COUNTY OF LOS ANGELES
DEPARTMENT OF AUDITOR-CONTROLLER

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September 27, 2007

TO: Supervisor Zev Yaroslavsky, Chairman
Supervisor Gloria Molina
Supervisor Yvonne B. Burke
Supervisor Don Knabe
Supervisor Michael D. Antonovich

FROM: J. Tyler McCauley
Auditor-Controller

SUBJECT: **DEPARTMENT OF JUSTICE SETTLEMENT AGREEMENT – JULY-AUGUST 2007 MONITORING RESULTS**

As requested, attached are the results of the Auditor-Controller (A-C) monitoring review of the County's juvenile halls for July and August 2007. The monitoring reviews are used to measure Los Angeles County's (County) progress in implementing the 52 recommendations (referred to as paragraphs) contained in the Department of Justice (DOJ) settlement agreement. The paragraphs covered by this report do not include the paragraphs that have been fully implemented or paragraphs that are undergoing formal monitoring by the DOJ Project monitors (Monitors).

Background

In December 2004, the A-C assumed oversight responsibility of the Quality Assurance Unit (QA Unit) as directed by your Board. The QA Unit was established to conduct on-going monitoring of the County's progress implementing the paragraphs contained in the DOJ settlement agreement. The QA Unit consists of staff from the A-C, Probation Department (Probation), the Department of Mental Health (DMH), and Juvenile Court Health Services (JCHS). The QA Unit works and consults with the Monitors regularly. The Monitors are a group of subject matter experts designated by the DOJ, the County and Los Angeles County Department of Education's (LACOE) to assess the County and LACOE's progress to implement the 52 paragraphs.

LACOE has been designated as the lead agency for five of the 52 paragraphs and monitors their own progress implementing these paragraphs. LACOE reports are submitted to the A-C and Monitors monthly. The status of each of LACOE's paragraphs begins on page 13 of Attachment 2 of this report.

Implementation Status Summary

The compliance rate noted below for each paragraph is based on our testwork, discussions with the Monitors and the compliance rates for overlapping paragraphs. For example, use of force includes paragraphs 18, 28, 29, and 32.

In August 2007, Paragraph 44 (Eyeglasses) was granted full compliance bringing the total number of paragraphs in full compliance to 21 of the 52 paragraphs. The DOJ also began formal monitoring for Paragraph 45 (Hygiene) in August 2007. Since January 2007, the DOJ began formal monitoring on a total of nine additional paragraphs (10, 18, 22, 23, 24, 45, 52, 53, and 54). Before a paragraph is considered implemented, it must undergo formal monitoring by the Monitors for one year. During the formal monitoring period, the Monitors evaluate the County's compliance with the paragraphs' provisions. The DOJ will classify paragraphs as implemented if the County maintains substantial compliance with the paragraphs' provisions during the formal monitoring period.

For five of the remaining 22 paragraphs, LACOE staff monitors the implementation status. For the remaining 17 paragraphs, we noted the following:

- 5 paragraphs showed a 90% or above compliance rate.
- 7 paragraphs showed an 80% to 89% compliance rate.
- 3 paragraphs showed a 70% to 79% compliance rate.
- 2 paragraphs showed a less than 70% compliance rate.

The compliance rate for Paragraph 31 Child Abuse Investigations rose from 65% to 75%. However, the compliance rate for Paragraph 12 Implementation of Treatment Plan dropped from 73% to 63%.

The compliance rates for the remaining 15 paragraphs did not significantly change from the compliance rates reported for June 2007 monitoring in our July 2007 report. Attachment 1 contains a summary of the status of the 17 paragraphs not in formal monitoring. The details of our August 2007 monitoring review for the 17 paragraphs and the compliance rate for each are addressed in Attachment 2.

Implementation Status of Key Paragraphs

Based on discussions with the Monitors, Probation and other members of the implementation team, we classified four of the 17 paragraphs not in formal monitoring as key paragraphs. This month we added Paragraph 16 (Substance Abuse) to the key paragraphs. The paragraphs focus on the County's need to improve the provision of essential mental health services to children assigned to the juvenile halls and a reduction in the level of violence. The following are the key paragraphs with a brief description and the current monitoring results.

Paragraph 16:

The County shall develop and implement policies, procedures, and practices to address substance use disorders appropriately.

The compliance rate is based on our assessment of the initial screening process, the drug education program, and the follow up process. Generally, the screening process is sufficient. However, the County needs to improve the drug education/drug awareness and follow up process. For example, on a voluntary basis, Atlantic Recovery, Tarzana Treatment and Narcotics Anonymous are providing treatment and counseling to the minors at the three juvenile halls. However, due to a lack of a contract, the service providers cannot provide all the needed services.

Probation management indicated that they are in the process of preparing a "Request For Proposal" (RFP) for a contract with service providers to provide substance abuse services at the juvenile halls. Probation is working with DMH to establish a statement of work to define the services that are needed at the juvenile halls. Probation management did not provide a completion date for the solicitation.

Over the last several months, Probation has been working with DMH to utilize the eight existing DMH contractors to provide the needed substance abuse services at the three juvenile halls until the solicitation process has been completed and formal contracts are signed. According to Probation management, the DMH contractors began to provide the needed services in September 2007.

Targeted Date to Request Formal Monitoring: October 2007

Paragraph 27:

