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COUNTY OF LOS ANGELES PROBATION DEPARTMENT

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TO: All Residential Treatment Services Bureau Staff:

The Residential Treatment Services Bureau Manual, as with all other manuals issued, is designed to standardize, maintain and improve services and operations.

Policies and procedures in this manual are mandatory and apply to all Residential Treatment Services Bureau employees. Revisions, additions or deletions are made only upon the approval of the Bureau Chief.

The Residential Treatment Services Bureau Manual has been administratively reviewed as required per Title 15 § 1324.

This Manual will be reviewed biennially and revised to ensure that it is current and incorporates changes in statutes, regulations, Department and Countywide policies.

Dalila Alcantara, Deputy Director
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LOS ANGELES COUNTY PROBATION DEPARTMENT

RESIDENTIAL TREATMENT SERVICES BUREAU MANUAL 2020

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LOS ANGELES COUNTY PROBATION DEPARTMENT

Subject: RESIDENTIAL TREATMENT SERVICES BUREAU MANUAL INTRODUCTION	Section Number: RTSB-100
	Effective Date: July 21, 2020
	Approved By: Jennifer Kaufman, Bureau Chief

101 THE ROLE OF THE RESIDENTIAL TREATMENT SERVICES BUREAU AND THE PROBATION DEPARTMENT

This manual describes the policies and procedures for the Residential Treatment Services Bureau (RTSB) of the Los Angeles County Probation Department, which are consistent with the Department's vision, mission, and core values:

VISION

Rebuild lives and provide for healthier and safer communities.

MISSION

Enhance public safety, ensure victims' rights, and effect positive probationer behavioral change.

CORE VALUES

We fundamentally subscribe to the fair and impartial administration of justice and embrace the following values:

- Dignity & Respect for our clients, public and employees.
- Integrity to do the right things for the right reasons – all of the time.
- Leadership to develop an organization that is sustainable and will attain national prominence.
- Rehabilitation is founded in a belief that people have the ability to transform into law-abiding individuals.
- Contribution of everyone is valued and everyone has the opportunity to perform to their highest potential.
- Commitment to providing service excellence to achieve positive outcomes for healthy families and communities.
- Collaboration by working with others to maximize efforts and achieve positive results.
- Evidence-Based practices and policies as a way of assuring that our best efforts are leading to desired outcomes.

The Board of Supervisors, the Probation Commission and various other commissions and bodies which are required by statute or directed by the Board provide oversight of the Probation Department and are responsible for reviewing the efforts of our

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operations.

The youth enter RTSB facilities Following a Camp Community Placement order made in juvenile court. Throughout the youth's camp program, the Probation Department will apprise the court of the youth's progress and status

In cooperation with our partners and stakeholders, the Residential Treatment Services Bureau seeks to provide a safe and secure rehabilitative environment for the youths housed in our facilities. The efforts of the Probation Department and these partner agencies seek to enhance the care and treatment of detained youth and ensure that they are receiving all necessary services in a capable manner.

Department of Mental Health (DMH):

DMH provides counseling and services to youths detained in RTSB facilities offered by licensed therapists and clinicians that assist the detained youth by providing for their mental health needs.

Juvenile Court Health Services (JCHS):

JCHS provides treatment and medical care to the detained youth in addition to being responsible for the daily disbursement of each youth's prescribed medication. JCHS also assists in providing dental and vision care for the youth. During emergent situations, or when a higher level of medical care is necessary, JCHS will provide necessary referrals to Department of Health Services Facilities.

Los Angeles County Office of Education (LACOE):

LACOE is responsible for administering the educational services that all youth detained in RTSB facilities will receive. On-site school facilities are located at every camp and staffed by LACOE administrators and teachers who see to each youth's educational needs including Individual Educational Programs (IEP) for youth in need of special education services.

It is the responsibility of staff assigned to the RTSB to be familiar with and maintain knowledge of the contents of this manual. Staff shall immediately seek clarification from their superiors on any issue that is unclear to them.

This manual shall be utilized in conjunction with any other applicable manuals and procedural statements. The RTSB Manual is administratively reviewed and updated annually.

(Meets standards set forth in Title 15, Sections 1324 (D)(b))

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102 ROLE OF THE CAMP SYSTEM

The Residential Treatment Services Bureau (RTSB) is charged with providing juvenile probationers with intervention services in a residential treatment setting. The Probation Department, along with its partner agencies, has created an integrated treatment approach in the camps using evidence-based practices to achieve positive behavior change in youth while endeavoring to ensure the safety and security of probationers, the community and staff. Each camp has an on-site school operated by the Los Angeles County Office of Education (LACOE). The Department of Mental Health (DMH) provides mental health counselors seven days per week. Group and individual substance abuse counseling is offered through DMH and various community-based treatment providers.

Each camp facility utilizes a cognitive-behavioral intervention, either Dialectical Behavior Therapy (DBT) or Aggression Replacement Training (ART), depending on the camp, to teach youth new skills to replace negative behaviors and decrease behaviors that interfere with treatment. Providing youth with the opportunity to develop the skills needed to control their own behavior and the personal motivation to help them want to achieve positive goals for themselves is what will create lasting change in our youth and communities. Skill-building programs emphasize the importance of the relationship between staff and youth in the learning of new skills. Probation and Mental Health staff frequently co-facilitate skills groups and staff focus on engaging and motivating youth to encourage them to commit to working on their behavior. Positive and healthy relationships between staff and youth are the basic building blocks to motivating and engaging youth to make a commitment to change their behavior and to helping youth maintain this commitment.

103 HISTORY OF CAMPS

Juvenile camps were established during the depths of the economic depression in 1932 in order to provide temporary shelter and employment for hundreds of homeless boys in Los Angeles County. Youngsters worked in forestry and fire-fighting projects, for which they received marginal wages. The program was established by the Los Angeles County Probation Department, the Forestry and Fire Department, as authorized by the Board of Supervisors and the Juvenile Court.

The 1941 State youth Authority Act established state camps for delinquent (rather than homeless) boys, patterned after the successful forestry camps. The first junior camp was opened in 1943. Since then, the camp program has expanded and evolved in response to local needs. The Los Angeles County Probation Department's Residential Treatment Services facilities have been widely emulated throughout the world.

104 CAMP LOCATIONS

Currently, the RTSB is comprised of 5 camps and Dorothy Kirby Center, capable of housing over 691 youth of both genders. They are as follows:

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Camp Clinton B. Afflerbaugh 6631 N. Stephens Ranch Road Laverne, CA 91750 (909) 593-4937	Camp Joseph Paige 6601 N. Stephens Ranch Road Laverne, CA 91750 (909) 593-4921
Camp Joseph Scott 28700 N. Bouquet Canyon Road Santa Clarita, CA 91390 (661) 296-8500	Camp Glenn Rockey 1900 N. Sycamore Canyon Rd. San Dimas, CA 91773 (909) 599-2391
Dorothy Kirby Center 1500 S. Mc Donnell Ave Commerce, CA 90022 Tel: (323) 981-4301	Campus Vernon Kilpatrick 427 S. Encinal Canyon. Road Malibu, CA 90265 (818) 889-1353

105 CAMP DESCRIPTIONS

The camps provide structured living experience, vocational training, credit recovery, cognitive behavior, skill building, substance abuse, mental health, education, specialized tutoring, athletic activities, and various types of social enrichment programming. Each camp provides enhanced treatment components tailored to the population and camp focus.

Basic Camp Program

Upon arrival to camp, youth receive an orientation as to camp procedures and protocols.

They attend school Monday through Friday, and they receive physical exercise daily. During their camp stay, youth receive various types of training, including classes in such areas as family issues and decision-making. Mental Health clinicians are also available to provide specialized services on an individual and group basis.

All youth receive an assessment that helps determine what services and resources may be provided. The assigned camp Deputy Probation Officer (DPO) monitors the youth's progress and works closely with the family, school, and community-based organizations to assist the youth in reaching his or her established case goals. The camp DPO also works with the DPO assigned to supervise the youth following the camp program to ensure a smooth transition from the camp to the community.

Camp Clinton B. Afflerbaugh

Camp Afflerbaugh is located at the foot of the San Gabriel Mountains just above the community of La Verne and adjacent to Camp Paige. It has a large dormitory, an administration building, joint school facilities with Camp Paige, a kitchen, dining room, gymnasium, and a large outdoor swimming pool.

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Campus Vernon Kilpatrick

The site of the former Camp Kilpatrick is currently being re-built into a state-of-the-art, 120-bed replacement facility. The new facility, when opened in 2017, will provide rehabilitation services for youth in a homelike environment based on the small group principles of the Missouri Model. Development of programming for the new facility is part of a multi-year collaborative planning process with leading researchers, advocates and Probation and County partner staff to create a new vision for juvenile justice in Los Angeles called the LA Model. This facility fosters a culture of supportive, collaborative, and learning environments for youth and staff alike. The facility is a place where youth develop interpersonal, educational, career technical and life skills; create healthy and supportive relationships with adults and peers; and begin to discover their true potential.

In the LA Model, a culture of healing and thriving, focusing on positive community reintegration, is forged through a safe, open, and holistic partnership involving all staff, families, and communities. Probation, Department of Mental Health, Los Angeles County Office of Education and Juvenile Court Health Services staff will all be trained together to provide a team approach. All staff are partners with youth and families in the creation of positive relationships. The resulting programming is geared to youth motivation and engagement with youth to participate in a treatment program that includes Dialectical Behavior Therapy, individual mental health services, trauma-informed practices, education and career technical skills, along with and strength-based and interest-based programs and activities to support behavior change in a therapeutic milieu.

Camp Joseph Paige

Camp Paige is located at the foothills of the San Gabriel Mountains adjacent to Camp Afflerbaugh. It has an open dormitory, administration building, school facility, gymnasium, kitchen, and dining area.

Camp Glenn Rockey

Camp Rockey is located in the foothills of San Dimas. It contains an open dormitory, a secure dorm with 20 individual rooms, administration building, school facility, gymnasium, kitchen, and dining area.

Camp Rockey's Operation Read is a literacy program endorsed by the Los Angeles County Board of Supervisors. The camp also offers a tutoring and mentoring program using student volunteers from local colleges to provide weekend literacy services. The program targets 25% of students with the most limited academic proficiency.

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Camp Joseph Scott

Camp Scott, which is adjacent to Camp Scudder, is situated in Bouquet Canyon, just outside the city of Valencia. It houses females and contains an open dormitory, administration building, a secure dorm with 12 individual rooms, school facility, kitchen, and dining area.

Camp Scott offers a behavioral stabilization and change program for female youth between the ages of 13 and 18 that focuses on building skills and enhancing personal motivation to change. Girls in the program learn new behaviors while building character in an appropriate and positive environment. Designed to assist youth in learning effective strategies to change attitudes and behaviors, the program's treatment modalities include mental health counseling, role modeling and mentoring (Girls and Gangs, Mommy and Me) and skill training (Moving On and other small groups). Youth participate in a treatment program that includes Dialectical Behavior Therapy.

Dorothy Kirby Center

Dorothy Kirby Center is a Residential Treatment Center offers a secure, co-educational program, where four agencies, Probation Department, Department of Mental Health, Department of Health Services and the Los Angeles County Office of Education, work collaboratively to achieve an integrated, therapeutic environment for the residents. Kirby is unique in that it is the only *secure treatment center* in L.A. County and one of few in the State.

The DKC campus has 10 living units of 10 beds each and facilities for school, recreation, administration, chapel, and dining. It offers group living, individualized school programs, health examinations and services, and an intensive day treatment mental health program. Adolescent boys and girls referred to DKC have emotional and behavioral impairments. At DKC, they are provided therapeutic treatment interventions by interagency clinical staff from the Probation Department and the Department of Mental Health (DMH).

LOS ANGELES COUNTY PROBATION DEPARTMENT

Subject: RESIDENTIAL TREATMENT SERVICES BUREAU MANUAL ADMINISTRATION, ORGANIZATION, AND MANAGEMENT	Section Number: RTSB-200
	Effective Date: July 21, 2020
	Approved By: Jennifer Kaufman, Bureau Chief

201 BUREAU CHIEF'S MESSAGE

Welcome to the Residential Treatment Services Bureau. The safety and security of our institutions and the provision of quality, individualized services for the youth under our care are our primary goals. This manual has been designed to provide you with policy and procedure guidance on day-to-day operations, as well as the handling of unusual or emergent circumstances. As our bureau continues to move forward, updates to this manual will occur.

202 RTSB ADMINISTRATIVE STRUCTURE

The administrative structure defines areas of responsibility for managers and the supervision of staff. It also establishes the chain of command for the bureau.

Chain of Command

The chain of command will be followed in all operational matters. Supervisors are directly responsible for those whom they supervise, and subordinate staff shall follow all lawful instructions from any supervisor. Most requests, problems, and complaints can be handled at the direct supervisor level, but may progress to the next order of rank indicated in the chain of command should it become necessary. It is the responsibility of staff at all levels to communicate information and issues up and down the chain of command to ensure effective communication and to expedite the resolution of problems.

In descending order, the supervisory levels are as follows:

- Chief Probation Officer
- Chief Deputy
- Deputy Director
- RTSB Bureau Chief
- RTSB Consultant
- RTSB Regional Director
- Camp Director
- Assistant Director
- Supervising Deputy Probation Officer
- Deputy Probation Officer II (no supervisory authority unless so designated)
- Deputy Probation Officer I (no supervisory authority)
- Group Supervisor Nights (no supervisory authority)

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Management Services Bureau Chain of Command

Staff from the Management Services Bureau (MSB) work side-by-side with RTSB staff in order to maintain facilities, operate work crews, ensure adequate supplies, and handle fiscal responsibilities. The chain of command for MSB staff is as follows:

- Camp Services Director
- Camp Services Manager/General Services Manager
- Crew Instructor
- Head Cook
- Senior Cook

203 DUTY STATEMENTS, RTSB MANAGEMENT

The duty statements that follow provide an overview of the duties and responsibilities for RTSB managers. Detailed specifications for each class can be found on the L.A. County Department of Human Resources web site at <http://dhr.mylacounty.info/>.

Bureau Chief

The Bureau Chief is responsible for directing, managing and evaluating the daily activities of the RTSB. The Bureau Chief oversees the bureau operations, budget, procedures, programs, services, and activities. The person in this position is responsible for appropriate staffing levels, work methods, processes and policies. The RTSB Chief assists in developing, implementing, and evaluating short and long-term departmental and bureau-wide goals and objectives, programs, policies and procedures, in order to improve operations and services, including employee performance and accountability.

Regional Director

The Regional Director (Senior Director Level) oversees the operations of camps within an identified geographical region: Central and East. The camps in each of these regions are as follows:

- Central: Campus Kilpatrick and Camp Scott
- East: Camps Afflerbaugh, Paige, Rockey, and Dorothy Kirby Center

The Regional Director is the liaison between the Bureau Chief and camp Directors. The person in this position ensures clear communication and efficient implementation of Departmental policies and procedures, as well as compliance with federal, state, and local mandates.

RTSB Consultant

The RTSB Consultant (Director Level) is the liaison between the Bureau Chief and inter-

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departmental operations within the department. The person in this position assists the Bureau Chief with implementing departmental policies in conjunction with federal, state and local mandates and ensuring the bureau's compliance.

Camp Director

The camp Director acts as the administrative head of an identified camp and is responsible for its overall operations. The camp Director is responsible for the camp's adherence to all federal, state and local mandates. This includes providing reports for submission to the BSCC regarding legal actions pertaining to confinement conditions filed against persons or legal entities responsible for juvenile facility operation; and monthly camp population and profile survey reports within ten (10) working days after the end of each reporting period. 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 camp Director shall provide a crowding report to the Board in a format provided by the BSCC. The camp Director must meet regularly with primary on-site representatives from education, health, mental health, MSB, and contracted agencies to discuss mutual operational issues.

The camp Director coordinates the implementation of camp-specific programs, ensuring clear communication of Departmental and RTSB policies and procedures to all camp staff and program providers. The camp Director is also responsible for developing and maintaining camp-specific policies and procedures in written form that are available to all camp staff.

