resulted in youth remaining in their rooms due to lack of staff reporting to work. When this occurred, video review noted that some units tried to get the youth out a few at a time to use the phone at the minimum.

Prior to inspection, we also expressed concern to both administration and to the medical team regarding the practice of "hybrid units" for housing of COVID positive and COVID negative youth together as this practice would result in room confinement for those youth who were not COVID positive and would be without a Medical Order for Isolation. Medical guidance has since been updated and this issue has been addressed and corrected.

Lastly, the agency transition policy requires that incident reports must include times in which youth were secured and brought out to resume programming and we found this not to occur as a consistent practice.

	(1) Room confinement shall not be used before other, less restrictive, options have been attempted and exhausted, unless attempting those options poses a threat to the safety or security of any youth or staff.	×		Section 1303: Room Confinement
	(2) Room confinement shall not be used for the purposes of punishment, coercion, convenience, or retaliation by staff.			Section 1303: Room Confinement
	(3) Room confinement shall not be used to the extent that it compromises the mental and physical health of the youth.	×		Section 1303: Room Confinement
(b)	A youth may be held up to four hours in room confinement. After the youth has been held in room confinement for a period of four hours, staff shall do one or more of the following:	×		Section 1303: Room Confinement  While regulation allows for youth to be held for 4 hours, agency policy requires immediate action.  Per documentation provided, received, and reviewed, no youth were held in their room longer than 4 hours.
	(1) Return the youth to general population.	×		Section 1303: Room Confinement  Youth are required to be reassessed every 2 hours for return to the general population. If youth can safety be returned, they are.
	(2) Consult with mental health or medical staff.		X	Per policy, all youth placed in room confinement are to be referred to mental health for a behavior chain analysis within 30 minutes. If a clinician is not available, it is to be completed when time permits. This did not occur in October and all samples in September were from the same incident in which youth were all seen by a mental health clinician.  In April 2022, a Detention Services Bureau memo was initiated authorizing all youth to be placed in room confinement in the units and that staff must follow the room confinement procedures outlined in DSB Policy 1303 and all documentation remains the same.  Communication was had with DMH regarding the Behavior Chain Analysis. It was noted that the youth refused to cooperate in most of the samples in September 2022, but that they only received 1 call for service in October 2022. This is inconsistent with the number of OC's. This section is noncompliant.
	(3) Develop an individualized plan that includes the goals and objectives to be met in order to reintegrate the youth to general population.	×		Section 1303: Room Confinement

(4) If room confinement must be extended beyond four hours, staff shall do each of the following:	$\boxtimes$		Section 1303: Room Confinement No incidents reviewed were beyond 4 hours.  Policy requires the same actions, i.e., reassessment every two hours as well as regulatory requirements to be completed.
(A) Document the reasons for room confinement and the basis for the extension, the date and time the youth was first placed in room confinement, and when he or she is eventually released from room confinement.	×		Section 1303: Room Confinement
(B) Develop an individualized plan that includes the goals and objectives to be met in order to integrate the youth to general population.	X		Section 1303: Room Confinement
(C) Obtain documented authorization by the facility superintendent or his or her designee every four hours thereafter.	X		Section 1303: Room Confinement
(5) This section is not intended to limit the use of single-person rooms or cells for the housing of youth in juvenile facilities and does not apply to normal sleeping hours.	X		Section 1303: Room Confinement
(6) This section does not apply to youth or wards in court holding facilities or adult facilities.	×		Section 1303: Room Confinement
(7) Nothing in this section shall be construed to conflict with any law providing greater or additional protections to youth.	×		Section 1303: Room Confinement
(8) This section does not apply during an extraordinary emergency circumstance that requires a significant departure from normal institutional operations, including a natural disaster or facility-wide threat that poses an imminent and substantial risk of harm to multiple staff or youth. This exception shall apply for the shortest amount of time needed to address this imminent and substantial risk of harm.	X		Section 1303: Room Confinement
(9) This section does not apply when a youth is placed in a locked cell or sleeping room to treat and protect against the spread of a communicable disease for the shortest amount of time required to reduce the risk of infection, with the written approval of a licensed physician or nurse practitioner, when the youth is not required to be in an infirmary for an illness. Additionally, this section does not apply when a youth is placed in a locked cell or sleeping room for required extended care after medical treatment with the written approval of a licensed physician or nurse practitioner, when the youth is not required to be in an infirmary for illness.	$\boxtimes$		Section 1303: Room Confinement
1355 INSTITUTIONAL ASSESSMENT AND PLAN			
The facility administrator shall develop and implement written policies and procedures for assessment and case planning.			

<ul> <li>(a) Assessment:         The assessment is based on information collected during the admission process with periodic review, which includes the youth's risk factors, needs and strengths including, but not limited to, identification of substance abuse history, educational, vocational, counseling, behavioral health, consideration of known history of trauma, and family strengths and needs.     </li> <li>(b) Institutional Case Plan:</li> </ul>	⊠		Section 413: Institutional Assessment, Case Plan and Periodic Review  An assessment was completed for each youth as part of the facility entry admission procedure.  Section 413: Institutional Assessment, Case
(1) A case plan shall be developed for each youth held for at least 30 days or more and created within 40 days of admission.	×		Plan and Periodic Review  Case plans were found to be completed within the regulatory timeline.
(2) The institutional plan shall include, but not be limited to, written documentation that provides:	×		
(A) objectives and time frame for the resolution of problems identified in the assessment;	×		Section 413: Institutional Assessment, Case Plan and Periodic Review  Objectives are tied to the regulatory requirements and timelines are noted by various means i.e., weekly, monthly, or daily.
(B) a plan for meeting the objectives that includes a description of program resources needed and individuals responsible for assuring that the plan is implemented;	X		Section 413: Institutional Assessment, Case Plan and Periodic Review  Unit Staff are responsible for ensuring that the case plan includes appropriate objectives. Individual staff may also be tasked if there is a relationship built with a certain staff member or a particular staff member is working directly with a youth on a goal such as an educational or vocational goal. The objectives are noted in menu format. There is also a section that provides the opportunity for additional information to be documented.
(3) periodic evaluation of progress towards meeting the objectives, including periodic review and discussion of the plan with the youth;	⊠		Section 413: Institutional Assessment, Case Plan and Periodic Review  Periodic review was found to be compliant. Staff were found to meet face-to-face with youth and document the contact.
(4) a transition plan, the contents of which shall be subject to existing resources, shall be developed for post dispositional youth in accordance with Section 1351; and,	×		Section 413: Institutional Assessment, Case Plan and Periodic Review  No post dispositional youth.
(5) in as much as possible and if appropriate, the plan, including the transition plan, shall be developed with input from the family, supportive adults, youth, and Regional Center for the Developmentally Disabled.	×		Section 413: Institutional Assessment, Case Plan and Periodic Review  No post dispositional youth.

1356 COUNSELING AND CASEWORK SERVICES			Section 207: General Staff responsibilities
The facility administrator shall develop and implement written policies and procedures ensuring the availability of appropriate counseling and casework services for all youth. Policies and procedures shall ensure:	⊠		The basic expectation of staff duties is as noted. With limited staff resources, staff report it is difficult to go beyond limited expectations.  Proof of practice included documentation of case planning, professional phone call documentation, and other documentation. Staff meet basic, limited expectations and minimal regulation compliance but, with proper staffing, should be doing so much more.  Youth interviewed stated that, as time permits, staff do assist them as they can.
(a) youth will receive assistance with needs or concerns that may arise;	×		Section 207: General Staff responsibilities
(b) youth will receive assistance in requesting contact with parents, other supportive adults, attorney, clergy, probation officer, or other public official; and,	×		Section 207: General Staff responsibilities
(c) youth will be provided access to available resources to meet the youth's needs.	×		Section 207: General Staff responsibilities
The facility administrator, In cooperation with the responsible physician, shall develop and implement written policies and procedures for the use of force, which may include chemical agents. Force shall never be applied as punishment, discipline, retaliation or treatment.  (a) At a minimum, each facility shall develop policies and procedures which:			Directive 1477: Detention and Residential Treatment Services Bureaus Manual-Physical Intervention Policy (Section DSB-1000/RTSB-1700) Issued 06/22/2022.  At inspection, it was noted the policy had been released and was implemented in June 2022, but staff were not formally trained. We have since been informed the staff have almost completed training.  The agency remains unable to meet certain areas of regulatory requirements and we found areas in which the agency failed to meet their own policy despite technical assistance being provided by both BSCC and Department of Justice (DOJ) in how to address the issues.
(1) restricts the use of force to that which is deemed reasonable and necessary, as defined in Section 1302 to ensure the safety and security of youth, staff, others and the facility.	×		Section 1003: Objectively Reasonable Determination

appropriate.			<ul> <li>De-escalation Options per policy include:</li> <li>Request for Compliance with Instructions</li> <li>Discussion/Counseling</li> <li>Mental Health Assistance</li> <li>Switching Officer (Tapping Out)</li> <li>Secluding the Situation/Youth</li> <li>Request Supervisor assistance</li> <li>Behavior chart Consultation</li> <li>Other officer/volunteers</li> <li>Temporary Halt to Program Activity</li> <li>Separation of Youth</li> <li>Resource Teams</li> <li>Force Options per policy include:</li> <li>Physical Control Holds.</li> <li>Take-downs.</li> <li>Restraint Devices.</li> <li>Oleoresin Capsicum (OC) Spray.</li> </ul>
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(3) describe force options or techniques that are expressly prohibited by the facility.		Section 1005(G): Physical Interventions-Inappropriate/Prohibited uses of Force and Conduct  Officers are required to view the alert log to be aware of any youth with medical or mental health issues.  The following are prohibited by the facility policy:  • "Carotid," "arm-bar," chokehold, or any other deliberate chokehold restraint utilized to or having the impact of restricting the airway or blood flow.  • Applying pressure to and/or torquing of the head and neck.  • Deliberate strikes or kicks to the head, torso, or other body parts (except in situations of self-defense).  • Deliberately or recklessly striking a youth's head, limbs, torso, or other body parts against a hard, fixed object (e.g., roadway, driveway, floor, wall, etc.).  • "Hog-tying" procedure wherein restraints are applied to both the
		hands and feet, which are then drawn together and secured behind the back.  Any form of excessive physical intervention, deliberate physical injury, or physical intervention used as coercion, punishment, retaliation, discipline, or treatment.  Any other force used maliciously, sadistically, and/or for the purpose of causing harm.  Failure to immediately decontaminate a youth exposed to OC spray when the incident is controlled.  Leaving youth in an enclosed structure where OC spray has been used, and the location has not been decontaminated.  Use of OC spray on youth in mechanical or soft restraints.  Officer actions leading to the use of force such as taunting, verbally insulting, or challenging a youth.  The use of force (UOF) as a response to a youth who is solely expressing suicidal ideations.  The use of prone and supine restraints on pregnant youth.  Officer actions that serve to encourage, instigate, or permit youth

			to engage in physical fights or assaults.
(4) describe the requirements of staff to report any inappropriate use of force, and to take affirmative action to immediately stop it.	×		Section 1005(G): Physical Interventions- Inappropriate/Prohibited uses of Force and Conduct
(5) define a standardized reporting format that includes time period and procedure for documenting and reporting the use of force, including reporting requirements of management and line staff and procedures for reviewing and tracking use of force incidents by supervisory and or management staff, which include procedures for debriefing a particular incident with staff and/or youth for the purposes of training as well as mitigating the effects of trauma that may have been experienced by staff and /or the youth involved.			Section 1005(K): Physical Interventions: Mandatory Reporting Requirements Section 1008: Post-Incident Physical Intervention-Post Incident Review Process-Debriefing for involved youth and Staff and Witnesses Section 1009: Quality Assurance: Debrief (Debriefs for all incidents now)  Debriefs are required for all use of force incidents per the agency policy. Per regulation, the purpose of the debrief is for training as well as to mitigate the effects of trauma that may have been experienced by staff and/or the youth. It is a reflection period for addressing training issues or areas and to address any potential trauma that may have occurred by youth or staff.  While the debriefs are being completed, they are not completed with efficacy as intended. Training issues or training needs are not being addressed as the lack of staffing is the main concern of staff. While this does not make this section noncompliant, it is noted that the lack of adequate staffing impacts the ability of supervisors to have an effective debrief regarding incidents as they occur.
(6) Include an administrative review and a system for investigating unreasonable use of force.		×	Section 1009(A) Quality Assurance - Use of Force Administrative Review  Each UOF is to be reviewed at the facility level and again through the Force Intervention Response Support Team (FIRST). This is an independent review entity that reviews all Use of Force incidents.
			This is not occurring. No documentation provided.

(7) define the role, notification, and follow-up procedures required after use of force incidents for medical, mental health staff and parents or legal guardians.		X		Section 1008(C): Post-Incident Physical Intervention-Medical Assessment of Youth  Section 1008(D): Post-Incident Physical Intervention-Mental Health Involvement and Assessment of Youth  Section 1010: Notifications: Parent/Guardian/ Caregiver Notification  Parents of youth are to be notified if any use of force has occurred. There is to be a 3x effort. This is not being documented in incident reports when a parent is not able to be contacted. Just that the attempt was made, and they were unable to be reached.
(8) describe the limitations of use of force on pregnant youth in accordance with Penal Code Section 6030(f) and Welfare and Institutions Code Section 222.	×			Section 1003: Objectively Reasonable Determinations-Pregnant and Post-Partum Recovery Youth
(b) Facilities that authorize chemical agents as a force option shall include policies and procedures that:	$\boxtimes$			
(1) identify who is approved to carry and/or utilize chemical agents in the facility and the type, size and the approved method of deployment for those chemical agents.	×			Section 1006(C): Oleoresin Capsicum (O.C.) Spray-OC Spray Interventions Section 1006(D): Oleoresin Capsicum (O.C.) Spray-Issuance and Accountability
(2) mandate that chemical agents only be used when there is an imminent threat to the youth's safety or the safety of others and only when de- escalation efforts have been unsuccessful or are not reasonably possible.	⊠			Section 1006(A): OC Spray-Training
(3) outline the facility's approved methods and timelines for decontamination from chemical agents. This shall include that youth who have been exposed to chemical agents shall not be left unattended until that youth is fully decontaminated or is no longer suffering the effects of the chemical agent.		×		Section 1006(E): OC Spray
(4) define the role, notification, and follow-up procedures required after use of force incidents involving chemical agents for medical, mental health staff and parents or legal guardians.			×	Section 1006: OC Spray-Medical Assessment" and "Mental Health Consultation Request"  Section 1010 Notifications: Parent/Guardian/ Caregiver Notifications  See above.

(5) provide for the documentation of each incident of use of chemical agents, including the reasons for which it was used, efforts to deescalate prior to use, youth and staff involved, the date, time and location of use, decontamination procedures applied and identification of any injuries sustained as a result of such use.	⊠	Section 1006: OC Spray Section H. Mandatory Reporting Requirements  Decontamination documentation is lacking.  Reports document that youth are being decontaminated but do not consistently include full documentation of the details of what is required by policy. I.e., it is unknown how youth are decontaminating or that youth are not self-decontaminating as it is not documented in the incident report. We often noted youth who were noted in the report narrative to be on a "Level 3: Direct Visual Supervision status" only to note on their safety check log they were in their rooms being supervised with regular safety checks. Documentation should be clarified in these circumstances.
(c) Facilities shall develop policies and procedure which require that agencies provide initial and regular training in use of force and chemical agents when appropriate that address:	×	Section 1002: Training Requirements  Staff are to receive initial training and annual refresher training. This has not occurred.
<ol> <li>known medical and behavioral health conditions that would contraindicate certain types of force;</li> </ol>	$\boxtimes$	Section 1002: Training Requirements  Regular training has not occurred.
(2) acceptable chemical agents and the methods of application.	X	Section 1006: OC Spray Section A. Training Regular training has not occurred.
(3) signs or symptoms that should result in immediate referral to medical or behavioral health.	X	Section 1002: Training Requirements  Regular training has not occurred.
(4) instruction on the Constitutional Limitations of Use of Force.	×	Section 1002: Training Requirements  Regular training has not occurred.
(5) physical training force options that may require the use of perishable skills.	$\boxtimes$	Section 1002: Training Requirements  Regular training has not occurred.
(6) timelines the facility uses to define regular training.	×	Section 1002: Training Requirements  Regular training has not occurred.

The facility administrator, In cooperation with the responsible physician and mental health director, shall develop and implement written policies and procedures for the use of restraint devices. Restraint devices include any devices which immobilize a youth's extremities and/or prevent the youth from being ambulatory.			Directive 1477: Detention and Residential Treatment Services Bureaus Manual-Physical Intervention Policy (Section DSB-1000/RTSB-1700) Issued 06/22/2022.  Section 1001: Introduction — Physical Interventions Section 1007: Restraints  Section marked NC due to no staff training and implementation of policy.  Agency policy now applies to the use of restraints for all purposes and no longer only for those that are mental health related or to control a youth who is destructive in nature. The use of restraints, for the purpose of this section, are a force option and are to be treated as such.  Policy defines hard mechanical restraints as handcuffs, leg irons, waist-chains, plastic flex- cuffs and soft mechanical restraints and safety helmets. Technical assistance provided regarding ensuring the appropriate training is provided for all use of restraints.  At the time of inspection, documentation provided was only provided for those youth who were having a mental health crisis. That documentation was consistent with regulatory requirements. All use of restraints were not reviewed for this section under the new policy.
Physical restraints may be used only for those youth who present an immediate danger to themselves or others, who exhibit behavior which results in the destruction of property, or reveals the intent to cause self-inflicted physical harm. Physical restraints should be utilized only when it appears less restrictive alternatives would be ineffective in controlling the youth's behavior.	×		Section 1007: Restraints  Several incidents were provided for review.  Documentation reviewed was consistent with regulatory requirements. We did not receive all use of restraint documentation as noted in the comment above.
In no case shall restraints be used as punishment or discipline, or as a substitute for treatment. The use of restraint devices that attach a youth to a wall, floor or other fixture, including a restraint chair, or through affixing of hands and feet together behind the back (hogtying) is prohibited. The use of restraints on pregnant youth is limited in accordance with Penal Code Section 6030(f) and Welfare and Institutions Code Section 222.	X		Section 1007(C): Restraints

The provisions of this section do not apply to the use of handcuffs, shackles or other restraint devices when used to restrain youth for movement or transportation within the facility. Movement within the facility shall be governed by Section 1358.5, Use of Restraint Devices for Movement Within the Facility.		×	Section 1007: Restraints
Youth shall be placed in restraints only with the approval of the facility manager or designee. The facility manager may delegate authority to place a youth in restraints to a physician. Reasons for continued retention in restraints shall be reviewed and documented at a minimum of every hour.			Section 1007(D): Restraints  Per new policy, the application of physical restraints is authorized when a youth presents an immediate danger to themselves or others, exhibits behavior which results in the destruction of property, or reveals the intent to cause self-inflicted physical harm. Youth shall be placed in restraints only when all de-escalation techniques and less intrusive physical interventions have been exhausted.  The use of restraints for mental health crisis or destruction of property must be authorized by the facility manager or designee.  In the incidents reviewed, either the supervisor was onsite in the unit or was
A medical opinion on the safety of placement and retention shall be secured as soon as possible, but no later than two hours from the time of placement. The youth shall be medically cleared for continued retention at least every three hours thereafter.	⊠		contacted as required.  Section 1007(E): Restraints  All youth were seen by medical personnel immediately.
A mental health consultation shall be secured as soon as possible, but in no case longer than four hours from the time of placement, to assess the need for mental health treatment.	×		Section 1007(F): Restraints  All youth were seen by mental health personnel.
Continuous direct visual supervision shall be conducted to ensure that the restraints are properly employed, and to ensure the safety and well-being of the youth. Observations of the youth's behavior and any staff interventions shall be documented at least every 15 minutes, with actual time of the documentation recorded.	X		Section 1007(D): Restraints  All youth were under constant, direct visual observation. Each incident had a complete log filled out for each youth.
In addition to the requirements above, policies and procedures shall address:			
(a) documentation of the circumstances leading to an application of restraints.			Section 1007: Restraints Section D. Application of Physical Restraints
(b) known medical conditions that would contraindicate certain restraint devices and/or techniques.	×		Section 1007(D): Restraints Application of Physical Restraints
(c) acceptable restraint devices.	×		Section 1007(D): Restraints Application of Physical Restraints
(d) signs or symptoms which should result in immediate medical/mental health referral.	×		Section 1007(D): Restraints Application of Physical Restraints

(e) availability of cardiopulmonary resuscitation equipment.	×		Section 1007(D): Restraints Application of Physical Restraints
(f) protective housing of restrained youth. While in restraint devices, all youth shall be housed alone or in a specified housing area for restrained youth which makes provision to protect the youth from abuse.	×		Section 1007(C): Restraints Application of Physical Restraints
(g) provision for hydration and sanitation needs.	×		Section 1007(D): Restraints Application of Physical Restraints
(h) exercising of extremities.	×		Section 1007(D): Restraints Application of Physical Restraints
1358.5 USE OF RESTRAINT DEVICES FOR MOVEMENT AND TRANSPORTATION WITHIN THE FACILITY.  The Facility Administrator, In cooperation with the responsible physician and behavioral/mental health director, shall develop and implement written policies and procedures for the use of restraint devices when the purpose is for movement or transportation within the facility that shall include the following:	×		Section 809: The Use of Mechanical Restraints for Movement and Transport Within the Facility  Youth interviewed noted they are not generally handcuffed during incidents. This was verified in the videos reviewed.
(a) identification of acceptable restraint devices, staff approved to utilize restraint devices and the required training.	×		Section 809: The Use of Mechanical Restraints for Movement and Transport Within the Facility  Any sworn staff is authorized to use mechanical restraints. Mechanical restraints refer to any device that immobilizes an individual's extremities.
(b) the circumstances leading to the application of restraints must be documented.	×		Section 809: The Use of Mechanical Restraints for Movement and Transport Within the Facility  The circumstances leading to the use of restraints in the incidents where restraints were used were documented. There were only a few. In most cases, restraints are not used.

(c) an individual assessment of the need to apply restraints for movement or transportation that includes consideration of less restrictive alternatives, consideration of a youth's known medical or mental health conditions, trauma informed approaches, and a process for documentation and supervisor review and approval.		×	Section 809: The Use of Mechanical Restraints for Movement and Transport Within the Facility  We noted handcuffs are only rarely used and are not used as practice to control youth or incidents. There is policy in place and regulatory requirements should restraints be utilized.
			We found in our documentation review there were some instances of the use of mechanical restraints for movement that were not documented correctly and in compliance with regulatory requirements and agency policy. This section is noncompliant.
(d) consideration of safety and security of the facility, with a clearly defined expectation that restraint devices shall not be used for the purposes of discipline or retaliation.	×		Section 809: The Use of Mechanical Restraints for Movement and Transport Within the Facility
(e) the use of restraints on pregnant youth is limited in accordance with Penal Code Section6030(f) and Welfare and Institutions Code Section 222.			Section 809: The Use of Mechanical Restraints for Movement and Transport Within the Facility
			There were no pregnant females involved in any of the incidents reviewed. There are currently no females housed in the facility.
1359 SAFETY ROOM PROCEDURES			The facility does not have a safety room.
(a) The facility administrator, and where applicable, In cooperation with the responsible physician, shall develop and implement written policies and procedures governing the use of safety rooms, as described in Title 24, Part 2, Section 1230.1.13. The room shall be used to hold only those youth who present an immediate danger to themselves or others, who exhibit behavior which results in the destruction of property, or reveals the intent to cause self-inflicted physical harm. A safety room shall not be used for punishment or discipline, or as a substitute for treatment. Policies and procedures shall:			Coation 700: Coatabas
1360 SEARCHES			Section 700: Searches
The facility administrator shall develop and implement written policies and procedures governing the search of youth, the facility, and visitors. Policies and procedures shall provide that:	X		

(a) Searches shall be conducted to ensure the safety and security of the facility, public, visitors, youth, and staff.		$\boxtimes$	Regulation requires the facility administrator to develop and implement policy and procedure. By policy, room searches are required daily, unit area searches are required daily, and two thorough contraband searches are required weekly. This has not occurred and is noncompliant.  All persons, including staff and visitors to the facility that enter the facility, are screened through the security Kiosk Xray to ensure weapons or other items are not brought into the facility and visitors are limited to items they can bring in on visitation day.  Documentation was provided of unit searches and canine searches for the facility and canine search for visitation. It was noted the quantity of unit/facility searches were not met as required.
(b) Searches shall be conducted in a manner that preserves the privacy and dignity of the person being searched and shall not be conducted for harassment or as a form of discipline or punishment.	X		Section 701: Introduction
(c) Strip searches and visual or physical body cavity searches shall comply with Penal Code Section 4030.	X		Section Policy Sections:  701: Introduction 709: Completing a Strip Search Authorization Form 711: Admissions Procedures - Strip Search and/or Visual Body Cavity Search  Documentation initially provided was found to be noncompliant; however, after some technical assistance and training, it was found the issue was addressed and corrected. Additional documents requested and all admission searches were completed correctly.
(d) Physical body cavity searches shall only be conducted by a medical professional.	×		Policy Sections:  702: Types of Searches and Definitions 711: Admissions Procedures - Strip Search and/or Visual Body Cavity Search  There have been no physical body cavity searches conducted this cycle.

(e) Any youth held after a detention hearing shall only be strip searched with prior approval of a supervisor when there is reasonable suspicion based on specific and articulable facts to believe that youth is concealing contraband. The reasonable suspicion shall be documented.			Section 703: Searches of Youth Housed in Juvenile Facilities - General Information  Documentation initially provided for review was found to be noncompliant; however, after some technical assistance and training, it was found the issue was addressed and corrected. Additional documents requested and all admission searches were completed correctly.
(f) Searches of transgender and intersex youth shall comply with Section 1352.5.	×		Section 706: Transgender Youth Searches  All youth are asked at intake which gender staff is preferred to conduct their searches.
(g) Cross-gender pat-down searches and strip searches are prohibited except in exigent circumstances or when conducted by a medical professional. Such searches must be justified and documented in writing.	×		Section 705: Cross Gender Searches  Cross gender pat down searches and strip searches are prohibited by policy.

1361 GRIEVANCE PROCEDURE			Section 1715: Youth Grievance Procedures
The facility administrator shall develop and implement written policies and procedures whereby any youth may appeal and have resolved grievances relating to any condition of confinement, including but not limited to health care services, classification decisions, program participation, telephone, mail or visiting procedures, food, clothing, bedding, mistreatment, harassment or violations of the nondiscrimination policy. There shall be no time limit on filing grievances. Policies and procedures shall include provisions whereby the facility manager ensures:			The regulation requires the agency to develop policy and procedures whereby a youth may appeal and have resolved grievances relating to conditions of confinement. The purpose of this process is to provide an opportunity and a mechanism for youth to resolve issues at the lowest level.  The agency grievance form provides the opportunity for youth to document their grievance and what they want to happen. The hearing officers then, after meeting with the youth, either "grant" or "deny" the youth's grievance. This is followed by an appeals process should the youth wish to appeal the
			first level officers' response.  We find that many times, the first level officers address and focus their response on what the youth "wants to happen" as opposed to seeking resolution for the grieved issue. The form itself and format of the grievance must be changed to address this issue. This has been discussed, scheduled for review several times but never fully processed or implemented.
			In discussion once again regarding this issue, we have been notified the Bureau is in the final stages of implementation of a new grievance process - GMS. (The process will not include the language of granted and denied). We are very excited to check in in a few months to see how the new process works to improve the grievance process.
			114 grievances provided and randomly reviewed from August 2022-October 2022.
(a) a grievance form and instructions for registering a grievance, which includes provisions for the youth to have free access to the form;	X		Section 1715: Youth Grievance Procedures  Grievances were found to be available to youth in all units.
(b) the youth shall have the option to confidentially file the grievance or to deliver the form to any youth supervision staff working in the facility;	⊠		Section 1715: Youth Grievance Procedures  Each unit has a locked box for confidential grievances. We noted that most youth place their grievances in the locked box for pick up. Youth are also aware they can file confidential grievances through the JIGS system.

(c) resolu	ution of the grievance at the lowest appropriate level;			Section 1715: Youth Grievance Procedures  When interviewed, youth who have written a grievance stated they can give their grievance to any staff at any level for review and response, but it was noted that most youth almost always place the grievance in the confidential box. It is picked up by the grievance officer, usually on the next shift or the next day, logged in, and the grievance goes through the process which includes the grievance officer coming to talk to them and then, if needed, a supervisor coming to resolve their issue. When youth were asked if they were comfortable with this process, they stated they were.  Youth are also aware they can file a grievance in the JIGS- electronic system.
grieva	sion for a prompt review and initial response to ances within three (3) business days, ances that relate to health and safety issues be addressed immediately;			Section 1715: Youth Grievance Procedures  Most grievances were found to be timely. Those that were not tended to be those that involved a work order or some other process outside the control of the unit/facility. Most health and safety grievances were addressed on the same day. Technical assistance again provided to ensure that youth are periodically reminded that any health or safety grievance should be given to staff for immediate resolution and not placed in the box.
h	The youth may elect to be present to explain his/her version of the grievance to a person not lirectly involved in the circumstances which led to the grievance.			Section 1715: Youth Grievance Procedures  All youth except for one participated in their own grievance.
, ,	Provision for a staff representative approved by the facility administrator to assist the youth.	×		Section 1715: Youth Grievance Procedures  No representatives were noted in any grievances reviewed. There were no requests for assistance.