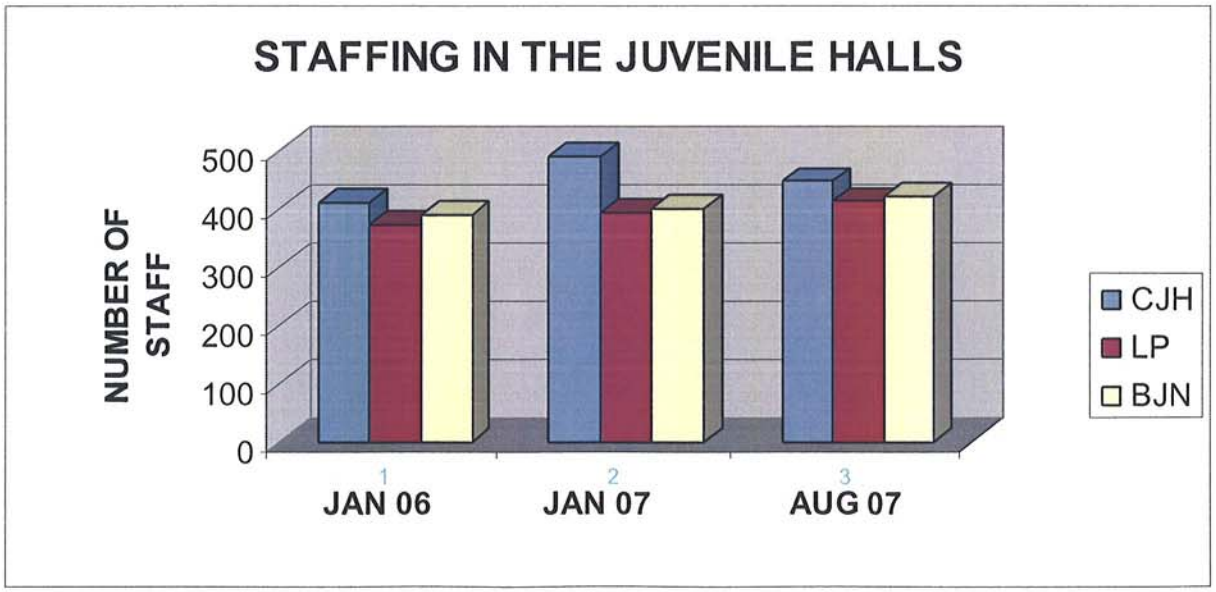
The County shall provide sufficient staff supervision to keep residents reasonably safe from harm and allow rehabilitative activities to occur successfully.

Probation management indicated that they follow the State's standard for staffing that requires one staff per ten minors for minors not under Level III supervision. In May 2007, Probation issued a new directive dealing with supervision of minors on Level III supervision status. Per Probation's new policy, a Probation staff member may supervise up to three Level III minors during waking hours (6:00 am to 10:00 pm) or four Level III minors during sleeping hours (10:00 pm to 6:00 am) in a dayroom setting. A dayroom is a community access area unlike individual rooms or offices.

Probation does not use a standardized process to track the staffing levels at the three juvenile halls. The documentation used to identify staffing levels and the staff positions that management include to calculate the staffing levels differ between the juvenile halls. For example, Central and Barry J. Nidorf Juvenile Halls include staff assigned to court and school posts in their count of staff directly supervising minors detained in the hall, while Los Padrinos does not include these positions in their staff count. Probation management needs to ensure that the three halls use the same forms and methods to count staff directly supervising the minors.

During August 2007, we conducted site visits to review the staffing levels within 26 living quarters. The staffing levels within the 26 living quarters (non-Level III supervision) ranged from 1 to 20 minors to 1 Probation staff. In addition, the staffing levels for minors under Level III supervision at the 3 juvenile halls were one minor to one staff.

We also compared the number of Probation managers and staff assigned to the three juvenile halls since January 2006. Overall, the juvenile halls have not sustained a significant increase in staffing levels. The following graph depicts the results of our comparison. See Attachment 2, page 7 for more detailed staffing levels.



Probation management reassessed their progress on this paragraph and revised the anticipated formal monitoring date from August 2007 to November 2007.

Targeted Date to Request Formal Monitoring: November 2007

Paragraph 28:

The County shall develop and implement policies, procedures, and practices to restrict the use of oleoresin capsicum (OC) spray to appropriate circumstances, enable supervisors to maintain appropriate controls over spray use and storage, restrict the carrying of OC spray to only those individuals who need to carry and use it, prevent whenever possible the use of OC spray on populations for whom its use is contraindicated or contrary to doctors' instructions, and ensure that decontamination occurs properly.

Oleoresin capsicum, "pepper spray," is a pepper based non-lethal chemical restraint. Minors who are sprayed with OC spray are to be decontaminated by flushing the sprayed area with cold water. Probation developed policies governing the use of OC spray that conform to the above requirements.

During the month of July 2007, 17 separate incidents were reported in which staff used OC spray on minors. Thirteen incidents occurred at Central Juvenile Hall, three incidents occurred at Los Padrinos Juvenile Hall, and one incident occurred at Barry J. Nidorf Juvenile Hall. Five of the 17 minors sprayed were taking psychotropic medication. According to the investigation reports, the use of OC spray in all of the 17 incidents was appropriate.

All of the 17 minors received the appropriate medical attention within 30 minutes of being sprayed with OC.

The County Project Manager requested formal monitoring for this paragraph. However, the Monitor has not yet granted formal monitoring.

Target Date to Request Formal Monitoring: July 2007

Paragraph 31:

The County shall develop and implement a system for the timely, thorough, and independent investigation of alleged child abuse.

Probation's Child Abuse Investigation Unit consists of five full time and two part time investigators. Per the Los Angeles County DOJ action plan, 90% of investigations of alleged child abuse are to be completed within 30 days, and 95% of the child abuse investigations are to be completed within 60 days of the date the case was opened.

As of August 29, 2007, six of the 15 cases that were opened during June and July 2007 were still open. The Unit has a total of 25 open cases. Thirteen of the 25 cases have been open for over 90 days.

Probation staff members are required to maintain an activity log (Log) that lists when a Suspected Child Abuse Report (SCAR) was initiated and when the staff contacted law enforcement regarding the disposition of a criminal investigation. The Unit has amended the Log to include whether a SCAR has been generated, an investigation number linked to the SCAR, date of occurrence and the date the Unit was notified. The Probation director in charge of the Unit has also agreed to require the investigators to sign in at the juvenile halls when they respond to an incident and to identify the case to which they are responding. In addition, the independent counsel started in August 2007.

The Monitor indicated that he will grant formal monitoring to this paragraph after Probation develops a data base to track child abuse cases and specific procedures addressing the Unit's response to reported alleged child abuse. The procedures also include the role of the independent counsel.

In September 2007, Probation management issued a draft Child Abuse Special Investigations Unit Administrative Policy.

Targeted Date to Request Formal Monitoring: September 2007

Paragraph 32:

The County shall develop and implement a system for review of uses of force and alleged child abuse by senior management so that they may use the information gathered to improve training and supervision of staff, guide staff discipline, and/or make policy or programmatic changes as needed.