Assistant Director

The Assistant Director (AD) as the administrative head of an identified camp and is responsible for its overall operations in the absence of the camp Director. The AD is responsible for the camp's adherence to all federal, state and local mandates. This includes providing reports for submission to the BSCC regarding legal actions pertaining to confinement conditions filed against persons or legal entities responsible for juvenile facility operation; and monthly camp population and profile survey reports within ten (10) working days after the end of each reporting period. 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, at the direction of the camp Director, the AD shall provide a crowding report to the Board in a format provided by the BSCC. Additionally, at the direction of the camp Director, the AD meets regularly with primary on-site representatives from education, health, mental health, MSB, and contracted agencies to discuss mutual operational issues.

(Meets standards set forth in Title 15, Sections 1321 (d), 1340, 1342, 1343)

204 DUTY STATEMENTS, DEPUTIZED STAFF

The duty statements that follow provide an overview of the duties and responsibilities for deputized staff responsible for running the daily operations at camp. Detailed

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specifications for each class can be found on the L.A. County Department of Human Resources website at <http://dhr.mylacounty.info/>.

Additionally, the Camp Director may provide specific duties and responsibilities in order to ensure smooth operation of camp-specific programs and services.

Supervising Deputy Probation Officer (SDPO)

The SDPO reports to the Camp Director or the Assistant Director and supervises the work of DPO IIs, DPO Is, and GSNs on a specific shift. Shifts generally span 56 consecutive hours over a three-day period. The SDPO carries out the duties and responsibilities of the camp Director when the latter is away from the site. General duties include, but are not limited to:

- Overseeing staff members to ensure they carry out daily camp operations pursuant to Departmental and RTSB policies and procedures;
- Providing guidance, correction, and discipline to subordinate staff;
- Communicating with program providers to ensure strategic implementation of camp-specific programs;
- Communicating with the camp Director regarding unusual cases, policies, and personnel matters;
- Preparing correspondence and supervising the maintenance of necessary records.

(Meets standards set forth in Title 15, Section 1321 (c).)

Deputy Probation Officer II (DPO II) / Dorm Team Leader (D.T.L.)

The rank of DPO II confers journeyman status. As such, the DPO II is expected to provide professional level staff services in the camp setting. The DPO II may be expected to carry a caseload of the more difficult and complex cases and ensure adequate scheduling of daily camp activities. She/he is expected to exercise and demonstrate a journey level knowledge of probation casework policies and procedures which may include;

- Psychological, social and cultural factors that influence individual and group behavior.
- Counseling techniques.
- Federal, state, local laws and ordinances relating to probation work.
- Functions and procedures of the Juvenile Court as they relate to Probation.
- Departmental policies and procedures; and first aid/CPR techniques.

The DPO II must possess abilities and skills to communicate effectively; write clear and concise reports; establish and maintain effective working relationships with clients, probation staff, the court, law enforcement personnel, and community groups; and demonstrate knowledge of evidence-based best practices in delinquency prevention and intervention.

Duties include, but are not limited to, the following:

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- Monitoring program needs.
- Coordinating casework services.
- Coordinating security and dorm operations.
- Serving as a training officer.
- Providing treatment and counseling services.
- Conducting small group interventions and workshops.
- All duties listed for DPO I.

Deputy Probation Officer I / Community Sponsor

This is considered an entry-level class. The DPO I is responsible for learning and applying the concepts, theories, principles, laws and procedures of professional level probation work.

The DPO I must be able to communicate clearly and effectively, both orally and in writing; display a working knowledge of first aid and CPR; accurately observe, evaluate, and document group behavior; and establish and maintain effective working relationships with youth, probation staff, court, law enforcement personnel, and community groups. Additionally, the DPO I must demonstrate an awareness of evidence-based best practice principles associated with professional level probation work; risk/needs assessment instruments and processes; proper case planning and management; and an understanding of the various intervention programs and service options available.

The duties of a DPO I include, but are not limited to:

- Maintaining group and individual behavioral standards;
- Performing case management and life-skills assessment activities;
- Managing the group living process, including the proper supervision of youth while they are eating, showering, using the restroom facility, visiting with families, and engaging in school and recreation activities;
- Providing individual and group crisis intervention;
- Ensuring that camp youth's health needs are met and personal appearances are adequate;
- Conducting small group interventions and workshops;
- Maintaining PCMS case notes
- Preparing petitions and court reports, as well as maintaining case records and logbooks.

Group Supervisor Nights (GSN)

The GSN ensures order and security during night time sleeping hours when there is normally minimal contact with camp youth. The GSN must exercise a basic knowledge of the rules and procedures of the facility sufficient to respond properly to events occurring during the night and to the particular needs of the individual youth, including one-on-one supervision.

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The duties of the GSN include, but are not limited to:

- Conducting and documenting safety checks every 15 minutes;
- Maintaining order and security in the living unit, investigating, and documenting unusual sounds and occurrences;
- Taking appropriate action to prevent escapes, rule infractions, or other disturbances;
- Observing and recording the behavior and actions of individual youth,
- Performing standard first aid and CPR as needed; and
- Contacting the SDPO or appropriate staff to address problematic youth or situations.

205 DUTY STATEMENTS, CAMP SUPPORT STAFF

Camp support staff members play an integral role in the daily operations of the camp. They interface on a regular basis with other camp personnel and, in some cases, members of the public.

Director's Secretary

The Camp Secretary reports directly to the Camp Director, who requires full-time personal secretarial assistance. Duties include, but are not limited to

- Replying to correspondence (with or without dictation);
- Relieving the director of routine personnel, budget, and other operating details. (Including but not limited to: scheduling, timekeeping, approving material and purchase requisitions, and contacting the Chief Executive Office, Department of Human Resources, and other Departments).
- Screening telephone calls, furnishing requested information, referring calls to others, and taking care of those calls that do not require the Director's attention
- Making appointments and arranging conferences and meetings for the director;
- Acting as intermediary between director and staff, transmitting messages, orders, and requests, both written and verbal;
- Acting as a liaison between the Director's office and other departments, agencies, and jurisdictions.

Clerical Staff

The Intermediate Typist Clerk (ITC) performs skilled typing and other clerical work. She/he reports to the Camp Director and may work under the direct supervision of the camp secretary. In addition, the ITC performs specialized clerical duties that require a working knowledge of camp operations. Duties include, but are not limited to:

- Typing court reports and similar documents requiring extreme accuracy.
- Providing secretarial assistance to the Director as needed.
- Typing complex charts, forms, statistical and similar documents from rough

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draft requiring skill in arranging tabular material, setting up forms and extreme accuracy in typing

- Processing documents, such as court reports, according to a predetermined but specialized procedure.
- Checking documents for completeness, accuracy and compliance with legal and other requirements.
- Operating office machines, such as copiers and fax machines, incidental to the performance of other duties.
- Maintaining logs and various databases related to camp operations.
- Computer skills

Camp Services Manager/General Services Manager

The Camp Services Manager/General Services Manager (CSM/GSM) maintains various equipment and supply requisitions, as well as financial records, to ensure compliance with Departmental and state mandated requirements for camp facilities. She/he must be knowledgeable about Departmental policies and procedures, camp operations, and form usage and processing. The CSM/GSM reports to the Management Services Bureau's camp services director or MSB Director of Technical Support.

Crew Instructor

The Crew Instructor supervises and instructs a crew of youth who are assigned specific job duties while at camp. Crew instructors are required to demonstrate proper and safe use of equipment and tools used for training purposes. They work independently under the general direction of an SDPO, DPO II, or a supervising crew instructor. They are required to communicate, motivate, and maintain discipline among crew participants.

Head Cook

The Head Cook supervises monitors and trains subordinate cooks and camp youth who assist in the food preparation in camp. She/he is responsible for coordinating the preparation of entire meals to ensure that the completion of all food items coincide with scheduled mealtimes, and for the inspection of final food products for adherence to established quality standards and dietary guidelines. The head cook is also responsible for ordering food and ensuring appropriate amounts of food are on hand. If assistance is unavailable, the head cook is responsible for preparing meals and cleaning the kitchen, utensils, and dining halls.

Senior Cook

The Senior Cook supervises subordinate cooks and camp youth engaged in all phases of food preparation and cooking in camp. She/he provides technical direction and

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training to less experienced cooks and camp youth in the standard techniques of quantity food preparation used in the mixing, cooking, baking, and serving of complete meals in an institutional environment. If assistance is unavailable, the senior cook is responsible for preparing meals and cleaning the kitchen, utensils, and dining halls.

206 STAFFING

The facility head is responsible to have an adequate number of personnel to carry out the overall facility operation and its programming, to provide for safety and security of youth and staff, meet established standards and regulations, and ensure that no required services are denied because of insufficient numbers of staff on duty absent exigent circumstances.

Administrative Responsibilities:

The facility shall:

- Produce a monthly schedule that identifies a Duty Supervisor to be responsible for the operation and activities of the facility during each shift. This person shall possess appropriate decision-making skills, have the ability to respond appropriately to emergencies, and shall maintain facility staffing levels according to this Policy (see below).
- Have a sufficient number of supervisory level staff to ensure adequate supervision of all staff members.
- Have a Duty Supervisor on duty at all times who is responsible for operations and activities and has completed the Juvenile Correction Officer Core Course and PC 832 training;
- Have at least one trained staff present in each dorm/cottage whenever youth are present with skill levels, job experience, and bilingual capabilities.
- Have sufficient food service personnel relative to the number and security of living units, including staff qualified and available to: plan meals 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.
- Have sufficient administrative, clerical, recreational, medical, dental, mental health, building maintenance, transportation, control room, facility security and other support staff for the efficient management of the facility, and to ensure that youth supervision staff shall not be diverted from supervising youth.

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- 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.

(Meets standards set forth in Title 15, Section 1321 (a-h))

In accordance with Section 1321, Title 15, Minimum Standards for Juvenile Facilities, camps shall comply with the following minimum staffing ratios:

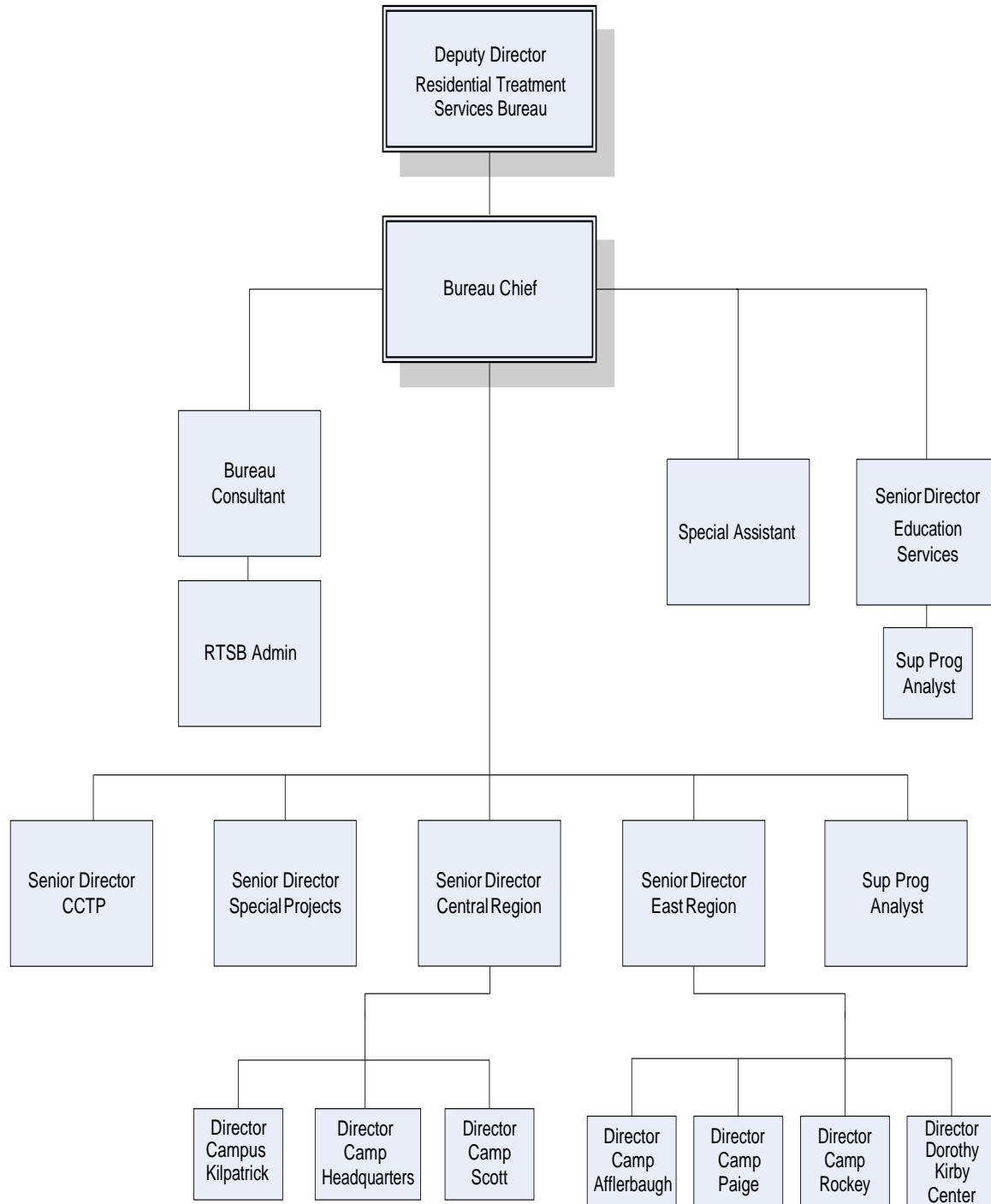
During hours that youth are awake, the minimum ratio shall be one wide- awake supervision staff member for each 15 youth in the facility.

- During the hours that youth are asleep, the minimum ratio shall be one wide-awake supervision staff member for each 30-camp youth in the facility. At least one supervision staff member on duty must be the same gender as the youth housed at the facility.
- At least two wide-awake youth supervision staff members on duty at all times, regardless of the number of youth in residence, unless arguments have been made for backup support services which allow for immediate response to emergencies.
- In addition to the minimum staff to youth ratio required in 1321(h)(3)(A)-(B), consideration shall be given to the size, design, and location of the camp; types of youth committed to the camp; and the function of the camp in determining the level of supervision necessary to maintain the safety and welfare of the youth and staff.
- Personal with primary responsibilities for other duties such as administration, supervision of personnel, academic or trade instructions, clerical, farm, forestry, kitchen, or maintenance shall NOT be considered as youth supervision staff positions.

Note: These are minimum staffing ratios, which do not reflect other state, Federal, and program mandates. Therefore, staffing ratios will be adjusted accordingly, depending on the individual camp requirements.

(Meets standards set forth in Title 15, Sections 1321 3(A), (B), (C), (D), (E) and (F) and 1324 (a). (c) and (g))

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207 Organization Chart

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Subject: RESIDENTIAL TREATMENT SERVICES BUREAU MANUAL CAMP INTAKE	Section Number: RTSB-300
	Effective Date: July 21, 2020
	Approved By: Jennifer Kaufman, Bureau Chief

301 INTRODUCTION

The goal of the Juvenile Justice Delinquency Court is to use the least restrictive disposition possible to address the youth's risks and needs while also protecting the community. One disposition available to the Court is the Camp Community Placement (CCP) order, which is typically referred to as camp. Youth can only be ordered to camp after they have incurred at least one sustained criminal offense and are declared a youth of the court pursuant to 602 WIC.

While a camp commitment is typically not the first option for judicial officers, it may be in cases involving very serious criminal behavior. Camp may also be ordered in situations where the youth has failed to cooperate with his/her conditions of probation in the community.

(Meets standards set forth in Title 15, Section 1342(b).)

302 CAMP ASSESSMENT UNIT

The Camp Assessment Unit (CAU) is tasked with coordinating a comprehensive assessment of each youth's risks and needs to determine which camp or camps can best address them. The CAU deputy works with a multi-disciplinary team, including Juvenile Court Health Services (JCHS), Department of Mental Health (DMH), and the L.A. County Office of Education (LACOE) to determine the most appropriate camp setting. The CAU DPO reviews information contained in up to nine computer systems, the dispositional court report, the court order, the Los Angeles Risk & Resiliency Checkup (LARRC), and has a face-to-face interview with the youth to help determine the most appropriate camp. This information is documented in the appropriate database.

303 EDUCATIONAL ASSESSMENT

The Los Angeles County Office of Education (LACOE) participates in the Multidisciplinary Assessment (MDA) process in the Camp Assessment Unit (CAU). LACOE provides educational data during this process including the student information summary, the Aeries progress report, student transcripts and information on specific special education needs. The student information report indicates if the student previously attended a Non-Public School (NPS), has an individualized Education Plan (IEP) or if the youth is in need of Special Day Classes (SDC).