(e) provision for a written response to the grievance			Section 1715: Youth Grievance Procedures
which includes the reasons for the decisions;			In general, we found the response documentation of grievances to be minimally compliant.  We found some grievances with more than one issue noted yet all issues did not have full responses to each item. We noted there were some that lacked reasonable responses and some that did not address the issue at all or were not forwarded on to the appropriate partner. Overall, these issues are concerning but the amount of these problematic grievances noted in comparison to the amount viewed overall did not rise to a level of non-responsive or of overall noncompliance at this time.  There have been a large number of new supervisors in the facility who need more guidance and specific training from their directors regarding proper response for grievances. This should be a priority.  Technical Assistance provided. This issue will be addressed and reviewed with all grievances reviewed in a targeted inspection in the next 90 days.  We will be looking for marked improvement in the handling and documentation of grievances in this area.
(f) a suction which provides that are small of a			ŭ
<ul> <li>(f) a system which provides that any appeal of a grievance shall be heard by a person not directly involved in the circumstances which led to the grievance;</li> </ul>	×		Section 1715: Youth Grievance Procedures  Appeals are heard by facility Directors.
<ul><li>(g) resolution of the grievance must occur within ten</li><li>(10) business days unless circumstances dictate a longer time frame. The youth shall be notified of any delay; and,</li></ul>	×		Section 1715: Youth Grievance Procedures Grievances were completed timely.
(h) the policy shall provide multiple internal and external methods to report sexual abuse and sexual harassment.	×		<ul> <li>Section 1715: Youth Grievance Procedures</li> <li>Grievance procedure</li> <li>Directly to staff, contractors, volunteers, or visitors.</li> <li>Mental Health referral</li> <li>Medical referral.</li> <li>Contacting the ombudsman.</li> </ul>
Whether or not associated with a grievance, concerns of parents, guardians, staff or other parties shall be addressed and documented in accordance with written policies and procedures within a specified timeframe.	×		Section 1715: Youth Grievance Procedures  Any issue should be resolved with a Director or the Superintendent onsite at the time of incident.

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A written report of all incidents which result in physical harm, use of force, serious threat of physical harm, or death of an employee, youth or other person(s) shall be maintained. Such written record shall be prepared by the staff and submitted to the facility manager by the end of the shift, unless additional time is necessary and authorized by the facility manager or designee.				Policy sections as noted below regarding reports:  1022: Safe Crisis Management – Physical Intervention Reports  1907: Special Incident Report Form  1909: Detention Observation Report (DOR) Form  1912: Preliminary and Follow Up Incident Notification Procedures  Various reports were provided for review. Reports were written and submitted in a timely manner.
1363 USE OF REASONABLE FORCE TO COLLECT DNA SPECIMENS, SAMPLES, IMPRESSIONS				Section 308: Juvenile Collection of DNA Samples
(a) Pursuant to Penal Code Section 298.1 authorized law enforcement, custodial, or corrections personnel including peace officers, may employ reasonable force to collect blood specimens, saliva samples, and thumb or palm print impressions from individuals who are required to provide such samples, specimens or impressions pursuant to Penal Code Section 296 and who refuse following written or oral request.				Since 2011, the Juvenile Halls have been responsible for the collection of DNA samples for both detained and non-detained youth.  There are trained officers who collect DNA samples in the facility. DNA is collected by senior Detention Services Officers. There has not been any use of force in any collection of DNA this cycle.  Per facility policy, force will not be used to collect DNA. If a youth refuses, this information is provided to the court for further review and action.
(1) For the purpose of this section, the "use of reasonable force" shall be defined as the force that an objective, trained and competent correctional employee, faced with similar facts and circumstances, would consider necessary and reasonable to gain compliance with this section.	×			Section 308: Juvenile Collection of DNA Samples
(2) The use of reasonable force shall be preceded by efforts to secure voluntary compliance. Efforts to secure voluntary compliance shall be documented and include an advisement of the legal obligation to provide the requisite specimen, sample or impression and the consequences of refusal.	×			Section 308: Juvenile Collection of DNA Samples
(b) The force shall not be used without the prior written authorization of the supervising officer on duty. The authorization shall include information that reflects the fact that the offender was asked to provide the requisite specimen, sample, or impression and refused.	×			Section 308: Juvenile Collection of DNA Samples

Attachment 5

(1) If the use of reasonable force includes a cell			Section	308:	Juvenile	Collection	of	DNA
extraction, the extraction shall be videotaped.			Samples					
Video shall be directed at the cell extraction								
event. The videotape shall be retained by the	$\boxtimes$							
agency for the length of time required by								
statute. Notwithstanding the use of the video as								
evidence in a court proceeding, the tape shall								
be retained administratively.								

## 1370 EDUCATION PROGRAM

#### (a) School Programs

The County Board of Education shall provide for the administration and operation of juvenile court schools in conjunction with the Chief Probation Officer, or designee pursuant to applicable State laws. The school and facility administrators shall develop and implement written policy procedures ensure communication to and coordination between educators and probation staff. Culturally responsive and trauma-informed approaches should be applied when providing instruction. Education staff should collaborate with the facility administrator to use technology to facilitate learning and ensure safe technology practices. The facility administrator shall request an annual review of each required element of the program by the Superintendent of Schools, and a report or review checklist on compliance, deficiencies, and corrective action needed to achieve compliance with this section. Such a review, when conducted, cannot be delegated to the principal or any other staff of any juvenile court school site. The Superintendent of Schools shall conduct this review in conjunction with a qualified outside agency or individual. Upon receipt of the review, the facility administrator or designee shall review each item with the Superintendent of Schools and shall take whatever corrective action is necessary to address each deficiency and to fully protect the educational interests of all youth in the facility.

The education program is provided by Los Angeles County Office of Education. Title 15 requires the Superintendent of Schools to conduct a review of the Education program in conjunction with a qualified outside agency or individual. The Board of State and Community Corrections Field Representative does not inspect the education program for compliance with Title 15.

The Principal at Central Juvenile Hall (CJH) is Scott Bastien. We were unable to meet with Principal Bastien while onsite but were able to meet on a TEAMS call after our visit. There is also an Assistant Principal at the CJH School who we were unable to meet.

Central Juvenile Hall School has 19 core teachers, 6 counselors, 2 Educational Behavior Technicians, 12 Paraeducators, 2 School Psychologists, 1 Program Specialist and 2 clerks. School operates year-round, Monday - Friday observing all regular holidays.

Youth attend in two blocks. Block one from 8:30AM to 11:50 AM and Block two from 1:20 PM to 3:00PM. We discussed the challenges of COVID, safety in the classrooms, and virtual learning.

In our interviews with young people, they all stated they like school and like attending. Most stated that they have been held from school in the unit due to COVID or others because of staffing. Youth noted that when this occurs, packets are provided to them but they are not provided with any teachers. They noted that the packet work only takes a few hours, and they don't receive anything else. This was discussed with Principal Bastien in that youth are not receiving virtual learning as in what is being indicated. Packets are not an appropriate learning method in that Title 15 per the Ed. Code requires instructional minutes from teaching staff.

The 2022 education program of the Central Juvenile Hall was evaluated by Maribel Martinez, Jose Jauregui and Flavio Gallarzo from Lynwood Unified School District. This reviewed occurred on November 22, 2022. The education program at CJH was found to meet and comply with all regulatory requirements.

The following italicized narrative is specific to the comments made by the inspecting body.

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			All operations are in conjunction with the CPO/Designee pursuant to state laws.
			Policies and procedures are available for stakeholders.
			PBIS framework and Road to Success Academy is being used to continue to support students in a culturally responsive manner and become trauma informed.
			Collaboration between education staff and facility administrators takes place regularly to ensure technology practices is aligned with daily goals.
			Annual review conducted November 22, 2022. The review was conducted by Lynwood Unified School District representatives. The Superintendent of Schools/Designee has agreed to review each item after the visit is conducted.
(b) Required Elements  The facility school program shall comply with the State Education Code and County Board of Education policies all applicable federal education			BP 6011 Instruction BP 6011 Instruction, BP 0460 Philosophy, Goals, Objectives and Comprehensive Plans BP 005 Philosophy, Goals, Objectives and
Education policies, all applicable federal education statutes and regulations and provide for an annual evaluation of the educational program offerings. As stated in the 2009 California Standards for the Teaching Profession, teachers shall establish and maintain learning environments that are physically, emotionally, and intellectually safe. Youth shall be provided a rigorous, quality educational program that responds to the different learning styles and abilities of students and prepares them for high school graduation, career entry, and post-secondary education.	⊠		Comprehensive Plans Item 3,4,5  The facility has complied with the State ED Code and County Board of Ed policies.  Teachers demonstrated the teaching practices during the visit.  Differentiated instruction appeared apparent during the visit.
All youth shall be treated equally, and the education program shall be free from discriminatory action. Staff shall refer to transgender, intersex and gendernonconforming youth by their preferred name and gender.	×		BP 5145.3 Students
(1) The course of study shall comply with the State Education Code and include, but not be limited to, courses required for high school graduation.	×		BP 005 Philosophy, Goals, Objectives and Comprehensive Plans Item 3,4,5  Evident by student work.
(2) Information and preparation for the High School Equivalency Test as approved by the California Department of Education shall be made available to eligible youth.	×		AR-6146.2  Evident during interview.
(3) Youth shall be informed of post-secondary education and vocational opportunities.	×		AR-6143 Instruction Item 9 (Grades 7-12)  Evident during interview.
(4) Administration of the High School Equivalency Tests as approved by the California Department of Education, shall be made available when possible.	×		AR6146-2 Instruction Ed Code 51420  Evident during visit and interview.

(5) Supplemental instruction shall be afforded to youth who do not demonstrate sufficient progress towards grade level standards.	×		AR-6179 Instruction BPP 5149  Supplemental and small group instruction was being conducted during the visit.
(6) The minimum school day shall be consistent with State Education Code Requirements for juvenile court schools. The facility administrator, in conjunction with education staff, must ensure that operational procedures do not interfere with the time afforded for the minimum instructional day. Absences, time out of class or educational instruction, both excused and unexcused, shall be documented.			BP 6112 Instruction  Evident during visit.  BSCC Note:  It was noted when youth do not attend school in the classroom, for example due to quarantine of the unit or other circumstances that prevent youth from being present in the classroom, they are provided with packets in lieu of in-person or virtual instruction. Packets do not meet the instructional minimums.  Technical assistance has been provided in this area previously. This issue has been discussed with both the school and probation in the past.
(7) Education shall be provided to all youth regardless of classification, housing, security status, disciplinary or separation status, including room confinement, except when providing education poses an immediate threat to the safety of self or others. Education includes, but is not limited to, related services as provided in a youth's Section 504 Plan or Individualized Education Program (IEP).	X		BP 6112 Instruction Partially address requirement. AR 5131  Evident during site visit and interview with the principal.
<ul> <li>(c) School Discipline</li> <li>(1) Positive behavior management will be implemented to reduce the need for disciplinary action in the school setting and be integrated into the facility's overall behavioral management plan and security system.</li> </ul>	×		AR 5144 Students  PBIS Framework was visible during the visit and interview with staff.
(2) School staff shall be advised of administrative decisions made by probation staff that may affect the educational programming of students.	×		BP 5021 Students CF 6020  School staff and probation staff collaborate daily to discuss the student's educational programming.
(3) Except as otherwise provided by the State Education Code, expulsion/suspension from school shall be imposed only when other means of correction fails to bring about proper conduct. School staff shall follow the appropriate due process safeguards as set forth in the State Education Code including the rights of students with special needs. School staff shall document the other means of correction used prior to imposing expulsion/ suspension if an expulsion/suspension is ultimately imposed.	×		BP 5144.1 Students; 5144.2 - Suspension and Expulsion/Due Process (Students with Disabilities)  Safeguards are put in place to ensure students are disciplined appropriately following Ed Code.

(4) The facility administrator, in conjunction with				BP 5144
education staff will develop policies and procedures that address the rights of any student who has	⊠			Evident by interview with school personnel.
continuing difficulty completing a school day.				
<ul> <li>(d) Provisions for Special Populations</li> <li>(1) State and federal laws and regulations shall be observed for all individuals with disabilities or suspected disabilities. This includes but is not limited to child find, assessment, continuum of alternative</li> </ul>	×			BP 0430 Philosophy, Goals, Objectives and Comprehensive Plans  State and Federal laws and regulations are being observed for all students with disabilities as noted during the interview
placements, manifestation determination reviews, and implementation of Section 504 Plans and Individualized Education Programs.				with the principal.
(2) Youth identified as English Learners (EL) shall be				BP 6174 Instruction
afforded an educational program that addresses their language needs pursuant to all applicable state and federal laws and regulations governing programs for EL students.	⊠			EL students are being supported through Road to Success Academy to ensure state and federal compliance is being met.
<ul><li>(e) Educational Screening and Admission</li><li>(1) Youth shall be interviewed after admittance and a</li></ul>	$\boxtimes$			BP 6162.5 Instruction Partially Answers Requirement
record maintained that documents a youth's educational history, including but not limited to:				Interview takes place immediately after the student is admitted as noted during the interview with school personnel.
(A) School progress/school history;				BP 6162.5 Instruction
				Evident through the interview with school personnel.
(B) Home Language Survey and the results of the State Test used for English language proficiency;				AR 6174 Instruction  Evident through the interview with school personnel.
(C) Needs and services of special populations as defined				BP 6162.5 Instruction
by the State Education Code, including but not limited to, students with special needs.				Evident through the interview with school personnel.
(D) Discipline problems.				BP 5131 Students
				Evident through the interview with school personnel.
(2) Youth will be immediately enrolled in school.				BP 6162.5 Instruction
Educational staff shall conduct an assessment to determine the youth's general academic functioning levels to enable placement in core curriculum courses.				Youth is immediately enrolled in school following the admittance to the facility.
(3) After admission to the facility, a preliminary education				BP 6162.5 Instruction
plan shall be developed for each youth within five school days.	$\boxtimes$			Evident through the interview with school personnel.
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(4) Upon enrollment, education staff shall comply with the State Education Code and request the youth's records from his/her prior school(s), including, but not limited to, transcripts, Individual Education Program (IEP), 504 Plan, state language assessment scores, immunization records, exit grades, and partial credits. Upon receipt of the transcripts, the youth's educational plan shall be reviewed with the youth and modified as needed. Youth should be informed of the credits they need to graduate.	$\boxtimes$		AR 5125 Students  Evident through the interview with school personnel.
(f) Educational Reporting			AR 5125 Students
(1) The complete facility educational record of the youth shall be forwarded to the next educational placement in accordance with the State Education Code.	$\boxtimes$		Evident through the interview with school personnel. Processes and procedures exist to ensure student records follow the student to their next educational placement.
(2) The County Superintendent of Schools shall provide			BP 5121 Students
appropriate credit (full or partial) for course work completed while in juvenile court school in accordance with the State Education Code.	X		Students receive daily partial credit for everyday they are in school and complete work as noted in the interview with school personnel.
(g) Transition and Re-Entry Planning			AR 6159 Instruction
(1) The Superintendent of Schools and the Chief Probation Officer or designee, shall develop policies and procedures to meet the transition needs of youth, including the development of an education transition plan, in accordance with the State Education Code and in alignment with Title 15, Minimum Standards for Juvenile Facilities, Section 1355.			Policies and procedures are in place support students in transition as noted during the interview with school personnel.
(h) Post-Secondary Education Opportunities			BP 6143 Instruction and BP 6163.4 Student Use of Technology
(1) The school and facility administrator should, whenever possible, collaborate with local post-secondary education providers to facilitate access to educational and vocational opportunities for youth that considers the use of technology to implement these programs.	$\boxtimes$		Dual enrollment with ELAC and Mission College will be available for interested students.
1371 PROGRAMS, RECREATION, AND			Section 622: Programs
EXERCISE.  The facility administrator shall develop and implement written policies and procedures for programs, recreation, and exercise for all youth. The intent is to minimize the amount of time youth are in their rooms or their bed area.	$\boxtimes$		Section 623: Recreation and Exercise

Juvenile facilities shall provide the opportunity for programs, recreation, and exercise a minimum of three hours a day during the week and five hours a day each Saturday, Sunday or other non-school days, of which one hour shall be an outdoor activity, weather permitting.		×	Section 622: Programs Section 623: Recreation and Exercise  Two weeks of programming sheets were reviewed to determine if the opportunity for programs, recreation, and exercise were provided to the youth. We reviewed limited, random video footage to determine if programs, exercise, and recreation were being conducted as required.  Documentation provided demonstrates that these activities are provided, however, they are not always provided as required by regulation. Additionally, youth are not receiving their hour outdoors daily. See below for specific by activity.
A youth's participation in programs, recreation, and exercise may be suspended only upon a written finding by the administrator/manager or designee that a youth represents a threat to the safety and security of the facility.	×		Section 622: Programs Section 623: Recreation and Exercise
Such program, recreation, and exercise schedule shall be posted in the living units.	×		Section 622: Programs Section 623: Recreation and Exercise  The program, recreation, and exercise schedules were posted in the living units.
There will be a written annual review of the programs, recreation, and exercise by the responsible agency to ensure content offered is current, consistent, and relevant to the population.			Section 622: Programs Section 623: Recreation and Exercise  At inspection, annual reviews were provided by the facility Superintendent for all programs, recreation, and exercise activities that occur/occurred in the facility in 2021 and 2022. There were no individual reviews provided by any of the Community Based Organizations identified by the Superintendents or from DMH. No program information that facility staff provided were noted in this review. This section was found noncompliant. Since the inspection and during 2023, facility staff have been able to get 3 letters from CBO's. We will continue to work with the agency during the CAP to ensure a full review is completed.

	Section 622: Programs Section 623: Recreation and Exercise
	Program topics and worksheets are identified and designated by the Behavior Management Program (BMP) unit. These resources are provided to the unit staff who are responsible for providing programs in the unit to the youth.  We found through our review that programs are not being provided daily in all units, they are not occurring for a full hour despite being documented as such, that youth may be provided with programming resources, i.e. a work sheet is handed out to them, but the staff are not engaging the youth in the process or program.  There was evidence of outside programs (CBO's) and DMH providing programming, but these programs were limited and did not occur often across the facility.  It was noted that program resources are limited. BMP staff do not provide staffing resources to conduct any daily programming in the units. Unit staff are responsible to determine the curriculum for the program to be offered. Unit staff have not been formally trained to facilitate programs and the unit
	determine the curriculum for the program to be offered. Unit staff have not been formally
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(1)	Cognitive	Behavior	Interventions;
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- (2) Management of Stress and Trauma;
- (3) Anger Management;
- (4) Conflict Resolution;
- (5) Juvenile Justice System;
- (6) Trauma-related interventions;
- (7) Victim Awareness:
- (8) Self-Improvement;
- (9) Parenting Skills and support;
- (10) Tolerance and Diversity;
- (11) Healing Informed Approaches;
- (12) Interventions by Credible Messengers;
- (13) Gender Specific Programming;
- (14) Art, creative writing, or self-expression;
- (15) CPR and First Aid training;
- (16) Restorative Justice or Civic Engagement;
- (17) Career and leadership opportunities; and.
- (18) Other topics suitable to the youth population.

Section 622: Programs

Section 623: Recreation and Exercise

Per the Superintendent's review of Facility Programs, the following are the programs that are provided to the youth at Central Juvenile Hall. As noted previously, the annual reviews were not all provided by the individual program providers. Programs provided by facility staff have not been included.

#### **Department of Mental Health**

Seeking Safety

DST

Meditation Seeking Safety Life Skills

**CST** 

Substance Abuse Psych Ed

Coping Skills

#### **Community Based Organizations**

Affiliates and Offenders Recovery Program Alcoholics Anonymous

Inside Out Writers Jail Guitar Doors

Homeboy Arts Academy Unusual Suspects

Give A Beat (\*)

Growth and Wellness Innovation Program

Keeping It Sober and Sensual

**Book Club** 

Saving Innocence Project

**Unusual Suspect** 

Anti-Recidivism Coalition

**ADVOT** 

(b) Recreation. All youth shall be provided the opportunity for at least one hour of daily access to unscheduled activities such as leisure reading, letter writing, and entertainment. Activities shall be supervised and include orientation and may include coaching of youth.				Youth spend most of their non-school hours in recreation and well exceed the hour that is required. We noted units are not consistent as to what is provided between buildings or between units. Some units have game stations, some have access to Netflix and other streaming options as staff are bringing them in and using their own cell phone Wi-Fi so the youth have access to fun activities and tasks that will occupy their attention.  All youth in the facility should have the same access to age-appropriate recreational activities. Youth should not have to depend on staff to bring their personal gaming system or use their hotspot to provide recreational activities. We noted that if a TV, radio, or speaker is broken, it takes a very long time to replace it. There should be replacement items available and replaced in a reasonable timeframe. If something is a risk, but is something that could get broken in an institutional setting such as a TV, then efforts should be made to mitigate the risk i.e., encasing it or framing it in so that it cannot be broken, not to just not replace it for long periods of time.  An accounting of recreational activities available to the youth was made and provided to the facility superintendent for review and action as appropriate.  We noted while reviewing documentation, in some units, documentation did not include the youth's choice of activity. We noted through our onsite visits, youth simultaneously have access to several activities all the while being on the phone and playing cards or dominoes. They choose what they participate in.  There is no cable, Wi-Fi, or other means for youth to access the television, the internet for television shows, or streaming of age-appropriate content or programs. This has been addressed in technical assistance several times. We will continue to provide
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(c) Exercise. All youth shall be provided with the opportunity for at least one hour of large muscle activity each day.			Per the Superintendent's review of Facility exercise, the following are the activities that are provided to the youth at Central Juvenile Hall:  Football Catch Soccer Basketball HORSE Jump Rope Power Walk Handball Workout Station Kickball  Youth are assigned to a specific exercise activity at a specific time due to the scheduling of the space. The facility does not have individual recreation spaces to keep the various populations separate. This presents security concerns as youth will run from one area to the next to assault other youth from rival gangs. As the time changed in the end of October, it is more difficult to get each unit out to exercise during the week.  Video review revealed youth are not going outside as required daily and stay inside to participate in indoor recreation or sometimes none at all. We also found that youth who do get outside do not always receive the full hour and return early. We are unaware of the reason why this occurs as it is not documented.  We have discussed alternative means to complete exercise requirements. Staffing issues further impact and deteriorate the issue.  This section is noncompliant. Section 622: Programs
not to exceed 24 hours, access to recreation and programs. The administrator/manager shall document the reasons why suspension of recreation and programs occurs.			Section 623: Recreation and Exercise
1372 RELIGIOUS PROGRAM			Section 1803: Religious Services
The facility administrator shall provide access to religious services and/or religious counseling at least once each week. Attendance shall be voluntary. A youth shall be allowed to participate in an activity outside of their room if he/she elects not to participate in religious programs.  Religious programs shall provide for:	$\boxtimes$		

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(a) opportunity for religious services and practices;				Section 1803: Religious Services
				Religious services are held on Sunday. Both protestant and catholic services have been offered. The facility has a chapel onsite. The facility has been in COVID related quarantines/isolations off and on during the cycle.
	⊠			On 09/25/2022, there were 12 youth in attendance, and on 10/16/2022, there were a total of 28 youth that attended church services.
				The facility had previously been asked to develop a process to track religious services, visiting, and any other areas that may be impacted by COVID to ensure youth are still getting needs met. This is in progress.
(b) availability of clergy; and,				Section 1803: Religious Services
	☒			Members of the clergy come to the facility to provide services and bible studies. Youth may also ask for individual clergy to be placed on the visitation list.
(c) availability of religious diets.				Section 1803: Religious Services
	×			Youth may ask for a special diet based on religious preference. Youth complete a special request form.
1373 WORK PROGRAM				Section 505: Housekeeping
The facility administrator shall develop policies and procedures regarding the fair and consistent assignment of youth to work programs. Work assigned to a youth shall be meaningful, constructive and related to vocational training or increasing a youth's sense of responsibility. Work programs shall not be imposed as a disciplinary measure.	⊠			Work programs have been significantly impacted by COVID-19. As the programs come back, the facility will inform the youth. In the meantime, youth are only responsible for maintaining their units and their rooms.

The facility administrator shall develop and implement written policies and procedures for visiting, that include provisions for special visits. Youth shall be allowed to receive visits by parents, guardians or persons standing in loco parentis, and children of youth. Other family members, such as grandparents and siblings, and supportive adults, may be allowed to visit with the approval of the facility administrator or designee, and in conjunction with the youth's case plan or in the best interest of the youth.			Documentation was requested and provided from September and October 2022. We found visits were cancelled on September 24 and 25, 2022 due to critical staffing. We did not find that virtual calls or extra calls were provided to all youth as an alternative. Visits were held as required in October 2022. We found that virtual calls and extra calls were lacking across all units throughout the facility.  Many youth who are located in CJH have children of their own. CJH does not have a regular program for baby visiting that is consistent and ongoing. Very few baby visits have been accommodated. This is noncompliant. We suggest you share the opportunity at orientation along with the requirements so youth can get working on the proper documentation to visit with their children.
All visits shall occur at reasonable times, subject only to the limitations necessary to maintain order and security. Visitation shall not be denied solely based on the visitor's criminal history. The staff shall determine in each case, whether the visitor's criminal history represents a risk to the safety of youth or staff in the facility. Any denial of visitation or limitation on visitations shall be communicated to the youth, person denied and facility administrator.	⊠		Section 304: Visiting

Opportunity for visitation shall be a minimum of two hours			Section 304: Visiting
per week. Visits may be supervised, but conversations shall not be monitored unless there is a security or safety need.			During the cycle, it was noted that the facility canceled visitation due to either quarantine status or a lack of staff to properly monitor the visits and to supervise youth and parents both in the units and at visitation.
			If visiting is cancelled or otherwise does not occur, all youth should be provided with virtual calls or phone calls. This issue has been discussed previously. Noncompliance is based on this issue. Cancelling visitation due to lack of staffing is addressed in staffing.
			Logs were provided for review and proof of practice. Technical assistance provided to enhance phone logs. We did not find any documentation of virtual calls offered; county line calls were limited as were the dayroom/hallway phone calls. Virtual calls must be made available to youth. We suggest more phones be installed to increase call opportunities for youth and to address the high level of work orders for phone maintenance.
			Technical assistance has been provided to facility managers regarding parent/visitor check in. Parents/visitors should be provided with a full 2 hours for active visiting. The facility should begin processing visitors early enough to ensure a full 2-hour visit is offered.
Provisions for special visits, in addition to the two-hour minimum and/or outside of the regular visiting hours, shall be accommodated as necessary and within the discretion of the facility administrator or designee. Family therapy and professional visits shall be accommodated outside the provisions of this regulation. Facilities may provide visitation opportunities outside of normal visiting hours to accommodate special visits.	⊠		Section 304: Visiting
The facility may provide access to technology as an alternative, but not as a replacement, to in-person visiting.	$\boxtimes$		Section 304: Visiting Section 306: Virtual Communication  Facility does not offer regular technology-based visitation.
1375 CORRESPONDENCE			Section 511: Mail
The facility administrator shall develop and implement written policies and procedures for correspondence which provide that:	×		Youth interviewed noted they have access to letter writing materials daily.

(a) there is no limitation on the volume of mail that youth may send or receive;	X		Section 511: Mail  There is no limitation on the amount of mail a youth may send out or receive. Youth are provided the opportunity to write letters every day during recreational periods. Youth can ask for supplies as needed.
(b) youth may send two letters per week postage free;	X		Section 511: Mail  All letters are sent postage paid.
(c) youth may correspond confidentially with state and federal courts, any member of the State Bar or holder of public office, and the Board; however, authorized facility staff may open and inspect such mail only to search for contraband and in the presence of the youth; and,	$\boxtimes$		Section 511: Mail
(d) incoming and outgoing mail, other than that described in (c), may be read by staff only when there is reasonable cause to believe facility safety and security, public safety, or youth safety is jeopardized.	×		Section 511: Mail
The administrator of each juvenile facility shall develop and implement written policies and procedures to provide youth with access to telephone communications.	×		Per policy, youth are provided with 1 call weekly on the County phone. They generally have access to dayroom telephones daily. Calls are currently free. Telephones appear to be in need of replacement and perhaps a review to determine if more could be installed. Current phones are often out of order or are not functioning properly per grievances reviewed and other conversations with youth. This is an issue that must be addressed.
The facility administrator shall develop written procedures to ensure the right of youth to have access to the courts and legal services. Such access shall include:	×		Section 513: Access to legal Services  Documentation reviewed noted several days of phone logs of youth making professional calls. All individual regulatory requirements have been met.
(a) access, upon request by the youth, to licensed attorneys and their authorized representatives;	×		Section 513: Access to legal Services  Attorneys can visit their youth at any time.
(b) provision for confidential consultation with attorneys; and,	×		Section 513: Access to legal Services  Attorney visits currently occur in the chapel until the construction is concluded in Boys Receiving.
(c) unlimited postage free, legal correspondence and cost-free telephone access as appropriate.	×		Section 513: Access to legal Services All mail is postage free.