During the monitoring period, a total of 122 use of force incidents were reported in the three juvenile halls: 61 at Barry J. Nidorf Juvenile Hall, 31 at Los Padrinos Juvenile Hall and 30 at Central Juvenile Hall. Of the 122 packets reviewed, 224 minors were involved in the use of force, 204 (91%) minors received medical treatment within 30 minutes of the use of force. Of the remaining 20 minors, five at Central Juvenile Hall received medical treatment from five minutes to 30 minutes beyond the required time frame, 12 minors at Barry J. Nidorf Juvenile Hall received medical treatment within two hours and 3 minors at Los Padrinos received medical treatment 15 to 30 minutes beyond the required time frame.

Generally, Probation supervisory staff submitted a use of force incident report to management within 48 hours of the incident as required. For the 122 incident packets in use of force reviewed, 118 (97%) of the packets were completed within the 48 hour

reporting timeline established by Probation. Of the remaining four reviews, three at Central Juvenile Hall were completed from two to six days after the 48 hour timeline and one at Barry J. Nidorf Juvenile Hall was completed two days after the 48 hour timeline.

The Monitor indicated that Probation must have an administrative use of force policy in place before he grants formal monitoring to this paragraph. The policy must include procedures for use of force reviews, identification of minors on psychotropic medication, timeliness of medical treatment and submission of use of force investigations. The Monitor also indicated that Probation must have an early intervention system in place. The early intervention system must include a policy, staff training and system implementation. Probation management issued the administrative use of force policy on July 16, 2007 and plan to implement the early warning system within the next two months.

The County Project Manager requested formal monitoring for this paragraph. However, the Monitor has not yet granted formal monitoring to this paragraph.

Targeted Date to Request Formal Monitoring: August 2007

If you have any questions, please contact me or have your staff call Don Chadwick at (626) 293-1102.

Attachments

JTM:MO:DC

c: William T Fujioka, Chief Executive Officer
Robert B. Taylor, Chief Probation Officer
Sachi A. Hamai, Executive Officer, Board of Supervisors
Dr. Bruce Chernof, Director, Department of Health Services
Dr. Marvin J. Southard, Director, Department of Mental Health
Patricia S. Ploehn, Director, Department of Children and Family Services
Dr. Darline P. Robles, Superintendent, Los Angeles County Office of Education
Justice Deputies
Children Services Deputies
Education Deputies
Audit Committee

AUDITOR-CONTROLLER QUALITY ASSURANCE UNIT SUMMARY OF MONITORING RESULTS

AUDITOR-CONTROLLER QUALITY ASSURANCE UNIT AUDIT RESULTS		APR 07	MAY 07	JUN 07	JULY 07	AUG 07	SUBSTANTIAL COMPLIANCE (1)
Paragraph 11	Treatment Planning	73%	74%	75%	78%	80%	80%
Paragraph 12	Implementation of the Treatment Plan	51%	50%	63%	73%	63%	85%
Paragraph 13 A	Counseling Services	76%	74%	66%	64%	59%	80% **(2)**
Paragraph 13 B	Counseling Services	83%	77%	77%	57%	61%	50% **(2)**
Paragraph 15	Individual Behavior Modification	70%	80%	90%	90%	90%	**(3)**
Paragraph 16	Substance Abuse	70%	70%	70%	70%	70%	Implementation of Contract Service Providers
Paragraph 25	Management of Suicidal Youth	80%	85%	90%	90%	90%	**(3)**
Paragraph 26	Care for Self-Harming Youth	90%	90%	90%	90%	90%	90%
Paragraph 27	Staffing	80%	80%	80%	80%	80%	**(3)**
Paragraph 28	Chemical Restraint	85%	85%	85%	85%	87%	90%
Paragraph 29	Force	95%	95%	95%	95%	95%	95% at all three halls
Paragraph 31	Child Abuse Investigations	55%	60%	65%	65%	75%	DOJ has not set a substantial compliance level
Paragraph 32	Use of Force Review	85%	85%	87%	87%	87%	90%
Paragraph 33	Rehabilitation and Behavior Management	75%	80%	90%	90%	90%	**(3)**
Paragraph 35	Reduce Youth on Youth Violence	78%	80%	80%	80%	80%	**(3)**
Paragraph 41	Medical Records Transfer	80%	85%	85%	85%	85%	**(4)**
Paragraph 46-50	LACOE	n/a	n/a	n/a	n/a	n/a	**(5)**
Paragraph 55	Youth Hygiene	70%	75%	75%	75%	75%	75%
Paragraph 56	System	85%	85%	85%	85%	85%	100%

Footnotes:

(1) Substantial compliance is the level of compliance set by DOJ that the County must achieve for the paragraph to be granted formal monitoring. There must be a commensurate level of compliance at all three halls.

(2) Paragraph 13-A measures the adequacy of treatment; Paragraph 13-B measures improvement in the client's condition.

(3) These paragraphs do not have an actual set percentage of substantial compliance. DOJ is monitoring these paragraphs by monitoring and observing the environmental change brought about by the reduction of use of force, reduction of youth on youth violence, appropriate management of suicidal youth and an environment free of fear and intimidation.

(4) DOJ has indicated this paragraph will be in substantial compliance when a program for an electronic medical record (EMR) has been identified, funding for the EMR has been appropriated and an implementation plan with an implementation date has been developed.

(5) Paragraphs 46-50 are monitored by LACOE and are outside the scope of this report. LACOE reassessed their progress on Paragraphs 46 through 50 and revised the anticipated formal monitoring dates of their paragraphs. LACOE management stated they have been working closely with the Monitors and have reached a mutual understanding of the definition of substantial compliance. The Monitors will provide details of LACOE's progress toward substantial compliance in their upcoming semi-annual report. LACOE management further stated that the primary Monitor for Paragraph 50 has indicated he will grant formal monitoring to Paragraph 50 in July 2007.