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304 HEALTH ASSESSMENT

Los Angeles County Department of Health Services, Juvenile Court Health Services (usually referred to as JCHS) conducts a physical exam within the first 72 hours of intake into any of the three juvenile halls. JCHS reviews the medical charts for all camp-ordered youth prior to movement to one of the 6 camps. JCHS advises Probation if any youth has any specific medical needs or restrictions and medically clears youth suitable for transfer to camp.

305 MENTAL HEALTH ASSESSMENT

The Department of Mental Health (DMH) conducts a Massachusetts youth Screening Inventory (MAYSI) within 72 hours of the youth's admission into juvenile hall. DMH staff review the daily list of new CCP orders and checks the DMH database for prior DMH involvement with the youth. They also provide a recommendation for the type of DMH services that appear warranted for each youth. CAU has direct access to a minimum of two clinicians, one who provides general information and a psychologist who provides additional psychological testing as needed.

306 LIVE SCAN AND DNA COLLECTION

Detention Services Bureau (DSB) personnel are responsible for conducting fingerprint collection through the Live-Scan process and for DNA collection. CAU deputies determine if each CCP-ordered youth has had DNA collection ordered or if s/he is required to have it collected. They are also responsible for checking the DNA Offense Tracking System (DOTS) and ensuring that each eligible candidate has been tested and the results are documented. If unable to do so, they refer the case to the appropriate juvenile hall DNA coordinator to request that the youth be tested.

307 CAMP ASSIGNMENT AND MOVEMENT TO CAMP

Camp Assessment Unit deputies are responsible for evaluating all of the specific information gathered by the four different LA County agencies (Probation, LACOE, JCHS, and DMH) to weigh the relevant and most salient factors in the process of determining the most appropriate camp or camps that can best meet the youth's needs. They also ensure that the youth's placement coincides with the goal of maintaining safe facilities and a safer community.

Camp Headquarters (CHQ) is the sister unit to the CAU and works side by side in the movement process of camp-ordered youth. Once assigned to a camp, CHQ deputies track the youth to ensure delivery to the assigned facility. If the youth's movement is cancelled for any reason (e.g., medical or mental health issues), CHQ tracks the youth's movement status on a daily basis until the youth is placed in camp. If CAU determines that the youth is not suitable for camp placement, via information provided by JCHS or DMH, CHQ evaluates the case for a more appropriate disposition and returns the youth to court on a 778 WIC Change of Plan petition.

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308 DOCUMENTATION OF MENTAL HEALTH RECORDING FORM AND MENTAL HEALTH RECORDING LOG IN RTSB (DIRECTIVE 1191)

The mental health treatment staff in the Residential Treatment Services Bureau (RTSB) shall begin formally implementing the *Mental Health Recording* form. This document is commonly referred to as the “Mental Health Green Sheet” and is utilized by mental health clinicians to share information necessary to assist probation staff in the proper care and treatment for detained youth with mental health issues.

Each time a mental health staff consults with a youth in the facility, the clinician shall be required to complete a *Mental Health Recording* form and shall distribute copies as noted below:

- Two copies to the duty supervisor;
- One copy to the youth mental health file;
- One copy to the DMH regional office;
- One copy maintained by DMH at the facility.

The mental health clinician shall immediately notify the facility’s duty supervisor either in person or via telephone upon placing any youth on a level 2 or level 3 Enhancement Supervision status to ensure that appropriate housing and supervision services are immediately initiated to keep the youth safe. The clinician shall note the date, time and the name of the duty supervisor the clinician spoke to on the *Mental Health Recording* form and shall ensure that two copies of the signed, dated and time-documented *Mental Health Recording* form are provided to the duty supervisor as soon as practical.

Upon receiving the two copies of the *Mental Health Recording* form from the mental health clinician, the duty supervisor shall:

- Review the form(s) thoroughly and ensure the clinician has signed, dated and noted the time of assessment and the youth’s current level of supervision on the form;
- Ensure that the information on the form(s) is clearly articulated and understandable;
- Immediately discuss any areas of concern with the mental health staff;
- Note any recommendation changes in the level of supervision required for the youth;
- Ensure appropriate housing and supervision is initiated to keep the youth safe based on the recommendation level of supervision;
- Ensure that the facility’s alert log is updated with any new level-status information;
- Ensure that the Probation Case Management System (PCMS) is updated with any new special codes and/or level-status information;

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- Place one copy of the *Mental Health Recording* form(s) in the mental health log binder (see next section), on the right-hand side, in a chronological date order with the most recently dated form(s) on top;
- Ensure that the remaining copy of the *Mental Health Recording* form is placed in the youth's behavior chart on the top right-hand side of the file.

NOTE: Do not remove any of the older forms from the youth's behavior chart, as the forms in the file are considered a permanent part of the behavioral file.

Upon issuance of this policy, each facility Director shall create and implement a Mental Health Log binder, which will consist of a labeled, approximately 3-inch size, 3-ring binder. The Mental Health Log binder shall be maintained in the Duty Supervisor's office or other generally secured and staff only accessible area within the facility as designated by the facility Director. The Duty Supervisor shall account for the presence of the Mental Health Log binder and the current and updated Mental Health Log Review Verification Sheet contained in the binder at the beginning and the end of each day in camp and at the beginning and end of each eight-hour shift at the Dorothy Kirby Center.

A copy of each Mental Health Recording form completed by the Mental Health Clinician shall be placed in the Mental Health Log binder. Copies of the Specialized Supervision Plans completed in accordance with Directive 1188 (Enhanced and Specialized Supervision Requirements for youth in Juvenile Facilities) shall be maintained in the Mental Health Log binder in chronological date order with the most recently dated documents on top.

The Mental Health Recording form allows the Clinician to:

- Provide identifying information regarding the youth;
- Share notifications regarding behaviors of concern;
- Communicate the mental health clinician's current mental health assessment of the youth;
- Underline various interventions that can be utilized while working with the youth;
- Outline the type of housing, clothing and level of supervision recommended;
- Note and effect a change in level of supervision necessary for the youth;
- Appraise probation staff of the date of the next scheduled mental health consultation with the youth;
- Facilitate the updating of the change of level of supervision in the Probation Case Management System (PCMS).

At the beginning of each shift work (each day in camp) and each eight-hour shift at DKC facility all peace officers on duty shall access a Mental Health Log binder and review the *Mental Health Recording* forms and Specialized Supervision Plans contained therein.

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They must then incorporate the relevant information, including changes in level of supervision and strategies that the Mental Health Clinician and/or Multi-Disciplinary Team (MDT) have recommended, to facilitate, include supervision and communication practices in order to provide a safer and more secure environment for all youths in the Department's care.

After reviewing the *Mental Health Recording* forms, staff shall print their initials on each new copy of the *Mental Health Recording* forms and Specialized Supervision Plans that have been placed in the Mental Health binder since the staff's last review of it.

Upon completing the review and printing their initials on the *Mental Health Recording* forms, the staff shall then also initial the Mental Health Log Review Verification Sheet located on the left side cover of the Mental Health Log binder to indicate the date on which the *Mental Health Recording* forms and Specialized Supervision Plans were reviewed.

Each day the facility's Alert Log Coordinator shall review the Mental Health Log binder and purge it of multiple *Mental Health Recording* forms and/or Specialized Supervision Plans pertaining to any one youth. Only the most recently dated example of each form in the log is to be retained. The Alert Log Coordinator shall also remove any *Mental Health Recording* forms and Specialized Supervision Plans for youths that have been released from the facility and are not expected to return. Documents purged shall be placed in the purged Mental Health Log documents file located in the Duty Supervisor's office. The coordinator shall ensure that these new purged Mental Health Log documents file is placed in use at the facility each month. Each month purged mental health document log file is to be maintained in the Director's office for one year.

On the first day of every month, the Alert Log Coordinator shall remove from the binder the Mental Health Log Review Verification Sheet from month prior and replace it with a fresh Mental Health Log Review Verification sheet. He/she shall then properly annotate the header area of the document with the proper month and facility name, etc. Two copies of the previous month's Mental Health Log Review Verification Sheet shall then be made. One copy shall be provided to the Duty Supervisor for placement in the previous month's purged Mental Health Log document; one copy shall be retained by the coordinator; and the original copy shall be placed to the facility Director. The facility Director shall maintain these documents in a Mental Health Log Review Verification file in the Director's office.

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Subject: RESIDENTIAL TREATMENT SERVICES BUREAU MANUAL CAMP ADMISSIONS	Section Number: RTSB-400
	Effective Date: July 21, 2020
	Approved By: Jennifer Kaufman, Bureau Chief

401 INTRODUCTION

This section addresses the process of admitting a new camp youth.

402 **ASSESSMENT AND CLASSIFICATION**

Upon entering camp, staff shall provide of 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 location within the dormitory and consideration of the facility populations and physical design of the facility.

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, and gender/gender identity of the youth.

(Meets standards set forth in Title 15, Section 1352 (a-c))

ASSESSMENT AND CLASSIFICATION POLICY (DIRECTIVE 1196)

It is the policy of the Probation Department and RTSB that appropriate assessments, classification and reclassification efforts shall occur on behalf of the youths ordered to and assigned to Residential Treatment Services Bureau (RTSB) camp facilities and the Dorothy Kirby Center (DKC), or adjusted to the HOPE Center or camp assessment center at any camp facility to ensure the ongoing safety and security of youths and staff and the facility.

ASSESSMENT BY THE RTSB CAMP ASSESSMENT UNIT (CAU)

Upon a youth being ordered to camp, RTSB CAU shall conduct a thorough assessment and classification review of the youth to determine the youth's suitability for camp. If the youth is suitable for camp assessment, the CAU shall assign the youth to a camp that appropriately meets the youth's needs. Staff shall ascertain this information through conversation with youth during the assessment process.

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Based on information collected during the admission process, the CAU assessment process shall consist of the following:

- **Medical Information:** A juvenile court services (JCHS) physician shall conduct a physical examination of each youth prior to the youth's delivery to camp. Information from this examination and any other medical history information, as printed by law, are shared with the CAU. Specific attention shall be paid to any noted injuries, physical limitations or other medical information that may preclude the youth from a camp assignment or require special accommodations upon assessment to a camp.
- **Mental Health Information:** The Department of Mental Health (DMH) staff shall conduct a MAYSI-2 (Massachusetts Youth Screening Inventory-II) and follow-up assessment on each youth admitted to juvenile hall. Additional mental health services shall be provided to the youth on an as-needed basis while detained in juvenile hall. A DMH clinician assigned to liaise with the CAU shall collaborate with the CAU and review the youth's mental health file. The clinician shall take note of any existing mental health or substance abuse disorders, additional mental health services needs and/or other information that may need to be shared, as per the law, to make an appropriate determination as to the youth's suitability for a camp assessment.
- **Education Information:** The Los Angeles County Office of Education (LACOE) shall conduct an educational assessment of each youth and shall share the results of these assessments with the CAU. A LACOE teacher assigned to liaise with the CAU will collaborate with the CAU and assist in appropriately placing the youth with special education needs, English language learner issues and other learning difficulties.
- **Criminal History:** The CAU shall consider the criteria that includes, but not limited to the following information when it is available:
 - youth's age and committing offense(s);
 - gang affiliation;
 - delinquency history;
 - treatment needs;
 - Los Angeles County Risk and Resiliency Checkup (LARRC) scores.
- **Interview of youth:** A Deputy Probation Officer (DPO) from the CAU shall conduct a face-to-face interview with each youth ordered to camp and utilized information gathered from this interview as well as a review of the Probation Caseload Management System (PCMS), behavior files and the

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Probation Department's Juvenile (PDJ) file to assist in making an overall assessment. If a youth discloses that they are LGBTQI, staff shall talk with the youth and determine if youth has any safety, housing, clothing, medical, mental health, or programming/service-related concerns. Careful consideration should be given to the youth's known history of trauma as well as, family strengths and needs.

The assessment information gathered and reviewed shall be utilized to determine the most appropriate camp environment in which to place each youth. This assessment shall form the foundation upon which the case plan for the youth can be initiated.

Occasionally, this assessment may indicate the youth may not be suitable for camp. When this situation occurs, the youth's case will then be considered for a change of plan (778WIC). The case will be reviewed with the CAU SDPO. If it is determined that the youth is not appropriate for camp, a 778WIC will be initiated by CHQ.

(Meets standards set forth in Title 15, Section 1355(a))

ASSESSMENT AND CLASSIFICATION DURING INITIAL ORIENTATION UPON ARRIVAL AT CAMP

Upon each youth's initial arrival at the assigned camp facility, the youth shall be afforded a full orientation to the facility by a camp orientation staff. As a part of the orientation process, the orientation status shall conduct a thorough review of camp assessment unit documents, the youth's behavior file, PDJ file (if available) and PCMS. Staff conducting the orientation and classification review shall be especially aware of youths that appear to be potential victims, have engaged in predatory or dangerous behaviors and/or have multiple incident reports that relate to inappropriate conduct or behavior in the behavior file. Youths who are identified as such must be appropriately classified and placed within the dormitory or HOPE Center to ensure appropriate supervision.

The camp nurse, mental health clinician and designated education staff shall review the respective medical, mental health and education files of all youth. They shall then as have permitted by the law, advise Probation of any medical, mental health or educational issues the youth may have so that camp staff may be aware of the issue so as to provide appropriate educational opportunities, housing and supervision of the youth to keep the youth reasonably safe and maintain the safety and security of the facility.

While conducting documentation reviews, probation, medical and mental health staff shall be alert to the following:

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- Special coding in the behavior file (S, SI, D, E and K) from previous detention;
- Gang affiliation and level of involvement in gang-related activities in juvenile hall or camps;
- Youths placed on Level 2, 3 or 4 in the last six months;
- History of self-harming behaviors (Level II or III coding) in behavior chart or in PCMS;
- Serious mental health issues/conditions or currently on psychotropic medications;
- Serious medical conditions (asthma, diabetes, seizure, heart conditions, etc.);
- Activity restrictions due to medical or mental health condition(s);
- History of serious misconduct in juvenile hall or camp (upon review of incident reports);
- History of predatory behavior to youth towards youth (physical or sexual assault);
- History of involvement in incidents involving disturbances, assaults, fights and/or contraband;
- History of involvement in Safe Crisis Management (SCM), physical intervention incident;
- History of multiple HOPE Center referrals;
- History of victimization (repetitive assault victim, personal belongings or food taken repeatedly);
- Alleged victim of sexual assault at any time during detention history;
- History of consensual sexual activity at any time during detention history;
- Offense history involving misconduct, violence and/or sexual assault in or out of custody facilities.
- Screening for the risk of sexual abuse
 - Prior sexual victimization or abusiveness
 - Gender nonconforming appearance or manner
 - Identification as lesbian, gay, bisexual, transgender, questioning or intersex
 - Current charges and offensive history
 - Age
 - Level of emotional and cognitive development
 - Physical size and stature
 - Mental illness or mental disabilities
 - Intellectual or developmental disabilities
 - Physical disabilities
 - Use perception of vulnerability
 - Any other specific information about the individual youth that may indicate heightened need for supervision, additional safety precautions, or separation from certain other use.

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Upon completing the orientation and documentation of review process, the youth shall then be classified in regards to any self-harm, medical, mental health issues or safety and security concerns that the youth may pose to themselves, other youths, staff and/or the facility utilizing the assessment and classification form in accordance with the instructions provided. The Duty Supervisor shall review, approve and sign the assessment and classification form upon completion of the process.

Should any Specialized Supervision arrangements be needed for the youth, (which may include placement of youth in a specified location in the dormitory to provide for increased/better supervision and/or to provide for the safety and security of the youth(s) and/or facility), these arrangements shall be documented on a specialized supervision plan (SSP) as outlined in Directive 1188. (Enhanced and Specialized Supervision Requirements for youths in Juvenile Facilities) They must also be approved by the Duty Supervisor. All SSPs shall be reassessed every of 30 days for suitability.

The assessment and classification form, the *Initial Intake Screening Questionnaire* form and any specialized supervision plans or *Request for Mental Health Consultation* forms generated during initial orientation and classification process shall be distributed as follows:

1. Original copy attached to the youth's orientation file document;
2. Copy in youth's Behavior File;
3. Copy to Alert Log Coordinator's mailbox;
4. A copy placed in the youth's monthly assessment and classification file maintained by the facility director.