The facility administrator shall develop and implement written policies and procedures for the discipline of youth that shall promote acceptable behavior; including the use of positive behavior interventions and supports. Discipline shall be imposed at the least restrictive level which promotes the desired behavior and shall not include corporal punishment, group punishment, physical or psychological degradation. Deprivation of the following is not permitted:		×	Section 1103: Discipline Guidelines Section 1104: Corporal Punishment  The facility lacks suitable age-appropriate incentives and support to achieve positive behavior. There is no incentive for youth to maintain good behavior. The current discipline process is ineffective as noted though a review of the point system, incentive options, and lack of a meaningful process and the incentive/sanction due process method.  Due process is being offered and documentation is being completed but the
			 process lacks viability and youth don't pursue anything further.
(a) bed and bedding;	×		Section 1103: Discipline Guidelines
<ul><li>(b) daily shower, access to drinking fountain, toilet and personal hygiene items, and clean clothing;</li></ul>	X		Section 1103: Discipline Guidelines
(c) full nutrition;	$\boxtimes$		Section 1103: Discipline Guidelines
(d) contact with parent or attorney;	$\boxtimes$		Section 1103: Discipline Guidelines
(e) exercise;	$\boxtimes$		Section 1103: Discipline Guidelines
(f) medical services and counseling;	$\boxtimes$		Section 1103: Discipline Guidelines
(g) religious services;	×		Section 1103: Discipline Guidelines
(h) clean and sanitary living conditions;	×		Section 1103: Discipline Guidelines
(i) the right to send and receive mail;	×		Section 1103: Discipline Guidelines
(j) education; and,	×		Section 1103: Discipline Guidelines
(k) rehabilitative programming.	X		Section 1103: Discipline Guidelines
The facility administrator shall establish rules of conduct and disciplinary penalties to guide the conduct of youth. Such rules and penalties shall include both major violations and minor violations, be stated simply and affirmatively, and be made available to all youth. Provision shall be made to provide accessible information to youth with disabilities, limited English proficiency, or limited literacy.	⊠		Section 1103: Discipline Guidelines Section 1106: Rules and Regulations
1391 DISCIPLINE PROCESS  The facility administrator shall develop and implement written policies and procedures for the administration of discipline which shall include, but not be limited to:	⊠		Section 1106: Rules and Regulations Section 1107: Due Process
(a) designation of personnel authorized to impose discipline for violation of rules;	×		Section 1106: Rules and Regulations
(b) prohibiting discipline to be delegated to any youth;	×		Section 1106: Rules and Regulations
(c) definition of major and minor rule violations and their consequences, and due process requirements;	×		Section 1106: Rules and Regulations Section 1107: Due Process

<ul><li>(d) trauma-informed approaches and positive behavior interventions;</li></ul>	$\boxtimes$		Section 1106: Rules and Regulations
(e) minor rule violations may be handled informally by counseling, advising the youth of expected conduct imposing a minor consequence. Discipline shall be accompanied by written documentation and a policy of review and appeal to a supervisor; and,	×		Section 1107: Due Process Section 1108: Minor Rule Violations  If a youth chooses to appeal a minor discipline, this is generally addressed through the grievance process. We saw no grievances for this purpose.
(f) major rule violations and the discipline process shall be documented and require the following:	×		Section 1107: Due Process
(1) written notice of violation prior to a hearing;	$\boxtimes$		Section 1107: Due Process  Sanctions and appeals are completed for all youth. We found youth refuse to complete all areas of the due process form and all waived their right to their hearings. Overall, officers are completing the forms as required and all had a second officer signature as a witness. Once the behavior management program is addressed in Section 1390, all officers should be retrained in these forms.
(2) accommodations provided to youth with disabilities, limited literacy, and English language learners;	⊠		Section 1107: Due Process
<ul><li>(3) hearing by a person who is not a party to the incident;</li></ul>	$\boxtimes$		Section 1107: Due Process
<ul><li>(4) opportunity for the youth to be heard, present evidence and testimony;</li></ul>	$\boxtimes$		Sanction 1107: Due Process
<li>(5) provision for youth to be assisted by staff in the hearing process;</li>	$\boxtimes$		Sanction 1107: Due Process
(6) provision for administrative review.	$\boxtimes$		Sanction 1107: Due Process
(g) violations that result in a removal from camp or commitment program, but not a return to court, will follow the due process provisions in subsection (e) above.		×	CJH does not have a camp or a commitment program.
1410 MANAGEMENT OF COMMUNICABLE DISEASES.  The health administrator/responsible physician, in cooperation with the facility administrator and the local health officer, shall develop written policies and procedures to address the identification, treatment, control and follow-up management of communicable diseases. The policies and procedures shall address, but not be limited to:	$\boxtimes$		Reviewed Probation policy and medical guidance to ensure Management of Communicable Disease policy is current and addresses all required areas required by section 1410, specifically COVID-19.  Compliance based on policy and guidance reviewed from medical provider JCHS.
(a) Intake health screening procedures;	$\boxtimes$		Sanction 1805: Communicable Diseases
(b) Identification of relevant symptoms;	$\boxtimes$		Sanction 1805: Communicable Diseases
(c) Referral for medical evaluation;	$\boxtimes$		Sanction 1805: Communicable Diseases
(d) Treatment responsibilities during detention;	$\boxtimes$		Sanction 1805: Communicable Diseases
(e) Coordination with public and private community-based resources for follow-up treatment;	×		Sanction 1805: Communicable Diseases
(f) Applicable reporting requirements; and,	$\boxtimes$		Sanction 1805: Communicable Diseases

(g) Strategies for handling disease outbreaks.	X		Sanction 1805: Communicable Diseases
The policies and procedures shall be updated as			Sanction 1805: Communicable Diseases
necessary to reflect communicable disease priorities identified by the local health officer and currently recommended public health interventions.	⊠		JCHS has been open to communications regarding language that is contradictory to regulatory language and solving this issue to avoid noncompliance.
1433 REQUESTS FOR HEALTH CARE SERVICES (EXCERPT)  The health administrator, in cooperation with the facility administrator, shall develop policy and procedures to establish a daily routine for youth to convey requests for emergency and non-emergency medical, dental and			Sanction 1702: Access to Care/Request for Services  Youth interviewed regarding health care services stated they submit a request for service, or they tell staff what they need. Staff will take them to medical if the issue is of an
behavioral/mental health care services.	⊠		emergent nature. Medical operates 24/7.  Mental health will also see youth within a reasonable amount of time. Any afterhours needs are addressed by an on-call staff member. All the youth interviewed felt the timelines in which they are seen is appropriate.
The youth's personal clothing, undergarments and footwear may be substituted for the institutional clothing and footwear specified in this regulation. The facility has the primary responsibility to provide clothing and footwear. Clothing provisions shall ensure that:	×		The facility provides all clothing and shoes for the youth.
(a) Clothing is clean, reasonably fitted, durable, easily laundered, in good repair, and free of holes and tears.	×		Sanction 403: Procedures for Newly Admitted Youth  Clothes appear to be clean, well-fitting, and free from rips and holes.
(b) The standard issue of climatically suitable clothing for youth shall consist of but not be limited to:			Sanction 403: Procedures for Newly Admitted Youth  Youth are provided with basic needs for weather. Technical assistance has been provided with regard to also providing sweatpants, sweatshirts, beanies and coats
	×		when appropriate, shorts for exercise or summer wear, and pajamas or something to sleep in.  When items of clothing are passed out, they should go to all youth consistently. It was discussed, it is the responsibility of unit staff to ensure that all youth have the same items of clothing as appropriate. Youth were viewed on video to be in the dayroom, generally during showers, after hours etc. who were walking around in boxer shorts to the restroom. This is inappropriate. Youth should be provided with proper sleeping attire.

(*	) Socks and serviceable footwear;	D		Sanction 403: Procedures for Newly Admitted Youth
				Touil
(2	2) Outer garments;	$\boxtimes$		Sanction 403: Procedures for Newly Admitted Youth
	8) New non-disposable underwear which shall remain with the youth throughout their stay, and;  1) Undergarments, that are freshly laundered and			Sanction 403: Procedures for Newly Admitted Youth  Youth are given brand new underwear upon entry.  Youth interviewed said they were provided with new underwear upon admission; however, some reported that at some point in their stay, they are not sure anymore if the underwear they receive are theirs. Staff were asked why the youth do not have their own underwear. They stated they are to have them but sometimes, the laundry sends all laundry back in the cart and not in the bags. Youth are then given new underwear again, but the issue will periodically occur. This is problematic and discussed with administrators for resolution.  Female youth have the option of new cotton underwear or a cotton disposable. They are provided with whichever they choose. The disposable underwear are generally for girls as requested but it was noted that some girls prefer the disposable to the regular underwear provided. This inspector asked to see the disposable underwear and they are of heavy cotton like material and very similar to regular underwear. Some girls said they are more comfortable, and they prefer to have the disposable daily.  Facility is working on ensuring that laundry bags are issued and returned as they should be. We will continue to review and monitor this in future visits. It is necessary to develop and implement a policy to be sure youth have their own underwear every day.  Sanction 403: Procedures for Newly Admitted
·	free of stains, including tee shirts and bras.	$\boxtimes$		Youth
b a	lothing is laundered at the temperature required y local ordinances for the commercial laundries and dried completely in a mechanical dryer or other nundry method approved by the local health officer.	×		Sanction 403: Procedures for Newly Admitted Youth  Clothing is laundered in facility commercial laundry.

(d) Suitable clothing is issued to pregnant youth.	$\boxtimes$		Sanction 403: Procedures for Newly Admitted Youth
	Δ		Pregnant youth receive clothing that fits but there is no special maternity clothing.
1482 CLOTHING EXCHANGE			Sanction 505: Housekeeping
The facility administrator shall develop and implement written policies and site-specific procedures for the cleaning and scheduled exchange of clothing. Unless work, climatic conditions, or illness necessitates more frequent exchange, outer garments, except for	$\boxtimes$		All youth we spoke to reported that clothing is exchanged on a schedule. Underclothes and T-shirts are exchanged daily and pants several times a week.
footwear, shall be exchanged at least once each week. Tee shirts, bras, and underwear shall be exchanged daily; youth shall receive their own underwear back at exchange.			Youth were asked, if they requested to exchange items, could their clothing be exchanged early and all noted they could, they just ask staff.
1484 CONTROL OF VERMIN IN YOUTH'S PERSONAL CLOTHING			Sanction 505: Housekeeping
There shall be written policies and site-specific procedures developed and implemented by the facility administrator to control the contamination and/or spread of vermin and ecto-parasites in all youth's personal clothing. Infested clothing shall be cleaned or stored in a closed container so as to eradicate or stop the spread of the vermin.			Youth clothing is placed in individual bags upon entry. Clothing can be washed if there is any concern.
There shall be written policies and site-specific procedures developed and implemented by the facility administrator for the availability of personal hygiene items. Each female youth shall be provided with sanitary napkins, panty liners and tampons as requested. Each youth to be held over 24 hours shall be provided with the following personal care items;	×		Sanction 508: Housekeeping: Personal Hygiene Supplies  Policy is in process of being addressed to fix the inconsistency with Section 510 regarding the use of electric razors.  Youth are provided with all necessary personal care items for shower time. Females have their choice of tampons or sanitary pads for personal care.
(a) Toothbrush;	$\boxtimes$		Sanction 508: Housekeeping: Personal Hygiene Supplies
(b) Toothpaste;	×		Sanction 508: Housekeeping: Personal Hygiene Supplies
(c) Soap;	×		Sanction 508: Housekeeping: Personal Hygiene Supplies
(d) Comb;	X		Sanction 508: Housekeeping: Personal Hygiene Supplies
(e) Shaving implements;	×		Sanction 508: Housekeeping: Personal Hygiene Supplies
(f) Deodorant;	$\boxtimes$		Sanction 508: Housekeeping: Personal Hygiene Supplies
(g) Lotion;	×		Sanction 508: Housekeeping: Personal Hygiene Supplies
(h) Shampoo; and,	×		Sanction 508: Housekeeping: Personal Hygiene Supplies
(i) Post-shower conditioning hair products.	X		Sanction 508: Housekeeping: Personal Hygiene Supplies

Youth shall not be required to share any personal care items listed in items (a) through (d). Liquid soap provided through a common dispenser is permitted. Youth shall not share disposable razors. Double edged safety razors, electric razors, and other shaving instruments capable of breaking the skin, when shared among youth, shall be disinfected between individual uses by the method prescribed by the State Board of Barbering and Cosmetology in Sections 979 and 980, Chapter 9, Title 16, California Code of Regulations.	×		Sanction 508: Housekeeping: Personal Hygiene Supplies
There shall be written policies and site specific procedures developed and implemented by the facility administrator for showering/bathing and brushing of teeth. Youth shall be permitted to shower/bathe up on assignment to a housing unit and on a daily basis thereafter and given an opportunity to brush their teeth after each meal.	×		Sanction 621: Showers Sanction 629: Personal Hygiene and Unit Housekeeping  Youth who were interviewed said they are given an opportunity to wash up and brush their teeth every morning, brush their teeth after every meal, and shower daily.
Youth shall have access to a razor daily, unless their appearance must be maintained for reasons of identification in Court. All youth shall have equal opportunity to shave face and body hair. The facility administrator may suspend this requirement in relation to youth who are considered to be a danger to themselves or others.			Sanction 510: Shaving and Haircut Procedures  Youth are to be provided with the opportunity to shave daily. There are signs posted that youth who wish to shave should sign up to do so. In talking with youth, it was noted through these conversations, there is no true consistency in this process as it stands. It was noted that some units do and others do not on a consistent basis. It was also noted the lack of regular or extra staff for supervision is also impacting this process as written.  While there is a policy in place, the policy and practice is not clear which leads to confusion. Youth were observed to have clean shaven faces in all the units throughout the time spent visiting the facilities over the course of the time spent in Los Angeles, therefore, it is apparent that shaving does occur, but consistency is certainly an issue. This regulation is found to be minimally compliant at this time.  TA provided and discussed that documentation must be clarified to ensure youth have the opportunity daily and this opportunity is documented for proof of practice. This issue will continue to be reviewed regularly in the coming months to ensure a thorough accounting of the process. Monthly reporting document implemented for the facility to report to the inspector by the 5th of the month to show proof of practice of shaving.

Hair care services shall be available in all juvenile facilities. Youth shall receive hair care services monthly. Equipment shall be cleaned and disinfected after each haircut or procedure, by a method approved by the State Board of Barbering and Cosmetology.	×		Sanction 510: Shaving and Haircut Procedures  Regulation and policy require access to monthly haircuts, but policy does not provide the procedure in which this should occur. More direction is needed for staff to ensure an opportunity is provided with adequate proof of practice. While it is clear that haircuts occurred in some units, it is not clear that haircuts were offered in all units and this was confirmed via interviews with youth, especially the female youth, who noted there is only a barber available.  TA provided to immediately implement proof of practice to document monthly access facility wide as well as to provide QA monthly to ensure that all youth who want a haircut receive one.  This section is minimally compliant at this time and this issue will continue to be reviewed regularly in the coming months to ensure haircuts occur as required. Monthly reporting document implemented for the facility to report to the inspector by the 5th of the month to show proof of practice of haircuts.
Clean laundered, suitable bedding and linens, in good repair, shall be provided for each youth entering a living area who is expected to remain overnight, shall include, but not be limited to:	⊠		While doing Title 24 inspections, suitable bedding was reviewed. It was noted that several mattresses do not have covers nor do youth have pillows. It was noted that this was due to contraband issues. This was addressed with facility staff and it was being referred for review.  We have been notified that mattresses and pillows have been ordered to ensure that all youth have an appropriate mattress and pillow. We will follow up on this issue in April 2023 to ensure that all mattresses have come
(a) One mattress or mattress-pillow combination which meets the requirements of Section 1502 of these regulations;	×		in and have been distributed. Sanction 505: Housekeeping
(b) One pillow and a pillow case unless provided for in (a) above;	×		Sanction 505: Housekeeping
(c) One mattress cover and a sheet or two sheets;	×		Sanction 505: Housekeeping
(d) One towel; and,	×		Sanction 505: Housekeeping
(e) One blanket or more, up on request	$\boxtimes$		Sanction 505: Housekeeping

1501 BEDDING LINEN EXCHANGE			Sanction 505: Housekeeping
The facility administrator shall develop and implement site specific written policies and procedures for the scheduled exchange of laundered bedding and linen issued to each youth housed. Washable items such as sheets, mattress covers, pillow cases and towels shall be exchanged for clean replacement at least once each week.	⊠		All linens are laundered as required.
The covering blanket shall be cleaned or laundered			505: Housekeeping
once a month.	×		Blankets may be exchanged more frequently and as needed.
The facility administrator shall develop and implement written policies and site-specific procedures for the maintenance of an acceptable level of cleanliness, repair and safety throughout the facility. The plan shall provide for a regular schedule of housekeeping tasks, equipment, including restraint devices, and physical plant maintenance and inspections to identify and correct unsanitary or unsafe conditions or work practices in a timely manner. The use of chemicals shall be done in accordance to the product label and Safety Data Sheet which may include the use of Personal Protection Equipment (PPE).	$\boxtimes$		Sanction 505: Housekeeping: Basic Cleaning Procedures for All Areas Sanction 507: Housekeeping: Maintenance Procedures  The facility is maintained by a contracted cleaning crew that is onsite cleaning daily. They maintain COVID cleaning protocols and general cleaning.  General cleaning is conducted daily by unit staff and the youth. Youth clean their own individual rooms, their restroom, and dayroom.  It was noted that in some units, cameras are routinely greased or otherwise covered by the youth with a substance that impedes camera view. TA provided that cameras should be checked by staff multiple times a shift to ensure the cameras have not been compromised.

### REVIEW OF NON REGULATORY REQUIREMENTS

GRANT FUNDING OR CODE REFERENCE	YES	NO	N/A	P/P REFERENCE - COMMENTS
JUVENILE PROBATION AND CAMPS FUNDING (JPC		os Only)		.,
The programs/services identified on the JPCF – Camp Allocation Eligibility Form are being provided at the facility. (Refer to the JPCF Program Agreement, Attachment B)		×		
208.5 WIC CONTACT BETWEEN PERSONS UNDER T	HE <i>JUVE</i>	ENILE C	OURT A	GES 19- 20 AND MINORS IN THE FACILITY
The facility houses Juvenile Court Wards 19 years of age and older.	×			
The facility has been approved to hold persons under the juvenile court who are ages 19 through 21.	$\boxtimes$			
The facility continues to comply with the requirements of 208.5 WIC (programming, capacity and security of the facility) as outlined in the county's application.			X	
JUVENILE JUSTICE DELINQUENCY PREVENTION AC	CT MONI	TORING	(JJDPA	)
WIC 206 SEPARATE FACILITIES FOR WIC 300 MINORS		□Vio		
Dependent or neglected minors who are defined under Section 300 of the Welfare and Institutions Code (WIC) are held only in non-secure, separate and segregated facilities.		lation		
DETENTION OF STATUS OFFENDERS (WIC 601) AND FEDERAL MINORS Status Offenders (WIC 601) are held in the facility.		$\boxtimes$		
Status Offenders (WIC 601) are kept separate from Juvenile Delinquents (WIC 602)? (WIC 207[d]).		□ Vio lation	$\boxtimes$	
Federal Minors (ICE Holds or ORR Contract) are held in the facility.		×		
If yes to the above, the <i>Monthly Report on the Detention of Status Offenders/Federal Minors</i> is submitted to the BSCC.			X	
WIC 208 SEPARATION OF MINORS AND ADULT INMATES (JJDPA 42 USC 5633, Sec 223, State Plans (a)[12])  Are adult inmates held in the facility? (When a person		×		
in detention is proceeding through the adult court, AND that person is 18 years of age or older that person is an <b>adult inmate.</b> )				
If adult inmates are held, they are appropriately separated from minors.		□Vio lation	×	
Adult inmates from an adult facility (e.g. inmate workers or "Scared Straight" programs) are not allowed in the facility in a manner that allows contact with minors.		□Vio lation	X	

# JUVENILE HALLS, SPECIAL-PURPOSE JUVENILE HALLS AND CAMPS Board of State and Community Corrections PROCEDURES CHECKLIST<sup>1</sup>

BSCC Code: 7204

FACILITY NAME:	FACILITY TYPE:				
Barry J. Nidorf Juvenile Hall	Juvenile Hall				
PERSON(S) INTERVIEWED:					
Janice Jones, Sr. Director; Lizet Barboza, BSCC Coordinator, Karen Streich and Ra	ae Tinnagan, DMH, David Oh, JCHS,				
Reuben Carranza Principal; 4-line staff and 6 youth, ages 17, 18.5,18,16,16,15 from Hill units and several youth from each					
Compound Unit.					
FIELD REPRESENTATIVE:	DATE:				
Lisa Southwell	November 8-18, 2022				

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
1313 COUNTY INSPECTION AND EVALUATION OF BUILDING AND GROUNDS On an annual basis, or as otherwise required by law, each juvenile facility administrator shall obtain a documented inspection and evaluation from the following:				
(A) County building inspection by agency designated by the Board of Supervisors to approve building safety;	×			Section 203: County Inspections of Buildings and Grounds  2020 The building inspection was completed by Tenneson D'Sena on December 15, 2020. The inspecting body noted all areas of concern were reinspected and found to be corrected.  2021 The building inspection was completed by Tenneson D'Sena on September 21, 2021. No issues of concern were noted.  There were no areas of concern.  2022 The building inspection was completed by Tenneson D'Sena on August 24, 2022.  There were three areas of concern found. These areas have been corrected and the inspecting body has provided clearance.

<sup>&</sup>lt;sup>1</sup> This document is intended for use as a tool during the inspection process; this worksheet may not contain each Title 15 regulation that is required. Additionally, many regulations on this worksheet are SUMMARIES of the regulation; the text on this worksheet may not contain the entire text of the actual regulation. Please refer to the complete California Code of Regulations, Title 15, Minimum Standards for Local Facilities, Division 1, Chapter 1, Subchapter 5 for the complete list and text of regulations.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(B) Fire authority having jurisdiction, including a fire clearance as required by Health and Safety Code Section 13146.1 (a) and (b);		×		Section 203: County Inspections of Buildings and Grounds  The fire inspection was completed by Inspector Brian Whalen, Valley Public Safety Unit  Fire Clearance was granted on 5/28/2020. Fire Inspection not completed for 2021 due to COVID.  Fire inspection completed on 07/26/2022 by Brian Whalen. The facility did not pass inspection and corrections are required. The facility is currently on Fire Watch status per administration and is keeping the appropriate logs.
(C) Local health officer, inspection in accordance with Health and Safety Code Section 101045;				Section 203: County Inspections of Buildings and Grounds  2021  Medical Mental Health: Completed March 12, 24-25, 2021 by Tia Mao, PHN. Areas of concern were reinspected in November 2021 and were noted to be corrected except for one area that would be reviewed at the next inspection per the inspecting body.  Nutrition: Completed March 24-25, 2021, by David Kornoff, EHS III. Areas of concern were reinspected in May 2021 and were noted to be corrected.  Environmental Health: Completed March 24-25, 2021, by David Kornoff, EHS III. Areas of concern were reinspected in May 2021 and were noted to be corrected except for larger items scheduled for renovation.  2022  Medical Mental Health: Completed January 27, February 22, and March 15-16, 2022, by Tia Mao, PHN  Nutrition: Completed March 16, 2022, by Nicolas Martinez, Chief EHS, and Antonio Valera EHSIII. No areas of noncompliance were found.  Environmental Health: Completed March 16, 2022, by Nicolas Martinez, Chief EHS, and Antonio Valera EHSIII. All areas noted as noncompliant were corrected on June 6, 2022, and noted as such.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(D) County superintendent of schools on the adequacy of educational services and facilities as required in Section 1370;				Section 203: County Inspections of Buildings and Grounds  Education for the facility is provided by the Los Angeles County Office of Education  2021  On December 20, 2021, the facility was inspected by Dr. Andrea Kittelson, Principal. LAUSD found the school program to meet regulatory expectations.  2022  Completed December 9, 2022, by Jason Deaville, Director of Student Services, Palmdale School District. The school was found to be compliant.
(E) Juvenile court as required by Section 209 of the Welfare and Institutions Code				See Section 1370 for specific comments made by Jason Deaville.  Section 203: County Inspections of Buildings and Grounds
Wellare and institutions Code		×		2021 The facility was inspected by the Honorable Akemi Arakaki on December 1, 2021. The facility was deemed to be operated and maintained as a suitable place for the confinement of minors.  Judge Arakaki found the facility to be suitable to house youth.
				The inspection was not completed as required.  An inspection was completed on 1/25/23 for the 2023/2024 inspection cycle. The report
(F) Juvenile Justice Commission as required by Section 229 of the Welfare and Institutions Code or Probation Commission as required by Section 240 of the Welfare and Institutions Code.	×			is pending.  Section 203: County Inspections of Buildings and Grounds  The Probation Oversight Commission conducts annual inspections of the facility.  2021 The facility was inspected in September 2021.
				2022 The facility was inspected on October 11, 2022.  Reports can be found at http://file.lacounty.gov/SDSInter/bos/supdocs/POC21-0136.pdf

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
1320 APPOINTMENT AND QUALIFICATIONS BSCC Note: Compliance with this section is determined by receipt of the Chief Probation Officer's certification letter confirming that all elements of regulation are met.  (a) Appointment In each juvenile facility there shall be a superintendent, director or facility manager in charge of its program and employees. Such superintendent, director, facility	⊠			Appointment and qualification certification letters, dated December 20, 2021, and January 26, 2022, were received from Chief Probation Officer Adolfo Gonzales certifying all appointments of staff are pursuant to the applicable laws and that all staff present at the facility meet all required qualifications. All non-employees also receive appropriate clearances prior to entering.
manager and other employees of the facility shall be appointed by the facility administrator pursuant to applicable provisions of law.				
(b) Employee Qualifications  Each facility shall:				
(1) recruit and hire employees who possess knowledge, skills and abilities appropriate to their job classification and duties in accordance with applicable civil service or merit system rules;	×			
(2) require a medical evaluation and physical examination including tuberculosis screening test and evaluation for immunity to contagious illnesses of childhood (i.e., diphtheria, rubeola, rubella, and mumps);	×			
(3) adhere to the minimum standards for the selection and training requirements adopted by the Board pursuant to Section 6035 of the Penal Code; and	$\boxtimes$			
(4) conduct a criminal records review, on each new employee, and psychological examination in accordance with Section 1031 et seq. of the Government Code.	×			
(c) Contract personnel, volunteers, and other non- employees of the facility, who may be present at the facility, shall have such clearance and qualifications as may be required by law, and their presence at the facility shall be subject to the approval and control of the facility manager.	×			
1321 STAFFING  Each juvenile facility shall:				Staffing documents were requested and received for the weeks of September 22-30, 2023, and October 10-17, 2023. Staffing breakdowns, Population, As Needed and Overtime Report, Shift Staffing Schedules. We noted the facility worksheet data noted 10 vacancies in the supervisor rank and approximately 200 vacancies at the line level. While there are two areas in this section of the regulation that are directly impacted, lack of staffing impacts the ability of the facility to deliver services and impacts the quality of the services that are delivered.

a) have an adequate number of personnel sufficient to		Section 206: Staffing Requirement and
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;		Ratios  We noted there is an excessive number of staff callouts, staff no-shows, and staff otherwise not reporting for work per shift.
		We noted an excessive number of staff who have resigned or left their positions with difficulty backfilling either due to the County hiring freeze or the inability to recruit and retain an adequate candidate sampling to meet the demand.
		Staff who come to work report they are held over regularly and forced to work back-to-back shifts, sometimes, up to or beyond 24 hours.
		We noted the physical plant of the facility, and the unit functions require more staffing than are being assigned or are available to safely operate the units and the facility, to ensure that full operations can be accomplished and to ensure both the officer's and youth's safety. On paper, it appears there is enough staff, but when these staff are not counted in the overall calculation as they are assigned to a one-on-one youth, school security or to a modified program assignment and have no supervision expectation, these numbers are not true reflections of child supervision. Those staff left in the unit may not be meeting the ratio or operating at the required ratio or in a safe manner for the physical plant or for the safe operation of the facility.  Interviews with both youth and staff noted that both are concerned for their ongoing
		safety. There have been multiple incidents where both youth and staff have been assaulted. Required functions of the facility are routinely canceled due to staffing shortages such as outdoor exercise or activity, programming, etc.to name a few. School has also been impacted. Back up staff are assigned and often pulled leaving units short. Regular staff who were interviewed noted they are tired but don't want to leave their peers or the kids alone, so they continue to report. The toll is obvious.
		Deployed field staff have been utilized to fill staffing vacancies on an ordered status however, as there are so many, there is no consistency with the deployed staff to identify or assign them to regular units so a

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
				relationship could be formed with the youth or that the unit program could be learned for repetition purposes. There are often 1 or 2 regular staff in a building with the rest being all deployed staff. Deployed staff are now only being deployed Monday - Friday. Overall, we found that all functions of the facility have been impacted by the lack of staffing.  We have offered technical assistance in this area however, without adequate resources, the facility continues to staff the unit and the facility in the same manner, continuing to operate in the same manner which creates an unsafe environment for both the staff and the youth.  This section is non-compliant.
b) ensure that no required services shall be denied because of insufficient numbers of staff on duty absent exigent circumstances;		X		Section 206: Staffing Requirement and Ratios  This has been a consistent concern over the course of the cycle despite the agency's efforts to utilize deployed field staff, mandatory holdovers, and overtime, including overtime with additional stipend pay to fill the gaps in the staffing profiles for all shifts.  There are documented instances of activities/ services that have been delayed, postponed, or canceled due to the lack of adequate staffing or insufficient staffing.  There have been occasions where youth have been held in their rooms for long periods of time or were unable to be brought out due to an inadequate and unsafe number of staff reporting for work.

	TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
c)	have a sufficient number of supervisory level staff to ensure adequate supervision of all staff members;				Section 206: Staffing Requirement and Ratios  The facility was, at the time of inspection, short of supervisors, but has since received some positions. There are now an adequate number of supervisors to adequately supervise staff and youth. Technical assistance has been provided to the facility management to utilize supervisors as needed and appropriate when staffing is low and on the line as needed. We also suggest that supervisors be required to remain in their units for a specific percentage of their shift per day to ensure they are there to support their staff and their youth.
d)	have a clearly identified person on duty at all times who is responsible for operations and activities and has completed the Juvenile Corrections Officer Core Course and PC 832 training;	×			Section 206: Staffing Requirement and Ratios  The OD is responsible for the operations of the facility. Facility staff is responsible for the unit activities of the youth. There is also a duty Director either onsite or on-call but on duty and the facility superintendent maintains overall responsibility for the facility.
e)	have at least one staff member present on each living unit whenever there are youth in the living unit;	×			Section 206: Staffing Requirement and Ratios  There is always a staff present where youth are present. TA provided that we did note that sometimes staff goes to the office and there is no staff in the dayroom or in the hallway when youth are present or in their rooms. This is addressed under Title 24.
f)	have sufficient food service personnel relative to the number and security of living units, including staff qualified and available to: plan menus meeting nutritional requirements of youth; provide kitchen supervision; direct food preparation and servings; conduct related training programs for culinary staff; and maintain necessary records; or, a facility may serve food that meets nutritional standards prepared by an outside source;	×			Section 206: Staffing Requirement and Ratios  Cooks do not supervise youth. All meals are prepared by contract and are warmed onsite and transported to each unit on a heated cart. Youth eat in the dayroom of their units.
g)	have sufficient administrative, clerical, recreational, medical, dental, mental health, building maintenance, transportation, control room, facility security and other support for the efficient management of the facility, and to ensure that youth supervision staff shall not be diverted from supervising youth; and,	X			Section 206: Staffing Requirement and Ratios  The facility employs staff for these individual functions so as not to take away youth supervision.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
h) assign sufficient youth supervision staff to provide continuous wide-awake supervision of youth, subject to temporary variations in staff assignments to meet special program needs. Staffing shall be in compliance with a minimum youth-staff ratio for the following facility types:	×			Section 206: Staffing Requirement and Ratios  Staff is assigned 24 hours a day through 3 shifts: AM Shift: 6:00 AM- 2:00 PM, PM Shift: 2:00 PM to 10:00 PM, and 10:00 PM to 6:00 AM. Staff are required to always remain awake.
<ul> <li>(1) Juvenile Halls (minimum youth-staff ratio)</li> <li>(A) during the hours that youth are awake, one wide-awake youth supervision staff member on duty for each 10 youth in detention:</li> </ul>	×			Section 206: Staffing Requirement and Ratios The ratio has been met.
(B) during the hours that youth are confined to their room for the purpose of sleeping, one wide-awake youth supervision staff member on duty for each 30 youth in detention;	×			Section 206: Staffing Requirement and Ratios The ratio has been met.
(C) at least two wide-awake youth supervision staff members on duty at all times, regardless of the number of youth in detention, unless an arrangement has been made for backup support services which allow for immediate response to emergencies; and,	×			Section 206: Staffing Requirement and Ratios  Staff are always wide awake; they are not to be asleep.
(D) at least one youth supervision staff member on duty who is the same gender as youth housed in the facility.	×			Section 206: Staffing Requirement and Ratios  There are always male and female staff on duty.
(E) personnel with primary responsibility for other duties such as administration, supervision of personnel, academic or trade instruction, clerical, kitchen or maintenance shall not be classified as youth supervision staff positions.	×			Section 206: Staffing Requirement and Ratios  Only youth supervision staff provide supervision of the youth.
(2) Special Purpose Juvenile Halls (minimum youth-staff ratio)  (A) during hours that youth are awake, one wide-awake youth supervision staff member is on duty for each 10 youth in detention:			⊠	The facility is not a Special Purpose Juvenile Hall. The following are all marked as NA.
(B) during the hours that youth are confined to their room for the purpose of sleeping, one wide-awake youth supervision staff member on duty for each 30 youth in detention:			$\boxtimes$	
(C) at least two wide-awake youth supervision staff members on duty at all times, regardless of the number of youth in detention, unless an arrangement has been made for backup support services which allow for immediate response to emergencies; and,			×	
(D) at least one youth supervision staff member on duty who is the same gender as youth housed in the facility.			×	

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(E) personnel with primary responsibility for other duties such as administration, supervision of personnel, academic or trade instruction, clerical, kitchen or maintenance shall not be classified as youth supervision staff positions.			×	
1322 YOUTH SUPERVISION STAFF ORIENTATION AND TRAINING (a) Prior to assuming any responsibilities each youth				Section 205: Youth Supervision Staff Orientation and Training
supervision staff member shall be properly oriented to their duties, including:				Each new staff upon reporting to the facility is assigned to a training officer who assists the new officer in their orientation and training.
	⊠			A New Youth Supervision Handbook is provided as part of the officer's signoffs.
				The last 5 officers' training documents were provided for review. All were signed off appropriately.
				Proof of practice for training was also provided for camp staff who were reassigned back to the facility.
(1) youth supervision duties;	$\boxtimes$			Section 205: Youth Supervision Staff Orientation and Training
(2) scope of decisions they shall make;	X			Section 205: Youth Supervision Staff Orientation and Training
(3) the identity of their supervisor;	×			Section 205: Youth Supervision Staff Orientation and Training
(4) the identity of persons who are responsible to them;	×			Section 205: Youth Supervision Staff Orientation and Training
(5) persons to contact for decisions that are beyond their responsibility; and	$\boxtimes$			Section 205: Youth Supervision Staff Orientation and Training
(6) ethical responsibilities.	×			Section 205: Youth Supervision Staff Orientation and Training
(b) Prior to assuming any responsibility for the supervision of youth, each youth supervision staff member shall receive a minimum of 40 hours of facility-specific orientation, including:	X			Section 205: Youth Supervision Staff Orientation and Training
(1) individual and group supervision techniques;	×			Section 205: Youth Supervision Staff Orientation Section and Training
<ul> <li>(2) regulations and policies relating to discipline and rights of youth pursuant to law and the provisions of this chapter;</li> </ul>	X			Section 205: Youth Supervision Staff Orientation and Training
(3) basic health, sanitation and safety measures;	×			Section 205: Youth Supervision Staff Orientation and Training
(4) suicide prevention and response to suicide attempts	×			Section 205: Youth Supervision Staff Orientation and Training
<ul><li>(5) policies regarding use of force, de-escalation techniques, chemical agents, mechanical and physical restraints;</li></ul>	×			Section 205: Youth Supervision Staff Orientation and Training
<ul><li>(6) review of policies and procedures referencing trauma and trauma-informed approaches;</li></ul>	×			Section 205: Youth Supervision Staff Orientation and Training

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(7) procedures to follow in the event of emergencies;				Section 205: Youth Supervision Staff Orientation and Training  All staff training documents noted emergency procedures were addressed and signed off, however; as part of the facility training program, the Juvenile Hall Building Emergency Plan (BEP) is provided for officer review and sign-off. The current Emergency Plan which acts as the facility Fire Suppression Pre Plan had not been signed off by the Fire Department. Efforts had been made by the agency to work with the local fire agency to get this document signed. As of the date of inspection, the document had not yet been approved by the fire department.  In February 2023, phone conversations were held between this inspector and Fire Inspector Whelan found extenuating circumstances for the document not being signed despite Probation's efforts.  On February 9, 2023, a phone call was received from Fire Inspector Whelan. The Fire Suppression Pre Plan has been completed and the Building Emergency Plan was signed by the facility manager. Technical assistance was provided and discussed to address consistency between CJH and BJNJH.  This area has been corrected.
(8) routine security measures, including facility perimeter and grounds;	×			Section 205: Youth Supervision Staff Orientation and Training
(9) crisis intervention and mental health referrals to mental health services;				Section 205: Youth Supervision Staff Orientation Section and Training
(10) documentation; and	×			Section 205: Youth Supervision Staff Orientation and Training
(11) fire/life safety training	⊠			Section 205: Youth Supervision Staff Orientation and Training  All staff training documents for this section noted fire/life safety training were addressed and signed off although the BEP had not yet been signed (See above).  As of February 9, 2023, the Fire Suppression Pre Plan has been approved.  This section has been corrected.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(c) Prior to assuming sole supervision of youth, each youth supervision staff member shall successfully complete the requirements of the Juvenile Corrections Officer Core Course pursuant to Penal Code Section 6035.	×			Section 205: Youth Supervision Staff Orientation and Training  All LA County Institutional Staff complete CORE before reporting to an institution.
(d) Prior to exercising the powers of a peace officer youth supervision staff shall successfully complete training pursuant to Section 830 et seq. of the Penal Code.	×			Section 205: Youth Supervision Staff Orientation and Training  All LA County Institutional Staff complete 832 before reporting to an institution.
1323 FIRE AND LIFE SAFETY  Whenever there is a youth in a juvenile facility, there shall be at least one wide awake person on duty at all times who meets the training standards established by the Board for general fire and life safety which relate specifically to the facility.	×			Section 206: Staffing Requirement and Ratios  All staff is required to always remain awake. Staff have been trained in Fire and Life Safety in CORE prior to reporting to their individual assignment.
All facility administrators shall develop, publish, and implement a manual of written policies and procedures that address, at a minimum, all regulations that are applicable to the facility. Such a manual shall be made available to all employees, reviewed by all employees, and shall be administratively reviewed at a minimum every two years, and updated, as necessary. Those records relating to the standards and requirements set forth in these regulations shall be accessible to the Board on request.  The manual shall include:	×			Policy Last reviewed: March 2022 Policy Last Updated: March 2022 The policy manual is provided to all staff on PROBNET for review. Staff are notified of the new policy sections to review by email. Room Confinement Memo: April 15, 2022 Directive 1477: Detention and Residential Treatment Services Bureaus Manual-Physical Intervention Policy (Section DSB-1000/RTSB-1700) Issued 06/22/2022. This policy was implemented but not trained. This is addressed under Section 1357.
(a) table of organization, including channels of communications and a description of job classifications;	×			Section 201: Administrative Structure and Chain of Command Section 202: Administrative Structure and Responsibilities Section 208: Duty Statement – Supervising Section Detention Services Officer Section 209: Duty Statement – Senior Detention Services Officer Section 210: Duty Statement: Detention Services Officer Section 210: Duty Statement: Detention Services Officer Section 211: Group Supervisor Nights Section 212: Organizational Chart
(b) responsibility of the probation department, purpose of programs, relationship to the juvenile court, the Juvenile Justice/Delinquency Prevention Commission or Probation Committee, probation staff, school personnel and other agencies that are involved in juvenile facility programs;	×			Section 103: Role of the Juvenile Halls Section 1801: Ancillary Programs

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(c) responsibilities of all employees;	X			Section 202: Administrative Structure and Responsibilities Section 208: Duty Statement – Supervising Detention Services Officer Section 209: Duty Statement – Senior Detention Services Officer Section 210: Duty Statement: Detention Services Officer Section 211: Group Supervisor Nights Section 212: Organizational Chart
(d) initial orientation and training program for employees;	X			Section 205: Youth Supervision Staff Orientation and Training See Section 1322 for Sworn Staff
(e) initial orientation, including safety and security issues and anti-discrimination policies, for support staff, contract employees, school, mental/behavioral health and medical staff, program providers and volunteers;	$\boxtimes$			Section 2400: Non-Sworn Personnel and Partner Agencies Handbook  All non-sworn facility staff is required to review and sign the "Non-Sworn Personnel and Partner Agencies Orientation Handbook". This booklet consists of 13 pages of information including, safety and security, anti-discrimination policies, expected conduct, confidentiality expectations, emergency procedures, and the referral/response process for medical requests, mental health referrals, and handling grievances. Signatures are kept current and are maintained in the Office of the Superintendent. These documents were provided for our review.  As part of the orientation, the facility Building Emergency Plan (BEP) is also reviewed as part of the agency's practice. Non-sworn partner staff completed the required orientation without the required Building Emergency Plan due to the agency's difficulty obtaining a signature from the Fire Department as required and as noted in previous sections.  The BEP has now been signed off by the
(f) maintenance of record-keeping, statistics and communication system to ensure:	X			facility manager and has been reissued to all facility staff.  Section 1900: Reports and Records (Group to include): 1902: Probation Case Management System (PCMS) Section 1903: Daily Reports Section 1904: Behavior Record Section 1905: Charting Section 1909: Detention Observation Report Form

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(1) efficient operation of the juvenile facility;	$\boxtimes$			Section 1900: Reports and Records (Group to include all the above)
(2) legal and proper care of youth;	×			Section 1900: Reports and Records (Group to include all the above)
(3) maintenance of individual youth's records;	$\boxtimes$			Section 1900: Reports and Records (Group to include all the above)
(4) supply of information to the juvenile court and those authorized by the court or by the law; and,	×			Section 1900: Reports and Records (Group to include all the above)
(5) release of information regarding youth.	×			Section 1900: Reports and Records (Group to include all the above)
(g) ethical responsibilities;	$\boxtimes$			Section 2349: Employee Honesty
(h) trauma-informed approaches;	$\boxtimes$			Section 207: General Staff Responsibilities
(i) culturally responsive approaches;	$\boxtimes$			Section 207: General Staff Responsibilities
(j) gender responsive approaches;	$\boxtimes$			Section 632: Promoting Dignity for Female Youth
(k) a non-discrimination provision that provides that all youth within the facility shall have fair and equal access to all available services, placement, care, treatment, and benefits, and provides that no person shall be subject to discrimination or harassment on the basis of actual or perceived race, ethnic group identification, ancestry, national origin, immigration status, color, religion, gender, sexual orientation, gender identity, gender expression, mental or physical disability, or HIV status, including restrictive housing or classification decisions based solely on any of the above mentioned categories;	⊠			Section 402: Non-Discrimination
(I) storage and maintenance requirements for any chemical agents related security devices, and weapons and ammunition, where applicable;	X			Directive 1477 Section 1006: OC Spray; Section D. OC Spray Issuance and Accountability Security of OC Spray Canisters: Maintenance of Canisters:
(m) establishment of procedures for collection of Medi- Cal eligibility information and enrollment of eligible youth; and,	×			Section 1716: Medi-Cal Administrative Activities
(n) establishment of a policy that prohibits all forms of sexual abuse, sexual assault and sexual harassment. The policy shall include an approach to preventing, detecting and responding to such conduct and any retaliation for reporting such conduct, as well as a provision for reporting such conduct by youth, staff or a third party.	$\boxtimes$			Section 1500: Prison Rape Elimination Act (PREA)
1325 FIRE SAFETY PLAN  The facility administrator shall consult with the local fire department having jurisdiction over the facility, or with the State Fire Marshal, in developing a plan for fire safety which shall include, but not be limited to:	⊠			
<ul> <li>a) a fire prevention plan to be included as part of the manual of policy and procedures;</li> </ul>	$\boxtimes$			Section 911: Fire Prevention and Suppression

	TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
b)	monthly fire and life safety inspections by facility staff with two- year retention of the inspection record;	×			Section 911: Fire Prevention and Suppression  Provided proof of inspections required for July 1-December 31, 2020, 2021, and 2022. Noted that in some cases, it appears that some comments were duplicates from months prior. Technical assistance was provided to MSB Supervisor for review.
c)	fire prevention inspections as required by Health and Safety Code Section 13146.1(a) and (b);			⊠	Section 912: Fire Safety  Noncompliance is captured above in Section 1313. The agency does not have a current fire clearance and will remain noncompliant until clearance is obtained.
d)	an evacuation plan;	×			Section 920: Emergency Evacuation and County of Los Angeles Building Emergency Plan of County Buildings  Each unit has an assigned evacuation location on the facility grounds where they are to evacuate if necessary. We noted that evacuation maps were posted in the units as we walked the units.
e)	documented fire drills not less than quarterly;				Section 911: Fire Prevention and Suppression  Fire Drills for 2021 and 2022 have been completed as required by regulation. The facility building emergency plan requires drills to be completed on each shift. This did not occur in all cases in all quarterly drills.  The facility coordinator is addressing the lack of a consistent recording document to ensure that all entities (partners) and shifts are included in all drills. This will be rereviewed in the new year to confirm compliance.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
f) a written plan for the emergency housing of youth in the case of fire; and,		X		Section 921: Operation FLEE and County of Los Angeles Building Emergency Plan of County Buildings  If the facility were to evacuate, they would normally evacuate to Central Juvenile Hall. The facility has the rated capacity available to hold the youth but, due to the myriad of construction projects, may not have the available space necessary. Technical assistance was provided to develop a plan as soon as possible for emergency planning for a full evacuation. At this time until a plan is fully developed, the facility is noncompliant in this area.
g) development of a fire suppression pre-plan In cooperation with the local fire department.				Section 911: Fire Prevention and Suppression
	×			At inspection, there was no fire suppression pre-plan provided for this section. The agency made attempts to resolve the issue and provided evidence of proof beginning in September 2022. Extenuating circumstances existed.
				On February 9, 2023, a phone call was received from Fire Inspector Whelan who completed the sign-off. This issue has been corrected.
1326 SECURITY REVIEW				Section 516: Security Procedures
Each facility administrator shall develop policies and procedures to annually review, evaluate, and document security of the facility. The review and evaluation shall include internal and external security, including, but not limited to, key control, equipment, and staff training.	×			Security reviews were completed for 2021 and 2022.  Security review was completed for 2021 on May 13, 2021. The review was completed but did not have all the required elements. All management and responsible persons are no longer present or responsible for the facility operations.  The security review was completed for 2022
				on June 27, 2022. The review contained all required elements as the format and documentation was revised by the new administration and contained all areas required by regulation.
1327 EMERGENCY PROCEDURES				Section 900: Emergency Procedures
The facility administrator shall develop facility-specific policies and procedures for emergencies that shall include, but not be limited to:	×			
(a) escape, disturbances, and the taking of hostages;	×			Section 906: Escapes (Code Green) Section 908: Major Disturbances (Code Red) Section 916: Hostages

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TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(b) civil disturbance, active shooter and terrorist attack;	×			Section 907: Outside Intruder (Code Yellow) Section 917: Active Shooter Section 918: Terrorist Attack Section 919: Civil Disturbance
(c) fire and natural disasters;	X			Section 911: Fire Prevention and Suppression Section 913: Power Failure Section 915: Earthquakes
(d) periodic testing of emergency equipment;	$\boxtimes$			Section 910: Testing of Emergency Equipment
(e) emergency evacuation of the facility; and	$\boxtimes$			Section 920: Emergency Evacuation
(f) a program to provide all youth supervision staff with an annual review of emergency procedures.				Section 920: Emergency Evacuation Annual Emergency Procedure Reviews were completed for 2020 and 2021.  The review was not completed in 2022 as the Building Emergency Plan was incomplete and pending fire department approval. Facility administrative staff had been actively working on this issue with the Fire Department and provided documentation of their efforts.  The Fire Agency approved the Fire Suppression Pre Plan on February 9, 2023, and are working on the BEP.  Facility administrative staff are actively working to have all staff review emergency procedures but have not yet completed all sign offs.

1328 SAFETY CHECKS		Section 209: Duty Statement-Senior
The facility administrator shall develop and implement		Detention Services Officer
policy and procedures that provide for direct visual		Section 210: Duty Statement-Detention
observation of youth at a minimum of every 15 minutes,		Services Officer
at random or varied intervals during hours when youth are asleep or when youth are in their rooms, confined in		Section 211: Group Supervisor Nights
holding cells or confined to their bed in a dormitory.		Section 630: Safety Checks
Supervision is not replaced, but may be supplemented		·
by, an audio/visual electronic surveillance system designed to detect overt, aggressive or assaultive behavior and to summon aid in emergencies. All safety checks shall be documented with the actual time the check is completed.		We requested and reviewed random blocks of dates and times of safety checks for Barry J. Nidorf Juvenile Hall. We selected 1 random day: all shifts for camera review for those units with cameras.
		In our review of paper logs for all units, we found most of the checks to comply with regulatory requirements as they are documented within the 15-minute allowance with only very few lates overall. We noted improvement in the random and variedness of the checks from the last cycle; however, there still needs to be improvement made as most of the checks were in the upper range of the timeline. We provided technical assistance regarding a randomization silent timer that may help in correcting this issue.
		While reviewing checks in units with cameras, we found some checks are not being documented on paper logs according to regulations and policy. The video review did not corroborate the written documentation. We found instances of checks being documented on the paper logs when in fact they had not been done. This occurred on all shifts. Some were noted to be staff documenting 6:00 AM, 2:00 PM, and 10:00 PM in the same manner as has been the past practice of "signing in" and some have been documented as completed but not done. We have viewed staff sitting in the office, personal belongings in hand, waiting to be relieved rather than conducting safety checks. Others were noted to be as a result of the check sheets not being posted as required and ready for the next shift. When the next shift comes in, they do not complete the check, but catch up on the log when putting up the sheets. Some were noted to be completed but not logged at the time of completion, but had they been, they would have been compliant. Lastly, there are those that were logged and not completed. This information was brought to the attention of the institution administrators for follow-up.
		The facility is noncompliant in this section.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
				In December 2022, the facility began to prepare for the implementation of an electronic safety check tracking tool. The tool tracks each check electronically and reports this information in real-time to supervisory staff. The Pilot and training began with full implementation planned for the coming weeks. It is the intent that this system will solve the problem of safety checks in the facility. TA has been provided to ensure a strong process of QA and review of downloads.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
The facility administrator, in collaboration with the healthcare and behavioral/mental health administrators, shall plan and implement written policies and procedures which delineate a Suicide Prevention Plan.  The plan shall consider the needs of youth experiencing past or current trauma.  Suicide prevention responses shall be respectful and in the least invasive manner consistent with the level of suicide risk.  The plan shall include the following elements:				Section 1601: Suicide Prevention - Introduction  We spoke to Rae Tinnagon, Acting Program Manager, LMFT with DMH, who noted a good relationship between Probation and Department of Mental Health Staff. There are currently 36 staff, 18 clinical staff, 4 supervisors, 8 psych techs, 6 clericals, and 2 clinical psychologists. Staff provides services between 7:30 AM-7:00 PM, 7 days a week. After hours, there is always a doctor on call to address any issue that may arise.  Youth are coming in with a great deal of trauma and abuse, and many have spent a lot of time on and in the streets. Many have undiagnosed mental health issues, and others are diagnosed but are not regularly taking their medications.  Each youth is assigned a clinician unless they decline. The youth is offered therapy based on their individual case plans. They may have group therapy, family phone therapy and/or psychiatric services, and medication management.  Probation, mental health, and medical work together in MDTs and case conferences and collateral work to meet the needs of the youth to ensure the safety of the youth. If a youth is placed on a level by a DMH staff, the youth must be cleared by a DMH staff.  14 individual document packets were provided for review from the time period requested. These packets included various items of documentation dependent on the circumstances including Incident Reports, Mental Health Recording Forms, Enhanced Supervision Observation Forms, Alert Logs, and Safety Check Logs. It was noted that the process of protecting the youth in crisis is intensive and comprehensive.  The youth we spoke to spoke highly of their therapists.  All individual regulatory requirements have been met.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(a) Suicide prevention training as required in Section 1322, Youth Supervision Staff Orientation, and Training and the Juvenile Corrections Officer Core Course.	⊠			Section 1604: Training  All staff are trained in suicide prevention training at CORE and upon arrival to their facility for facility-specific training. Additionally, staff receives a 4-hour refresher training during block week.
(b) Screening, Identification Assessment and Precautionary Protocols (1) All youth shall be screened for risk of suicide at intake and as needed during detention.	X			Section 1606: Identification and Referral of At-Risk Youth Section 1608: Intervention to Prevent Self-Harming or Suicidal Behavior  30 Intake admission documents were provided and reviewed. All included a mental health screening at intake by probation.  Every youth coming into the facility is screened for risk of suicide by probation, by medical, and by mental health staff. Youth's current emotional status is also considered throughout their intake.
(2) All youth supervision staff who perform intake processes shall be trained in screening youth for risk of suicide.	X			Section 1604: Training  All youth supervision staff are trained in screening processes for the risk of suicide. This is a part of the initial and ongoing training that staff receives at CORE, upon arrival to the facility, and during refresher training at block week.
(3) All youth who have been identified during the intake screening process to be at risk of suicide shall be referred to behavioral/mental health staff for a suicide risk assessment.	⊠			Section 1606: Identification and Referral of At-Risk Youth  Youth are also screened by medical during their admission process and again no later than 72 hours by mental health who conduct the full MAYSI on each youth. Youth are triaged based on risk level.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(4) Precautionary protocols shall be developed to ensure the youth's safety pending the behavioral/mental health assessment.				Section 1606: Identification and Referral of At-Risk Youth  Any youth who is found to be at risk is placed on a Level II or a Level III and supervised accordingly. These levels can be either a probation level or a mental health-initiated level. If a youth is placed on a mental health level, he or she must be removed by mental health staff.  We noted that for any youth who is on a level III, blankets and sheets are routinely suggested for removal despite the youth having no history of self-harm involving the use of blankets, sheets, or any other items of clothing etc. We also noted in inconsistent use of this recommendation in some cases as some mental health staff make the recommendation and some do not, sometimes within the same day or day to
				Youth on Level 3 are on a constant visual. We noted that Probation does not execute the recommendation as, while they have suicide gowns, they did not have suicide blankets. Technical assistance was provided and discussed these items as a necessity. Follow-up information noted facility managers have ordered and now have suicide blankets for use for youth who need them. We reached out to the DMH Director who will clarify the policy with her staff to ensure consistency. We also noted that in some cases, youth are recommended to not have eating utensils. This same issue exists with consistency and follow-through. Facility administrators are looking into this recommendation as well as this does not appear to be a concern or a recommendation at the other juvenile facility.
(c) Referral process to behavioral/mental health staff for assessment and/or services.	×			Section 1607: Interagency Communication Regarding Self-Harming Youth  Officers submit mental health referrals to DMH for services. Issues are triaged for care.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(d) Procedures for monitoring of youth identified at risk for suicide.	×			Section 1405: Level 2 Enhanced Supervision Requirements Section 1406: Level 3 Enhanced Supervision Requirements  Youth are placed on levels dependent on their level of risk. Procedures are specific to the level.
(e) Safety Interventions  (1) Procedures to address intervention protocols for youth identified at risk for suicide which may include, but are not limited to:	×			Section 1601: Suicide Prevention- Introduction Section 1608: Intervention to Prevent Self- Harming or Suicidal Behavior
A. Housing consideration				Section 1403: Procedure Section 1601: Suicide Prevention- Introduction  Youth are housed in their regular housing unit on level or in a HOPE Center, if necessary, or as a SSP.
B. Treatment strategies including trauma-informed approaches	×			Section 1600: Suicide Prevention Section 1608: Intervention to Prevent Self-Harming or Suicidal Behavior  Mental Health staff determine how often the youth are seen based on need.
(2) Procedures to instruct youth supervision staff how to respond to youth who exhibit suicidal behaviors.	⊠			Section 1601: Introduction Section 1608: Intervention to Prevent Self-Harming or Suicidal Behavior Section 1403: Procedure  Mental Health provides unit staff with instruction through verbal and written communication in the form of the Mental Health Recording Form. This form provides all information for staff, including the recommendations to keep youth safe.
(f) Communication  (1) The intake process shall include communication with the arresting officer and family guardians regarding the youth's past or present suicidal ideations, behaviors or attempts.	×			Section 1607: Interagency Communication Regarding Self-Harming Youth  The documentation reviewed was compliant.
(2) Procedures for clear and current information sharing about youth at risk for suicide with youth supervision, healthcare, and behavioral/mental health staff.	×			Section 1607: Interagency Communication Regarding Self-Harming Youth  Any issues that arise as a result of communication with arresting officers or staff are shared with mental health staff.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(g) Debriefing of Critical Incidents Related to Suicides or Attempts     (1) Process for administrative review of the circumstances and responses proceeding, during and after the critical incident.	×			Section 1913: Critical Incident Review Process  Critical incident reviews are conducted as required and appropriate.
(2) Process for a debriefing event with affected staff.	×			Section 1913: Critical Incident Review Process
(3) Process for a debriefing event with affected youth.	×			Section 1913: Critical Incident Review Process
(h) Documentation         (1) Documentation processes shall be developed to ensure compliance with this regulation	×			Section 1912: Preliminary and Follow Up Incident Notification Procedures 1913: Critical Incident Review (CIR) Process
Youth identified at risk for suicide shall not be denied the opportunity to participate in facility programs, services and activities which are available to other non-suicidal youth, unless deemed necessary for the safety of the youth or security of the facility. Any deprivation of programs, services or activities for youth at risk of suicide shall be documented and approved by the facility manager.	⊠			Section 1606: Identification and Referral of At-Risk Youth  We did not note any situations where youth on Level 3 were denied programming other youth were taking part in. Youth choose what they participate in.
1340 REPORTING OF LEGAL ACTIONS  Each facility shall submit to the Board a letter of notification on each legal action, pertaining to conditions of confinement, filed against persons or legal entities responsible for juvenile facility operation.	×			Section 202: Administrative Structure and Responsibilities  Request made to Executive Management.
1341 DEATH AND SERIOUS ILLNESS OR INJURY OF A YOUTH WHILE DETAINED  (1) Death of a Youth. (a) The facility administrator, In cooperation with the health administrator and the behavioral/mental health director, shall develop written policies and procedures in the event of the death of a youth while detained, which include notifications to necessary parties, which may include the Juvenile Court, the parent, guardian or person standing in loco parentis and the youth's attorney of record.	×			Section 2001: Special Situations Introduction Section 2002: Deaths  There have been no deaths in the facility. Sections b, c, and d are marked as yes, for compliance with the policy.
(b) The health administrator, In cooperation with the facility administrator, shall develop written policies and procedures to assure there is a medical and operational review of every in-custody death of a youth. The review team shall include the facility administrator and/or facility manager, the health administrator, the responsible physician and other health care and supervision staff who are relevant to the incident.	×			Section 2002: Deaths