QUALITY ASSURANCE UNIT
MONTHLY MONITORING RESULTS
FOR AUGUST 2007

Scope of Review

The paragraphs covered by this report do not include the paragraphs that have been fully implemented or paragraphs that are undergoing formal monitoring by the Department of Justice (DOJ). In August 2007, Paragraph 44 (Eyeglasses) was granted full compliance bringing the total number of paragraphs in full compliance to 21 of the 52 paragraphs. The DOJ also began formal monitoring on Paragraph 45 (Hygiene). Since January 2007, the DOJ began formal monitoring on a total of nine additional paragraphs (10, 18, 22, 23, 24, 45, 52, 53, and 54). For five of the remaining 22 paragraphs, LACOE staff monitor the implementation status. Our monitoring review covered the remaining 17 paragraphs.

The compliance rate that we identified for each paragraph is based on our testwork, discussions with the Monitors and compliance rate for the overlapping paragraphs. For example, use of force includes paragraphs 18, 28, 29 and 32.

PARAGRAPH 11: Treatment Planning

The County shall develop and implement policies and procedures, and practices for interdisciplinary treatment planning for youth with serious mental health needs, which allow for the ongoing identification, goal setting, and monitoring of youths' target symptoms. As permitted by law, a representative of LACOE shall share information with regard to the youth's academic performance and school-related behaviors, and shall also be responsible for sharing needed information from the treatment planning process with education professionals serving those youth.

Current Compliance Rate: 80%

Comments:

Based on documentation maintained by Probation staff, it appeared that DMH services were provided to the minors. However, DMH's and the mental health contractors did not maintain adequate documentation to support the services. These findings have been noted in prior monitoring reviews and discussed with DMH management. DMH management met with the contracted agencies' executive directors to reinforce the need for staff to maintain documentation to support the services provided.

The Individualized Behavior Modification Planning (IBMP) process is well-established and smoothly functioning. Managers from the appropriate departments are meeting weekly to discuss and implement joint behavior management plans for difficult multi-problem youth, including those on specialized units.

During the monitoring period, DMH Quality Integrity (QI) staff attended our exit meetings with DMH management and participated in the discussions of audit findings. The QI staff are providing training to the DMH staff to correct the discrepancies noted in our monitoring reviews. The QI staff have also amended DMH treatment forms to accurately document service levels provided to minors.

PARAGRAPH 12: Implementation of the Treatment Plan

The County shall develop and implement policies, procedures, and practices for case management, which would allow for the implementation of the treatment plans and ensure that treatment planning follows each youth from facility to facility.

Current Compliance Rate: 63%

Comments:

DMH staff did not always sufficiently document the minors' target symptoms and the problems that need to be addressed during the treatment session. DMH staff also did not always sufficiently document changes in the minors' targeted symptoms since the minors' last treatment sessions as required.

In March 2007, DMH implemented a more precise criterion for situations when the youth decline to have their families contacted or when the parents' telephones are disconnected. Since implementing the new procedures, DMH staff have demonstrated an improved effort to document their attempts to contact parents and guardians of the minors. The QI staff have also amended DMH treatment forms to accurately document service levels provided to minors.

PARAGRAPH 13: Counseling Services

The County shall develop and implement policies, procedures and practices to ensure the availability of sufficient and adequate counseling services that meet the goal of ameliorating target symptoms of identified mental illness.

Current Compliance Rate: A. Screen 1 - 59%, B. Screen 2 - 61%

Comments:

The Brief Symptom Inventory (BSI) is a standardized instrument that reflects subjective distress. The initial BSI is administered to a minor upon admission. A second BSI is administered three weeks after the minors' admission to determine if there has been any improvement in the clients' symptoms.

During February 2007, the DOJ set the compliance level for Paragraph 13 A (Screen 1) at 80%. In March 2007, DOJ agreed to set the compliance level for Paragraph 13 B (Screen 2) to 50%.

Screen 1 measures the adequacy of DMH staff's treatment contacts to the minor. Screen 2 measures improvements in the minors' symptoms when the results of the second BSI are compared to the first BSI.

During our August 2007 monitoring visit, we reviewed the documentation contained in 30 case files and noted the following compliance levels for Screen 1:

- 2 cases were rated at 100%
- 6 cases were between 80% and 90%
- 7 cases were rated between 60% and 70%
- 15 cases were rated at less than 60%

The case ratings were based on the level of documentation to identify the services provided to the minors. Case files rated at less than 100% did not maintain sufficient documentation of the services that DMH staff provided or their contacts with the minors.

During our August 2007 review of Screen 2, we reviewed 28 cases where a second BSI was administered. Seventeen (61%) of the 28 cases reviewed showed improvement when the second BSI was compared to the first BSI. This reflects that all three juvenile halls have achieved the compliance level established for this screen.

PARAGRAPH 15: Individualized Behavior Modification

The County shall develop and implement individualized behavior modification programs for individual youth where appropriate. If warranted, LACOE will develop and implement Behavior Support Plans which will be incorporated into youths' Individual Learning Plans. If a special education pupil requires a Behavior Support Plan or Behavior Intervention Plan, the IEP team shall include this need in the IEP.

Current Compliance Rate: 90%

Comments:

The Monitor and DMH have not developed a specific audit tool for this paragraph. The Monitor and DMH believe that the Individualized Behavior Modification Planning (IBMP) process outlined in Paragraph 33 addresses the minors' needs related to this paragraph. The Monitor stated that the type of intervention addressed in this paragraph is rare.

DMH management stated that this paragraph does not lend itself to regular sampling and auditing. Probation and DMH established a process for youth whose needs can not be met through the IBMP process. The IBMP committee will refer the youth for consideration by the Enhanced Supervision Unit (ESU) and for the Collaboration, Assessment, Rehabilitation and Evaluation (CARE) Units as appropriate. If none of these options meet the youth's needs, an individual behavior modification program will be developed by Probation and DMH specifically for the youth. In addition, the opening of the boys' and girls' ESUs provides an alternative treatment environment to meet the minors' needs.

PARAGRAPH 16: Substance Abuse

The County shall develop and implement policies, procedures, and practices to address substance use disorders appropriately.

Current Compliance Rate: 70%

Comments:

The compliance rate is based on our assessment of the initial screening process, the drug education program, and the follow up process. Generally, the screening process is sufficient. However, the County needs to improve the drug education/drug awareness and follow up process. For example, on a voluntary basis, Atlantic Recovery, Tarzana Treatment and Narcotics Anonymous are providing treatment and counseling to the minors at the three juvenile halls. However, due to a lack of a contract, the service providers cannot provide all the needed services.