Youth on SSP shall be annotated on the facility's Alert Log and a copy of the SSP placed in the facility's mental health log binder. The camp's population sheet, bed chart and behavior files shall be annotated and/or updated with any special coding related to the youth's classification requirements by the orientation staff.

Specialized Supervision Plans must be reviewed as to their necessity at least once every (30) days and updated as appropriate by the facility's Alert Log coordinator in consultation with the facility's Alert Log supervisor and/or multidisciplinary team (MDT). Upon completion of the initial assessment and classification process, it may be determined that the current camp placement is not appropriate for the youth. After this time, the youth may be considered for a transfer to another camp by utilizing the established MDT assessment, re-class meeting and recommendation process.

ONGOING IN CAMP ASSESSMENT AND CLASSIFICATION PROCESSES

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Assessment and classification of youth within the camp facilities shall be an ongoing process. The facility's Alert Log coordinator shall conduct a weekly review of the camp's facility incident report database (FIR) for the previous (60) days. He/she shall to identify youth that, based on the number and/or types of incidents they have recently been involved in, may be experiencing difficulty adjusting to the camp environment and/or may require additional services. When conducting this review, the Alert Log coordinator shall refer to Section (B) of the assessment classification form and the instructions provided as a general guide for determining which youth may require additional assessment and possible reclassification.

Upon identifying any youth that meets these criteria, the youth shall be counted for the facility's next regularly scheduled daily MDT meeting. At the meeting, the MDT shall conduct an assessment and classification review of the youth's behavior, medical and mental health statuses, any facility incident reports (special incident reports and physical intervention reports), the facility's Alert Log and other pertinent documents. The purpose is to determine if the youth may benefit from the provisions of additional services and/or placement on a specialized supervision plan to facilitate rehabilitative efforts and/or to provide for the safety and security of the youth or the youth's staff and/or the facility. Each youth reviewed shall have an assessment and classification form generated on their behalf upon which the MDT recommendation is documented.

Once monthly, during one of the scheduled weekly MDT meetings for that month, all of the youth that are on an SSP shall be reviewed and their SSPs continued, adjusted or terminated by the MDT as circumstances dictate. The facility director shall ensure all MDT meetings are fully documented and specific actions taken on behalf of individual Youths are included in the meeting minutes. The facility's Alert Log supervisor shall ensure that Youths on active SSPs are calendared for review by the MDT at least every (30) days.

Compliance with the foregoing classification assessment process shall not preclude the immediate placement of a youth on SSP based on a youth's actions, behavior and/or the receipt of additional information concerning the youth that warrants immediate action to ensure the safety and security of the youth(s), staff or the facility. Once placed on an SSP, the youth's plan shall be reviewed at the next MDT meeting.

During the youth's camp assessment, a changed circumstance may occur that may necessitate a change of plan. When this occurs, the camp must use the initial assessment information and any other subsequent information gathered on behalf of the youth to develop a change of plan that will help the court determine a more suitable or appropriate environment for the youth as outlined in Directive 1041 (778WIC Petitions: Change of Plan).

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The Duty Supervisor shall review, approve, assign and date the classification forms generated on behalf of each youth during the weekly MDT process. The assessment and classification form and the SSP generated (including 30-day SSP extensions approved by the facility director) during the weekly MDT meeting shall be stapled together. Copies of these documents shall be placed in the following locations:

- 1) Youth's behavior file;
- 2) Alert Log coordinator's mailbox;
- 3) The monthly MDT assessment and classification file maintained by the facility director.

Youth on SSP shall be annotated on the facility's Alert Log and a copy of the SSP placed in the facility's mental health log binder. The camp's population sheet, bed chart and behavior files shall be annotated and/or updated with any special coding consistent with the youth's classification requirements by the orientation staff.

CLASSIFICATION STATUS VERIFICATION UPON ASSESSMENT TO THE HOPE CENTER OR ASSESSMENT REQUIRED AT RTSB FACILITIES

The assessment of a youth to the HOPE Center or an Assessment Center (AC) at a camp is usually undertaken as a disciplinary measure or in response to safety and security needs of the youth, other youths and/or the facility. Occasionally, a youth may be assigned to one of these units for administrative purposes by the Camp Director. Experience has demonstrated that youth assigned to these units, especially upon initial arrival, may be at high risk for engaging in self-harming behavior and/or acting out in a violent or other inappropriate manner.

Upon assigned youth's arrival to the HOPE Center, and prior to the youth's placement in any room or day room area that is not under direct supervision, the HOPE Center staff shall orientate the youth to the rules and regulations of the HOPE Center and complete a HOPE Center classification verification form for the youth. This is to ensure that appropriate housing and supervision is initiated to keep the youth(s) safe. Upon entry, if the youth is upset and not amenable to the orientation of classification and verification process, staff may place the youth in a room or day room or other area in the unit where continuous visual supervision can be afforded to the youth until the youth regains control and these processes can be initiated.

HOPE Center staff receiving, orientating and assessing youth upon arrival shall be cognizant of the fact that in many instances, youth assigned to the HOPE Center are from different camp facilities. Accordingly, as part of the classification and verification process, the HOPE Center staff shall initiate contact with the Duty Supervisor at the youth's home camp to determine if the youth is currently noted at that facility's Alert Log. If the youth is on that facility's Alert Log, the Duty Supervisor

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at the youth's home camp shall be asked to provide HOPE Center with a copy of the most recent mental health recording form and/or SSP completed on behalf of the youth. During the contact with the Duty Supervisor, the HOPE Center staff shall also attempt to gather information from the Duty Supervisor or other knowledgeable staff at the camp regarding the youth's behavior and any current or recent issues that surround or affect the youth.

HOPE Center classification and verification process shall consist of the following as necessary and appropriate:

- Review of PCMS, behavior file and mental health recording forms in the behavior file;
- Review of the Alert Log from the youth's home camp;
- Review of any SSPs in the youth's file or from the youth's home camp;
- Review of any placement of special coding on HOPE Center population and grade sheet and bed chart;
- Administration intake screening questionnaire to the youth;
- Contact the Duty Supervisor at the youth's home camp facility to verify classification information;
- Prepare a request for mental health consultation for the youth that are currently on a mental health caseload at their home camp as a precautionary measure;
- Prepare a request for a mental health consultation form for any youth who are currently on Level II or Level III enhanced supervision status, or appear to require counseling and assessment;
- Contact medical/mental health staff for assessment information that HOPE Center staff should be aware of in order to house and care for the youth appropriately;
- Place youth on L2 or L3 supervision as required by the home camp's Alert Log, supervision plan or other emerging circumstances that require pending mental health assessment;
- Place the youth's information on the HOPE Center Facility's Alert Log as appropriate;
- Place the SSP forms from the youth's home camp, if any exist, into the mental health log binder at the facility where the HOPE Center is located;
- Complete an HOPE Center classification and verification form on behalf of the youth;
- Place the youth in a room/bed location that is most appropriate or safe for supervision purposes.

Duty Supervisor shall review, approve, assign and date the completed HOPE Center classification and verification form. The HOPE Center classification and verification form and initial intake screening questionnaire form shall be stapled together and placed in the youth's behavior chart along with copies of the following documents attached to it:

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1. Current mental health recording forms (only if youth on Level II or Level III status); and/or

2. Current specialized supervision plan (only if youth is on an SSP).

A second set of these forms (stapled together) shall be maintained in HOPE Center classification and verification file maintained by the facility Director.

INSTRUCTIONS FOR COMPLETING THE ASSESSMENT AND CLASSIFICATION FORM

All youth entering the camp for the first time pursuant to a new camp order or administrative reassignment to a different camp shall be provided with a formal assessment and classification upon entering the facility. An assessment and classification form shall be completed in accordance with the instructions provided below:

A. Youth Information:

The following must be noted on the classification:

- The youth's name;
- Gender
- Gender identity
- PDJ number;
- Date of birth;
- Date entered camp;
- The name of the DPO responsible for conducting the initial assessment and classification of the youth;
- The circumstances during which the form was completed (initial orientation or ongoing in camp assessment as a part of the MDT process);
- The name of any MDT staff present during the assessment process.
- Facility staff shall not consider lesbian, gay, bisexual, transgender, questioning or intersect identification or status as an indicator of likelihood of being sexually abusive

(Meets standards set forth in Title 15, Sections 1352 (C) & (F))

B. Probation Document and System Reviews:

As a part of the orientation process, the orientation staff shall conduct a thorough review of camp assessment unit documents, the youth's behavior file, PDJ file and the PCMS system so that the youth can be appropriately classified and placed within a dormitory or HOPE Center to ensure appropriate supervision.

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Review of Behavior Charts, PCMS Systems and PDJ Files: Note whether these files/systems were reviewed during the process. If not, note the reason why the files/systems were not reviewed.

Staff conducting the document and system reviews preparatory to initiating any orientation and/or classification process shall be especially alert to documentation that indicates that the youth:

- 1) May be potential victims;
- 2) Engage in predatory behaviors;
- 3) Has engaged in any acts of violence (indicate YOYV, physical or sexual assaults or disturbances);
- 4) Has engaged in other types of misconduct such as gang activity, acting out, possession of controlled items, escape attempts and/or sexual misconduct);
- 5) Has been involved in three (3) or more use of force incidents during the current detention period;
- 6) Has multiple HOPE Center referrals (at least 3 or more in the most recent 30-day detention period);
- 7) Has engaged in self-harming behaviors resulting in placement on Levels II, III or IV;
- 8) Currently is on psychotropic medications;
- 9) Has any documented developmental disabilities, education, psychological or medical conditions;
- 10) Has any activity restrictions due to medical or mental health issues;
- 11) Has a history of violent offences; and/or
- 12) Has a current gang membership or affiliation, and youth's status in that particular gang (if known).

While conducting the review of these documents, staff shall adhere to the instructions provided below:

Gang Affiliation:

If the youth admits to, or appears to be affiliated (via file/system review) with a gang, check the box, then note the name of the gang and check the box that indicates whether the youth admits to, or appears to be:

- a) A leader in the gang;
- b) General gang member;
- c) An associate (desirous of belonging).

If the youth is determined to have a leadership role in the gang, the youth must be placed on an SSP and assigned to a bed in the dormitory that is in the immediate proximity of the control center, which allows the staff the ability to observe the youth

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at all times. This SSP shall be reassessed in 30 days and a decision made as to whether to continue the SSP and specialized dormitory supervision and/or placement supervision and/or placement based on the youth's behaviors.

Special Coding:

Note whether the youth has any special codes noted in the file. If the youth is coded, check the box and circle the code(s) that apply. Ensure that these codes are added to the population sheet and bed chart as appropriate:

- a) **S or SI Code:** If the youth is "S" or "SI" coded and has been placed on Level II, III or IV at any other camp, hall or DKC in the past six months, the youth must be placed on an SSP. In addition, the youth shall be assigned to a bed in the dormitory that is in the immediate proximity of the control center, so that the staff may easily observe the youth at all times. This SSP shall be reassessed every (30) days and a decision is to be made as to whether to continue the SSP. Staff shall also be cognizant as to whether or not this youth has demonstrated other predatory behaviors prior to or while in camp environment and factor this information into the 30-day reassessment decision regarding whether or not to terminate or continue the SSP.
- b) **E Code:** If the youth has escaped, or attempted to escape, from the secured probation department facility (juvenile hall, camp or DKC) at any time in the past, check the box. The youth must be placed on an SSP and assigned to a bed in the dormitory that is in the immediate proximity of the control center, which allows staff to easily observe and account for the youth. This SSP shall be reassessed every (30) days and a decision is to be made as to whether to continue the SSP. When a youth is on E-code related SSP, he may only be removed from SSP status by the facility Director, who must formally document this action.
- c) **D and K Codes:** If the youth is "D" or "K" coded, check the box. Staff shall review the circumstances of the coding and shall determine if placement on an SSP is necessary. Staff shall also be cognizant of any situations where a youth coded "K" is assigned to the same camp as the youth(s) or gang that the youth is designated as a "keep-away" from. If this situation occurs, the Duty Supervisor shall be contacted and shall investigate the appropriateness of the youth's assignment to the camp.

Level II, III or IV Placement in the Last Six Months or History of Self-Harming Behaviors:

Note whether or not the youth has been placed on Level II, Level III or level IV enhanced supervision status at any time in the past six months, or if the youth has

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engaged in any type of self-harming behavior at any time in the past six months. If yes, the box must be checked and the youth must be placed on an SSP and assigned to a bed in the dormitory that is in the immediate proximity of the control center, allowing staff to observe the youth at all times. This SSP shall be reassessed in 30 days and a decision made as to whether to continue the SSP.

History of Committing Sexual Assault Either in or out of Custody:

If the youth has a history of sexual assault, including non-substantiated allegations of sexual assault/misconduct, check the box. The youth must be placed on an SSP and assigned to a bed in the dormitory that is in the immediate proximity of the control center, allowing staff to observe the youth at all times. The SSP shall be reassessed in (30) days and a decision is to be made as to whether to continue the SSP. Staff should also be cognizant as to whether or not this youth has demonstrated other predatory behaviors prior to or while in camp environment and factor this information into their thirty (30) day reassessment decision regarding whether or not to terminate/ continue the SSP.

History as a Victim of Sexual Assault Either in or out of Custody:

If the youth has a history of being a victim of sexual assault, either in or out of custody (if known), check the box. The youth must be placed on a SSP and assigned to a bed in the dormitory that is in the immediate proximity of the control center, allowing staff to observe the youth at all times. The SSP shall be reassessed in (30) days and a decision is to be made as to whether to continue the SSP. Staff should also be cognizant as to whether or not this youth has been victimized in any manner while in the camp environment and factor this information into their (30) day reassessment decision regarding whether or not to terminate or continue the SSP.

History of Engaging in Consensual Sexual Activity While in Custody (one or more incidents):

If a youth has a history of engaging in consensual sexual activity while in custody, check the box. The SSP shall be reassessed in (30) days and a decision is to be made as to whether to continue the SSP. Staff should also be cognizant as to whether or not this youth has been victimized in any manner while in the camp environment and factor this information into their (30) day reassessment decision regarding whether or not to terminate or continue the SSP. Staff should also be cognizant as to whether or not the youth has been observed to be out of bounds or has engaged in any other types of sexual misconduct while in the camp environment and factor this information into their (30) day reassessment decision regarding whether or not to terminate/continue the SSP for the youth.

C. Sixty (60) Day Detention History Review:

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Orientation and MDT staff shall review the youth's prior detention history over the course of the past (60) days, including behavior at juvenile hall, camp and/or the Dorothy Kirby Center. This is generally accomplished via a review of the behavior file and PCMS systems. Staff shall fully review each incident that in any way involves the youth's participation in acts of misconduct. If any box is checked in this section, then the item shall be discussed at the youth's MDT. The MDT shall fully review circumstances of any YES answer(s) and following the instructions for completing this form, determine if the youth should be placed on an SSP at the facility.

Serious Misconduct Incidents:

Serious incidents may consist of the following types of behaviors:

- 1) Predatory behaviors;
- 2) Assault (sexual or physical) on other youths or physical assault on staff;
- 3) Participating in a major disturbance;
- 4) An escape attempt or well-developed plan for escape;
- 5) Consensual sexual misconduct; or
- 6) "The hoarding of medication and/or possessing of other youth medications.

Youth engaging in these behaviors and that meet any of the specific criteria outlined below must be placed on an SSP and assigned to a bed in the dormitory that is in the immediate proximity of the control center, allowing staff to observe the youth at all times. The SSP shall be reassessed in (30) days and a decision is to be made as to whether to continue the SSP. Staff shall also be cognizant as to whether or not the youth had engaged in any other serious misconduct incidents while on a (30) day SSP. Enter this information into the (30) day reassessment decision regarding whether or not to terminate/continue the SSP.

- **Predatory Behaviors:** Serious unprovoked physical or sexual assaults on other youth resulting in injury, pressuring, targeting and/or bullying smaller stature or weaker youth for favors and/or the taking of personals and/or food from these youths.
- **Assault on Other Youth or Staff Resulting in Injury:** Physical or sexual assault on a youth or assault on a staff resulting in serious injury requiring offsite medical treatment for youth or staff.
- **Initiating or Leading a Major Disturbance:** The youth initiated or helped to lead a large group disturbance in the facility that involved five or more youths.