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(c) The administrator of the facility shall provide to the Board a copy of the report submitted to the Attorney General under Government Code Section 12525. A copy of the report shall be submitted to the Board within 10 calendar days after the death.				Section 2002: Deaths
(d) Upon receipt of a report of the death of a youth from the administrator, the Board may within 30 calendar days inspect and evaluate the juvenile facility, jail, lockup or court holding facility pursuant to the provisions of this subchapter. Any inquiry made by the Board shall be limited to the standards and requirements set forth in these regulations.	X			Section 2002: Deaths
(2) Serious Illness or Injury of Youth  (a) The facility administrator, In cooperation with the health administrator, shall develop written policies and procedures for the notification to necessary parties, which may include the Juvenile Court, the parent, guardian or person standing in loco parentis and the youth's attorney of record in the case of a serious illness or injury of a youth.	$\boxtimes$			Section 922: Serious Illness or Injury of a Youth While Detained  Section 1912: Preliminary and Follow Incident Notification Procedures  Section 1900: Parent/Guardian/Caregiver Notification and Court/Attorney Notification  Section 1909: Detention Observation Report Form  8 incidents reviewed. Notifications were provided as required. Serious incidents are defined in policy but are in no means an exhaustive list.
1342 POPULATION ACCOUNTING  Each juvenile facility shall submit required population and profile survey reports to the Board within 10 working days after the end of each reporting period, in a format to be provided by the Board.	X			Section 202: Administrative Structure and Responsibilities.  All population reports have been provided as required.
1343 JUVENILE FACILITY CAPACITY  When the number of youth detained in a living unit of a juvenile facility exceeds its rated capacity for more than fifteen (15) calendar days in a month, the facility administrator shall provide a crowding report to the Board in a format provided by the Board.	$\boxtimes$			Section 202: Administrative Structure and Responsibilities.  The facility has not exceeded its rated capacity this cycle.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
The facility administrator shall develop and implement written policies and procedures for admittance of youth that emphasize respectful and humane engagement with youth and reflect that the admission process may be traumatic to youth who may have already experienced trauma. Policies shall be trauma-informed, culturally relevant, and responsive to the language and literacy needs of youth. In addition to the requirements of Sections 1324 and 1430 of these regulations:				Section 403: Procedures for Newly Admitted Youth  31 individual admission JH packets were provided and reviewed for the timeline requested. All individual regulatory requirements have been met.  4 individual packets for SYTF packets were provided and reviewed for the same timeline. These packets included additional information regarding the rules and expectations of Units R, S, and Campus Kilpatrick. All other rules etc. apply for Barry J. Nidorf (BJN).  There have been no changes that require an additional admission process. Technical assistance provided and discussed to ensure procedures are in place for the SYTF program that are consistent with RTSB procedures.
<ul> <li>(a) the admittance process shall include:</li> <li>(1) Access to two free phone calls within one hour of admittance in accordance with the provisions of Welfare and Institution Code Section 627;</li> </ul>	X			Section 403: Procedures for Newly Admitted Youth  Youth received their phone calls upon entry as required. These calls are documented. Youth interviewed confirmed receiving phone calls upon entry.
(2) Offer of a shower;	×			Section 403: Procedures for Newly Admitted Youth  Showers are documented on admission documents. Youth interviewed confirmed being offered a shower upon entry.
(3) Documented secure storage of personal belongings;	X			Section 403: Procedures for Newly Admitted Youth  The property is inventoried and stored securely. Random property receipts were viewed and were found to be complete.
(4) Offer of food upon arrival;	×			Section 403: Procedures for Newly Admitted Youth  Youth interviewed confirmed being offered something to eat upon entry.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(5) Screening for physical and behavioral health and safety issues, intellectual or developmental disabilities;	×			Section 403: Procedures for Newly Admitted Youth Section 404: Special Needs screening Procedures Section 405: Accommodation Procedures for Heating Impaired Youth Section 414: Identification, Referral, Collaborative Care, Habilitative Treatment, Management and Discharge of Youths with or Suspected of Having a Developmental Disability Admitted to Juvenile Hall  Screenings are completed by Probation staff, by medical staff, and by mental health staff. All are documented in the youth's files.
(6) Screening for physical and developmental disabilities in accordance with Sections 1329, 1418, and 1430 of these regulations;				Section 403: Procedures for Newly Admitted Youth Section 404: Special Needs screening Procedures Section 405: Accommodation Procedures for Heating Impaired Youth Section 414: Identification, Referral, Collaborative Care, Habilitative Treatment, Management and Discharge of Youths with or Suspected of Having a Developmental Disability Admitted to Juvenile Hall  Screenings are completed by Probation staff, by medical staff, and by mental health staff. All are documented in the youth's files.
(7) Contact with Regional Center for the Developmentally Disabled for youth that are suspected of or identified as having a developmental disability, pursuant to Section 1418; and,				Section 414: Identification, Referral, Collaborative Care, Habilitative Treatment, Management and Discharge of Youths with or Suspected of Having a Developmental Disability Admitted to Juvenile Hall  In addition to the regulatory requirements, as noted, the agency will identify those youth who require a higher level of care in specialized units at Central Juvenile Hall. If a youth is a confirmed Regional Center client, contact is made with the case manager, and he is transferred as soon as possible to Central Juvenile Hall.
(8) Procedures consistent with Section 1352.5.	⊠			Section 403: Procedures for Newly Admitted Youth Section 631: Supervision of Lesbian, Gay, Bisexual, Transgender, Questioning and Intersex (LGBTQI) Youth Intake  At the time of inspection, there were no transgender youth in custody to interview.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(b) juvenile hall administrators shall establish written criteria for detention that considers the least restrictive environment.	×			Section 407: Los Angeles County Detention Screening (LADS) Assessment Tool  The facility uses both the Krisberg Scale and the Los Angeles County Screening Tool (LADS) to ensure only youth who require detention remain detained.
(c) juvenile camps and post-dispositional programs in juvenile halls shall develop policies and procedures that advise the youth of the estimated length of stay, inform them of program guidelines and provide written screening criteria for inclusion and exclusion from the program.	⊠			Section 421: Estimated Length of Stay  4 SYTF Admission packets were reviewed and included program estimated length of time documentation. Youth are also provided with written screening criteria that explain the rules and expectations for inclusion for RS and CVK.
(d) juvenile halls shall develop policies and procedures that advise any committed youth of the estimated length of his/her stay.			×	BJN does not house any other committed youth that requires an estimated length of stay notification.
ABUSE The facility administrator shall develop and implement written policies and procedures to reduce the risk of sexual abuse by or upon youth. The policy shall require facility staff to assess each youth within 72 hours of admission based on the following information:	X			Section 1509: Screening for Risk of Sexual Victimization and Abusiveness.  Admission packets were reviewed for those youth who remained detained and were screened for risk of sexual abuse. 31 screenings were provided and reviewed to ensure compliance with regulatory expectations. All screenings were completed as required. All individual regulatory requirements have been met.
(a) Prior sexual victimization or abusiveness;	×			Section 1509: Screening for Risk of Sexual Victimization and Abusiveness.
(b) Gender nonconforming appearance or manner; or identification as lesbian, gay or bisexual, transgender, queer or intersex, and whether the youth may, therefore, be vulnerable to sexual abuse;	×			Section 1509: Screening for Risk of Sexual Victimization and Abusiveness.
(c) Current charges and offense history;	×			Section 1509: Screening for Risk of Sexual Victimization and Abusiveness.
(d) Age;	×			Section 1509: Screening for Risk of Sexual Victimization and Abusiveness.
(e) Level of emotional and cognitive development;	×			Section 1509: Screening for Risk of Sexual Victimization and Abusiveness.
(f) Physical size and stature;	×			Section 1509: Screening for Risk of Sexual Victimization and Abusiveness.
(g) Mental illness or mental disabilities;	×			Section 1509: Screening for Risk of Sexual Victimization and Abusiveness.
(h) Intellectual or developmental disabilities;	×			Section 1509: Screening for Risk of Sexual Victimization and Abusiveness.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(i) Physical disabilities;	×			Section 1509: Screening for Risk of Sexual Victimization and Abusiveness.
(j) The youth's perception of vulnerability; and,	×			Section 1509: Screening for Risk of Sexual Victimization and Abusiveness.
(k) Any other specific information about the individual youth that may indicate heightened needs for supervision, additional safety precautions, or separation from certain other youth.	×			Section 1509: Screening for Risk of Sexual Victimization and Abusiveness.
Staff shall ascertain this information through conversations with the youth during the admittance process, medical and behavioral health screenings; during classification assessments; and by reviewing court records, case files, facility behavioral records, and other relevant documentation from the youth's files.	⊠			Section 1509: Screening for Risk of Sexual Victimization and Abusiveness.  Documentation noted information gathered based on various sources. TA provided to ensure to document thoroughly all areas reviewed and to include conversations with the youth and any other person.
The facility administrator shall implement appropriate controls on the dissemination of information within the facility relative to responses received pursuant to this assessment in order to ensure that sensitive information is not exploited to the youth's detriment by staff or other youth.	⊠			Section 1509: Screening for Risk of Sexual Victimization and Abusiveness.  Documentation of the screening occurs in PEMERS. The staff has access to the overall score but not to specific answers. Only those staff authorized to PEMERS have access to the sensitive information.
1351 RELEASE PROCEDURES				Section 309: Release Procedures
The facility administrator shall develop and implement written policies and procedures for release of youth from custody which provide for:	$\boxtimes$			10 release documents were reviewed for regulatory compliance.
(a) verification of identity/release papers;				Section 309: Release Procedures
	×			The documentation reviewed noted parents were notified and signed the release documents for their youth.
(b) return of personal clothing and valuables;				Youth and parents sign for the youth's property.  Property room staff only work till 6 PM Monday-Friday and are off on weekends. Management has indicated that with advance notice, arrangements can be made to pick up any property after hours.  Technical assistance was provided suggesting parents should not have to come back another day to pick up the youth's property if property room staff are not present. Suggested an additional process be implemented to address this in which probation staff can sign off on the property.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(c) notification to the youth's parents or guardian;	×			Section 309: Release Procedures  The Probation Officer generally will notify the parent of a pending release. Parents are also notified by the facility staff or by the court (judge) when the youth is at court and being released from court.
(d) notification to the facility health care provider in accordance with Sections 1408 and 1437 of these regulations, for coordination with outside agencies; and,	×			Section 309: Release Procedures  The nursing staff is listed as a notification on the release form. Medical discharge documents were found in all packets.
(e) notification of school staff;	×			Section 309: Release Procedures  School staff was not found to be listed in the notification documentation provided but it is clear to this inspector that LACOE is aware of the released youth. The youth had their grades prepared and sent to the school of origin and proof of practice was provided for review. For youth who spent long periods in detention, full transcripts were provided. While not technically a formal notification, notification was made as documentation of the release documents has been provided.  Technical assistance is provided to implement a formal notification that is trackable for proof of notification purposes and proof of practice.  Upon receiving this information, facility coordinators immediately made this change and implemented this procedure.
(f) notification of facility mental health personnel.	X			Section 309: Release Procedures  Mental health staff were not found to be listed in the notification documentation provided but it is clear to this inspector that mental health staff are aware of the release due to documentation provided of mental health discharge documents that were provided along with the release of information documents for review.  Technical assistance was provided to implement a formal notification that is trackable for notification purposes and proof of practice.  Upon receiving this information, facility coordinators immediately made this change and implemented this procedure.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
The facility administrator shall develop and implement policies and procedures for post-disposition youth to coordinate the provision of transitional and reentry services including, but not limited to, medical and behavioral health, education, probation supervision and community-based services.	×			Section 309: Release Procedures  The facility is in the beginning stages of this process.  Post release plans were provided for review. SYTF youth receive the SYTF/TRI-Academy Release, Family Reunification and Community Reintegration Instructions upon release.
The facility administrator shall develop and implement written policies and procedures for the furlough of youth from custody.	×			Section 310: Youth Furloughs
1352 CLASSIFICATION  The facility administrator shall develop and implement written policies and procedures on classification of youth for the purpose of determining housing placement in the facility.	⊠			Section 412: Classification and Assignment of Youth
Such procedures shall:  (a) provide for the safety of the youth, other youth, facility staff, and the public by placing youth in the appropriate, least restrictive housing and program settings. Housing assignments shall consider the need for single, double or dormitory assignment or location within the dormitory;	×			Section 412: Classification and Assignment of Youth  All rooms in Barry J. Nidorf are utilized as single cell rooms. This cycle, the space including the rooms behind the offices in the compound units began to be utilized for youth who needed separation and are utilized as a 3 <sup>rd</sup> unit with all same staffing, programming, and activities.  Each youth is to be classified upon entry and be periodically reclassified as needed.
(b) consider facility populations and physical design of the facility;	×			Section 412: Classification and Assignment of Youth
(c) provide that a youth shall be classified upon admittance to the facility; classification factors shall include, but not be limited to: age, maturity, sophistication, emotional stability, program needs, legal status, public safety considerations, medical/mental health considerations, gender and gender identity of the youth;	×			Section 412: Classification and Assignment of Youth  Upon entry and after the admission process is complete, youth are classified to the Medical Observation Unit due to the COVID testing protocols. Once their test is clear (negative), they are reclassified to their actual appropriate living unit and moved for housing.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(d) provide for periodic classification reviews, including provisions that consider the level of supervision and the youth's behavior while in custody; and,	X			Section 412: Classification and Assignment of Youth  Periodic classifications are completed during the periodic review of the case plan. Staff are trained to ask weekly during the periodic review if the youth is experiencing any problems or concerns and to update the classification as appropriate. They are also trained to update any classification changes if it has not already been done. All documents reviewed were found to be compliant.
(e) provide that facility staff shall not separate youth from the general population or assign youth to a single occupancy room based solely on the youth's actual or perceived race, ethnic group identification, ancestry, national origin, color, religion, gender, sexual orientation, gender identity, gender expression, mental or physical disability, or HIV status. This section does not prohibit staff from placing youth in a single occupancy room at the youth's specific request or in accordance with Title 15 regulations regarding separation.	×			Section 412: Classification and Assignment of Youth
(f) facility staff shall not consider lesbian, gay, bisexual, transgender, questioning or intersex identification or status as an indicator of likelihood of being sexually abusive.	×			Section 412: Classification and Assignment of Youth
1352.5 TRANSGENDER AND INTERSEX YOUTH.  The facility administrator shall develop written policies and procedures ensuring respectful and equitable treatment of transgender and intersex youth. The policies shall provide that:	X			Section 631: Supervision of Lesbian, Gay, Bisexual, Transgender, Questioning and Intersex (LGBTQI) Youth  All individual regulatory requirements were met.  There were no grievances noted regarding the treatment of transgender youth.  At the time of inspection, there was no transgender youth in detention. Prior to inspection and while onsite previously (and during the cycle), this inspector had the opportunity to interview a youth to ensure that all policies were being adhered to with respect to regulatory requirements. She indicated, at that time, that they were. She has since been released.
(a) Facility staff shall respect every youth's gender identity and shall refer to the youth by the youth's preferred name and gender pronoun, regardless of the youth's legal name. Facilities may prohibit the use of gang or slang names or names that otherwise compromise facility operations as determined by the facility manager or designee and shall document any decision made on this basis.	×			Section 631: Supervision of Lesbian, Gay, Bisexual, Transgender, Questioning and Intersex (LGBTQI) Youth

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(b) Facility staff shall permit youth to dress and present themselves in a manner consistent with their gender identity and shall provide youth with the institution's clothing and undergarments consistent with their gender identity.	×			Section 631: Supervision of Lesbian, Gay, Bisexual, Transgender, Questioning and Intersex (LGBTQI) Youth
(c) Facility staff shall house youth in the unit or room that best meets their individual needs and promotes their safety and well-being. Staff may not automatically house youth according to their external anatomy and shall document the reasons for any decision to house youth in a unit that does not match their gender identity. In making a housing decision, staff shall consider the youth's preferences, as well as any recommendations from the youth's health or behavioral health provider.	X			Section 631: Supervision of Lesbian, Gay, Bisexual, Transgender, Questioning and Intersex (LGBTQI) Youth
(d) Facility administrators shall ensure that transgender and intersex youth have access to medical and behavioral health providers qualified to provide care and treatment to transgender and intersex youth.	$\boxtimes$			Section 631: Supervision of Lesbian, Gay, Bisexual, Transgender, Questioning and Intersex (LGBTQI) Youth
(e) Consistent with the facility's reasonable and necessary security considerations and physical plant, facility staff shall make every effort to ensure the safety and privacy of transgender and intersex youth when the youth are using the bathroom or shower or dressing or undressing.	×			Section 631: Supervision of Lesbian, Gay, Bisexual, Transgender, Questioning and Intersex (LGBTQI) Youth
Facility staff shall not conduct physical searches of any youth for the purpose of determining the youth's anatomical sex. Whenever feasible, the facility shall respect the youth's preference regarding the gender of the staff member who conducts any search of the youth.				Section 631: Supervision of Lesbian, Gay, Bisexual, Transgender, Questioning and Intersex (LGBTQI) Youth
				Youth are asked at admission for their preference of the gender of the staff member to conduct their searches. Admission documentation noted this information was asked of all youth at admission.  Youth are not searched to determine anatomical sex.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
The facility administrator shall develop and implement written policies and procedures to orient a youth prior to placement in a living area. Both written and verbal information shall be provided and supplemented with video orientation if feasible. Provision shall be made to provide accessible orientation information to all detained youth including those with disabilities, limited literacy, or English language learners. Orientation shall include information that addresses:				Section 416: Orientation Process for Detained Youth  31 admission document packets were provided and reviewed. Youth are provided with a primary, initial orientation upon entry and a secondary, more thorough orientation as part of the actual admission/facility full orientation process once in either MOU or Units L/M. There is no current video used.  All individual regulatory requirements have been met.  The youth interviewed stated they were orientated upon entry with the items identified in this section. They further stated they had a secondary, more in-depth interview in which they were further orientated after they were in a regular living unit. There are several bilingual staff who are able to conduct orientation and the agency has access to a language interpreter service if necessary.
(a) facility rules including contraband and searches and disciplinary procedures;	×			Section 416: Orientation Process for Detained Youth
(b) facility's system of positive behavior interventions and supports, including behavior expectations, incentives that youth will receive for complying with facility rules, and consequences that may result when youth violate the rules of the facility;	×			Section 416: Orientation Process for Detained Youth
(c) age appropriate information that explains the facility's policy prohibiting sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment;	×			Section 416: Orientation Process for Detained Youth
(d) identification of key staff and their roles;	×			Section 416: Orientation Process for Detained Youth
(e) the existence of the grievance procedure, the steps that must be taken to use it, the youth's right to be free of retaliation for reporting a grievance, and the name of the person or position designated to resolve the issue;	×			Section 416: Orientation Process for Detained Youth
(f) access to legal services and information on the court process;	×			Section 416: Orientation Process for Detained Youth
(g) access to routine and emergency health and mental health care;	×			Section 416: Orientation Process for Detained Youth
(h) access to education, religious services, and recreational activities;	X			Section 416: Orientation Process for Detained Youth

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(i) housing assignments;	×			Section 416: Orientation Process for Detained Youth
(j) opportunity for personal hygiene and daily showers including the availability of personal care items	×			Section 416: Orientation Process for Detained Youth
(k) rules and access to correspondence, visits and telephone use;	×			Section 416: Orientation Process for Detained Youth
(I) availability of reading materials, programming, and other activities;	×			Section 416: Orientation Process for Detained Youth
(m) facility policies on the use of force, use of restraints, chemical agents and room confinement;	×			Section 416: Orientation Process for Detained Youth
(n) immigration legal services;	×			Section 416: Orientation Process for Detained Youth
(o) emergencies including evacuation procedures;	×			Section 416: Orientation Process for Detained Youth
(p) non-discrimination policy and the right to be free from physical, verbal or sexual abuse and harassment by other youth and staff;	×			Section 416: Orientation Process for Detained Youth
(q) availability of services and programs in a language other than English if appropriate;	×			Section 416: Orientation Process for Detained Youth
(r) the process for requesting different housing, education, programming and work assignments;	×			Section 416: Orientation Process for Detained Youth
(s) a process for which parents/guardians receive information regarding the youth's stay in the facility that at a minimum includes answers to frequently asked questions and provides contact information for the facility, medical, school and mental health; and,	×			Section 416: Orientation Process for Detained Youth  There is a parent handbook that is specific to DSB and also one for RTSB.
(t) a process by which youth may request access to Title 15 Minimum Standards for Juvenile Facilities.	×			Section 416: Orientation Process for Detained Youth
1354 SEPARATION  The facility administrator shall develop and implement written policies and procedures that address:	×			

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(a) separation of youth for reasons that include, but are not be limited to, medical and mental health conditions, assaultive behavior, disciplinary consequences and protective custody.				Section 1301: Separation Room Confinement Memo: April 15, 2022  The types of separation that occur in the facility are as follows:  Room Confinement Cool Down Specialized Supervision Plan (SSP) Self-Separation
				Documentation received from August, September, and October 2022 for Separation. 8 Youth were placed on Specialized Supervision Plans (SSP) during this time due to their charges as they were either pending SYTF dispositions or fitness hearings. These youth were placed on protective custody status by either the courts or by Probation to ensure their safety which in turn placed them on a SSP. 2 other youth were placed on SSP for assaultive behavior. All youth resided in the HOPE Center. All documentation of their full program was consistent with their separation, appropriate and compliant.  Youth may elect to self-separate from the group. When this occurs, the youth signs off his separation on the safety hall check sheet and may spend time in his room. It was noted that in some cases, subsequent occurrences were not always signed off by the youth. Policy Addendum Memo dated June 8, 2022 stated youth are to sign off on the safety check sheet their request for Self-Separation.  We found some inconsistencies and
				brought this to the attention of managers for correction. Technical assistance provided for Self-Separation and to ensure compliance moving forward, we will review through targeted inspection to ensure this issue has been addressed and does not drift into non-compliance.
				In April 2022, the Bureau changed policy noting that Room Confinement no longer was required to occur in the HOPE Center and could occur in the youth's living unit with proper notification and documentation. (See Room Confinement)
(b) consideration of positive youth development and trauma-informed care.	×			Section 1301: Separation

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(c) separated youth shall not be denied normal privileges available at the facility, except when necessary to accomplish the objective of separation.	×			Section 1301: Separation
(d) when the objective of the separation is discipline, Title 15 Section 1390 shall apply.	×			Section 1301: Separation
(e) when separation results in room confinement, the separation shall occur in accordance with Welfare and Institutions Code Section 208.3 and Section1354.5 of these regulations.	×			Section 1301: Separation
(f) policies and procedures shall ensure a daily review of separated youth to determine if separation remains necessary.	×			Section 1301: Separation

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1354.5 ROOM CONFINEMENT				Section 1303: Room Confinement Section 608: Transition Periods
(a) The facility administrator shall develop and				Room Confinement Memo: April 15, 2022
implement written policies and procedures				Treem commented were. April 10, 2022
addressing the confinement of youth in their room				We requested and reviewed room
that are consistent with Welfare and Institutions				confinement documentation for incidents
Code Section 208.3. The placement of a youth in				that occurred from September 22-30, 2022,
room confinement shall be accomplished in				and October 10-17, 2022.
accordance with the following guidelines:				For these dates and times, we were provided with 7 incident packets for the September dates and 11 incident packets for the October dates. All room confinement occurred in the youth's housing unit. (In April 2022, a Detention Services Bureau memo was initiated authorizing room confinements to be conducted in the living unit and not in the HOPE Center).  Most documentation was completed except for the mental health behavior chain analysis which notes the youths' emotions and feelings at the time of incident. It was noted a behavior health referral was made but that documentation was not completed,
				although it was available.  Youth were generally seen the same day or the next by a mental health counselor.
				Technical assistance has been provided and will continue to be provided to enhance documentation but overall, the facility did well with the documentation they provided.
				It was noted through the review of other inspection documentation however, that in some units, youth were in their rooms for periods beyond what is allowable for transitions i.e. shift change, were placed in rooms for early bed contrary to policy directives, and some were found to be in their room after incidents confirmed through either regular safety checks or were noted through self-separation checks. Some self-separation incidents were not thoroughly and consistently documented by the youth as required by policy. These practices seem to occur sporadically throughout the documentation viewed and do not appear to be widespread throughout the full facility. Technical assistance has
				been provided in that supervisory staff should be in the facility, throughout the PM and weekend shifts, providing a heavy presence and inquiring about the status of youth who are in their rooms.
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TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
				Several of the youth interviewed confirmed the above actions, but noted that although incidents still occur, they reported the facilities continue to do better than from what has occurred in the past. Youth stated any long-term room confinement is the result of lack of staff.
				We noted, through video review and while onsite, many oncoming staff to be routinely late to their posts resulting in the on-duty unit staff not being relieved timely. Youth are kept in their rooms while staff wait to be relieved, until staff are called in or they make it to the unit.
				Prior to inspection, we also expressed concern to both administration and to the medical team regarding the practice of "hybrid units" for housing of COVID positive and COVID negative youth together as this practice would result in room confinement for those youth who were not COVID positive and would be without a Medical Order for Isolation. Medical guidance has since been updated and this issue has been addressed and corrected.
				Lastly, the agency transition policy requires that incident reports must include times in which youth were secured and brought out to resume programming and we found this not to occur as a consistent practice.
(1) Room confinement shall not be used before other, less restrictive, options have been attempted and exhausted, unless attempting those options poses a threat to the safety or security of any youth or staff.	X			Section 1303: Room Confinement
(2) Room confinement shall not be used for the purposes of punishment, coercion, convenience, or retaliation by staff.	$\boxtimes$			Section 1303: Room Confinement
(3) Room confinement shall not be used to the extent that it compromises the mental and physical health of the youth.	X			Section 1303: Room Confinement
(b) A youth may be held up to four hours in room confinement. After the youth has been held in room confinement for a period of four hours, staff shall do one or more of the following:	×			Section 1303: Room Confinement  While regulation allows for youth to be held for 4 hours, agency policy requires immediate action.
				Per documentation provided, received, and reviewed, no youth were held in their room longer than 4 hours. Most were released at the first assessment.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(1) Return the youth to general population.				Section 1303: Room Confinement
	×			Youth are required to be reassessed every 2 hours for return to the general population. If youth can safety be returned, they are.
(2) Consult with mental health or medical staff.				Section 1303: Room Confinement
	⊠			Per bureau policy, youth placed in room confinement are to be referred to mental health for a behavior chain analysis within 30 minutes. If a clinician is not available, it is to be completed when time permits. This did not occur for any of the incidents, but we noted that BCA samples were attached in all packets. Behavior health referrals were submitted for all youth as well. This issue was addressed with behavioral health also. This issue will be reviewed going forward.
(3) Develop an individualized plan that includes the goals and objectives to be met in order to	×			Section 1303: Room Confinement
reintegrate the youth to general population.				Section 1303: Room Confinement
(4) If room confinement must be extended beyond four hours, staff shall do each of the following:				No incidents reviewed were beyond 4 hours.
iodi fiodio, cian crian de caer er tre feneming.				The policy requires the same actions, i.e. reassessment every two hours as well as regulatory requirements to be completed.
(A) Document the reasons for room confinement and the basis for the extension, the date and time the youth was first placed in room confinement, and when he or she is eventually released from room confinement.	×			Section 1303: Room Confinement
(B) Develop an individualized plan that includes the goals and objectives to be met in order to integrate the youth to general population.	×			Section 1303: Room Confinement
(C) Obtain documented authorization by the facility superintendent or his or her designee every four hours thereafter.	×			Section 1303: Room Confinement
(5) This section is not intended to limit the use of single-person rooms or cells for the housing of youth in juvenile facilities and does not apply to normal sleeping hours.	×			Section 1303: Room Confinement
(6) This section does not apply to youth or wards in court holding facilities or adult facilities.	×			Section 1303: Room Confinement
(7) Nothing in this section shall be construed to conflict with any law providing greater or additional protections to youth.	×			Section 1303: Room Confinement