Probation management indicated that they are in the process of preparing a "Request For Proposal" (RFP) for a contract with service providers to provide substance abuse services at the juvenile halls. Probation is working with DMH to establish a statement of work to define the services that are needed at the juvenile halls. Probation management did not provide a completion date for the solicitation.

Over the last several months, Probation has been working with DMH to utilize the eight existing DMH contractors to provide the needed substance abuse services at the three juvenile halls until the solicitation process has been completed and formal contracts are signed. According to Probation management, the DMH contractors began to provide the needed services in September 2007.

PARAGRAPH 25: Management of Suicidal Youth

The County and LACOE shall develop and implement policies, procedures, and practices to ensure that mental health staff are sufficiently involved with probation and education staff in the management of youth exhibiting suicidal behaviors, including creation of individual behavior modification programs (County) and, if needed, creation for a youth of a Behavior Support Plan or a Behavior Intervention Plan (LACOE), and decisions about appropriate clothing, bedding, and housing (County).

Current Compliance Rate: 90%

Comments:

Probation staff provide adequate supervision of youth placed on Level III supervision. The Individual Behavior Management Plan (IBMP) committees reviewed and classified all the self-harm incidents that occurred during the period of our review. Probation issued a policy requiring building supervisors to promptly review and evaluate attempted suicides that occurred in their units. The policy also requires a tracking system that assigns a unique identifier to each incident to ensure that the incidents are properly reported and filed in a centralized location.

The total number of self-harming incidents that occurred at the three juvenile halls during July 2007 was 75. The number represents a 9% decrease compared to the 82 incidents that occurred in July 2006.

On May 22, 2007, Probation management issued a new directive (Directive Number 1132) delineating guidelines for enhanced supervision requirements for detained minors. The directive establishes an additional level of supervision for minors, Level 4. If a minor is placed on Level 4 supervision, the minor's self-injurious behavior is serious enough to warrant transporting the minor to a psychiatric emergency care facility for psychiatric assessment. The directive also establishes that a Probation staff member may supervise up to three Level III minors during waking hours (6:00 am to 10:00 pm) or four Level III minors during sleeping hours (10:00 pm to 6:00 am) in a dayroom setting. A dayroom is a community access area unlike individual rooms or offices.

Each minor placed on Level III supervision must have an Enhanced Supervision Observation (ESO) form initiated for each shift and maintained during their assignment to Level III supervision status. Probation staff shall make entries on the form at four-hour intervals documenting the staff's observations of the minor's behavior. During our August review we noted that Probation staff are not always completing the forms and maintaining the forms in the appropriate file. Probation management needs to ensure that staff complete the forms as required and maintain the completed forms in the appropriate file.

PARAGRAPH 26: Care for Self – Harming Youth

The County shall develop a continuum of services and responses to meet the needs of self-harming youth, including revised supervision practices to minimize incidents of self-harm and appropriate access to hospital services and specialized residential facilities.

Current Compliance Rate: 90%

Comments:

Each juvenile hall must maintain a Mental Health Psychiatric Hospital log, indicating minors requiring transfer to a higher level of care and a Transportation log documenting minors transferred to a higher level of care. We reviewed the Mental Health Psychiatric Hospital log and the Transportation log at each juvenile hall and noted they were current and accurate.

When DMH refers a minor to a mental health facility, this paragraph requires the minor to be transported to the facility within two hours. Fourteen minors were referred to a mental health facility during the monitoring period. Nine (64%) minors were transported to the facility within the mandatory two hour time frame. Of the remaining five minors, one was transported three hours, two were transported four hours and one was transported 24 hours after the mandatory time frame. Due to lack of documentation, we were unable to determine when the remaining minor was transported to the mental health facility.

PARAGRAPH 27: Staffing

The County shall provide sufficient staff supervision to keep residents reasonably safe from harm and allow rehabilitative activities to occur successfully.

Current Compliance Rate: 80%

Comments:

Probation management indicated that they follow the State's standard for staffing that requires one staff per ten minors for minors not under Level III supervision. In May 2007, Probation issued a new directive dealing with supervision of minors on Level III supervision status. Per Probation's new policy, a Probation staff member may supervise up to three Level III minors during waking hours (6:00 am to 10:00 pm) or four Level III minors during sleeping hours (10:00 pm to 6:00 am) in a dayroom setting. A dayroom is a community access area unlike individual rooms or offices.

Probation does not use a standardized process to track the staffing levels at the three juvenile halls. The documentation used to identify staffing levels and the staff positions that management include to calculate the staffing levels differ between the juvenile halls. For example, Central and Barry J. Nidorf Juvenile Halls include staff assigned to court and school posts in their count of staff directly supervising minors detained in the hall, while Los Padrinos does not include these positions in their staff count. Probation management needs to ensure that the three halls use the same forms and methods to count staff directly supervising the minors.

During August 2007, we conducted site visits to review the staffing levels within 26 living quarters. The staffing levels within the 26 living quarters (non-Level III supervision) ranged from 1 to 20 minors to 1 Probation staff. In addition, the staffing levels for minors under Level III supervision at the 3 juvenile halls were one minor to one staff.

We also compared the number of Probation managers and staff assigned to the three juvenile halls since January 2006. Overall, the juvenile halls have not sustained a significant increase in staffing levels. The following table depicts the staffing levels at the juvenile halls from January through August 2007 compared to January 2006. The positions include Supervising Detention Services Officer (SDSO), Senior Detention Services Officer (Sr. DSO), Detention Services Officer (DSO) and Night Shift Staff (GSN).