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- **Escape Attempt or Planning Escape:** Participating in an escape attempt or planning an escape.
- **Consensual Sexual Misconduct:** Engaged in sexual misconduct with another youth involving physical contact, intentionally exposed him/herself to others, or has a history of sexual misconduct and is continually moving out of staff supervision (out of bounds) and/or encouraging other youths to engage in sexual misconduct.
- **Hoarding Medication or Possessing Medication of Other Youths:** Possessing prescription medication prescribed for that youth or other youths at any time.
- **Involvement in Three (3) or More of the Following Incidents:**
 - 1) Participates in a disturbance (not an initiator/leader);
 - 2) Assault;
 - 3) Fight;
 - 4) Possession of contraband such as weapons, drugs, cigarettes/lighters, alcohol, electronic devices, tattoo machines, etc.; and/or
 - 5) Gang-related activities.

If the youth has engaged in a combination of at least three (3) of these incidents combined in the past (60) days, the MDT must review the youth's combined conduct to determine if an SSP is indicated.

- **Initiating or Leading in Major Disturbance:**
While detained in juvenile hall or camp, if a youth has engaged in the act of initiating or helping to lead a major disturbance, the youth must be placed on an SSP and assigned to a bed in the dormitory that is in the immediate proximity of the control center, allowing staff to observe the youth at all times. The SSP shall be reassessed in (30) days and a decision is to be made as to whether to continue the SSP. Staff should also be cognizant as to whether or not the youth has engaged in other serious misconduct incidences while on the (30) day SSP and factor this information into the thirty (30) day reassessment decision regarding whether or not to terminate/continue the SSP.
- **Involvement in Three (3) or More Safe Crisis Management Incidents Within Sixty (60) Days:**
If the youth was involved in three or more use of force (SCM) incidents within the past (60) days that resolve at Levels IV, V or VI, the MDT must review the youth's conduct in each of the incidents. That information in combination with the youth's overall conduct in juvenile hall and/or camp settings during the prior (60) days and determine whether an SSP is indicated for the safety of the youth and staff.

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- **History of Multiple HOPE Center Referrals (Three or More in the Most Recent 30-Day Period):** If the youth was involved in three or more HOPE Center referrals for misconduct (not assigned to the HOPE Center for administrative purposes) within the last 30 days, the MDT must review the youth's conduct in each of these incidents. This in combination with the youth's overall conduct in juvenile hall and/or camp during the prior three days will be used to determine whether an SSP is necessary to provide better supervision for the youth in the facility setting.

D. Medical, Mental Health, Education and Other Safety/Security Concerns:

Upon the youth's arrival at camp, the camp nurse, mental health clinician and designated education staff shall review the respective medical, mental health and educational files of the youth and, insofar as permitted by law. They will in turn advise Probation of any medical, mental health or education issues that camp staff should be made aware of to provide appropriate educational opportunities, housing and supervision of the youth to keep the youth reasonably safe and maintain the safety and security of this facility.

Serious Mental Health Illness/Conditions:

If the youth has a serious mental health illness/condition, check the box and note there has been mental illness, if known, in the comments section provided.

Current Use of Psychotropic Medication:

If the youth is currently taking psychotropic medication, check the box and note the type(s) of medication currently being taken by the youth, if known, in the comments section.

NOTE: If the box is checked for either of the above sections, the assessment and classification staff shall:

- a) Complete a *Request for Mental Health Consultation* form;
- b) Notify the Duty Supervisor of the situation;
- c) Ensure that appropriate supervision is provided to the youth as directed by the Duty Supervisor pending mental health assessment. DMH staff that is assisting in the classification process shall advise the MDT participants if the youth's mental health condition requires special placement in the dormitory or other accommodations that will require an SSP. If the youth is currently taking

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psychotropic medication, the youth's name shall be added to the facility's list of youths on psychotropic medications.

Serious Medical Conditions:

If the youth has a serious medical condition, check the box, then note the condition/illness, if known, in the comments section.

- Current activity restrictions: If the youth has current activity restrictions as noted in the medical file, mental health file or PCMS, check the box and then note the type and duration of activity restrictions in the comments section.

NOTE: The staff shall consult with medical or mental health staff on the serious medical/mental health conditions and determine if an SSP is indicated for the condition and the attached attendant activity restrictions. If the youth has any permanent activity restrictions related to the condition, the youth must be placed on an SSP and the nature and duration of the activity restrictions noted on the SSP. The SSP shall be reassessed every 30 days or when a change in the medical condition occurs and the SSP continued until the permanent activity restriction has been lifted. At this time, a decision shall be made by the MDT as to whether to discontinue the SSP. For purposes of classification, a "permanent activity restrictions" is one that does not have a defined or otherwise documented endpoint. If the youth has a temporary activity restriction related to the medical issue that will resolve itself in a designated time-period, then an SSP is not generally indicated.

Special Education Needs or High School Graduate/GED:

Note whether the youth has education issues (special education needs or high school graduate/GED recipient by checking the appropriate boxes. Note that the type of education issue will determine whether there is a need to provide the youth with specialized or other educational services.

E. RECOMMENDATION:

This section, indicated by checking one or more boxes, the actions were taken or recommended by the MDT:

- The youth was placed on an SSP.
- The youth was removed from an SSP.
- The youth was continued on an existing SSP for an additional (30) days.
- The youth's SSP information was added to the facility's Alert Log.
- The youth's SSP information was removed from the facility's Alert Log.
- No action was recommended.

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If no actions were recommended, then the “No action recommended” box shall be checked.

If a youth is placed on an SSP, or if the youth’s SSP was extended for an additional thirty (30) days, the youth’s SSP status must be added to, or updated on the facility Alert Log and a copy of the new or updated SSP placed in the facility’s mental health log binder. If it is recommended that the youth’s SSP be discontinued, then the youth’s SSP status must be removed from the Alert Log.

No youth may appear on the Alert Log that does not have either an active SSP or a current *Mental Health Recording* form indicating Level 2, Level 3 or Level 4 enhanced supervision status on file in the facility’s mental health log binder.

F. Duty Supervisor Approval:

The Duty Supervisor shall, upon completion of the assessment and classification process, review, approve, assign and date the assessment and classification form.

G. Document Distribution:

For assessment and classification documents generated during the initial orientation process:

The assessment and classification form, the initial intake screening questionnaire form and any SSP or *Request for Mental Health Consultation* form that is generated during the initial orientation and classification process shall be distributed as follows:

- 1) Original copy attached to the youth’s orientation file documents;
- 2) A copy to youth’s behavior file;
- 3) A copy to the Alert Log coordinator’s mailbox;
- 4) A copy placed in the monthly assessment and classification file maintained by the facility director.

For assessment and classification documents generated during the weekly MDT meetings:

The Duty Supervisor shall review, approve, assign and date assessment and classification forms generated on behalf of each youth during the weekly MDT process. The assessment and classification form and any specialized supervision plans generated (including 30-day SSP extensions approved by the facility director) during the weekly MDT meetings shall be stapled together. Copies of these documents shall be placed in the following locations:

- 1) youth’s behavior file;
- 2) Alert Log coordinator’s mailbox;

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- 3) The monthly MDT assessment and classification file maintained by the facility director.

INSTRUCTIONS FOR COMPLETING THE HOPE CENTER CLASSIFICATION VERIFICATION FORM

All youths assigned to the HOPE Center or assessment center, regardless of length of assignment shall have a HOPE Center classification verification form initiated upon arrival at the HOPE Center. The form shall be completed in accordance with the instructions provided below. For the remainder of these instructions, the special handling unit and assessment center shall be jointly referred to as the HOPE Center.

Upon assigned youth's arrival at the HOPE Center, and prior to placement, unsupervised, and in any room or day room area, the HOPE Center staff shall orientate the youth to the rules and regulations of the HOPE Center and initiate a classification and verification process to ensure that appropriate housing and supervision is initiated to keep the youth safe.

Throughout this document, reference is made to the youth's "home camp." The youth's home camp is the camp/facility of assignment at the time the youth was adjusted to HOPE Center. It is recognized that more than two-thirds of the youths adjusted to HOPE Center must be transferred from their home camp facility to HOPE Center, while the remaining one-third of the Youths are adjusted to HOPE Center at their own camps (Rockey, Gonzalez, Scott and the Dorothy Kirby Center).

A. Youth Information:

Note the youth's name, PDJ number, date of birth, gang affiliation, special coding, date and time entering the HOPE Center, date and time the HOPE Center classification and verification form was completed, the name of the youth's home camp, and name of the DPO/GSN performing the HOPE Center orientation process and completing the HOPE Center classification and verification form.

Special Coding: Note whether the youth has any special codes noted in the file, circle the code(s) that apply. Ensure that these codes are added to the population sheet and bed chart as appropriate, and that appropriate housing and safety precautions are put in place so that the youth may be properly supervised.

B. HOPE Center Adjustment Information and Document Review:

Upon each youth's initial arrival at the HOPE Center, the youth shall be afforded orientation to HOPE Center. Information related to the youth's classification status contained in PCMS and the behavior chart, including special incident reports, mental health recording forms and SSP, shall be reviewed. The Alert Log from the

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youth's home camp shall also be reviewed. Staff conducting the classification and verification shall be especially alert to youths that appear to be at risk of self-harm, are potential victims or have engaged in predatory and/or dangerous behaviors. It is important to identify these youths so that they can be properly classified and placed within HOPE Center to ensure appropriate supervision and facilitate the ongoing safety and security of the facility. Staff shall follow the guidelines outlined below to ensure the appropriate classification and verification of all youths assigned to HOPE Center:

- **Reasons youth adjusted to HOPE Center:** In this section, note the reasons the youth was adjusted to HOPE Center.
- **Staff adjusting youth to HOPE Center/supervisor approving:** Note the names of the staff adjusting the youth to HOPE Center and the name of the SDPO that approved the adjustment of the youth to HOPE Center.
- **Review of behavior chart and PCMS systems:** Note whether these files/systems were reviewed during the process. If not reviewed, note the reason why in the area provided.
- **Initial intake screening questionnaire process:** Note the time the initial intake-screening questionnaire was conducted and the name of the staff member conducting the process.

Question #1: Note whether the Alert Log status at the home camp was verified for the youth. Note the name of the staff verifying the Alert Log status.

Question #2: Note whether the youth is on Alert Log at the home camp. If yes to question #2, note the reason(s) that the youth is noted on the Alert Log by checking the appropriate box(es) in sections 2A, 2B and 2C.

In section 2D, note whether a current mental health recording form and/or a current SSP justifying the youth's current Alert Log status is available and on file. These documents should be located in the youth's behavior chart. If these current documents are not in the behavior chart, the Duty Supervisor at the home camp shall be immediately contacted and asked to provide these documents to HOPE Center camp facility for filing in both the behavior chart and the facility HOPE Center classification file at the soonest possible time.

In section 2E, if the youth is on a Level II or Level III status, a *Request for Mental Health Consultation* form shall be completed and for youth to the DMH office so that DMH is alerted to the youth's transfer to HOPE Center. DMH can then access the youth's mental health record and provide continuing service to the youth in HOPE Center.

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Question #3: Note whether the HOPE Center Camp's Duty Supervisor was advised regarding the youth's Alert Log status.

Question #4: Note whether the HOPE Center Camp's Duty Supervisor and HOPE Center staff ensured that appropriate supervision and housing were initiated to facilitate the ongoing safety and security of the youth and the facility.

Question #5: Note whether or not the HOPE Center Camp's Duty Supervisor ensured that the youth was added to (or currently noted on) the HOPE Center Camp's Alert Log.

Comments: Utilize this section to note any information that other staff reviewing the classification and verification document should be apprised of as regards this youth's housing, supervision, behavior and/or other special safety and/or security issues or circumstances.

C. Duty Supervisor Approval:

The Duty Supervisor shall, upon completion of the HOPE Center classification and verification process, review, approve, sign and date the HOPE Center classification and verification form.

D. Document Distribution:

The original copies of the HOPE Center classification and verification form and *Initial Intake Screening Questionnaire* form shall be stapled together in place in the youth's behavior chart. If the youth is on L2 or L3 enhanced supervision status, a copy of the current mental health recording form shall be also attached. If the youth is on an SSP, a copy of the SSP shall be attached. Copies of these forms shall be provided to the facility's Alert Log coordinator and a copy of these forms shall be placed in the monthly HOPE Center classification and verification file maintained by the facility director.

403 JUVENILE SUPERVISION OF LESBIAN, GAY, BISEXUAL, TRANSGENDER, QUESTIONING AND INTERSEX (LGBTQI) YOUTH IN INSTITUTIONAL SETTINGS (DIRECTIVE 1418)

It is the policy of Probation Department and RTSB to maintain a zero-tolerance policy toward all forms of sexual abuse, discrimination, and harassment. This policy is to reinforce departmental policy and work performance expectations of Detention Services Bureau (DSB), Residential Treatment Services Bureau (RTSB), and Management Services Bureau (MSB) staff relative to the supervision of Lesbian, Gay, Bisexual, Transgender, Questioning and Intersex (LGBTQI) youth detained in juvenile halls and camps.

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This policy is also intended to foster and maintain a system free from organizational and personal biases, both intentional and unintentional, and to support operational practices that ensure respect and equitable treatment of LGBTQI youth, while recognizing and addressing the individual needs of all detained youth.

DSB/RTSB/MSB Staff, Contractors and Volunteers shall:

Provide fair and equal treatment to LGBTQI youth in Probation's care and custody.

- Protect LGBTQI youth from discrimination, physical and sexual harassment or assault, and verbal harassment by either staff or other youth based on a youth's actual or perceived sexual orientation or gender identity.
- Respect and protect the rights of LGBTQJ youth to question and determine their own sexual orientation and gender identity.
- Ensure a workplace environment that fosters a culture in which anti-LGBTQJ threats of violence, actual violence, abuse, harassment and disrespectful or suggestive comments or gestures will not be tolerated.
- Utilize respectful language and terminology that does not stereotype or convey bias or hatred towards LGBTQI youth. In addition, staff should not tolerate such language among youth.

Legal Basis

This policy is governed by the United States and California Constitutions, as well as California Code of Regulations, Title 15, Division 1, Chapter 1, Subchapter 5 et seq., and 28 C.F.R. Part 115 et. seq.(Prison Rape Elimination Act).

Definitions

- A. Bisexual - A person who is emotionally, romantically and sexually attracted to two genders.
- B. Gay - A person who is primarily emotionally, romantically and sexually attracted to individuals of the same gender.
- C. Gender Identity - A person's internal, deeply felt sense of gender, regardless of biological sex.
- D. Gender Nonconforming - A person whose appearance, or gender expression or manner does not conform to societal expectations.
- E. Harassment - Conduct that may include, but is not limited to, name-calling; disrespectful or humiliating gestures, jokes or comments; inappropriate touching; threats of physical or emotional acts or negative consequences

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(including religious indoctrination); pantomiming inappropriate behavior; shunning or isolation; or making attempts to change a youth's sexual orientation, gender identity, or gender expression.

- F. Intersex - A person whose sexual or reproductive anatomy or chromosomal pattern is ambiguous or is not distinctly (what has been defined as) male or female anatomy. Intersex anatomies are sometimes referred to as differences of sex development.
- G. Lesbian - A female who is primarily emotionally, romantically and sexually attracted to individuals of the same gender.
- H. Questioning - A person who is exploring or unsure about their sexual orientation and/or gender identity.
- I. Sexual Orientation - A person's emotional, romantic and sexual attraction to another person.
- J. Transgender - A person whose gender identity (i.e., internal sense of feeling male or female) is different from the person's assigned sex at birth.
- K. Individual Behavior Management Plan (IBMP)/Multi-Disciplinary Assessment (MDA)/Multi-Disciplinary Team (MDT) - An inter-disciplinary team consisting of members from medical, mental health, education and probation who shall be designated to assess needs of youth.

Confidentially

Staff shall not disclose a youth's sexual orientation or gender identity to other youth at the facility or to outside parties, individuals, or agencies, including the youth's family or friends, without the youth's permission. Disclosure is authorized only to other Probation staff members with a need to know, to members of MDTs, agencies providing treatment or supervision of the youth, or where necessary to comply with State or federal law. If a youth discloses their sexual orientation or gender identity to a staff member, and that staff member assesses that the youth is at risk of sexual or physical abuse, the staff member shall then act consistent with *Directive 1412: Juvenile - Prison Rapes Elimination Act (PREA) for Juvenile Institutions Bureaus* (Directive No.1412, issued 1/4/18) and other protocols governing the safety of youth.