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(8) This section does not apply during an extraordinary emergency circumstance that requires a significant departure from normal institutional operations, including a natural disaster or facility-wide threat that poses an imminent and substantial risk of harm to multiple staff or youth. This exception shall apply for the shortest amount of time needed to address this imminent and substantial risk of harm.				Section 1303: Room Confinement
(9) This section does not apply when a youth is placed in a locked cell or sleeping room to treat and protect against the spread of a communicable disease for the shortest amount of time required to reduce the risk of infection, with the written approval of a licensed physician or nurse practitioner, when the youth is not required to be in an infirmary for an illness. Additionally, this section does not apply when a youth is placed in a locked cell or sleeping room for required extended care after medical treatment with the written approval of a licensed physician or nurse practitioner, when the youth is not required to be in an infirmary for illness.				Section 1303: Room Confinement
1355 INSTITUTIONAL ASSESSMENT AND PLAN  The facility administrator shall develop and implement written policies and procedures for assessment and case planning.				Documentation for both detention youth and for the Secure Youth Treatment youth Facility's Institutional Assessment and Plan were provided for our review.
(a) Assessment:  The assessment is based on information collected during the admission process with periodic review, which includes the youth's risk factors, needs and strengths including, but not limited to, identification of substance abuse history, educational, vocational, counseling, behavioral health, consideration of known history of trauma, and family strengths and needs.	X			Section 413: Institutional Assessment, Case Plan and Periodic Review  For detention youth, an assessment was completed for each youth as part of the facility entry admission procedure. 29 assessments were provided for our review.  Each completed as required by regulation and by policy.  SYTF youth complete an MDT meeting upon arrival into the program. This process is the basis for the youth's programs.
(b) Institutional Case Plan:  (1) A case plan shall be developed for each youth held for at least 30 days or more and created within 40 days of admission.				Section 413: Institutional Assessment, Case Plan and Periodic Review  The case plan is generally completed within about the first week to 10 days for the juvenile hall youth. Case plans are documented quicker for the SYTF youth as their cases are tied to court deadlines, per staff.
(2) The institutional plan shall include, but not be limited to, written documentation that provides:	X			

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
<ul><li>(A) objectives and time frame for the resolution of problems identified in the assessment;</li></ul>	×			Section 413: Institutional Assessment, Case Plan and Periodic Review  Objectives are tied to the regulatory requirements and timelines are noted by various means i.e., weekly, monthly, or delike
(B) a plan for meeting the objectives that includes a description of program resources needed and individuals responsible for assuring that the plan is implemented;	⊠			daily.  Section 413: Institutional Assessment, Case Plan and Periodic Review  Staff share responsibility to work with youth to ensure good outcomes. There are menu options and free fill sections for staff to complete the document.
(3) periodic evaluation of progress towards meeting the objectives, including periodic review and discussion of the plan with the youth;	×			Section 413: Institutional Assessment, Case Plan and Periodic Review  Documentation reviewed noted face-to-face meetings with the youth and staff were documenting the youth's progress. Periodic reviews were found to be compliant.
(4) a transition plan, the contents of which shall be subject to existing resources, shall be developed for post dispositional youth in accordance with Section 1351; and,	×			Section 413: Institutional Assessment, Case Plan and Periodic Review  SYTF youth receive "Transition Instructions". These instructions include all regulatory requirements. They provide the youth with directions as to what to do upon release, where to report, where to go for counseling, resources in the community, contacts for Probation, mentors, etc.  This document, as well as the youth's court order, are reviewed with the youth and his/her parent prior to their release.
(5) in as much as possible and if appropriate, the plan, including the transition plan, shall be developed with input from the family, supportive adults, youth, and Regional Center for the Developmentally Disabled.	⊠			Section 413: Institutional Assessment, Case Plan and Periodic Review  The parent or other supportive adults as appropriate are involved in the youth's case and the youth's MDT process.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
The facility administrator shall develop and implement written policies and procedures ensuring the availability of appropriate counseling and casework services for all youth. Policies and procedures shall ensure:	X			Section 207: General Staff responsibilities  Basic expectations of staff duties are as noted. With limited staff resources, it is difficult to go beyond limited expectations. Proof of practice included documentation of case planning, professional phone call documentation. and other documentation. Staff meet basic, limited expectations and minimal regulation compliance but, with proper staffing, should be doing so much more.  Youth interviewed stated that staff assist them in making contact with social workers,
(a) youth will receive assistance with needs or concerns that may arise;	×			attorneys, and PO's.  Section 207: General Staff responsibilities
(b) youth will receive assistance in requesting contact with parents, other supportive adults, attorney, clergy, probation officer, or other public official; and,	×			Section 207: General Staff responsibilities
(c) youth will be provided access to available resources to meet the youth's needs.	×			Section 207: General Staff responsibilities
The facility administrator, In cooperation with the responsible physician, shall develop and implement written policies and procedures for the use of force, which may include chemical agents. Force shall never be applied as punishment, discipline, retaliation or treatment.  (a) At a minimum, each facility shall develop policies and procedures which:		×		Directive 1477: Detention and Residential Treatment Services Bureaus Manual-Physical Intervention Policy (Section DSB-1000/RTSB-1700) Issued 06/22/2022.  At inspection, it was noted the policy had been released and was implemented in June 2022 but staff were not formally trained. We have since been informed the staff have been trained on the policy.  The agency remains unable to meet certain areas of regulatory requirements and we found areas in which the agency failed to meet their own policy despite technical assistance being provided by both BSCC and DOJ in how to address the issues.
(1) restricts the use of force to that which is deemed reasonable and necessary, as defined in Section 1302 to ensure the safety and security of youth, staff, others and the facility.	×			Section 1003: Objectively Reasonable Determination

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(2) outline the force options available to staff including both physical and non-physical options and define when those force options are appropriate.				Section 1004: Prevention and De- Escalation and Section 1005: Physical Interventions  De-escalation Options per policy include: Request for Compliance with Instructions Discussion/Counseling Mental Health Assistance Switching Officer (Tapping Out) Secluding the Situation/Youth Request Supervisor assistance Behavior Chart Consultation Other officer/volunteers Temporary Halt to Program Activity Separation of Youth Resource Teams  Force Options per policy include: Physical Control Holds. Take-downs. Restraint Devices. Oleoresin Capsicum (OC) Spray.

	expressly prohibited by the facility.		Inappropriate/Prohibited Uses of Force an Conduct  The following are prohibited by the facility policy:  "Carotid," "arm-bar," chokehold, of any other deliberate chokehold restraint utilized to or having the impact of restricting the airway of blood flow.  Applying pressure to and/off torquing of the head and neck.  Deliberate strikes or kicks to the head, torso, or other body part (except in situations of selefense).  Deliberately or recklessly striking youth's head, limbs, torso, or other body parts against a hard, fixed object (e.g., roadway, driveward floor, wall, etc.).  "Hog-tying" procedure wherein restraints are applied to both the hands and feet, which are the drawn together and secure behind the back.  Any form of excessive physical intervention, deliberate physical intervention, deliberate physical intervention, descipline, or treatmented as coercion, punishmenter retaliation, discipline, or treatmenter and the decontaminate and youth exposed to OC spray when the incident controlled.  Leaving youth in an enclose structure where OC spray has been used, and the location has not been decontaminated.  Use of OC spray on youth in an enclose structure where OC spray has been used, and the location has not been decontaminated.  Use of OC spray on youth in an enclose structure where OC spray has been used, and the location has not been decontaminated.  Use of OC spray on youth in an enclose structure where OC spray has been used, and the location has not been decontaminated.  Use of OC spray on youth in an enclose structure where OC spray has been used, and the location has not been decontaminated.  Use of OC spray on youth in an enclose structure where OC spray has been used, and the location has not been decontaminated.  Use of OC spray on youth in an enclose structure where OC spray has been used, and the location has not been decontaminated.  Use of OC spray on youth in an enclose structure where OC spray has been used, and the location has not been decontaminated.
(3)	describe force options or techniques that are expressly prohibited by the facility.		Conduct  The following are prohibited by the facil
			<ul> <li>policy:</li> <li>"Carotid," "arm-bar," chokehold, any other deliberate chokehol restraint utilized to or having the impact of restricting the airway oblood flow.</li> <li>Applying pressure to and/or torquing of the head and neck.</li> <li>Deliberate strikes or kicks to the head, torso, or other body part (except in situations of selefense).</li> <li>Deliberately or recklessly striking youth's head, limbs, torso, or other body parts against a hard, fixe object (e.g., roadway, drivewar floor, wall, etc.).</li> <li>"Hog-tying" procedure wherein restraints are applied to both the hands and feet, which are the drawn together and secure behind the back.</li> <li>Any form of excessive physical intervention, deliberate physical intervention, discipline, or treatmen retaliation, discipline, or treatmen as a coercion, punishmen retaliation, discipline, or treatmen and the force used maliciously sadistically, and/or for the purpos of causing harm.</li> <li>Failure to immediate decontaminate a youth exposed to OC spray when the incident controlled.</li> <li>Leaving youth in an enclose structure where OC spray has been used, and the location has not been decontaminated.</li> <li>Use of OC spray on youth mechanical or soft restraints.</li> <li>Officer actions leading to the use of force such as taunting, verbal insulting, or challenging a youth.</li> <li>The use of force as a response to a youth who is solely expressing suicidal ideations.</li> <li>The use of prone and suping restraints on pregnant youth.</li> <li>Officer actions that serve to encourage, instigate, or permyouth to engage in physical fight or assaults.</li> </ul>

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
				alert log to be aware of any youth with medical or mental health issues.
(4) describe the requirements of staff to report any inappropriate use of force, and to take affirmative action to immediately stop it.	$\boxtimes$			Section 1005(G): Physical Interventions- Inappropriate/Prohibited uses of Force and Conduct
(5) define a standardized reporting format that includes time period and procedure for documenting and reporting the use of force, including reporting requirements of management and line staff and procedures for reviewing and tracking use of force incidents by supervisory and or management staff, which include procedures for debriefing a particular incident with staff and/or youth for the purposes of training as well as mitigating the effects of trauma that may have been experienced by staff and /or the youth involved.				Section 1005(K): Physical Interventions: Mandatory Reporting Requirements  Section 1008: Post-Incident Physical Intervention-Post Incident Review Process-Debriefing for involved youth and Staff and Witnesses  Section 1009: Quality Assurance: Debrief (Debriefs for all incidents now)  Debriefs are required for all use-of-force incidents per the agency policy. Per regulation, the purpose of the debrief is for training as well as to mitigate the effects of trauma that may have been experienced by staff and/or the youth. It is a reflection period for addressing training issues or areas and to address any potential trauma that may have occurred by youth or staff.  While the debriefs are being completed, they are not completed with efficacy as intended. Training issues or training needs are not being addressed as the lack of staffing is the main concern of staff. While this does not make this section noncompliant, it is noted that the lack of adequate staffing impacts the ability of supervisors to have an effective debrief regarding incidents as they occur.
(6) Include an administrative review and a system for investigating unreasonable use of force.		X		Section 1009(A) Quality Assurance -Use of Force Administrative Review  Each UOF is to be reviewed at the facility level and again through the Force Intervention Response Support Team (FIRST). This is an independent review entity that reviews all Use of Force incidents.  This is not occurring. No documentation provided.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(7) define the role, notification, and follow-up procedures required after use of force incidents for medical, mental health staff and parents or legal guardians.	⊠			Section 1008(C): Post-Incident Physical Intervention-Medical Assessment of Youth  Section 1008(D): Post-Incident Physical Intervention-mental Health involvement and Assessment of Youth  Section 1010: Notifications: Parent/ Guardian/Caregiver Notification  Medical staff and parents were notified and a mental health referral was submitted for all youth.
(8) describe the limitations of use of force on pregnant youth in accordance with Penal Code Section 6030(f) and Welfare and Institutions Code Section 222.	X			Section 1003: Objectively Reasonable Determinations-Pregnant and Post-Partum Recovery Youth
(b) Facilities that authorize chemical agents as a force option shall include policies and procedures that:				
(1) identify who is approved to carry and/or utilize chemical agents in the facility and the type, size and the approved method of deployment for those chemical agents.	×			Section 1006(C): Oleoresin Capsicum (O.C.) Spray-OC Spray Interventions  Section 1006(D): Oleoresin Capsicum (O.C.) Spray-Issuance and Accountability
(2) mandate that chemical agents only be used when there is an imminent threat to the youth's safety or the safety of others and only when de- escalation efforts have been unsuccessful or are not reasonably possible.				Section 1006(A): OC Spray-Training
(3) outline the facility's approved methods and timelines for decontamination from chemical agents. This shall include that youth who have been exposed to chemical agents shall not be left unattended until that youth is fully decontaminated or is no longer suffering the effects of the chemical agent.	X			Section 1006(E): OC Spray
(4) define the role, notification, and follow-up procedures required after use of force incidents involving chemical agents for medical, mental health staff and parents or legal guardians.			X	Section 1006: OC Spray-Medical Assessment" and "Mental Health Consultation Request"  Section 1010 Notifications: Parent/ Guardian/Caregiver Notifications  See above. Notification is required for any use of force. Noted above.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(5) provide for the documentation of each incident of use of chemical agents, including the reasons for which it was used, efforts to deescalate prior to use, youth and staff involved, the date, time and location of use, decontamination procedures applied and identification of any injuries sustained as a result of such use.		×		Section 1006: OC Spray Section H. Mandatory Reporting Requirements  Decontamination documentation was lacking.  Reports document that youth are being decontaminated and provide information regarding the process, including the constant visual, but lack some required details required by policy.
(c) Facilities shall develop policies and procedure which require that agencies provide initial and regular training in use of force and chemical agents when appropriate that address:		×		Section 1002: Training Requirements  Staff are to receive initial training and annual refresher training. This has not occurred.
(1) known medical and behavioral health conditions that would contraindicate certain types of force;		×		Section 1002: Training Requirements  Regular training has not occurred.
(2) acceptable chemical agents and the methods of application.		×		Section 1006: OC Spray Section A. Training Regular training has not occurred.
(3) signs or symptoms that should result in immediate referral to medical or behavioral health.		×		Section 1002: Training Requirements  Regular training has not occurred.
(4) instruction on the Constitutional Limitations of Use of Force.		×		Section 1002: Training Requirements  Regular training has not occurred.
(5) physical training force options that may require the use of perishable skills.		×		Section 1002: Training Requirements  Regular training has not occurred.
(6) timelines the facility uses to define regular training.		×		Section 1002: Training Requirements  Regular training has not occurred.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
The facility administrator, In cooperation with the responsible physician and mental health director, shall develop and implement written policies and procedures for the use of restraint devices. Restraint devices include any devices which immobilize a youth's extremities and/or prevent the youth from being ambulatory.		$\boxtimes$		Directive 1477: Detention and Residential Treatment Services Bureaus Manual-Physical Intervention Policy (Section DSB-1000/RTSB-1700) Issued 06/22/2022.  Section 1001: Introduction — Physical Interventions Section 1007: Restraints  Section marked noncompliant due to no staff training and implementation of policy.  Agency policy now applies to the use of restraints for all purposes and no longer only for those that are mental health related or to control a youth who is destructive in nature. The use of restraints, for the purpose of this section, are a force option and are to be treated as such.  Policy defines hard mechanical restraints as handcuffs, leg irons, waist-chains, plastic flex-cuffs and soft mechanical restraints as padded leather wrist and ankle restraints and safety helmets. Technical assistance provided regarding ensuring the appropriate training is provided for all use of restraints.
Physical restraints may be used only for those youth who present an immediate danger to themselves or others, who exhibit behavior which results in the destruction of property, or reveals the intent to cause self-inflicted physical harm. Physical restraints should be utilized only when it appears less restrictive alternatives would be ineffective in controlling the youth's behavior.				At the time of inspection, documentation provided was only for 2 incidents in which the youth were having a mental health crisis and the restraint log was utilized. Both incidents were youth who were exhibiting self-harm behavior coupled with behavior issues resulting in use of force and use of restraints.  That documentation was consistent with previous policy requirements. The documentation meets current regulatory requirements. New policy requires additional information. This information was not included in reports received. (As staff were not yet trained) All use of restraints were not reviewed for this section under the new policy.
In no case shall restraints be used as punishment or discipline, or as a substitute for treatment. The use of restraint devices that attach a youth to a wall, floor or other fixture, including a restraint chair, or through affixing of hands and feet together behind the back (hogtying) is prohibited. The use of restraints on pregnant youth is limited in accordance with Penal Code Section 6030(f) and Welfare and Institutions Code Section 222.	×			Section 1007(C): Restraints

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
The provisions of this section do not apply to the use of handcuffs, shackles or other restraint devices when used to restrain youth for movement or transportation within the facility. Movement within the facility shall be governed by Section 1358.5, Use of Restraint Devices for Movement Within the Facility.			×	Section 1007: Restraints
Youth shall be placed in restraints only with the approval				Section 1007(D): Restraints
of the facility manager or designee. The facility manager may delegate authority to place a youth in restraints to a physician. Reasons for continued retention in restraints shall be reviewed and documented at a minimum of every hour.	⊠			Per the new policy, the application of physical restraints is authorized when a youth presents an immediate danger to themselves or others, exhibits behavior that results in the destruction of property, or reveals the intent to cause self-inflicted physical harm. Youth shall be placed in restraints only when all de-escalation techniques and less intrusive physical interventions have been exhausted.
				Per policy, the use of restraints for a mental health crises or destruction of property must be authorized by the facility manager or designee.
A medical opinion on the safety of placement and retention shall be secured as soon as possible, but no later than two hours from the time of placement. The youth shall be medically cleared for continued retention at least every three hours thereafter.	X			Section 1007(E): Restraints  Per the documentation reviewed, youth were seen by medical personnel immediately.
A mental health consultation shall be secured as soon as				Section 1007(F): Restraints
possible, but in no case longer than four hours from the time of placement, to assess the need for mental health treatment.				Per documentation reviewed, youth were seen by mental health personnel.
Continuous direct visual supervision shall be conducted to ensure that the restraints are properly employed, and to ensure the safety and well-being of the youth. Observations of the youth's behavior and any staff interventions shall be documented at least every 15 minutes, with actual time of the documentation recorded.	×			Section 1007(D): Restraints  All youth were under constant, direct visual observation. Each incident had a complete log filled out for each youth.
In addition to the requirements above, policies and procedures shall address:				
(a) documentation of the circumstances leading to an application of restraints.	×			Section 1007(D): Restraints Application of Physical Restraints
(b) known medical conditions that would contraindicate certain restraint devices and/or techniques.	×			Section 1007(D): Restraints Application of Physical Restraints
(c) acceptable restraint devices.	×			Section 1007(D): Restraints Application of Physical Restraints
(d) signs or symptoms which should result in immediate medical/mental health referral.	×			Section 1007(D): Restraints Application of Physical Restraints

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(e) availability of cardiopulmonary resuscitation equipment.	×			Section 1007(D): Restraints Application of Physical Restraints
(f) protective housing of restrained youth. While in restraint devices, all youth shall be housed alone or in a specified housing area for restrained youth which makes provision to protect the youth from abuse.	×			Section 1007(C): Restraints Application of Physical Restraints
(g) provision for hydration and sanitation needs.	×			Section 1007(D): Restraints Application of Physical Restraints
(h) exercising of extremities.	×			Section 1007(D): Restraints Application of Physical Restraints
1358.5 USE OF RESTRAINT DEVICES FOR MOVEMENT AND TRANSPORTATION WITHIN THE FACILITY.  The Facility Administrator, In cooperation with the responsible physician and behavioral/mental health director, shall develop and implement written policies and procedures for the use of restraint devices when the purpose is for movement or transportation within the facility that shall include the following:	⊠			Section 809: The Use of Mechanical Restraints for Movement and Transport Within the Facility  It was noted, through videos viewed, youth are not generally handcuffed during incidents, when moved to their room or to another location. Youth interviewed confirmed this observation.
(a) identification of acceptable restraint devices, staff approved to utilize restraint devices and the required training.	×			Section 809: The Use of Mechanical Restraints for Movement and Transport Within the Facility
(b) the circumstances leading to the application of restraints must be documented.	⊠			Section 809: The Use of Mechanical Restraints for Movement and Transport Within the Facility  The circumstances leading to the use of restraints in the incidents where restraints were used were documented. There were only a few. In most cases, restraints are not used.
(c) an individual assessment of the need to apply restraints for movement or transportation that includes consideration of less restrictive alternatives, consideration of a youth's known medical or mental health conditions, trauma informed approaches, and a process for documentation and supervisor review and approval.	×			Section 809: The Use of Mechanical Restraints for Movement and Transport Within the Facility  In the few incidents where restraints were used, an assessment occurred and was documented in the incident report.
(d) consideration of safety and security of the facility, with a clearly defined expectation that restraint devices shall not be used for the purposes of discipline or retaliation.	⊠			Section 809: The Use of Mechanical Restraints for Movement and Transport Within the Facility

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(e) the use of restraints on pregnant youth is limited in accordance with Penal Code Section6030(f) and Welfare and Institutions Code Section 222.	×			Section 809: The Use of Mechanical Restraints for Movement and Transport Within the Facility  There were no pregnant females involved in any of the incidents reviewed. There are currently no females housed at BJN.
(a) The facility administrator, and where applicable, In cooperation with the responsible physician, shall develop and implement written policies and procedures governing the use of safety rooms, as described in Title 24, Part 2, Section 1230.1.13. The room shall be used to hold only those youth who present an immediate danger to themselves or others, who exhibit behavior which results in the destruction of property, or reveals the intent to cause self-inflicted physical harm. A safety room shall not be used for punishment or discipline, or as a substitute for treatment. Policies and procedures shall:			×	The facility does not have a safety room. Text of regulation deleted.
1360 SEARCHES  The facility administrator shall develop and implement written policies and procedures governing the search of youth, the facility, and visitors. Policies and procedures shall provide that:	×			Section 700: Searches
(a) Searches shall be conducted to ensure the safety and security of the facility, public, visitors, youth, and staff.				Section 701: Introduction  All persons/visitors to the facility that enter the facility are screened through the security Kiosk X-ray.  Documentation was provided noting canine searches and searches conducted by facility staff, but the documentation did not contain the requirements set by agency policy. Agency policy requires daily room searches, daily common area searches, and two thorough, facility wide, including perimeter and school, contraband searches a week.  This section is noncompliant.
(b) Searches shall be conducted in a manner that preserves the privacy and dignity of the person being searched, and shall not be conducted for harassment or as a form of discipline or punishment.	×			

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(c) Strip searches and visual or physical body cavity searches shall comply with Penal Code Section 4030.	X			Policy Sections:  701: Introduction 709: Completing a Strip Search Authorization Form 711: Admissions Procedures - Strip Search and/or Visual Body Cavity Search  All strip searches have been completed in compliance with PC 4030. Technical assistance was provided regarding documentation to enhance compliance.
(d) Physical body cavity searches shall only be conducted by a medical professional.	×			Policy Sections:  702: Types of Searches and Definitions 711: Admissions Procedures - Strip Search and/or Visual Body Cavity Search There have been no physical body cavity searches.
(e) Any youth held after a detention hearing shall only be strip searched with prior approval of a supervisor when there is reasonable suspicion based on specific and articulable facts to believe that youth is concealing contraband. The reasonable suspicion shall be documented.	×			Section 703: Searches of Youth Housed in Juvenile Facilities - General Information  Documentation received and reviewed specific to strip searches. Documentation was completed as required, reasonable suspicion was documented, and prior supervisor approvals were obtained.
(f) Searches of transgender and intersex youth shall comply with Section 1352.5.	×			Section 706: Transgender Youth Searches  All youth are asked at intake which gender staff is preferred to conduct their searches.
(g) Cross-gender pat-down searches and strip searches are prohibited except in exigent circumstances or when conducted by a medical professional. Such searches must be justified and documented in writing.	⊠			Section 705: Cross Gender Searches  Cross gender pat down searches and strip searches are prohibited.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
The facility administrator shall develop and implement written policies and procedures whereby any youth may appeal and have resolved grievances relating to any condition of confinement, including but not limited to health care services, classification decisions, program participation, telephone, mail or visiting procedures, food, clothing, bedding, mistreatment, harassment or violations of the nondiscrimination policy. There shall be no time limit on filing grievances. Policies and procedures shall include provisions whereby the facility manager ensures:	YES		N/A	Policy Section 1715: Youth Grievance Procedures  The regulation requires the agency to develop policy and procedures whereby a youth may appeal and have resolved grievances relating to conditions of confinement. The purpose of this process is to provide an opportunity and a mechanism for youth to resolve issues at the lowest level.  The agency grievance form provides the opportunity for youth to document their grievance and what they want to happen. The hearing officers then, after meeting with the youth, either "grant" or "deny" the youth's grievance. This is followed by an appeals process should the youth wish to appeal the first-level officers' response.  We find that many times, the first-level officers address and focus their response on what the youth "wants to happen" as opposed to seeking a resolution for the
				grieved issue. The form itself and format of the grievance must be changed to address this issue. This has been discussed and scheduled for review several times but never fully processed or implemented.  In discussing this issue once again, we have been notified the Bureau is in the final stages of implementation of a new grievance process- GMS (The process will not include the language of granted and denied). We are very excited to check in in a few months to see how the new process is working to improve the grievance process.  151 grievances were provided and randomly reviewed from August 2022-October 2022.
(a) a grievance form and instructions for registering a grievance, which includes provisions for the youth to have free access to the form;	×			Policy Section 1715: Youth Grievance Procedures  Grievance forms were found to be available to youth in all units. Youth interviewed were asked if they always had access and they stated they did. A few stated that if they run out, they just ask staff, and they are refilled.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(b) the youth shall have the option to confidentially file the grievance or to deliver the form to any youth supervision staff working in the facility;	⊠			Policy Section 1715: Youth Grievance Procedures  Each unit has a locked box for confidential grievances. We noted that most youth place their grievances in the locked box for pick up. Youth are also aware they can file confidential grievances through the JIGS system.
(c) resolution of the grievance at the lowest appropriate staff level;				Policy Section 1715: Youth Grievance Procedures  When interviewed, youth were specifically asked if they have written grievances, all youth stated they can provide their grievance to any staff at any level.  When asked what they personally do with their grievance, all but one stated they put the grievance in the box for pick up. Youth know the process, that it is picked up by the grievance officer, usually on the next shift or the next day depending on time, logged in, and the grievance goes through the process which includes the grievance officer coming to talk to them and then, if needed, a supervisor coming to resolve their issue. All stated they like that process. When asked if they were writing a grievance on a specific staff if they could give the grievance to that staff for a response, they stated they could, but most would prefer to place it in the box.  Youth are also aware they can file a grievance in the JIGS - electronic system.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(d) provision for a prompt review and initial response to grievances within three (3) business days, grievances that relate to health and safety issues must be addressed immediately;				Policy Section 1715: Youth Grievance Procedures  Many grievances were found to be out of date on the grievance itself; however, when reviewing all of the documentation associated with the grievance i.e. all the emails etc., it was noted that work on the grievance had occurred and communication had occurred with the youth but was not documented on the grievance document form, it was documented in the emails, documentation and other information attached. This was addressed with the supervisory staff who immediately addressed the issue. Additional documentation was reviewed at the end of December 2022. One staff has needed additional guidance and direction. The compliance unit Director has addressed this issue.  Many of these grievances were those that needed resolution outside of Probation either through a work order, through a partner agency, etc. Most health and safety grievances were addressed same day. Technical assistance again provided to ensure that youth are periodically reminded that any health or safety grievance should be given to staff for immediate resolution and not placed in the box.
(1) The youth may elect to be present to explain his/her version of the grievance to a person not directly involved in the circumstances which led to the grievance.	×			Policy Section 1715: Youth Grievance Procedures  All youth participated in their own grievance.
(2) Provision for a staff representative approved by the facility administrator to assist the youth.	⊠			Policy Section 1715: Youth Grievance Procedures  No representatives were noted in any grievances reviewed. There were no requests for assistance.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS	
(e) provision for a written response to the grievance which includes the reasons for the decisions;				Policy Section 1715: Youth Grievance Procedures	
				In general, we found the response documentation of grievances to be minimally compliant.	
					We found some grievances with more than one issue noted yet all issues did not have full responses to each item. We noted there were some that lacked full responses or responses that were specific to the issue grieved. We noted that many were forwarded on but were late in being returned and addressed. Overall, these issues are concerning but the amount of these problematic grievances noted in comparison to the amount viewed overall did not rise to a level of non-responsive or overall noncompliance at this time.
				Technical assistance was provided. This issue will be addressed and reviewed with all grievances reviewed in a targeted inspection in the next 90 days.	
				We will be looking for marked improvement in the handling and documentation of grievances in this area.	
<ul> <li>(f) a system which provides that any appeal of a grievance shall be heard by a person not directly involved in the circumstances which led to the grievance;</li> </ul>	×			Policy Section 1715: Youth Grievance Procedures  Appeals are heard by facility Directors.	
(g) resolution of the grievance must occur within ten (10) business days unless circumstances dictate a				Policy Section 1715: Youth Grievance Procedures	
longer time frame. The youth shall be notified of any delay; and,	X			Grievances were completed timely but especially when the issue necessitated a work order, the timeline was not noted on the grievance but was in the accompanying documentation. We will continue to review this as part of the technical assistance and targeted inspection.	
(h) the policy shall provide multiple internal and external methods to report sexual abuse and sexual				Policy Section 1715: Youth Grievance Procedures	
harassment.	⊠			<ul> <li>Grievance procedure</li> <li>Directly to staff, contractors, volunteers, or visitors.</li> <li>Mental Health referral</li> <li>Medical referral.</li> <li>Contacting the ombudsman.</li> </ul>	