CENTRAL JUVENILE HALL									
	Jan-06	Jan-07	Feb-07	Mar-07	Apr-07	May-07	Jun-07	Jul-07	Aug-07
SDSO	20	17	17	17	16	14	21	23	23
SR DSO	44	64	62	62	62	63	54	56	57
DSO	272	327	302	297	292	261	282	290	283
GSN	73	80	107	111	71	106	81	82	83
Total	**409**	**488**	**488**	**487**	**441**	**444**	**438**	**451**	**446**

LOS PADRINOS JUVENILE HALL									
	Jan-06	Jan-07	Feb-07	Mar-07	Apr-07	May-07	Jun-07	Jul-07	Aug-07
SDSO	21	19	19	19	19	19	20	20	20
SR DSO	47	50	50	50	48	48	49	52	54
DSO	232	251	241	248	228	221	230	256	257
GSN	73	72	77	80	62	101	77	75	80
Total	**373**	**392**	**387**	**397**	**357**	**389**	**376**	**403**	**411**

BARRY J. NIDORF JUVENILE HALL									
	Jan-06	Jan-07	Feb-07	Mar-07	Apr-07	May-07	Jun-07	Jul-07	Aug-07
SDSO	23	23	23	23	21	17	21	21	19
SR DSO	60	51	51	51	49	51	51	51	57
DSO	229	261	255	132	282	265	261	261	259
GSN	77	65	71	73	64	74	75	75	86
Total	**389**	**400**	**400**	**279**	**416**	**407**	**408**	**408**	**421**

PARAGRAPH 28: Chemical Restraint

The county shall develop and implement policies, procedures, and practices to restrict the use of oleoresin capsicum (OC) spray to appropriate circumstances, enable supervisors to maintain appropriate controls over spray use and storage, restrict the carrying of OC spray to only those individuals who need to carry and use it, prevent whenever possible the use of OC spray on populations for whom its use is contraindicated or contrary to doctors' instructions, and ensure that decontamination occurs properly.

Current Compliance Rate: 87%

Comments:

Oleoresin capsicum, "pepper spray," is a pepper based non-lethal chemical restraint. Minors who are sprayed with OC spray are to be decontaminated by flushing the sprayed area with cold water. Probation developed policies governing the use of OC spray that conform to the above requirements.

During the month of July 2007, 17 separate incidents were reported in which staff used OC spray on minors. Thirteen incidents occurred at Central Juvenile Hall, three incidents occurred at Los Padrinos Juvenile Hall, and one incident occurred at Barry J. Nidorf Juvenile Hall. Five of the 17 minors sprayed were taking psychotropic medication. According to the investigation reports, the use of OC spray in all of the 17 incidents was appropriate.

All of the 17 minors received the appropriate medical attention within 30 minutes of being sprayed with OC.

PARAGRAPH 29: Use of Force

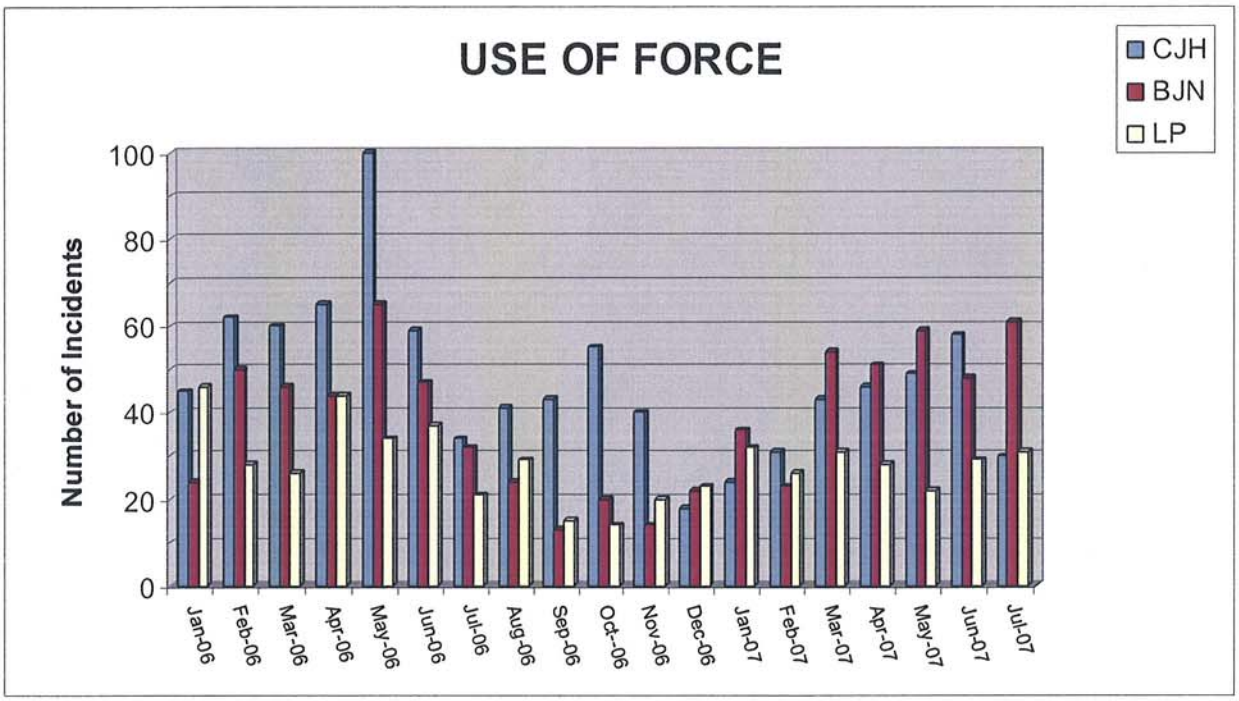
The County shall develop and implement a comprehensive policy and accompanying practices governing use of force, ensuring that the least amount of force necessary for the safety of staff, youth residents, and visitors is used on youth.

Current Compliance Rate: 95%

Comments:

The Probation Department trained its employees in "Safe Crisis Management," which emphasizes programming and de-escalation techniques. The training also included the proper use of physical and chemical restraints. Based on the number of reported incidents, it appears that overall the use of force has not significantly changed from last year. In addition, over the previous seven months the number of use of force incidents has gradually increased, as depicted in the chart on the following page.

In the past, the Monitor had stated that although Probation implemented a use of force policy and training to comply with this paragraph, the Monitor will not grant formal monitoring until the related Paragraphs 18, 28 and 32, are also ready for formal monitoring. In January 2007, the Monitor indicated to the County's Project Manager that DOJ will consider formal monitoring for each paragraph on each paragraph's merit.



PARAGRAPH 31: Child Abuse Investigation

The County shall develop and implement a system for the timely, thorough, and independent investigation of alleged child abuse.

Current Compliance Rate: 75%

Comments:

Probation's Child Abuse Investigation Unit consists of five full time and two part time investigators. Per the Los Angeles County DOJ action plan, 90% of investigations of

alleged child abuse are to be completed within 30 days, and 95% of the child abuse investigations are to be completed within 60 days of the date the case was opened.