Names and Language

As described in Directive No. 1198, issued 10/5/10 and Directive No. 1221, issued 9/23/09:

- Employees, volunteers, and contractors working with youth shall use respectful language and terminology that does not further stereotypes about LGBTQI people.
- Staff shall respect the choices made by youth and refer to youth by the youth's preferred name and pronoun (including but not limited to he/she, his/her, they/them/their) even if their name has not been legally changed.

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Facilities may prohibit the use of gang or slang names or names that otherwise compromise facility operations as determined by the Facility Director or designee, and shall document any decision made on this basis. All written documentation about a transgender youth shall utilize the youth's preferred name as well as noting the youth's legal name recognized by the court.

- Staff shall refer to a transgender or intersex youth by the youth's last name or asserted first name.
- The youth's legal name will be used in all systems such as, but not limited to, Probation Case Management System, Probation Electronic Medical Records System, and the Juvenile Automated Index. The youth's legal name will be used along with any preferred name as an AKA.
- Staff shall not direct/apply derisive or demeaning names to youth; use contemptuous language directed at youth which may include vulgar or profane words; use any words that show prejudice or intolerance toward an individual based on their actual or perceived sex, sexual orientation or gender identity; engage in verbal interactions that a reasonable person would view as abusive.
- Employees, volunteers, and contractors in the course of their work, shall not refer to youth by using derogatory language in a manner that conveys bias towards LGBTQI people. In particular, employees shall not imply to or tell LGBTQI youth that they are abnormal, deviant, or sinful, or that they can or should change their sexual orientation or gender identity.

Intake

The following apply to juvenile detention facility operations:

Intake staff shall ask all youth, as standard practice, if they identify as LGBTQI in line with applicable intake forms.

- A. If a youth discloses that they are LGBTQI, staff shall talk with the youth and determine if the youth has safety concerns.
- B. If a youth discloses that they are transgender or intersex, the staff should refer the youth to medical staff for continuation and coordination of gender affirming services, including medical services.
- C. Intake staff shall complete the Probation Electronic Medical Records System (PEMRS) PREA Risk Assessment form for each youth admitted to the facility. If the youth indicates they are transgender or intersex and requests to be housed in a juvenile hall living unit or camp, which houses youth of another assigned biological birth sex of the transgender or intersex youth, a medical referral shall be completed and shall be forwarded to the IBMP/MDA/MDT Coordinator.
- D. If a transgender or intersex youth requests to be housed in a living unit or facility which houses youth of another assigned biological birth sex of the

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transgender or intersex youth, the IBMP/MDA/MDT shall be convened to determine how to meet the classification and housing needs of the transgender or intersex youth. Transgender or intersex youth shall not automatically be housed based on their assigned biological birth sex. In addition to the general considerations that apply to all classification and housing decisions, the IBMP/MDA/MDT shall make housing recommendations for transgender or intersex youth, prioritizing the youth's health and safety needs with consideration as to whether the placement would present management or security concerns. The IBMP/MDA/MDT shall also consider the transgender or intersex resident's own views with respect to their own safety.

- E. If the IBMP/MDA/MDT recommends housing the youth in a living unit or facility which houses youth of another assigned biological birth sex of the transgender or intersex youth, a recommendation for housing shall be submitted to the juvenile hall Superintendent/Regional Director or designee. Final housing determination for a transgender or intersex youth shall be made by the Superintendent/Regional Director or designee. The Superintendent/Regional Director or designee shall indicate in writing the decision for housing and email the decision to the IBMP/MDA/MDT coordinator.
- F. Pending a decision on housing within the facility (decision to be finalized within two business days), transgender or intersex youth shall be housed in the medical unit.
- G. If the administrative decision is made to house the youth in a living unit housing youth of another assigned biological birth sex, the IBMP coordinator shall coordinate with the supervisors of the current housing unit and the new housing unit to ensure that the transfer is completed. For youth residing in the juvenile hall pending movement to camp, the Camp's Intake Supervising Deputy Probation Officer (SDPO) shall ensure that the Camp Packet and special needs are provided to the receiving location prior to the youth's arrival. The Camp's Intake SDPO will ensure transportation is notified of the pending movement. When camp youth are transferred to opposite assigned biological birth sex camps, the Regional Director shall ensure that the MDT notes and relevant documents are provided to the receiving location prior to the arrival of the youth. The Regional Director shall ensure that the management of the receiving location is aware of the transfer and pending arrival of the youth. It is the responsibility of the sending camp to notify transportation regarding the transfer prior to the movement of the youth.

Clothing and Gender Presentation

- A. Transgender and intersex youth who request specific clothing and/or undergarments shall be provided with desired clothing regardless of whether the youth is housed in a boy's unit or a girl's unit as approved by the juvenile

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hall unit Supervisor or camp SDPO. These garments shall not be leveraged for purposes of discipline.

- B. Access to grooming and hygiene products/aids shall not be restricted based on gender.

Bathrooms and Showers

- A. Transgender or intersex youth, or any other youth who has been determined is vulnerable to sexual harassment or abuse, shall have the option to shower at a different time from other youth and be afforded reasonable privacy.

Medical and Mental Health Care

See Juvenile Court Health Services (JCHS) and Department of Mental Health (DMH) policies.

- A. Transgender or Intersex youth shall not be denied gender affirming medical and mental health services as a form of punishment or for any other reason.

Searches (Directive 1412, issued 1/14/18)

- A. Institutions staff shall not search or physically examine a transgender or intersex youth for the sole purpose of determining genital status. If a youth's genital status is unknown, it may be determined during routine intake medical examinations that all youth are required to undergo, by reviewing medical records, or by speaking with the youth.
- B. Institutions staff shall conduct searches of transgender and intersex residents in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. Youth may identify the gender of a staff with whom they would feel most comfortable conducting the search. If the youth has no preference, they shall be searched by a staff of the same assigned biological birth or sex/gender.
- C. The duty supervisor shall make the determination whether a transgender youth may be searched by a staff of the opposite assigned biological birth or sex/gender.

Reporting and Responding to Harassment and Discrimination

- A. Probation staff shall promptly and appropriately intervene to de-escalate situations where a youth is being physically, verbally or sexually abused or harassed for any reason, including based on the youth's actual or perceived

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sexual orientation or gender identity. This includes the use of homophobic and transphobic slurs/remarks.

- B. All employees, contractors and volunteers shall report any violations of this policy. Failure to report a violation may result in disciplinary action or, in the case of contractors and volunteers, removal from continued services in the juvenile halls/camps.
- C. Youth shall be able to report LGBTQI concerns by following the facility's grievance policy and procedures (Directive No. 1197, issued 9/9/10).
- D. Supervisory and management staff shall treat all reports of alleged violations of this policy seriously. Administrators shall take swift action per established procedures when employees, contractors, or volunteers report alleged violations of this policy (Directive No.1412, issued 1/4/18).

NOTE: Facility staff shall not conduct physical searches of any youth for the purpose of determining the use anatomical sex. Whenever feasible, the facility shall respect youth preference regarding the gender of the staff member who conducts any search of the youth.

(Meets standards set forth in Title 15, Sections 1352.5(a)-(e))

404 DOCUMENTATION

When the youth arrives to camp, the receiving DPO shall ensure that the transporting deputy has also delivered the youth's medical and behavior charts. The receiving DPO shall place the youth's medical chart in the nurse's in-box.

From time to time, the transporting deputy provides the receiving camp staff with a temporary behavior chart. It is important for the receiving staff to document that the behavior chart was not delivered, as juvenile hall staff may not accept the youth back into juvenile hall at a future date with a temporary chart.

The receiving camp DPO shall write clearly on the cover of the temporary chart the following information:

- 1) Date of youth's entry to the camp (state which camp)
- 2) "Temporary chart received this date"

405 MEDICAL CONSENT (DIRECTIVE 1243)

The provision of routine medical and dental care to youths in camp requires consent and authorization of the detainee's parents or legal guardian for youths under 18 years old. To obtain such permission, an Authorization for Medical Care form must be completed and signed by a parent or legal guardian. The camp facilities and

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Dorothy Kirby Center (DKC) shall attempt to obtain a signed Medical Consent form for a youth's parent/legal guardian for each youth. The process for obtaining the medical consent shall be as follows:

If the juvenile hall has not secured a signed Medical Consent, the camp caseworker shall proceed as follows:

- The camp caseworker is to verify the youth has a current signed Medical Consent by checking the youth's Behavioral Chart, checking with the camp nurse or contacting the **Medical Consent Coordinator** (MCC) at the juvenile hall.
- If the juvenile hall MCC has a copy of the Medical Consent, they shall PDF a copy to the camp caseworker.
- The camp caseworker shall place a copy of the Medical Consent on the bottom left side of the Behavioral Chart and provide a copy to the camp nurse.
- The camp caseworker shall notify the RTSB MCC via a PCMS entry in Case Notes that a Medical Consent has been received, a copy for youth to the camp nurse and a copy was placed in the Behavioral Chart.
- If there is no Medical Consent available, the camp caseworker shall contact parent/legal guardian telephonically indicating that a Medical Consent form has been mailed to their home, which needs to be returned by mail or at Saturday or Sunday visiting. The signed Medical Consent should be received within the same week of the telephone call if the parent/legal guardian is delivering the Medical Consent at visiting; otherwise, the parent/legal guardian is to be instructed to send the Medical Consent by mail.
- If the parent/legal guardian does not bring the Medical Consent during Saturday or Sunday visiting, the camp caseworker shall follow up requesting to have a Medical Consent form signed by the parent/legal guardian. If the parent/legal guardian refuses to sign the Medical Consent form, the caseworker shall indicate the parent/guardian refusal on the form and notify the RTSB MCC via a PCMS entry in Case Notes that a Medical Consent has not been received.
- A Medical Consent form shall be on file for each youth within 14 days of the youth's assignment to camp.

TELEPHONIC MEDICAL CONSENT

For those youths who do not have a Medical Consent on file, the MCC shall contact the parent/guardian by telephone and request authorization for medical care. The following instructions shall be completed by the MCC when contacting the parent/guardian telephonically to request the medical consent:

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- The MCC shall contact the parent/guardian by telephone indicating that they are requesting telephonic medical consent for the child.
- The MCC shall verify that they are speaking to the parent/guardian of the youth where telephonic medical consent is being requested. Verification shall be in the form of the parent/guardian confirming the address and date of birth of the youth.
- The MCC shall read the Medical Consent form to the parent/guardian. Once completed, the MCC shall ask the parent/guardian if they understand the terms of the Medical Consent and if they agree to allow the Probation Department to provide medical care to their child.
- If the parent/guardian agrees to allow telephonic medical consent, the MCC shall complete the Medical Consent form and sign the Medical Consent form as indicated that the parent/guardian agreed to allow the Probation Department to provide medical care to the youth. The MCC shall also indicate with a check mark the parent/guardian approved medical consent by telephone and the youth's information was verified by the parent/guardian.
- The MCC shall include on the Medical Consent form the time and date signed, the MCC's telephone number and the address of the MCC.
- The MCC shall distribute the telephonic Medical Consent as indicated in the above-mentioned section.
- The MCC shall continue to obtain the original signature on the Medical Consent form from the parent/guardian during visiting or by mail.

EX PARTE COURT REPORT

If a medical consent cannot be obtained from the parent/guardian using the above-mentioned process, the MCC or camp caseworker shall complete an Ex Parte court report requesting the court to authorize the Probation Department the ability to provide medical treatment.

Prior to completing an Ex Parte court report requesting the court to authorize the Probation Department to provide medical treatment for those youths who do not have a signed Medical Consent from the parent/guardian on file, an email shall be sent to medicalconsent@probation.lacounty.gov. The email shall request for staff at Central Juvenile Hall (CJH) to check the Court's Minute Order System (JMON) to determine if a minute order is on file authorizing the Probation Department to provide medical treatment. This should be requested after the MCC has exhausted all efforts to obtain a signed consent from the Parent/legal guardian. If a minute order is on file, the CJH staff shall email a copy of the minute order to the requesting location.

Once the minute order is obtained, the MCC or the caseworker shall complete a Medical Consent form and sign as the parent. The Medical Consent form along with a copy of the minute order shall be provided to the Medical Records or the

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camp nurse. If there is no minute order on file, the following procedures shall be followed for completing an Ex Parte court report for non-youth and youth of the court.

Youth of the court – specifically youth with a camp community placement or Dorothy Kirby Center court-ordered disposition:

Per WIC739(C), whenever a youth of the juvenile court is placed by order of the court within the care and custody or under the supervision of the Probation Officer of the county in which the youth resides in and it appears to the court that there is no parent, guardian or person standing in loco parents capable of authorizing or willing to authorize medical, surgical, dental or other remedial care or treatment for the youth, the court may, after due notice to the parent, guardian or person standing in loco parents, if any, order that the Probation Officer may authorize the medical, surgical, dental or other remedial care for the youth by a licensed practitioner, as may from time to time appear necessary.

- The camp caseworker shall complete the Ex Parte report requesting the court to authorize medical care for the youth.
- A check mark shall indicate the efforts that were made by the camp caseworker to obtain a Medical Consent from the parent/legal guardian. The dates and types of efforts made to obtain the consent shall be indicated in the report.
- The camp caseworker shall make four (4) copies of the Ex Parte packet. The packet shall be sent via county messenger to the court clerk in which the hearing will take place.
- If the court makes the order for medical care or denies request for medical care and the court clerk indicates on the minute order the medical care order or denied, the court officer shall send a copy of the minute order to camp caseworker via the county messenger.

Data pertaining to preparing Ex Parte shall be logged indicating the youth's name, DOB, PDJ Number, Court Department, date Ex Parte was sent to court, if the Ex Parte was ordered, or took information, and the date the Ex Parte was ordered. If the parent/guardian signs a Medical Consent form during the Ex Parte process that shall be indicated on the log, (see Attachment JM).

406 ON-SITE MEDICAL CLEARANCE

The receiving DPO shall contact the camp nurse, if available, who will medically clear the youth into camp. If the nurse is not available, the receiving DPO shall place the youth's medical chart in the nurse's in-box, so that the nurse can clear the youth when the nurse becomes available.

407 ON-SITE DENIAL CRITERIA

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In certain circumstances, the receiving facility shall not allow the youth to be admitted. The youth cannot be admitted if there is no medical file, or if proper clearances have not been issued by medical and mental health staff at the juvenile hall. In such instances, the receiving DPO shall notify the Supervisor on Duty, who shall authorize return of the youth to juvenile hall pending proper clearance or file receipt.

408 CLASSIFICATION

When a youth is moved to camp, CHQ emails the Probation Officer's Assessment Report to designated staff at camp. This contains classification information, which clerical staff enter onto the camp's matrix/data base. The classification codes are as follows:

D (Dangerous): Offenses such as PC 187 (murder) PC 192 (manslaughter), and PC 245 (assault).

E (Escape Risk): Escape from juvenile hall, DJJ, camp, placement, or runaways from transportation or field staff.

I (Impairment): This code identifies youth with physical and/or mental impairments, as well as those with special needs.

K (Keep Away): The youth is to be physically separated from specific individual(s), such as crime partner(s) or victim(s), as ordered or specified by the arresting agency, IDC, court, or facility administration.

P (Pregnant): This has been established from medical records, self- reporting and subsequent medical findings, parental/interested party reporting, police reports, or other reliable sources. This coding indicates that the youth has special need requirements and that precautionary measures might be possible.

S (Suicide/Mental Problems): Established from police and arrest record, by psychiatrist, mental health staff, court officer, the youth's probation officer, recorded past history and attempts, history of previous mental hospital placement, wrist wounds, extreme depression, history of excessive alcohol and drug use.

SI (Self Injury): Evidence of self-injurious behavior not rising to "S" level.

All youth coded S shall be assigned to one of the first four beds in each row of any living unit.

409 CAMP ADMISSION SEARCHES– GENERAL POLICY

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All youth newly arriving in camp shall be subject to a pat down and metal detection search only for maintaining a safe and secure setting for youth, staff, and civilians in the camp environment. Refer to section RTSB-1300 of this manual for detailed procedures, which provides staff in the control center with enhanced visual supervision.

No camp-admission search shall be conducted as a disciplinary measure or for harassment purposes. All camp admission searches shall be conducted in a professional manner, affording the youth as much privacy as possible consistent with camp security. All camp admission searches, except metal detector searches, shall be conducted by an authorized person of the same sex as the youth. Under no circumstances shall the admission clothing change and/or showering process be used to conduct a search of the youth.