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
Whether or not associated with a grievance, concerns of parents, guardians, staff or other parties shall be addressed and documented in accordance with written policies and procedures within a specified timeframe.	×			Policy Section 1715: Youth Grievance Procedures  Any issue should be resolved with a Director or the Superintendent onsite at the time of the incident.
A written report of all incidents which result in physical harm, use of force, serious threat of physical harm, or death of an employee, youth or other person(s) shall be maintained. Such written record shall be prepared by the staff and submitted to the facility manager by the end of the shift, unless additional time is necessary and authorized by the facility manager or designee.	⊠			Policy sections as noted below regarding reports:  1022: Safe Crisis Management – Physical Intervention Reports  1907: Special Incident Report Form  1909: Detention Observation Report (DOR) Form  1912: Preliminary and Follow-Up Incident Notification Procedures  Various reports were provided for review. Reports were written and submitted timely.
1363 USE OF REASONABLE FORCE TO COLLECT DNA SPECIMENS, SAMPLES, IMPRESSIONS  (a) Pursuant to Penal Code Section 298.1 authorized law enforcement, custodial, or corrections personnel including peace officers, may employ reasonable force to collect blood specimens, saliva samples, and thumb or palm print impressions from individuals who are required to provide such samples, specimens or impressions pursuant to Penal Code Section 296 and who refuse following written or oral request.				Section 308: Juvenile Collection of DNA Samples  Since 2011, the Juvenile Halls have been responsible for the Collection of DNA Samples for both detained and non-detained youth. Per Policy, force is not to be used to collect DNA. If a youth refuses to comply with collection efforts, the information and the youth is referred to the court for review and action.  At BJN, there are two trained officers who collect DNA samples in the facility. There has not been any use of force in any collection of DNA this cycle. Technical Assistance was provided to review the need for additional staff to collect DNA.
(1) For the purpose of this section, the "use of reasonable force" shall be defined as the force that an objective, trained and competent correctional employee, faced with similar facts and circumstances, would consider necessary and reasonable to gain compliance with this section.	×			Section 308: Juvenile Collection of DNA Samples
(2) The use of reasonable force shall be preceded by efforts to secure voluntary compliance. Efforts to secure voluntary compliance shall be documented and include an advisement of the legal obligation to provide the requisite specimen, sample or impression and the consequences of refusal.	×			Section 308: Juvenile Collection of DNA Samples

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(b) The force shall not be used without the prior written authorization of the supervising officer on duty. The authorization shall include information that reflects the fact that the offender was asked to provide the requisite specimen, sample, or impression and refused.	X			Section 308: Juvenile Collection of DNA Samples
(1) If the use of reasonable force includes a cell extraction, the extraction shall be videotaped. Video shall be directed at the cell extraction event. The videotape shall be retained by the agency for the length of time required by statute. Notwithstanding the use of the video as evidence in a court proceeding, the tape shall be retained administratively.	X			Section 308: Juvenile Collection of DNA Samples

## 1370 EDUCATION PROGRAM (a) School Programs The County Board of Education shall provide for the administration and operation of juvenile court schools in conjunction with the Chief Probation Officer, or designee pursuant to applicable State laws. The school and facility administrators shall develop and implement written policy and procedures to ensure communication coordination between educators and probation staff. Culturally responsive approaches should be applied when providing instruction. Education staff should collaborate with the facility administrator to use technology to

facility.

trauma-informed

and

facilitate learning and ensure safe technology

practices. The facility administrator shall request an

annual review of each required element of the

program by the Superintendent of Schools, and a

report or review checklist on compliance,

deficiencies, and corrective action needed to

achieve compliance with this section. Such a review.

when conducted, cannot be delegated to the

principal or any other staff of any juvenile court

school site. The Superintendent of Schools shall

conduct this review in conjunction with a qualified

outside agency or individual. Upon receipt of the

review, the facility administrator or designee shall

review each item with the Superintendent of Schools

and shall take whatever corrective action is

necessary to address each deficiency and to fully

protect the educational interests of all youth in the

and

The education program is provided by Los Angeles County Office of Education. Title 15 requires the Superintendent of Schools to conduct a review of the Education program in conjunction with a qualified outside agency or individual. The Board of State and Community Corrections Field Representative does not inspect the education program for compliance with Title 15.

The Principal at the Barry J. Nidorf Juvenile Hall (BJNJH) is Rueben Carranza. We met with Principal Carranza while onsite.

The BJNJH school has 17 core teachers and paraprofessionals. There are teachers with ESL specialties, math specialties, and language and reading specialties. There are 7 Special Education teachers, 4 school psychologists, 1 behavior specialist, 1 wellness counselor, and 1 transition counselor.

Youth attend in two blocks. Block one from 8:30AM to 11:50 AM and Block two from 1:20 PM to 3:00PM. We discussed the challenges of COVID, safety in the classrooms, and virtual learning. We discussed that packets are not an appropriate learning method in that Title 15, per the Ed. Code requires instructional minutes from teaching staff. A tour was provided of the school complex. Youth were not present as it was a minimum day; however, teachers were present working on lesson plans and were happy to show materials.

Discussions were held with youth as well regarding their education experiences. Several youths spoke highly of their education when in class but all shared concerns of low tolerance and being kicked out of class or suspended. We also noted entire groups being returned to units. Additional information has been requested from Mr. Carranza to discuss this issue and to bring this issue to his attention for further review and resolution. We will continue to address and follow this issue.

2022 Education annual review was completed by Jason Deaville, Director of Student Services. His specific comments have been transposed into the sections below and are in italics.

 $\boxtimes$ 

Barry J. Nidorf School is staffed by professional educators who are committed to serve the neediest population of students. The curriculum is designed to build the students into informed citizens with the social emotional skills to navigate our complex society.

The school has designed and utilizes an evaluation and assessment system that seek to support and strengthen student. Assessments are built to be responsive to students diverse learning styles and needs.

Barry J. Nidorf seeks to develop students to be citizens of the 21st century by exposing them to the technology and tools to navigate a computerized world. Students build on those skills daily and the use of technology is infused into the curriculum.

\*\*See below for education annual review information. The information from has been documented in italics direct from the Title 15 document received from Jason Deaville.

- Administration and the Chief Probation Officer work together to operate the school.
- Collaborative meetings take place be-weekly, and they are interagency.
- The school utilizes Road to Success (RTSA) curriculum with social emotional components.
- designed for the students in mind.
   Site also conducts implicit bias training annually.
- Instructional tech support and a site technician support the school and the network has a state-of-
- the-art filtering system on their network.
- Completed annually by someone outside of LACOE and probation.
- Completed annually by someone outside of LACOE and probation.
- As has been the past practice, this report will be reviewed, monitored, and implemented by the Superintendent of Schools or their designee.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(b) Required Elements  The facility school program shall comply with the State Education Code and County Board of Education policies, all applicable federal education statutes and regulations and provide for an annual evaluation of the educational program offerings. As stated in the 2009 California Standards for the Teaching Profession, teachers shall establish and maintain learning environments that are physically, emotionally, and intellectually safe. Youth shall be provided a rigorous, quality educational program that responds to the different learning styles and abilities of students and prepares them for high school graduation, career entry, and post-secondary education.				BP 6011 Instruction, BP 0460 Philosophy, Goals, Objectives, and Comprehensive Plans BP 005 Philosophy, Goals, Objectives and Comprehensive Plans Item 3,4,5  The school complies with all Ed. Code and County policies.  All classrooms are well decorated and print rich. The teachers appear to be in good spirits and their classrooms show evidence of rigor.  RTSA is fully implemented in the classrooms and supported by the site leadership.
All youth shall be treated equally, and the education program shall be free from discriminatory action. Staff shall refer to transgender, intersex and gendernonconforming youth by their preferred name and gender.	×			BP 5145.3 Students
(1) The course of study shall comply with the State Education Code and include, but not be limited to, courses required for high school graduation.	×			BP 005 Philosophy, Goals, Objectives and Comprehensive Plans Item 3,4,5  All courses are standards based and designed to move students toward graduation. The school is WASC accredited.
(2) Information and preparation for the High School Equivalency Test as approved by the California Department of Education shall be made available to eligible youth.	×			AR-6146.2  HISET is utilized by counselors as an option for students where graduation is impractical due to time constraints.
(3) Youth shall be informed of post-secondary education and vocational opportunities.	X			AR-6143 Instruction Item 9 (Grades 7-12)  The site offers dual enrollment in high school and college. Students who graduation are offered college classes. Program also includes OSHA safety training and a building skills program.
(4) Administration of the High School Equivalency Tests as approved by the California Department of Education, shall be made available when possible.	×			AR6146-2 Instruction Ed Code 51420  Offered as needed. Test is administered on site.
(5) Supplemental instruction shall be afforded to youth who do not demonstrate sufficient progress towards grade level standards.	×			AR-6179 Instruction BPP 5149  Read 180, Math 180, Imagine Math, Achieve 3000 and system 44 are used as supplemental support to youth who need additional help.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(6) The minimum school day shall be consistent with State Education Code Requirements for juvenile court schools. The facility administrator, in conjunction with education staff, must ensure that operational procedures do not interfere with the time afforded for the minimum instructional day. Absences, time out of class or educational instruction, both excused and unexcused, shall be documented.				All shorted days are help consistent with Education Code Requirements. A typical day includes 300 minutes of instruction and 240 minutes on a shortened day.  BSCC Note:  It was noted when youth do not attend school in the classroom, for example due to quarantine of the unit or other circumstances that prevent youth from being present in the classroom, they are provided with packets in lieu of in-person or virtual instruction. Packets do not meet the instructional minimums. Technical assistance has been provided in this area previously. This issue has been discussed with both the school and probation in the past.
(7) Education shall be provided to all youth regardless of classification, housing, security status, disciplinary or separation status, including room confinement, except when providing education poses an immediate threat to the safety of self or others. Education includes, but is not limited to, related services as provided in a youth's Section 504 Plan or Individualized Education Program (IEP).	×			BP 6112 Instruction Partially address requirement. AR 5131  When students are secluded, they still receive instruction from a certificated staff.
(c) School Discipline				AR 5144 Students
(1) Positive behavior management will be implemented to reduce the need for disciplinary action in the school setting and be integrated into the facility's overall behavioral management plan and security system.	X			The site implements a full PBIS program and utilizes Wellness counselors (social emotional counselors).
(2) School staff shall be advised of administrative				BP 5021 Students CF 6020
decisions made by probation staff that may affect the educational programming of students.	⊠			Probation has a liaison that regularly escorts students and communications on a daily basis.  The site also maintains movement sheets and conducts bi-weekly reconciliation meetings.
(3) Except as otherwise provided by the State Education Code, expulsion/suspension from school shall be imposed only when other means of correction fails to bring about proper conduct. School staff shall follow the appropriate due process safeguards as set forth in the State Education Code including the rights of students with special needs. School staff shall document the other means of correction used prior to imposing expulsion/ suspension if an expulsion/suspension is ultimately imposed.	×			BP 5144.1 Students; 5144.2 - Suspension and Expulsion/Due Process (Students with Disabilities)  Suspensions are used only as a last resort and when other means of correction have failed.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(4) The facility administrator, in conjunction with education staff will develop policies and procedures that address the rights of any student who has continuing difficulty completing a school day.	×			BP 5144  Conducted bi-weekly as reconciliation meetings.
<ul> <li>(d) Provisions for Special Populations</li> <li>(1) State and federal laws and regulations shall be observed for all individuals with disabilities or suspected disabilities. This includes but is not limited to child find, assessment, continuum of alternative placements, manifestation determination reviews, and implementation of Section 504 Plans and Individualized Education Programs.</li> </ul>	⊠			BP 0430 Philosophy, Goals, Objectives and Comprehensive Plans  SPED compliance is important and monitored utilizing the SPED Ex program.
(2) Youth identified as English Learners (EL) shall be afforded an educational program that addresses their language needs pursuant to all applicable state and federal laws and regulations governing programs for EL students.				BP 6174 Instruction  Rosetta Stone, English 3D, and dedicated teacher with 2 para educators meet the needs of the EL population at BJN.
(e) Educational Screening and Admission     (1) Youth shall be interviewed after admittance and a record maintained that documents a youth's educational history, including but not limited to:	×			BP 6162.5 Instruction Partially Answers Requirement  Enrollment clerk interviews students upon entry and creates records for the student's school progress, home language, SPED needs, and discipline problems.
(A) School progress/school history;	X			BP 6162.5 Instruction  BJN provides progress reports to students monthly. Counselors and SpEd Team keeps track of student progress toward both graduation and IEP goals.
(B) Home Language Survey and the results of the State Test used for English language proficiency;	×			AR 6174 Instruction  The enrollment staff logs into CAL PADS and communicates with the District of Residence to ensure proper enrollment and course of study.
(C) Needs and services of special populations as defined by the State Education Code, including but not limited to, students with special needs.	⊠			BP 6162.5 Instruction  The counselors and Sp.Ed Team peruse the IEPs from the District of Residence, hold 30-day IEPs, within 30 days, Admin Placements as necessary. The ed team of Teachers (Including RSP and SDC), Paraeducator, School Psych, Teachers on Special Assignment follow the students' IEPs.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(D) Discipline problems.	×			BP 5131 Students  The school at BJN implements PBIS and documents discipline incidents in AERIES and shares the info with Probation and
	۵			other sister agencies daily. The transition counselors also communicate with the Districts of Residence to ensure smooth transition back into traditional education in cases of previous expulsion.
(2) Youth will be immediately enrolled in school. Educational staff shall conduct an assessment to determine the youth's general academic functioning levels to enable placement in core curriculum courses.	⊠			BP 6162.5 Instruction  STAR 360 is administered within 3 days of entry and also every 60 days to determine functioning levels for placement.
(3) After admission to the facility, a preliminary education plan shall be developed for each youth within five school days.	×			BP 6162.5 Instruction  The youth and counselor develop an Individual Learning Plan (ILP) upon entry to
				the facility.
(4) Upon enrollment, education staff shall comply with the State Education Code and request the youth's records from his/her prior school(s), including, but not limited to, transcripts, Individual Education Program (IEP), 504 Plan, state language assessment scores, immunization records, exit grades, and partial credits. Upon receipt of the transcripts, the youth's educational plan shall be reviewed with the youth and modified as needed. Youth should be informed of the credits they need to graduate.	×			AR 5125 Students  The enrollment clerk handles the requests of student records which are made through the student File Center in Downey headquarters. LACOE will request local school districts for records for the File Center.
(f) Educational Reporting				AR 5125 Students
(1) The complete facility educational record of the youth shall be forwarded to the next educational placement in accordance with the State Education Code.	×			This process is handled centrally by LACOE in the Student File Center.
(2) The County Superintendent of Schools shall provide appropriate credit (full or partial) for course work				BP 5121 Students
completed while in juvenile court school in accordance with the State Education Code.	⊠			All educational programs are WASC accredited, and students receive transferable credits (partial or whole course credit).
(g) Transition and Re-Entry Planning				AR 6159 Instruction
(1) The Superintendent of Schools and the Chief Probation Officer or designee, shall develop policies and procedures to meet the transition needs of youth, including the development of an education transition plan, in accordance with the State Education Code and in alignment with Title 15, Minimum Standards for Juvenile Facilities, Section 1355.	×			Transition counselors handle transitioning students back to the community either in a local school of residence or a Community Day School run by a school district or LACOE.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
<ul> <li>(h) Post-Secondary Education Opportunities</li> <li>(1) The school and facility administrator should, whenever possible, collaborate with local post-secondary education providers to facilitate access to educational and vocational opportunities for youth that considers the use of technology to implement these programs.</li> </ul>	×			BP 6143 Instruction and BP 6163.4 Student Use of Technology  The school works tirelessly to offer students opportunities to extend their education by attending Mission College online, East Los Angeles College (online), and West Los Angeles College (online). In addition to this, the school offers certification to OSHA safety courses.
1371 PROGRAMS, RECREATION, AND EXERCISE.  The facility administrator shall develop and implement written policies and procedures for programs, recreation, and exercise for all youth. The intent is to minimize the amount of time youth are in their rooms or their bed area.	×			Section 622: Programs Section 623: Recreation and Exercise
Juvenile facilities shall provide the opportunity for programs, recreation, and exercise a minimum of three hours a day during the week and five hours a day each Saturday, Sunday or other non-school days, of which one hour shall be an outdoor activity, weather permitting.		$\boxtimes$		Section 622: Programs Section 623: Recreation and Exercise  The documentation provided at the inspection noted programs, exercise and recreational activities are occurring in the facility. These activities, however, were not always documented in a manner that is consistent or that demonstrates the activity is compliant or is conducted in compliance with the regulatory requirements as it is often times illegible. The facility is a large facility, and this is not a widespread issue, but it does occur and needs attention. Requested additional documentation be provided to ensure the issue has been addressed.  Technical assistance was provided to management to discuss consistency and clarify the specific areas needing attention and improvement in the future for compliance.  Additional documentation was received. Youth receive recreation, programs, and exercise but not consistently per regulatory requirements. They are not going outside daily. It was noted that, with the time change, it is difficult to get all youth outside before dark and the facility is not conducive with the open space to exercise after dark. When daylight is not an issue, the physical plant provides safety and security issues according to staff. This section is noncompliant.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
A youth's participation in programs, recreation, and exercise may be suspended only upon a written finding by the administrator/manager or designee that a youth represents a threat to the safety and security of the facility.	×			Section 622: Programs Section 623: Recreation and Exercise
Such program, recreation, and exercise schedule shall be posted in the living units.				Section 622: Programs Section 623: Recreation and Exercise
	×			The program, recreation and exercise schedules were posted in the living units. Some were posted very high up on the wall and out of the view of the youth.
There will be a written annual review of the programs, recreation, and exercise by the responsible agency to ensure content offered is current, consistent, and				Section 622: Programs Section 623: Recreation and Exercise
relevant to the population.	X			The facility manager provided an annual review for all programs, recreation and exercise activities that occur in the facility. Annual review was provided by external providers.
(a) <b>Programs.</b> All youth shall be provided with the opportunity for at least one hour of daily programming to include, but not be limited to, trauma focused, cognitive, evidence-based, best practice interventions that are culturally relevant and linguistically appropriate, or pro-social interventions and activities designed to reduce recidivism. These programs should be based on the youth's individual needs as required by Sections 1355 and 1356. Such programs may be provided under the direction of the Chief Probation Officer or the County Office of Education and can be administered by county partners such as mental health agencies, community based organizations, faith-based organizations or Probation staff.				Section 622: Programs Section 623: Recreation and Exercise  Facility administrators have hired staffing specifically to provide programs to the youth. The Behavior Management Unit is responsible for determining the programs for both the programming staff and the unit staff when program staff are unavailable. Technical assistance provided regarding program efficacy and ensuring programs are specific to the youth's needs.
Programs may include but are not limited to:  (1) Cognitive Behavior Interventions; (2) Management of Stress and Trauma; (3) Anger Management; (4) Conflict Resolution; (5) Juvenile Justice System; (6) Trauma-related interventions; (7) Victim Awareness; (8) Self-Improvement; (9) Parenting Skills and support; (10) Tolerance and Diversity; (11) Healing Informed Approaches; (12) Interventions by Credible Messengers; (13) Gender Specific Programming; (14) Art, creative writing, or self-expression; (15) CPR and First Aid training; (16) Restorative Justice or Civic Engagement; (17) Career and leadership opportunities; and, (18) Other topics suitable to the youth population.				

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(b) Recreation. All youth shall be provided the opportunity for at least one hour of daily access to unscheduled activities such as leisure reading, letter writing, and entertainment. Activities shall be supervised and include orientation and may include coaching of youth.				Section 623: Recreation and Exercise  Youth spend most of their non-school hours in recreation and well exceed the hour that is required. We noted units are not consistent as to what is provided between buildings or between units. Some units have game stations, some have access to Netflix and other streaming options as staff are bringing them in and using their own cell phone Wi-Fi so the youth have access to fun activities and tasks that will occupy their attention.
				All youth in the facility should have the same access to age-appropriate recreational activities. Youth should not have to depend on staff to bring their personal gaming system or use their hotspot to provide recreational activities. We noted that if a TV, radio, or speaker is broken, it takes a very long time to replace it. There should be replacement items available and broken items should be replaced in a reasonable timeframe. If something is a risk, but is something that could get broken in an institutional setting such as a TV, then efforts should be made to mitigate the risk i.e., encasing it or framing it in so that it cannot be broken, not to just not replace it for long periods of time.  An accounting of recreational activities available to the youth was made and provided to the facility superintendent for review and action as appropriate.  We noted while reviewing documentation, in some units, documentation did not include that youth's choice of activity. We noted through our onsite visits, youth simultaneously have access to several activities all the while being on the phone and playing cards or dominoes. They choose what they participate in.  There is no cable, Wi-Fi, or other means for youth to access the television, the internet for television shows or streaming of age-appropriate content or programs. This has been addressed in technical assistance several times. We will continue to provide

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(c) <b>Exercise</b> . All youth shall be provided with the opportunity for at least one hour of large muscle activity each day.				Section 623: Recreation and Exercise  Per the facility superintendent, the youth play basketball, soccer, handball, football, kickball, and volleyball. They also can work out on the stationary workout apparatus and go to the gym. The pool is available in the summertime.
		×		All units are provided a specific time and location that must be adhered to. Movement and control notify the unit when to come and go. We noted that in many cases youth are shifted from outdoor exercise to indoor exercise, or they do not participate at all. This happens regularly. Youth are required to have 1 hour of daily exercise. Most of the youth interviewed asked for assistance in getting movement and control to get them out and on time.
				Youth from the compound reported that, during outdoor exercise, they are sometimes told to come in early by movement and control. (For various reasons). They reported they have in the past refused to come in as told as they know they are to receive an hour. Unit staff have supported their "peaceful protest" and they came in on time.
				Hill units utilize the open space for recreation. This creates a safety and security issue on occasion as the youth will run from one area to the other to engage in fights.
				Lack of staffing greatly impacts getting all youth outdoors for exercise. This has been addressed in staffing.
The administrator/manager may suspend, for a period not to exceed 24 hours, access to recreation and programs. The administrator/manager shall document the reasons why suspension of recreation and programs occurs.	×			Section 622: Programs Section 623: Recreation and Exercise
1372 RELIGIOUS PROGRAM				Section 1803: Religious Services
The facility administrator shall provide access to religious services and/or religious counseling at least once each week. Attendance shall be voluntary. A youth shall be allowed to participate in an activity outside of their room if he/she elects not to participate in religious programs.				
Religious programs shall provide for:				

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(a) opportunity for religious services and practices;				Section 1803: Religious Services
	×			Religious services are held every Sunday in the chapel. Attendance proof of practice provided for religious services from August-October 2022. Both protestant and catholic services have been offered.
(b) availability of clergy; and,				Section 1803: Religious Services
	⊠			Members of the clergy come to the facility to provide services and bible studies. Youth may also ask for individual clergy to be placed on their regular visitation list or to come in as requested.
(c) availability of religious diets.				Section 1803: Religious Services
	⊠			Religious diets are available for those youth who ask for them. Youth fill out a request form and submit it to a supervisor for review and submission.
1373 WORK PROGRAM				Section 505: Housekeeping
The facility administrator shall develop policies and procedures regarding the fair and consistent assignment of youth to work programs. Work assigned to a youth shall be meaningful, constructive and related to vocational training or increasing a youth's sense of responsibility. Work programs shall not be imposed as a disciplinary measure.	oxtimes			Due to COVID, work programs have been significantly impacted. Youth are responsible for maintaining their units and their room.  The documentation provided of two programs that, when able and if eligible, youth are eligible for:  • The Los Angeles County Youth at Work Program through the LA county America's Job Center of California.  Youth:  • Receive 120 hours of personal enrichment training and paid experience.  • Earn \$15.00 an hour  • Work within the facility  • Transition to employment outside the facility  • RISE program.  Participants may receive training and services and ultimately transition to permanent positions in the community.  A facility staff member is assigned as the Liaison to the program. As the community COVID numbers decrease, the program will begin to open up.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
The facility administrator shall develop and implement written policies and procedures for visiting, that include provisions for special visits. Youth shall be allowed to receive visits by parents, guardians or persons standing in loco parentis, and children of youth. Other family members, such as grandparents and siblings, and supportive adults, may be allowed to visit with the approval of the facility administrator or designee, and in conjunction with the youth's case plan or in the best interest of the youth.				Section 304: Visiting  Documentation was provided from September and October 2022. Visits are held on Saturdays and Sundays from 12:30 to 4:30 PM for regular visitation. Parents can request an alternative weeknight hour visiting block if they cannot make the weekend visits or if they arrive late. Special visits are accommodated from 1:30-2:30 and 2:30-3:30.  We noted that visitation had been canceled due to quarantines and had been canceled due to staffing. When this happens, youth are provided with virtual visits via Facetime or Duo and provided with additional phone calls. Additionally, staff are assigned weekly to ensure youth receive virtual calls home as part of the regular program.  In May 2022, the facility implemented a regular Baby Visiting session. Youth with children may see their child weekly as required by regulation. Documentation provided noted regular visits between youth and their children. Youth interact with their child, play with toys and visit with them. Babies are brought to the facility by an approved adult.  Youth we interviewed confirmed all of the above information. We noted the facility Baby Bonding program is occurring but is not well known or that youth do not meet the criteria as they do not have proof of parentage. We suggest the program information and requirements are shared in orientation for those youth that have children so that their children can visit sooner.
All visits shall occur at reasonable times, subject only to the limitations necessary to maintain order and security. Visitation shall not be denied solely based on the visitor's criminal history. The staff shall determine in each case, whether the visitor's criminal history represents a risk to the safety of youth or staff in the facility. Any denial of visitation or limitation on visitations shall be communicated to the youth, person denied and facility administrator.	⊠			Section 304: Visiting  Visits occur on weekends and during the week. There have been no denials for any reason other than contraband.  Technical assistance was provided about ensuring parents are ready for visitation to begin at the start time of 12:30 PM. Processing of visitors should begin with enough time to ensure a timely start.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
Opportunity for visitation shall be a minimum of two hours per week. Visits may be supervised, but conversations shall not be monitored unless there is a security or safety need.				Section 304: Visiting  When visitation is cancelled due to lack of staff to properly monitor visits and supervise young people; this is non-compliant in staffing.
	⊠			During COVID-19, visitation was canceled when the facility or a particular unit or the youth was on isolation or quarantine.
				In this instances, youth receive virtual calls and telephone calls. The facility had a suspension of regulation and documentation was provided of these calls.
Provisions for special visits, in addition to the two-hour minimum and/or outside of the regular visiting hours,				Section 304: Visiting
shall be accommodated as necessary and within the discretion of the facility administrator or designee. Family therapy and professional visits shall be accommodated outside the provisions of this regulation. Facilities may provide visitation opportunities outside of normal visiting hours to accommodate special visits.	×			The facility is offering the parents alternative hours if needed as well as making arrangements for special visits as appropriate.
The facility may provide access to technology as an alternative, but not as a replacement, to in-person visiting.				Section 304: Visiting Section 306: Virtual Communication
				Youth are offered Facetime or DUO calls weekly. If on quarantine or isolation due to COVID, youth are provided with additional virtual calls and telephone calls. Logs were provided for review and proof of practice. Technical assistance was provided suggesting opportunity to enhance the form used to document the calls.
1375 CORRESPONDENCE				Section 511: Mail
The facility administrator shall develop and implement written policies and procedures for correspondence which provide that:				Youth interviewed stated they can write letters daily.
(a) there is no limitation on the volume of mail that youth may send or receive;				Section 511: Mail
, , , , , , , , , , , , , , , , , , , ,	X			There is no limitation on the amount of mail a youth may send out or receive. Youth may send and receive as many letters as they want to.
(b) youth may send two letters per week postage free;	$\boxtimes$			Section 511: Mail  All letters are sent postage paid.
(c) youth may correspond confidentially with state and federal courts, any member of the State Bar or holder of public office, and the Board; however, authorized facility staff may open and inspect such mail only to search for contraband and in the presence of the youth; and,	×			Section 511: Mail