As of August 29, 2007, six of the 15 cases that were opened during June and July 2007 were still open. The Unit has a total of 25 open cases. Thirteen of the 25 cases have been open for over 90 days.

Probation staff members are required to maintain an activity log (Log) that lists when a Suspected Child Abuse Report (SCAR) was initiated and when the staff contacted law enforcement regarding the disposition of a criminal investigation. The Unit has amended the Log to include whether a SCAR has been generated, an investigation number linked to the SCAR, date of occurrence and the date the Unit was notified. The Probation director in charge of the Unit has also agreed to require the investigators to sign in at the juvenile halls when they respond to an incident and to identify the case to which they are responding. In addition, the independent counsel started in August 2007.

The Monitor indicated that he will grant formal monitoring to this paragraph after Probation develops a data base to track child abuse cases and specific procedures addressing the Unit's response to reported alleged child abuse. The procedures also include the role of the independent counsel.

In September 2007, Probation management issued a draft Child Abuse Special Investigations Unit Administrative Policy.

PARAGRAPH 32: Use of Force Review

The County shall develop and implement a system for review of uses of force and alleged child abuse by senior management so that they may use the information gathered to improve training and supervision of staff, guide staff discipline, and/or make policy or programmatic changes as needed.

Current Compliance Rate: 87%

Comments:

During the monitoring period, a total of 122 use of force incidents were reported in the three juvenile halls: 61 at Barry J. Nidorf Juvenile Hall, 31 at Los Padrinos Juvenile Hall and 30 at Central Juvenile Hall. Of the 122 packets reviewed, 224 minors were involved in the use of force, 204 (91%) received medical treatment within 30 minutes of the use of force. Of the remaining 20 minors, five at Central Juvenile Hall received medical treatment from five minutes to 30 minutes beyond the required time frame, 12 minors at Barry J. Nidorf Juvenile Hall received medical treatment within two hours and 3 minors at Los Padrinos received medical treatment 15 to 30 minutes beyond the required time frame.

Probation supervisory staff did not always submit a use of force incident report to management within 48 hours of the incident as required. We reviewed the documentation packets for 122 incidents in use of force and noted 118 (97%) of the packets were completed within the 48 hour reporting timeline established by Probation. Of the remaining four reviews, three at Central Juvenile Hall were completed from two to six days after the 48 hour timeline and one at Barry J. Nidorf Juvenile Hall was completed two days after the 48 hour timeline.

The Monitor indicated that Probation must have an administrative use of force policy in place before he grants formal monitoring to this paragraph. The policy must include procedures for use of force reviews, identification of minors on psychotropic medication, timeliness of medical treatment and submission of use of force investigations. The Monitor also indicated that Probation must have an early intervention system in place. The early intervention system must include a policy, staff training and system implementation. Probation management issued the administrative use of force policy on July 16, 2007 and plan to implement the early warning system within the next two months.

The County Project Manager requested formal monitoring for this paragraph. However, the Monitor has not yet granted the request.

PARAGRAPH 33: Rehabilitation and Behavioral Management

The County shall provide adequate rehabilitative programming and gender-specific programming, where appropriate. The County and LACOE shall provide a facility-wide behavioral management system that is implemented throughout the day, including school time.

Current Compliance Rate: 90%

Comments:

Individual Behavior Management Plan (IBMP) and Interagency meetings are held weekly. As part of our July 2007 monitoring, we attended IBMP meetings at all three juvenile halls to determine whether protocols and processes utilized at each facility are consistently applied. Based on our observations at the IBMP meetings, staff at all three facilities are conducting the meetings in a consistent manner. Committee members from LACOE, DMH, JCHS and Probation were present and participated in the discussions of the minors scheduled for review. Minutes to the meeting were taken and no problems were noted. We will continue to attend at least one meeting a month at one of the three juvenile halls.

On January 22, 2007, the Life Enhancement and Assessment of Personal Skills (LEAPS) program was implemented at all three juvenile halls. During our July review, we reviewed the documentation for approximately 50 LEAPS sessions at each of the three juvenile halls; all documentation was in order. The children's incentive stores are in place at all three halls and the points system is fully implemented. All staff assigned

to the juvenile halls have been trained in LEAPS. We will closely monitor the progress of LEAPS during our future reviews.

PARAGRAPH 35: Reduce Youth and Youth Violence

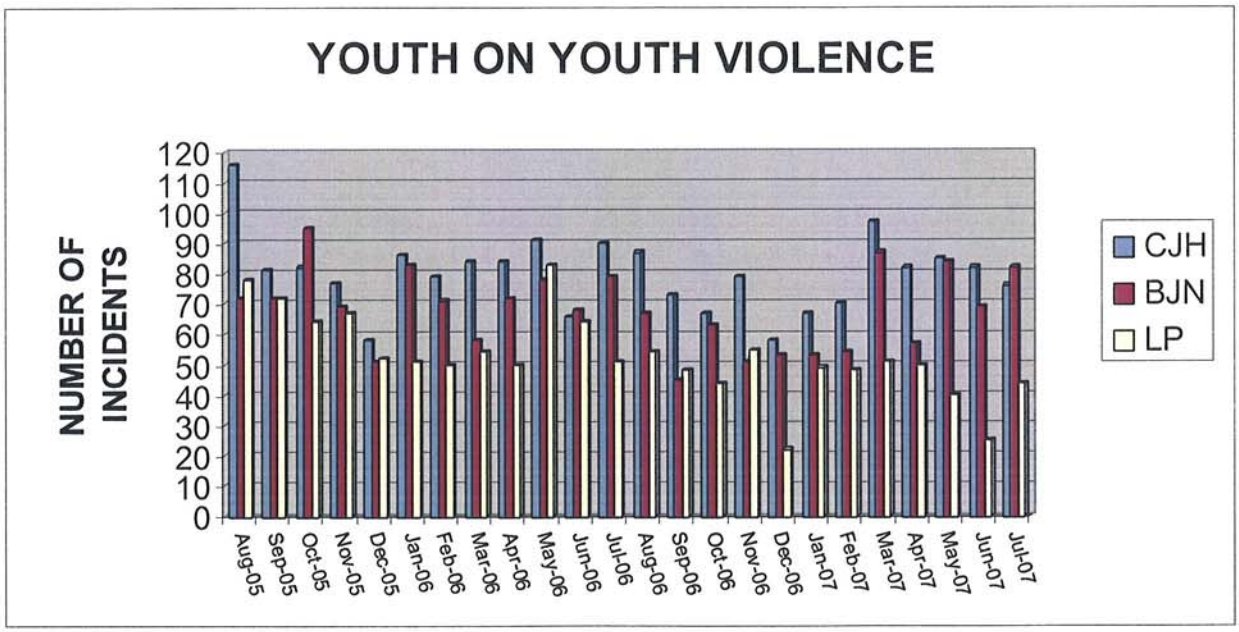
The County and LACOE shall develop and implement strategies for reducing youth on youth violence that includes training staff in appropriate behavior management, recognition and response to gang dynamics, and violence reduction techniques.