- During the camp admission process, the receiving officer shall fill out a Strip Search Authorization Form (SSAF) only if the officer finds reasonable cause to conduct a strip search. In such an instance, the officer will follow strip search procedures outlined in RTSB-1300, which may include receiving written authorization from the Camp Director.

410 CHANGE OF CLOTHING AND CONTINUED SEARCH

Where no reasonable suspicion exists to warrant a strip search and/or visual body cavity search, the DPO will continue to process the youth into camp as follows:

- Escort the youth to the appropriate dressing/shower area and issue him/her a towel.
- Direct the youth to remove his/her clothing and cover up with the towel and to alert the Officer once completed
- Remove yourself from the area while the youth is undressing and dressing
- Once the youth has disrobed and covered by the towel, return to the area and carefully examine each piece of clothing removed. Place the clothing in the area designated for laundry.
- Use a hand-held metal detector (wand) over the towel to examine the youth.
- Instruct the youth to shower, if appropriate to the camp's requirements.
- Issue camp clothing to the youth and have them cloth him/herself appropriately for the camp setting.

411 BEDDING ISSUANCE

The DPO initially assigning the youth a bed shall ensure that the youth has received clean bedding as follows:

- One pillowcase

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- Towel
- One pillow
- Two sheets
- Blankets, (one blanket or more, upon request)

Consideration shall be given to mattress type for pregnant youth or youth with other medical related needs.

(Meets standards set forth in Title 15, Sections 1383 & 1500(e))

LOS ANGELES COUNTY PROBATION DEPARTMENT

Subject: RESIDENTIAL TREATMENT SERVICES BUREAU MANUAL CAMP ORIENTATION, RIGHTS, AND PRIVILEGES	Section Number: RTSB-500
	Effective Date: July 21, 2020
	Approved By: Jennifer Kaufman, Bureau Chief

501 INTRODUCTION – DUE PROCESS

When the Court orders a youth to camp, the youth has been deprived of his or her freedom. Due process is the idea that the government must be respectful of a citizen's legal rights when taking away the citizen's freedom or property. Many of the youth's due process rights are outlined in the Welfare and Institutions Code, Article 1, youth Bill of Rights (WIC Sections 224.70 – 224.74). Camp staff have an obligation to ensure that the youth's due process rights are preserved while detained in camp, and that the youth is treated fairly.

Staff shall ensure that youth with disabilities shall have equal opportunity and access to services, programs, and activities. Youth have the right to be safe and to be treated fairly, regardless of race, religion, national origin, disability, gender, or sexual orientation.

(Meets standards set forth in Title 15, Section 1324(h).

502 ORIENTATION PROCESS AND HANDBOOK

Staff must conduct 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.

Both written and verbal information shall be provided and supplemented with video orientation if feasible, prior to placement in a living area in the facility.

As part of the camp admittance process, the SDPO or designee shall ensure a youth receives a camp orientation upon admission to camp, and before being placed into a camp living area. This orientation shall include, but is not limited to:

- Access to two (2) free phone calls within one (1) hour of admittance to a parent, legal guardian, or caregiver, in accordance with the provisions of Welfare and Institution Code Section 627
- Offer of a shower upon arrival
- Offer of food upon arrival
- Documented secure storage of personal belongings

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It is the policy of the Probation Department and RTSB that the Camp Orientation Packet is explained in a respectful manner and is done with humane engagement, so the youth understands:

- Facility rules
- Access to legal services, including immigration legal services
- Access to care
- Grievance procedures
- Housing assignments
- Estimated length of stay
- Program guidelines
- Criteria for inclusion and exclusion from the program
- Court process and Release dates
- What happens if you don't follow the rules
- Special Incident Reports (SIRs)
- Physical Incident Reports (PIRs)
- Appeal and Hearing Rights
- Healing Opportunities and Positive Engagement (HOPE) Center, including room confinement
- Probation violations or new charges
- Multi-Disciplinary Team (MDT) meeting
- Behavior Management Program (BMP) - 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
- Merit Ladder
- Access to Recreational Activities
- Restroom use
- Meal time rules
- Major rule violations and enhancement to major rules violation penalties
- Visiting
- Special visits
- Family Engagement Day
- Telephone use
- Mail
- Hygiene opportunities and clothing
- Personal items
- Drinking fountains
- Youth rule violations
- Property damage
- Fighting
- Youth-On-Youth Violence (YOYV)
- Staff are Peace Officers
- Drugs/Alcohol

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- Weapons
 - Daily schedule
 - Program and activities
 - Access to Education
 - Access to routine and emergency health and mental health care
 - Medical needs
 - Dental needs
 - Mental health needs
 - Access to Religious services
 - Youth rights
 - Rights against discrimination, which include the right to be free from physical, verbal or sexual abuse and harassment by other youth and staff
 - Ombudsman
 - Calling your attorney
 - Age appropriate information that explains facility's policy prohibiting sexual abuse and sexual harassment and how to report incidents/suspensions of sexual abuse or sexual harassment
 - Special needs
 - Emergency
 - Contraband and Searches
 - Wildlife
 - Availability of personal care items and opportunity for personal hygiene and daily showers
 - Rules and access to correspondence, visiting and telephone use
 - Availability of reading materials, programming, and other activities
 - Identification of key staff and their roles (Probation, LACOE, DMH, JCHS, MSB, etc.)
 - Process of requesting different housing, education, programming, and work assignments
- Facility policy on the Use of restraints, Use of Force, and evacuation procedures
Staff shall deliver the aforementioned information through conversation with the youth during the orientation and intake process.
 - The camp orientation must be understood by youth who are impaired, illiterate, or who do not speak English, if the youth's primary language is other than English, interpreter services to explain availability of services and programs shall be arranged through facility management.
 - Youth shall have access to a copy of the Title 15 Minimum Standards for Juvenile Facilities upon request.

(Meets standards set forth in Title 15, Sections 1350 & 1353)

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The Camp Orientation Process

The camp orientation shall take place during the admittance procedure and includes the orienting officer advising the youth of the estimated length of stay, informing them of program guidelines, and providing them with written screening criteria for inclusion and exclusion from the available programs.

The youth shall receive an opportunity to place a telephone call to a parent, legal guardian, or caregiver before being placed in the main camp population. If the parents are unavailable, continued efforts to contact them shall be made until a phone call is completed. When initiating the telephone call, the orienting DPO shall ensure it is to the parent, legal guardian, or caregiver prior to allowing the youth to speak with them. Once the youth completes his/her conversation with the parent, legal guardian, or caregiver, the orienting DPO shall talk to the caregiver and inquire about the following:

- The youth's gang history, substance abuse history, education status, vocational, counseling, behavior health, considerations of known history of trauma and family strengths and needs, and other pertinent case plan information; and,
- Whether the caregiver has any questions regarding the youth's camp program.

The orienting officer should provide the parent, legal guardian, or caregiver information regarding the youth's stay in the facility that at a minimum includes answering all questions courteously and thoroughly, promising to call the parent back if a question cannot be immediately answered, and providing contact information for the facility, medical, school, and mental health. This officer must also inform the family member of the camp's established visiting hours.

Following the phone call, the orienting officer shall issue a camp orientation packet to the youth. The officer shall adequately explain and discuss each document in the camp orientation packet. The absence of a meaningful discussion between the youth and the orienting Probation staff invalidates the camp orientation process. The orienting staff member must therefore determine that the youth understands each document in the packet before the youth signs the form indicating that he received the packet.

Youth Who Are Suspected of Developmental Disability

It is the policy of the Probation Department and RTSB that youth who have been referred to the Regional Center, a current Regional Center consumer, is Developmentally Disabled, or Severely Emotionally Disturbed should generally not be considered for camp community placement. If during the orientation process, a youth is suspected of having a developmental disability, a second orientation shall be conducted by the camp SDPO. If the supervisor is in agreement with the assessment, the DPO shall:

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- Complete the applicable Regional Center referral form(s) - Referral forms are available on Probnnet
- Forward completed referral form(s) to the appropriate Regional Center for Evaluation
- Refer to Probnnet for link to www.dds.ca.gov/rc/rclist.cfm for a listing of Regional Center locations
- Forward a copy of the referral form(s) to probationer's attorney via fax or US mail
- Document the referral in PCMS
- Email the Developmentally Disabled Field Services Coordinator (DDFSC) [EDL-PR08 Field-DDOffice or Field-DDOffice@probation.lacounty.gov] or Developmentally Disabled Placement Coordinator (DDPC) [EDL-Prob Placement DD Office or Placement-DDOffice@probation.lacounty.gov], as applicable, once the referral is submitted to the Regional Center document in PCMS.
- Contact the DDFSC or DDPC, as applicable, if no notification of Regional Center acceptance/rejection has been received and more than 60 days have passed since the Regional Center referral date. Be sure to document in PCMS

The Camp Director must then be immediately notified to seek approval from the Regional Director to transport the youth to Central Juvenile Hall to receive developmentally disabled services. The camp DPO may then be responsible for preparing a 778 for the youth for a possible change of plan upon positive identification of the youth's disability.

(Meets standards set forth in Title 15, Sections 1350(5)(6)(7))
(Please cross reference this section with Directives 1242 & 1382)

The Camp Orientation Packet shall include, but not be limited to, the following documents:

- RTSB Orientation Instructions
- County Property provided
- Grievance Procedures
- Special Incident Report and Appeal Procedures in Camp
- Purpose of Camp
- General Rules and Regulations
- Visiting Information
- Personal Property List
- Personal Dress Code
- Physical Conditioning and Recreation
- Living Area Standards and Housekeeping and Dormitory Rules
- Camp Protocols and Procedures
- Personal Rights

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- Request for Services Form and Procedures
- Camp Mail Policy
- Visiting Rules for Camp youth
- Overview of Behavior Management Program, stage system, earned points, Scorecard
- Parent Notification of youth's Camp Arrival
- Consent for General Medical and Dental Care
- Notification of the youth's projected release date form

(Meets standards set forth in Title 15, Section 1350 (c))

(Please cross-reference this section with Section 702)

503 SCREENING FOR THE RISK OF SEXUAL ABUSE

In order to reduce the risk of sexual abuse by or upon our youth, staff shall assess each youth within 72 hours of admission based on the following information:

- Prior sexual victimization or abusiveness next bullet
- Gender nonconforming appearance or manner; identification as lesbian, gay or bisexual, transgender, questioning or intersect, and whether the youth may, therefore be vulnerable to sexual abuse
- current charges and offense history
- Age
- Level of emotion and cognitive development
- Physical size and stature
- Mental illness or emotional disabilities
- Intellectual or developmental disabilities
- Physical disabilities
- The youth's perception of vulnerability
- Any other specific information about the individual youth that may indicate heightened needs for supervision, additional safety precautions, or separation from certain other youth

Note: Staff shall ascertain this information through conversation with youth during the admittance process, medical and behavioral health screenings, during classification assessments; and by reviewing court records, case files, facility behavior records, and any other relevant documentation from the youth's file.

Note: 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.

(Meets standards set forth in Title 15, Section 1350.5 (a)-(k))

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504 OMBUDSMAN

In order to ensure probationers' rights to due process, the Chief Probation Officer has established the Office of the Ombudsman. The Ombudsman represents the interest of probationers and community members. He or she is responsible for responding to, helping to resolve, and initiating issues or concerns of probationers, citizens and outside agencies. Camp youth have the right to contact the Ombudsman, and camp staff shall notify the supervisor when a youth makes a request to do so. The supervisor will ensure telephone access for this purpose as soon as reasonably possible.

505 ACCESS TO CARE (DIRECTIVE 1276)

INTRODUCTION

The purpose of this departmental policy is to reinforce work performance expectations relative to access to care/request for services by youth detained in camp.

EXPECTATION

It is the policy of the Los Angeles County Probation Department that all youths committed to a camp program shall have the ability to refer themselves for the following services:

- Probation Services: includes religious services, haircuts, and other services (services that are not defined as medical or mental health)
- Medical Services: includes dental services
- Mental Health Services

When a health and/or mental health concern appears urgent, staff shall arrange for the youth to see the on-duty mental health clinician and/or medical staff for a “walk-in” for evaluation. Where appropriate, grievances related to health and safety issues must be addressed immediately.

POLICY

Youth-Process for Self-Referrals

While youth currently make requests to staff to facilitate medical, dental and mental health services, there are instances where youth, for various reasons, do not want to discuss his or her needs with staff. When this occurs, youth may refer themselves for service(s) by:

- Completing the applicable form by placing a check mark next to the service requested

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- Printing their name on the form
- Signing the form
- Placing the completed form in the applicable box located in every unit
- Forms for services include:
 - Probation Services – Complete a Request for Probation Services form (ProbNet)
 - Medical Services – Complete a Request for Medical Services form (ProbNet)
 - Mental Health Services – Complete a Request for Mental Health Services form (ProbNet)

Grievance Officer – Procedure for Processing Youth Self-Referrals for Probation Services

The Grievance Officer shall facilitate the following procedures to ensure youth are able to access needed services at each camp:

- Post Request for Probation Services forms next to the Probation Request for Services and Grievance box in all living units, dorms, school, Medical Unit and Admission areas
- Ensure these forms are stocked and available on a daily basis
- Collect Request for Probation Services on a daily basis
- Refer the youth to the requested services immediately upon receipt of grievance
- Follow-up to ensure that the requests for Probation services are responded to within 48 hours of receipt of grievance
- Investigate matters where services were not provided; refer youth to the requested services or immediately refer the matter to the Camp Director or designee for handling when it is appropriate
- Document a record of the grievance in PCMS in the grievance information and also under the youth's case notes
- Provide information regarding the process to request Probation, Medical and Mental Health services to each newly admitted youth during the orientation process.

If a youth places the "Request for Medical Services" form in the Probation Request for Services and Grievance box, the Grievance Officer shall prepare a transmittal and provide the Request for Medical Services form to Juvenile Court Health Services (JCHS) medical staff as soon as possible but no later than 24 hours. The Grievance Officer shall keep the original signed transmittal as proof that the Request for Medical Services form was given to medical staff. The Grievance Officer shall give a copy of the transmittal to the JCHS medical staff.

If a youth places the "Request for Mental Health Services" form in the Probation Request for Services and Grievance box, the Grievance Officer shall prepare a transmittal and provide the Request for Mental Health Services form to Departmental of Mental Health

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(DMH) staff. The Grievance Officer shall keep the original signed transmittal as proof that the Request for Mental Health Services form was given to DMH staff.

Juvenile Court Health Services (JCHS) – Procedures for Processing Youth-Self Referrals for Medical Services

- Collect Request for Medical Services forms not less than one (1) time each day for processing.
- Review forms to determine if a referral is needed or the youth must be seen immediately
- Provide the Camp Director or designee with the names of the youth who will need to be seen in the nurse's clinic, so they can arrange transportation.

Department of Mental Health (DMH) – Procedure for Processing Youth-Self Referrals for Mental Health Services

- Collect Request for Mental Health Services forms not less than one (1) time each day for processing.
- Provide the Camp Director or designee with the names of the youth who will need to be seen in the nurse's clinic so they can arrange for the youth to be present

Overall, all camp staff should encourage youth to request a referral for desired services. However, in the event that a youth desires the use of the “Request for Probation Services,” the “Request for Medical Services,” or the “Request for Mental Health Services” process; staff shall not deter, prevent or discourage youth from utilizing this process to access service

506 NON-ENGLISH SPEAKING YOUTH

It is the policy of the RTSB to facilitate communication with a youth while maintaining the safety and security of the camp. Whenever possible, bilingual staff will communicate with Non-English speaking youth; however, such bilingual skills may not always be available.

Rights of Camp Youth

No staff in any camp shall prohibit youth from speaking a foreign language. Every individual has the right to communicate in his or her primary language without fear of reprisal.

The only deviation from this policy may occur when, in the staff member's professional judgment, a situation that endangers the safety of the youth, staff, or the camp has arisen. In these circumstances, staff will intervene in a swift and appropriate manner. This might make it necessary for all individuals to speak English, if capable of doing so, to lessen tension and keep the situation from becoming volatile. Youth unable to speak English may have to be moved temporarily to lessen tensions.