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(d) incoming and outgoing mail, other than that described in (c), may be read by staff only when there is reasonable cause to believe facility safety and security, public safety, or youth safety is jeopardized.	×			Section 511: Mail
The administrator of each juvenile facility shall develop and implement written policies and procedures to provide youth with access to telephone communications.	⊠			Section 512: Use of Telephone  Youth are provided with access to the dayroom telephones daily. Calls are currently free. Youth are also provided with a free phone call on the county phone at least once a week per policy, but documented logs noted this occurs more often. Virtual calls are also provided.
The facility administrator shall develop written procedures to ensure the right of youth to have access to the courts and legal services. Such access shall include:	×			Section 513: Access to legal Services  Youth interviewed all reported they can call their attorneys, probation officers, and social workers as needed.
(a) access, upon request by the youth, to licensed attorneys and their authorized representatives;	×			Section 513: Access to legal Services Attorneys can visit their youth at any time.
(b) provision for confidential consultation with attorneys; and,	×			Section 513: Access to legal Services  Attorneys can utilize private interview space in the visiting center for their interviews. There is also a visiting space area behind the compound where attorneys can meet with youth.
(c) unlimited postage free, legal correspondence and cost-free telephone access as appropriate.	×			Section 513: Access to legal Services  All mail is postage free. Youth can write unlimited letters to their attorney and make unlimited calls at no cost.
The facility administrator shall develop and implement written policies and procedures for the discipline of youth that shall promote acceptable behavior; including the use of positive behavior interventions and supports. Discipline shall be imposed at the least restrictive level which promotes the desired behavior and shall not include corporal punishment, group punishment, physical or psychological degradation. Deprivation of the following is not permitted:		×		Section 1103: Discipline Guidelines Section 1104: Corporal Punishment  The facility lacks suitable age-appropriate incentives and support to achieve positive behavior. There is no incentive for youth to maintain good behavior. The current discipline process is ineffective as noted though a review of the point system, incentive options, and lack of a meaningful process and the incentive/sanction due process method. Due process is being offered as required in 1391 and documentation is being completed but the process lacks viability and youth don't pursue anything further.
(a) bed and bedding;	×			Section 1103: Discipline Guidelines
(b) daily shower, access to drinking fountain, toilet and personal hygiene items, and clean clothing;	×			Section 1103: Discipline Guidelines
(c) full nutrition;	×			Section 1103: Discipline Guidelines
(d) contact with parent or attorney;	$\boxtimes$			Section 1103: Discipline Guidelines

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(e) exercise;	×			Section 1103: Discipline Guidelines
(f) medical services and counseling;	$\boxtimes$			Section 1103: Discipline Guidelines
(g) religious services;	×			Section 1103: Discipline Guidelines
(h) clean and sanitary living conditions;	×			Section 1103: Discipline Guidelines
(i) the right to send and receive mail;	×			Section 1103: Discipline Guidelines
(j) education; and,	×			Section 1103: Discipline Guidelines
(k) rehabilitative programming.	×			Section 1103: Discipline Guidelines
The facility administrator shall establish rules of conduct and disciplinary penalties to guide the conduct of youth. Such rules and penalties shall include both major violations and minor violations, be stated simply and affirmatively, and be made available to all youth. Provision shall be made to provide accessible information to youth with disabilities, limited English proficiency, or limited literacy.	⊠			Section 1103: Discipline Guidelines Section 1106: Rules and Regulations
1391 DISCIPLINE PROCESS  The facility administrator shall develop and implement written policies and procedures for the administration of discipline which shall include, but not be limited to:	×			Section 1106: Rules and Regulations Section 1107: Due Process
(a) designation of personnel authorized to impose discipline for violation of rules;	×			Section 1106: Rules and Regulations
(b) prohibiting discipline to be delegated to any youth;	×			Section 1106: Rules and Regulations
(c) definition of major and minor rule violations and their consequences, and due process requirements;	×			Section 1106: Rules and Regulations Section 1107: Due Process
(d) trauma-informed approaches and positive behavior interventions;	×			Section 1106: Rules and Regulations
(e) minor rule violations may be handled informally by counseling, advising the youth of expected conduct imposing a minor consequence. Discipline shall be accompanied by written documentation and a policy of review and appeal to a supervisor; and,	X			Section 1107: Due Process Section 1108: Minor Rule Violations  If a youth chooses to appeal a minor discipline, this is generally addressed through the grievance process. We saw no grievances for this purpose.
(f) major rule violations and the discipline process shall be documented and require the following:	×			Section 1107: Due Process

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(1) written notice of violation prior to a hearing;				Section 1107: Due Process  Every incident that necessitated sanctions and appeals forms had one. Facility staff are very good at completing the form. Every youth refused to cooperate with the process, nor did they wish to have a hearing.  Officers are completing the forms as required and a witness's secondary signature was noted; however, the process needs review and update to a process that is meaningful.  Once the behavior management program is addressed in Section 1390, all officers should be retrained in these forms to ensure correct implementation.
(2) accommodations provided to youth with disabilities, limited literacy, and English language learners;	X			Section 1107: Due Process
(3) hearing by a person who is not a party to the incident;	×			Section 1107: Due Process
<ul><li>(4) opportunity for the youth to be heard, present evidence and testimony;</li></ul>	×			Sanction 1107: Due Process
(5) provision for youth to be assisted by staff in the hearing process;	×			Sanction 1107: Due Process
(6) provision for administrative review.	$\boxtimes$			Sanction 1107: Due Process
(g) violations that result in a removal from camp or commitment program, but not a return to court, will follow the due process provisions in subsection (e) above.			$\boxtimes$	BJN does not have a camp or a commitment program.
1410 MANAGEMENT OF COMMUNICABLE DISEASES.  The health administrator/responsible physician, in cooperation with the facility administrator and the local health officer, shall develop written policies and procedures to address the identification, treatment, control and follow-up management of communicable diseases. The policies and procedures shall address, but not be limited to:	X			Section 1805: Communicable Diseases  Reviewed Probation policy and medical guidance to ensure Management of Communicable Disease policy is current and addresses all required areas required by section 1410, specifically COVID-19.  Compliance based on policy and guidance reviewed from medical provider JCHS.
(a) Intake health screening procedures;	$\boxtimes$			Section 1805: Communicable Diseases
(b) Identification of relevant symptoms;	×			Section 1805: Communicable Diseases
(c) Referral for medical evaluation;	X			Section 1805: Communicable Diseases
(d) Treatment responsibilities during detention;	×			Section 1805: Communicable Diseases
(e) Coordination with public and private community-based resources for follow-up treatment;	×			Section 1805: Communicable Diseases
(f) Applicable reporting requirements; and,	$\boxtimes$			Section 1805: Communicable Diseases
(g) Strategies for handling disease outbreaks.	$\boxtimes$			Section 1805: Communicable Diseases

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
The policies and procedures shall be updated as necessary to reflect communicable disease priorities identified by the local health officer and currently recommended public health interventions.	×			Section 1805: Communicable Diseases  JCHS has been open to communications regarding language that is contradictory to regulatory language and solving this issue to avoid noncompliance.
1433 REQUESTS FOR HEALTH CARE SERVICES (EXCERPT)  The health administrator, in cooperation with the facility administrator, shall develop policy and procedures to establish a daily routine for youth to convey requests for emergency and non-emergency medical, dental and behavioral/mental health care services.				Section 1702: Access to Care/Request for Services  Youth interviewed regarding health care services stated they submit a request for service, or they tell staff what they need. Staff will call the medical clinic and take them to medical if the issue is of an emergent nature. Medical operates 24/7.  Mental health will also see youth within a reasonable amount of time. Any after-hours needs are addressed by an on-call staff member. All youth interviewed felt the timelines in which they are seen is appropriate.  Compound youth were viewed being walked across the facility without restraints.
The youth's personal clothing, undergarments and footwear may be substituted for the institutional clothing and footwear specified in this regulation. The facility has the primary responsibility to provide clothing and footwear. Clothing provisions shall ensure that:	X			The facility provides all clothing and shoes for the youth.
(a) Clothing is clean, reasonably fitted, durable, easily laundered, in good repair, and free of holes and tears.	×			Section 403: Procedures for Newly Admitted Youth  Clothes appear to be clean, well-fitting, and free from rips and holes.

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(b) The standard issue of climatically suitable clothing for youth shall consist of but not be limited to:	$\boxtimes$			Section 403: Procedures for Newly Admitted Youth  Youth are provided with basic needs for the weather. Technical assistance has been provided about also providing sweatpants, sweatshirts, beanies, and coats when appropriate, shorts for exercise or summer wear, and pajamas or something to sleep in.  We noted there are some youth who have items and some who don't. All youth should have the same items of clothing. It was discussed that it is the responsibility of unit staff to ensure that all youth have the same items of clothing as appropriate.  Youth were viewed on video to be in the dayroom, generally during showers, after hours, etc. who were walking around in boxer shorts to the restroom. This is inappropriate. Youth should be provided with proper sleeping attire and should not be walking around in boxer shorts.
(1) Socks and serviceable footwear;	$\boxtimes$			Section 403: Procedures for Newly Admitted Youth
(2) Outer garments;	X			Section 403: Procedures for Newly Admitted Youth
(3) New non-disposable underwear which shall remain with the youth throughout their stay, and;				Section 403: Procedures for Newly Admitted Youth  Youth are given brand-new underwear upon entry. The youth interviewed noted they are provided with new underwear at entry but are unsure if they get the same ones back from the laundry as there are sometimes issues or problems with the laundry bags opening. Facility administrators are working on ensuring that laundry bags are issued and returned as they should be. They are also looking at alternatives to replace the current bag. We will continue to review and monitor through future visits. It is necessary to develop and implement a laundry policy for the laundry personnel to be sure youth have their own underwear every day.
(4) Undergarments, that are freshly laundered and free of stains, including tee shirts and bras.	X			Section 403: Procedures for Newly Admitted Youth

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(c) Clothing is laundered at the temperature required by local ordinances for the commercial laundries and dried completely in a mechanical dryer or other laundry method approved by the local health officer.	×			Section 403: Procedures for Newly Admitted Youth  Clothing is laundered in facility commercial laundry.
(d) Suitable clothing is issued to pregnant youth.			×	Section 403: Procedures for Newly Admitted Youth
1482 CLOTHING EXCHANGE				There are no female youth at Barry J. Nidorf.  Section 505: Housekeeping
The facility administrator shall develop and implement written policies and site-specific procedures for the cleaning and scheduled exchange of clothing. Unless work, climatic conditions, or illness necessitates more frequent exchange, outer garments, except for footwear, shall be exchanged at least once each week. Tee shirts, bras, and underwear shall be exchanged daily; youth shall receive their own underwear back at exchange.	×			All youth interviewed noted that clean clothing is exchanged daily. Items that are not on the list can still be exchanged upon request.
1484 CONTROL OF VERMIN IN YOUTH'S PERSONAL CLOTHING  There shall be written policies and site-specific procedures developed and implemented by the facility administrator to control the contamination and/or spread of vermin and ecto-parasites in all youth's personal clothing. Infested clothing shall be cleaned or stored in a closed container so as to eradicate or stop the spread of the vermin.	X			Section 505: Housekeeping  Youth clothing is placed in individual bags upon entry. Clothing can be washed if there is any concern.
1485 ISSUE OF PERSONAL CARE ITEMS  There shall be written policies and site-specific procedures developed and implemented by the facility administrator for the availability of personal hygiene items. Each female youth shall be provided with sanitary napkins, panty liners and tampons as requested. Each youth to be held over 24 hours shall be provided with the following personal care items;	⊠			Section 508: Housekeeping: Personal Hygiene Supplies  Policy is in process of being addressed to fix the inconsistency with Section 510 regarding the use of electric razors.  Youth are provided with all necessary items for personal care.
(a) Toothbrush;	$\boxtimes$			Section 508: Housekeeping: Personal Hygiene Supplies
(b) Toothpaste;	×			Section 508: Housekeeping: Personal Hygiene Supplies
(c) Soap;	×			Section 508: Housekeeping: Personal Hygiene Supplies
(d) Comb;	×			Section 508: Housekeeping: Personal Hygiene Supplies
(e) Shaving implements;	×			Section 508: Housekeeping: Personal Hygiene Supplies
(f) Deodorant;	$\boxtimes$			Section 508: Housekeeping: Personal Hygiene Supplies
(g) Lotion;	×			Section 508: Housekeeping: Personal Hygiene Supplies
(h) Shampoo; and,	×			Section 508: Housekeeping: Personal Hygiene Supplies

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(i) Post-shower conditioning hair products.	×			Section 508: Housekeeping: Personal Hygiene Supplies
Youth shall not be required to share any personal care items listed in items (a) through (d). Liquid soap provided through a common dispenser is permitted. Youth shall not share disposable razors. Double edged safety razors, electric razors, and other shaving instruments capable of breaking the skin, when shared among youth, shall be disinfected between individual uses by the method prescribed by the State Board of Barbering and Cosmetology in Sections 979 and 980, Chapter 9, Title 16, California Code of Regulations.	×			Section 508: Housekeeping: Personal Hygiene Supplies
There shall be written policies and site specific procedures developed and implemented by the facility administrator for showering/bathing and brushing of teeth. Youth shall be permitted to shower/bathe up on assignment to a housing unit and on a daily basis thereafter and given an opportunity to brush their teeth after each meal.				Section 629: Personal Hygiene and Unit Housekeeping  Youth interviewed stated they can brush their teeth after every meal, they can wash up and brush their teeth in the morning when they wake up, and shower daily.  TA was provided in that policy/memo directs youth to not be placed in their rooms prior to 8:00 p.m. for the purposes of shower preparation. Staff are to schedule shower times based on the dynamics of the unit, such as the population, number of showers, number of "keep-aways" or for those youth who take psych medications. etc. Showers can begin earlier than 8:00 p.m. only if this results in youth coming back out for additional programming afterward but not for the purpose of going to bed earlier. Bedtime shall be no earlier than 9:00 p.m. This issue has been addressed in room confinement.

TITLE (FORTION VE			21/4	D/D DESERVATION - 0.014451170
TITLE 15 SECTION YE	5	NO	N/A	P/P REFERENCE - COMMENTS
1487 SHAVING  Youth shall have access to a razor daily, unless their appearance must be maintained for reasons of identification in Court. All youth shall have equal opportunity to shave face and body hair. The facility administrator may suspend this requirement in relation to youth who are considered to be a danger to themselves or others.				Section 510: Shaving and Haircut Procedures  Youth are to be provided with the opportunity to shave daily. There is a process in place wherein youth may sign up to shave the next day. This is said to be done for planning purposes.  In talking with youth, it was noted through conversations with them, that there is no true consistency in this process as some units do and others do not on a consistent basis. While there is a policy in place, the policy and practice are not clear which leads to confusion. Youth were observed to have clean-shaven faces in all the units throughout the time spent visiting the facilities.  TA provided and discussed that documentation must be clarified to ensure it is clear that youth have the opportunity daily. Proof of practice is necessary. This issue will continue to be reviewed regularly in the coming months. A monthly reporting document was implemented for the facility to report to the inspector by the 5th of the month to show proof of the practice of

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
1488 HAIR CARE SERVICES (Excerpt)  Hair care services shall be available in all juvenile facilities. Youth shall receive hair care services monthly. Equipment shall be cleaned and disinfected after each haircut or procedure, by a method approved by the State Board of Barbering and Cosmetology.  1500 STANDARD BEDDING AND LINEN ISSUE  Clean laundered, suitable bedding and linens, in good				Section 510: Shaving and Haircut Procedures  Regulation and policy require access to monthly haircuts, yet the policy does not provide the procedure in which this should occur. This appears to cause confusion with staff which was confirmed through youth interviews as they stated haircuts do not consistently occur as required.  The documentation provided and viewed noted a significant catch-up of haircuts occurred facility-wide to correct the inability to provide haircuts in the past.  TA was provided to immediately implement proof of practice to document monthly access facility-wide as well as to provide QA monthly to ensure that all youth who want a haircut. receive policy one.  This section is minimally compliant at this time and this issue will continue to be reviewed regularly in the coming months to ensure haircuts occur as required. Monthly reporting document implemented for the facility to report to the inspector by the 5th of the month to show proof of practice of haircuts.  Section 505: Housekeeping  While doing Title 24 inspections, suitable
repair, shall be provided for each youth entering a living area who is expected to remain overnight, shall include, but not be limited to:				bedding was reviewed. It was noted that several mattresses do not have covers nor do youth have pillows. It was noted that this was due to contraband issues. This was addressed with facility staff and it was being referred for review.  We have been notified that mattresses and pillows have been ordered to ensure that all youth have an appropriate mattress and pillow. We will follow up on this issue in April 2023 to ensure that all mattresses have come in and have been distributed.
<ul> <li>(a) One mattress or mattress-pillow combination which meets the requirements of Section 1502 of these regulations;</li> </ul>	X			Section 505: Housekeeping
(b) One pillow and a pillow case unless provided for in (a) above;	$\boxtimes$			Section 505: Housekeeping
(c) One mattress cover and a sheet or two sheets;	×			Section 505: Housekeeping
(d) One towel; and,	×			Section 505: Housekeeping

TITLE 15 SECTION	YES	NO	N/A	P/P REFERENCE - COMMENTS
(e) One blanket or more, up on request	×			Section 505: Housekeeping
1501 BEDDING LINEN EXCHANGE				Section 505: Housekeeping
The facility administrator shall develop and implement site specific written policies and procedures for the scheduled exchange of laundered bedding and linen issued to each youth housed. Washable items such as sheets, mattress covers, pillow cases and towels shall be exchanged for clean replacement at least once each week.	×			All linens are laundered as required.
The covering blanket shall be cleaned or laundered once a month.	×			Section 505: Housekeeping  Blankets are to be exchanged at a minimum of once a week. If a youth ask for a replacement, he is provided one.
The facility administrator shall develop and implement written policies and site-specific procedures for the maintenance of an acceptable level of cleanliness, repair and safety throughout the facility. The plan shall provide for a regular schedule of housekeeping tasks, equipment, including restraint devices, and physical plant maintenance and inspections to identify and correct unsanitary or unsafe conditions or work practices in a timely manner. The use of chemicals shall be done in accordance to the product label and Safety Data Sheet which may include the use of Personal Protection Equipment (PPE).	$\boxtimes$			Section 505: Housekeeping Section 506: Housekeeping: Basic Cleaning Procedures for All Areas Section 507: Housekeeping: Maintenance Procedures  Facility is cleaned daily by a contracted cleaning crew that is onsite providing general cleaning of the buildings daily and maintaining COVID cleaning.  Unit cleaning is also conducted daily by unit staff and the youth. Youth clean their rooms and youth keep up overall cleanliness of the unit including restroom.

#### REVIEW OF NON REGULATORY REQUIREMENTS

GRANT FUNDING OR CODE REFERENCE	YES	NO	N/A	P/P REFERENCE - COMMENTS
JUVENILE PROBATION AND CAMPS FUNDING (JPC		os Only)		-
The programs/services identified on the JPCF – Camp Allocation Eligibility Form are being provided at the facility. (Refer to the JPCF Program Agreement, Attachment B)		$\boxtimes$		
208.5 WIC CONTACT BETWEEN PERSONS UNDER T	HE JUVE	NILE C	OURT A	GES 19- 20 AND MINORS IN THE FACILITY
The facility houses Juvenile Court Wards 19 years of age and older.	$\boxtimes$			
The facility has been approved to hold persons under the juvenile court who are ages 19 through 21.	×			
The facility continues to comply with the requirements of 208.5 WIC (programming, capacity and security of the facility) as outlined in the county's application.			$\boxtimes$	
JUVENILE JUSTICE DELINQUENCY PREVENTION AC	CT MONI	TORING	(JJDPA	
WIC 206 SEPARATE FACILITIES FOR WIC 300 MINORS				
Dependent or neglected minors who are defined under Section 300 of the Welfare and Institutions Code (WIC) are held only in non-secure, separate and segregated facilities.		□Vio lation		
DETENTION OF STATUS OFFENDERS (WIC 601) AND FEDERAL MINORS		$\boxtimes$		
Status Offenders (WIC 601) are held in the facility.				
Status Offenders (WIC 601) are kept separate from Juvenile Delinquents (WIC 602)? (WIC 207[d]).		□Vio lation	$\boxtimes$	
Federal Minors (ICE Holds or ORR Contract) are held in the facility.		×		
If yes to the above, the <i>Monthly Report on the Detention of Status Offenders/Federal Minors</i> is submitted to the BSCC.			$\boxtimes$	
WIC 208 SEPARATION OF MINORS AND ADULT INMATES (JJDPA 42 USC 5633, Sec 223, State Plans (a)[12])  Are adult inmates held in the facility? (When a person		$\boxtimes$		
in detention is proceeding through the adult court, AND that person is 18 years of age or older that person is an <b>adult inmate.</b> )				
If adult inmates are held, they are appropriately separated from minors.		□Vio lation	$\boxtimes$	
Adult inmates from an adult facility (e.g. inmate workers or "Scared Straight" programs) are not allowed in the facility in a manner that allows contact with minors.		□Vio lation	×	

# **Letter From Youth Law Center**

Settlement Discussions to Avoid Litigation Regarding the Unsuitability of Los

Angeles County's Central and Barry J.
Nidorf Juvenile Halls





May 22, 2023

Linda Penner, Chair
Board of State and Community Corrections
2595 Venture Oaks Way, Suite 200
Sacramento, CA 95833
<a href="mailto:linda.penner@bscc.ca.gov">linda.penner@bscc.ca.gov</a>
Via email only

Re: Settlement Discussions to Avoid Litigation Regarding the Unsuitability of Los Angeles County's Central and Barry J. Nidorf Juvenile Halls

Dear Chair Penner and Board Members,

As the Board prepares for its May 23, 2023, meeting to address the dire conditions in Los Angeles County's juvenile halls, we want to reiterate the Board's present obligation to declare and immediately issue notice of unsuitability with respect to Central Juvenile Hall and Barry J. Nidorf (BJN) Juvenile Hall.

As we explained in our previous letters of April 12th and April 27th, the Board has a legal duty under Welfare and Institutions Code section 209 to issue notice of unsuitability regarding Los Angeles' juvenile halls because these facilities received notice of noncompliance with minimum standards and failed to submit an approved corrective action plan to the Board within 60 days of that notice. In fact, when the Board meets next Tuesday, 130 days will have elapsed since it provided Los Angeles with notice of noncompliance. In our previous letters we stated we were prepared to litigate the Board's failures to act according to its duty.

We appreciate the time staff and counsel for the Board have taken to meet with us to resolve this matter since our April 27, 2023 letter. Our discussions to date have been productive. We were pleased to see that the recommendations from staff in the May 23, 2023 Board Letter reflected what was represented to us during those discussions. And, as a result, we have delayed commencing litigation to give the Board an opportunity to meet its obligations at the upcoming meeting.

Recently, we learned that at the upcoming May 23 meeting, Los Angeles County's Probation intends to present its most recent plan to bring its facilities into compliance and to request that the Board give Los Angeles a "reasonable deadline extension." Even if circumstances indicated that more time might be reasonable – which they absolutely do not – the Board cannot legally extend the statutory deadlines set for correcting noncompliance.

We ask that the Board fulfill its current obligations as required by law. We are also very interested in continuing to work with staff and counsel to clarify the process for dealing with findings of noncompliance and unsuitability that arise in the future. However, if on May 23, 2023, the Board fails to declare Los Angeles' juvenile halls unsuitable or to immediately transmit notice of unsuitability, we will move forward with commencing litigation.

If you would like to discuss, we can make ourselves available at any point between now and the beginning of the May 23, 2023, meeting. Please feel free to contact us at the numbers below.

Sincerely,

Sean Garcia-Leys, Esq., Co-Executive Director Peace and Justice Law Center

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Norma Cumpian, ncumpian@antirecidivism.org

Agenda Item B

MEETING DATE: May 23, 2023 AGENDA ITEM: B

TO: BSCC Chair and Members

Aaron Maguire, Chief Deputy Director and General Counsel,

FROM: aaron.maguire@bscc.ca.gov

Allison Ganter, Deputy Director, allison.ganter@bscc.ca.gov

Development of Process for Submittal of 60-Day Corrective Action

**SUBJECT:** Plans: Requesting Approval

### **Summary**

This item requests that the BSCC Board direct staff to develop written policies and procedures for the submission and approval of county Corrective Action Plans (CAP) under Welfare and Institutions Code section 209.

### **Background**

The Board of State and Community Corrections (BSCC) establishes the minimum standards for juvenile halls, camps, and secure youth treatment facilities (SYTF) and conducts inspections of those facilities. (Welf. & Inst. Code, §§ 209, 210, 875, & 885.)

Welfare and Institutions Code section 209, subdivision (d), provides:

Except as provided in subdivision (e), a juvenile hall, special purpose juvenile hall, law enforcement facility, or jail shall be unsuitable for the confinement of minors if it is not in compliance with one or more of the minimum standards for juvenile facilities adopted by the Board of State and Community Corrections under Section 210 or 210.2, and if, within 60 days of having received notice of noncompliance from the board or the judge of the juvenile court, the juvenile hall, special purpose juvenile hall, law enforcement facility, or jail has failed to file an approved corrective action plan with the Board of State and Community Corrections to correct the condition or conditions of noncompliance of which it has been notified. The corrective action plan shall outline how the juvenile hall, special purpose juvenile hall, law enforcement facility, or jail plans to correct the issue of noncompliance and give a reasonable timeframe, not to exceed 90 days, for resolution, that the board shall either approve or deny. In the event the juvenile hall, special purpose juvenile hall, law enforcement facility, or jail fails to meet its commitment to resolve noncompliance issues outlined in its corrective action plan, the board shall make a determination of suitability at its next scheduled meeting. (Emphasis added.)

In the Board's recent consideration of the suitability of the Los Angeles County juvenile halls, BSCC staff determined that the corrective action plan submitted by the county was insufficient and did not approve it. However, because the plan was submitted on the 60<sup>th</sup> day, there was also no opportunity for the county to make corrections. The county also submitted a supplemental corrective action plan (SCAP) after the 60-day period had passed. BSCC staff enumerated concerns about the deficiencies of both the CAP and SCAP at the April 2023 Board meeting and the Board did not approve either plan at the April 2023 meeting.

Going forward, it is recommended that the Board establish guidelines and/or promulgate appropriate regulations to address the CAP approval process. Considerations for this process should include, but not be limited to, the following:

- a. Whether the BSCC staff should be delegated with authority to approve or deny CAPs.
- b. Whether counties should be required to submit their CAP in advance of the 60-day deadline so that BSCC staff may provide technical assistance in the case of a deficient CAP. If so, how soon after notice of noncompliance should a CAP be submitted?
- c. A timeframe for when reinspection for compliance should occur within the 90-day corrective action timeframe

#### **Recommendation/Action Needed**

- Approve the recommendation to direct BSCC staff to develop a written process and timeline for the consideration and approval of county Corrective Action Plans under Welfare and Institutions Code section 209 (d).
- 2. Until new policies and procedure are adopted, formally delegate authority to staff under Penal Code section 6025.6<sup>1</sup> to approve CAPs.

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<sup>&</sup>lt;sup>1</sup> "The [BSCC] may delegate any ministerial authority or duty conferred or imposed upon the board to a subordinate officer subject to those conditions as it may choose to impose."





For additional information about this notice, agenda, to request notice of public meetings, to submit written material regarding an agenda item, or to request special accommodations for persons with disabilities, please contact:

Adam.Lwin@bscc.ca.gov or call (916) 324-2626

For general information about the BSCC:

visit www.bscc.ca.gov, call (916) 445-5073 or write to:
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