Current Compliance Rate: 80%

Comments:

Probation staff assigned to the juvenile halls received training in efforts to reduce youth on youth violence (YOYV). The number of incidents of YOYV in the three juvenile halls has increased by 26 incidents (15%) from the previous month. The number of incidents that occurred in July 2007 represented an 8% decrease compared to the 220 incidents reported in July 2006.

Since December 2006, the number of incidents involving YOYV has increased at all three juvenile halls. Next month, we will include comments from Probation to explain this trend.



PARAGRAPH 41: Medical Records Transfer

The County shall develop and implement an effective system for transferring medical records from one facility to another so that youth receive timely and consistent medical services.

Current Compliance Rate: 85%

Comments:

Medical records are being transferred manually from one juvenile hall to another in a timely manner, and medical staff are documenting when medical records are sent and received. Probation and JCHS managers selected the Jail Health Information System (JHIS), a system used by the Los Angeles County Sheriff's Department at the County jails, as the electronic medical record system to serve the juvenile halls. Probation and JCHS management are continuing to work with the Sheriff, the contractor and County Counsel to determine if a new contract is required, or if they can amend system contractor's current contract to include modifying JHIS to accommodate Probation and JCHS. Probation's FY 07-08 budget included the funding for an electronic medical record system.

PARAGRAPHS 46 to 50

Paragraphs 46 through 50 are audited by LACOE's internal auditors under the supervision of LACOE management. On September 17, 2007, LACOE reassessed their progress on Paragraphs 46 through 50 and revised the anticipated formal monitoring dates of their paragraphs as indicated below.

LACOE management stated they have been working closely with the Monitors and have reached a mutual understanding of the definition of substantial compliance. LACOE management met with the primary Monitor for Paragraph 46 and discussed the feasibility of dividing Paragraph 46 into five subparagraphs to make the paragraph easier to monitor. LACOE management indicated that the Monitor was agreeable to their suggestion. LACOE modified their audit tools to capture the information needed to document LACOE's progress toward substantial compliance.

PARAGRAPH 46: Special Education

The County and LACOE shall develop and implement a systematic, comprehensive process to locate, screen, identify and provide appropriate services to all youth through age 21 with disabilities who require special education services.

LACOE is proceeding on the assumption this paragraph will be divided into five subparagraphs as follows:

- 46.1 Special Education Upon Intake.

- 46.2 Staffing.
- 46.3 Screening for Special Education Needs.
- 46.4 Individual Education Programs.
- 46.5 Training and Quality Assurance.

The LACOE Project Manager stated that in August 2007, LACOE requested the Monitor to grant formal monitoring to 46.1 and 46.2 retroactive to May 2007. However, the Monitor has not yet granted formal monitoring.

Targeted Date to Request Formal Monitoring for 46.3-5: November 2007

PARAGRAPH 47: Related Services

LACOE shall provide related services to special education students with needs for these services.

Targeted Date to Request Formal Monitoring: November 2007

PARAGRAPH 48: Parent Participation

The County and LACOE shall utilize a range of methods to facilitate parent participation in Individualized Educational Program (IEP) meetings.

In August 2007, the LACOE Project Manager requested formal monitoring for this paragraph retroactive to May 2007. However, the Monitor has not yet granted formal monitoring.

PARAGRAPH 49: Transition Planning and Services

The County and LACOE shall provide adequate transition planning and services for all eligible youth with disabilities.

Targeted Date to Request Formal Monitoring: October 2007

PARAGRAPH 50: Materials, Space and Equipment

The County and LACOE shall ensure that all classes, including those held inside residential units, have appropriate materials, space and equipment.

In August 2007, the LACOE Project Manager requested formal monitoring for this paragraph retroactive to July 2007. However, the Monitor has not yet granted formal monitoring.

PARAGRAPH 55: Youth Hygiene

The County and LACOE shall ensure that youth have adequate hygiene opportunities, including sanitary personal hygiene products. The County shall ensure that youth have adequate linens, bedding and clothing.

Current Compliance Rate: 75%

Comments:

Paragraph 55 is audited by Probation's Management Services Bureau (MSB) auditors. We review MSB's audits on a monthly basis. The percentage of compliance is based on the MSB auditors' reports and our discussions with the Monitor.

We conducted walk-through inspections of the living quarters, supply rooms and laundry at all three juvenile halls. We interviewed Probation staff and inspected MSB's documentation related to inventories for clothing, hygiene items and cleaning supplies. Established inventory levels were posted in the supply rooms. The living quarters reviewed were in good condition and the laundries were clean. MSB's documentation at all three juvenile halls were in order. We compared the inventory levels to the established levels for 48 separate inventory items in the stockrooms of 16 living units at the three juvenile halls. Of the 48 items, 33 items did not meet the minimum established inventory level. Of the remaining 15 inventory items, six were over the established level. One item (deodorant) was 232 over the established inventory level.

Paragraph 56: System

The County and LACOE shall revise and/or institute quality assurance systems to ensure implementation of the provisions addressed in this Agreement.

Current Compliance Rate: 85%

Comments:

The County has established a quality assurance program for the three juvenile halls. Data is being gathered in a variety of areas. The Auditor-Controller's Quality Assurance Unit is completing periodic compliance audits at the juvenile halls and issuing monthly status reports to the Board of Supervisors.