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507 DEAF AND HEARING IMPAIRED SERVICES

Consistent with the Americans with Disabilities Act, the State of California Unruh Civil Rights Act, and the Los Angeles County Policy of “Nondiscrimination on the Basis of Disability”, it is the Department’s policy that persons with disabilities be given equal opportunity and access to services, programs, and activities. It is the Department’s intent to ensure that services are provided in a timely manner and as completely as required.

Camp staff shall adhere to the following procedures for ensuring effective communication and accessibility to Probation services and treatment options of deaf and hearing-impaired youth.

Camps Headquarters

Camps Headquarters (CHQ) is responsible for placing youth in appropriate camp settings to meet their treatment needs. When youth are identified as being deaf or hearing-impaired, CHQ shall:

- Determine during the screening process what accommodations are required to meet the youth’s needs.
- Notify the Bureau Chief, the RTSB consultant, and the Probation Department Ombudsman within 24 hours via a Facility Incident Report. A tracking process will then be initiated to ensure that the youth is properly tracked in the system to prepare for his/her arrival at a camp.
- If an interpreter is needed, the RTSB consultant shall be notified. The consultant will contact the approved vendor and arrange for interpreter services to be provided during transportation and throughout waking hours.
- Maintain a Special Needs log for tracking purposes that will denote the youth’s name, date of birth, PDJ number, Court number, and special needs.
- Notify the receiving camp of the youth’s special needs and advise the Camp Director of the need to acquire the auxiliary aids and services necessary to accommodate the youth.
- Ensure that the appropriate services are available for the youth at the receiving camp and arrange for transportation of the youth to the camp.
- Ensure that notifications of the transfer to camp are made to the Bureau Chief’s office and the Probation Department Ombudsman.

Camp Staff

The Camp Director shall:

- Notify the camp’s ADs, school personnel, medical staff, and camp staff of the pending arrival of the deaf or hearing-impaired youth.
- Advise supervisory personnel regarding time keeping documentation pertaining to the interpreter.
- Ensure that the youth is given equal opportunity and access to all services,

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- programs, and activities available to other youth.
- Ensure that the youth is not segregated from the general population solely because of the youth's deafness or hearing impairment.
- Ensure that a deaf or hearing-impaired youth, who is transferred to another facility for any reason, will have appropriate auxiliary aids and services available upon arrival.
- Ensure that the youth's camp release is reported to both the Bureau Chief and the Department Ombudsman within 24 hours of the release.

Documentation regarding the use of the interpreter and/or other auxiliary aids and services shall be made in the youth's case notes in PCMS and in the behavior chart on a weekly basis. A monthly Record of Aids/Services form shall be completed and faxed to the Department Ombudsman before the 5th of each month.

Interpreter Services

The Department has contracted for sign language interpreting services. Staff members shall not use the youth's family members or friends to interpret, except in emergencies. Only qualified interpreters shall be used. The office of the RTSB Consultant is responsible for arranging interpreter services for hearing-impaired youth through an approved contractor.

The Ombudsman also has a TDD and is able to send and receive communications from the deaf and hearing-impaired. Questions regarding interpreter services may be directed to the Probation Ombudsman at (562) 940-2842 or (562) 940-2843.

508 GRIEVANCE PROCEDURES

Cross reference with DIRECTIVE 1386 --- YOUTH'S GRIEVANCE PROCEDURES

INTRODUCTION

The purpose of the procedure is to reinforce departmental policy and performance expectations of Residential Treatment Services Bureau (RTSB) staff relative to Grievance Procedures for youths detained in camp.

EXPECTATIONS

RTSB staff shall assist youth with completing and filing grievances upon request. Staff must remain objective and helpful while assisting youths with the grievance procedure and not direct and form a reprisal against them for filing grievances. If youth cannot find a staff to assist them, a facility manager will assign a staff member to provide assistance. All grievances related to health and safety issues must be addressed immediately.

POLICY

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The Grievance Procedures and forms must be available in English and Spanish and easily accessible to youths. 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.

Youth detained in camp shall:

- Have access to Grievance Procedures, which provide an opportunity for a fair review and resolution of complaints concerning any aspect of their care while in camp.
- Receive the Grievance Procedures during their initial orientation at camp.
- Receive prompt review and initial response to grievances within three (3) business days
- Have a resolution of his/her grievance within ten (10) business days unless circumstances dictate a longer timeframe. The youth shall be notified of any delays.

Posting of Grievance Procedures

Juvenile facilities shall post a copy of these procedures and blank Grievance Procedure forms as follows:

- Camp - post on both sides of each dormitory and in other locations where youth congregate (such as school, dining hall, and main offices).
- Additionally, "instructions for completing the grievance form" shall be posted in a visible location.

Grievance Procedures

Youth may complete a grievance form and provide the grievance to any probation staff or non-deputized staff personnel such as the doctor, nurse, dentist, teacher, advocate or volunteer at the camp. Grievance forms can also be placed in one of the locked Grievance/Request for Services boxes, mounted in the living areas, dormitories, school, medical unit or Healing Opportunities and Positive Engagement (HOPE) Center.

Non-deputized personnel who receive a grievance shall immediately forward the grievance to the Assistance Director (AD) or Camp Director. Upon receipt, the Camp Director shall assign the grievance to the appropriate supervisor to handle.

Each day the grievance officer or camp SDPO shall collect and process grievance forms from each of the grievance boxes at their respective camp.

Probation peace officers assigned to a camp shall process the grievances received as

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outlined below:

Step 1: The youth completes a Grievance Form and submits it to the Deputy Probation Officer I (DPO I), who will review and then declare the grievance as either “resolved” or “unresolved” in writing and ensure a copy of the completed grievance form is returned to the youth by the end of the shift. If the youth grieves more than one (1) issue on the form, each issue must be individually addressed on the form by the staff handling the grievance. (If the grievance involves a complaint against the DPO, the youth may choose to bypass this step).

Step 2: If the grievance is unresolved, or the youth chooses to bypass the first step, the youth may submit the grievance to the Deputy Probation Officer II (DPO II). The DPO II will then review and then declare the grievance as either “resolved” or “unresolved” in writing and ensure a copy of the completed grievance is returned to the youth before the end of the day. If the youth grieves more than one (1) issue on the form, each issue must be individually addressed on the form by the staff handling the grievance. (If the grievance involves a complaint against the DPO II, the youth may choose to bypass this step).

Step 3: If the grievance is unresolved, or the youth wishes to bypass the second step, the youth may file the grievance directly with the Supervising Deputy Probation Officer (SDPO), who will investigate and answer the grievance in writing and ensure a copy of the completed grievance is returned to the youth within two (2) business days. If the youth grieves more than one (1) issue on the form, each issue must be individually addressed on the form by the supervisor handling the grievance.

Step 4: If the grievance is unresolved at steps 1 or 2, the youth may appeal the grievance to the SDPO. A formal grievance appeal hearing will be held by the supervisor within two (2) business days of receipt of the grievance. If the grievance involves a complaint against the SDPO, then the Facility Director or designee will assign a SDPO not directly involved in the circumstances that led to the grievance.

Note: In each step above, the response is to be made on the Grievance Form initiated by the youth and shall include a description of the actions taken on behalf of the youth to resolve the grievance, or a notation as to the reason why the grievance was unresolved. The staff member handling the grievance is to discuss the grievance results with the youth, note the date the grievance was discussed with the youth, ask the youth to sign and date the grievance, provide the youth with a photocopy of his or her original grievance, and forward the completed grievance to the camp SDPO.

Step 5: If the grievance is unresolved at Step 3, or if the appeal remains unresolved at Step 4, the youth may appeal the grievance to the camp director. A formal grievance appeal hearing will be held by the director within two (2) business days of receipt of the

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grievance. The director may continue the hearing to a reasonable date for the necessity of obtaining all of the pertinent facts and shall notify the youth of the extended timeframe. The director's response is to be made on the grievance form initiated by the youth and shall include a description of the actions taken on behalf of the youth to resolve the grievance, or a notation as to the reason why the grievance was remains unresolved. The Camp Director's decision will be final and will be given to the youth in writing within one (1) business day.

Note: In a camp, if the camp director is unavailable, the SDPO not involved in the original grievance shall be assigned to handle the appeal.

Grievance Accountability

The camp SDPO shall review all grievances filed in the camp while under their supervision. The supervisor shall ensure the youth has an opportunity to review, sign and receive a copy of the completed grievance. The supervisor shall then forward a completed grievance(s) to the camp director for review.

The Camp Director shall review the grievances, ensure grievances are processed and handled appropriately. The Camp Director shall retain copies of the grievances on file in their office for one (1) full year.

The Camp Director shall also be responsible for maintaining a log of all grievances filed at the facility utilizing the Probation Incident Reporting System (PIRS).

Camp Grievance Officer

A grievance officer shall be assigned to each camp. The camp grievance officer's primary responsibility shall be to facilitate the timely resolution of all grievances and to coordinate any grievance appeals filed at the camp.

Each camp grievance officer shall:

- Process and handle the grievances and appeal grievances.
- Review the grievances collected, handle and process in the camp each week.
- Initial response to grievances within three (3) business days
- Ensure that each grievance or appealed grievance is processed properly and in a timely manner.
- Grievances that relate to health and safety issues must be addressed immediately
- Ensure that any filed grievances that involve another agency or entity within the facility are handled and addressed by the responsible agency in a timely manner.
- Ensure that grievances that involve multiple issues have resolutions for each issue noted.
- Meet with all youth who have filed grievances each week, to ensure that grievances have been addressed.

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- Ensure that youths sign their completed grievances and receive copies.
- Retain copies of the grievance for filing in the Camp Director's office
- Ensure grievance information into the Probation Information and Reporting System (PIRS)
- Maintain a current log of all grievances filed at the camp.
- Prepare weekly and monthly reports regarding grievances as instructed by the Camp Director.
- Resolution of the grievance must occur within ten (10) business days unless circumstances dictate a longer timeframe. In this case, the youth shall be notified of any delay.

Grievances related to sexual abuse and sexual harassment

Youth who are the victim or have knowledge, suspicion, or information regarding sexual abuse or harassment, may report through the following means:

- Grievance procedure
- Citizen Complaint form
- Directly to staff, contractors, volunteers or visitors
- Parent/Guardian
- Mental Health referral
- Medical referral
- Contacting the ombudsman 877-822-3222 or via email *Ombudsman@probation.lacounty.gov*

Forms:

The grievance procedure and forms (forms are in English and Spanish) are available on ProbNet; to access the procedures/forms;

- Log onto ProbNet
- Click on Forms.
- Select RTSB Forms.
- Click on the applicable form or grievance procedure.

Juvenile Institutions Grievance System (JIGS)

The Juvenile Institutions Grievance System (JIGS) allows youth in the camps to electronically submit grievances using their LACOE laptops. Youth have an option to submit an electronic grievance anonymously. Once a youth submit a grievance through JIGS, an email notification is sent to all responsible parties (grievance officer, their back

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up, and supervisor) whom shall check their facility's respective grievance mailbox and print out new and outstanding grievances submitted by 10:00 am each morning. The printed grievance shall be processed in the same manner as a hand-written grievance. The current paper form remains as the primary method for submitted a grievance while JIGS provides an automated method. Harassment or retaliation from other youth and/or staff results from the submission of a grievance will not be tolerated.

Note: Whether or not associated with a grievance, concerns of parent, guardians, staff or other parties are to be addressed and documented in a timely manner. The individual with a complaint shall resolve the issue with a facility administrator or supervisor on site. If the grievance or concern is not resolvable or the person does not wish to resolve at the facility level, the agency Ombudsman may be contacted who will provide feedback and recommendations to every complainant as soon as possible with the intent to provide a response within ten business days from the date of the initial complaint.

(Meets standards set forth in Title 15, Section 1361(a)-(h))

509 TELEPHONE CALLS

It is the Department's policy to facilitate telephone calls for camp youth in order to enhance the reunification process.

Reconnecting youth with their families in ways that enhance and increase protective factors is a critical cross-bureau task and an overarching goal for the Department.

For youth housed at camp, this task is especially critical. The process of reconnecting camp youth with their families is accomplished through a variety of case management supports and services that include monitored telephone calls. Structured, monitored, and goal-directed telephonic contact is one of the ways in which case management activities can facilitate positive communication between camp youth and their families in the reunification process.

Youth who themselves have children of their own shall be allowed telephone calls to their children in order to maintain meaningful contact as part of the overall case plan. In addition, youth shall be allowed telephone contact with the caregiver, those individuals involved in the upbringing and care of their children.

Safety and security considerations require that camp staff adhere to all rules and regulations pertaining to telephone call procedures. At no time are youth to use a telephone unsupervised.

Prohibited and Restricted Telephone Calls

Youth shall not be allowed to make telephone calls to other juvenile facilities, victims, witnesses, or anyone specifically restricted by proper authority. The DPO assigned as the caseworker is responsible to restricting such calls.

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Telephone Call Procedures

The assigned DPO caseworker shall authorize telephone calls according to the following procedures:

- Youth shall be allowed at least one telephone call per week, except for a limited time when safety and security are concerns.
- Calls shall be allowed during periods that do not interfere with established programs or with essential health, safety, and security procedures.
- Probation staff shall monitor all calls, except those to or from the attorney of record. The DPO shall be in close proximity of the youth making a telephone call.
- Calls shall take place in a casework area (such as an administration office, assessment unit, etc.). Youth shall not make calls from phones in the open dormitory.
- There shall be no denial of the weekly phone call due to disciplinary issues.
- Probation staff shall document all telephone calls in PCMS.

Documentation shall include the following information:

- Youth's name;
- Name and number and relationship of the person called;
- Date and time the call was attempted and completed; and
- Name of the staff member authorizing and monitoring the phone call.

Court-Ordered Telephone Calls

Staff shall adhere to the following procedures when processing court-ordered telephone calls:

- Court-ordered telephone calls shall be completed on the date ordered by the court.
- Telephone calls between youth and their attorney of record shall not be monitored.
- Staff shall record completion of the call in PCMS.
- If, for some reason, the call cannot be completed within 48 hours of the court order, the SDPO or designee shall notify the court and request further direction

510 MAIL

Correspondence with family members is another means for fostering the reunification process. All youth have a right to send and receive mail.

Mail to and from attorneys, elected officials, the Board of State and Community Corrections, and Federal and other courts shall not be opened or read under any circumstances. All other mail is subject to inspection for contraband or for security

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reasons.

Mail shall not be read or withheld unless there is reasonable suspicion that the facility may be in danger. If mail is withheld, the youth shall be notified. The staff member shall notify the Supervisor of any withheld mail, and the Supervisor will communicate with the youth's caseworker. Camp staff shall distribute all other mail to the youth daily.

Fundamental to the right to send mail is the opportunity to write letters in order to promote communication between youth and their families and interested parties.

At the time of orientation, staff shall advise each youth: that there is no limitation on the amount of mail that they may send or receive. Youth may write or receive mail to or from anyone not specifically disapproved of by the casework DPO or the court. The orienting officer shall also advise the youth that s/he shall not be allowed to write to other probationers.

Communication with relatives in a detention or correctional facility must be reviewed on a case-by-case basis and authorized by a supervisor. The caseworker must note in PCMS the reasons for approval.

Incoming/Outgoing Mail

These procedures are to be followed in processing mail:

- Incoming mail shall be picked up each delivery day, inspected, and, absent a security related emergency, shall be distributed the same day received (unless rejected for contraband or security reasons).
- Unacceptable incoming mail shall be returned to sender.
- Outgoing mail from wards shall be inspected, sealed, and delivered each day for mailing. Staff shall check all outgoing mail to determine its destination. All forbidden mail shall be confiscated as contraband and given to the ward's caseworker.
- There is no limit on the amount of mail that a ward may send out. The Department shall provide postage.

Possible Contraband in Mail

Contraband shall be handled according to established procedures:

- If there is reason to believe that incoming or outgoing mail contains contraband, it shall be turned over to the SDPO, who shall have the ward open the letter in his or her presence; and
- If contraband is discovered in outgoing mail, the envelope and its contents shall be retained as evidence for violation proceedings. If contraband is discovered in incoming mail, it shall be handled on a case-by-case basis.
- Depending on the nature of the contraband, local law enforcement may need to be notified.

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(Meets standards set forth in Title 15, Section 1375.)

511 PERSONAL ITEMS

Camp youth are entitled to the following items at minimum:

(Each individual camp may allow additional individual items as approved by Camp Management based on their specific BMP rewards policy as noted below in section 412)

ITEM #	FEMALES	MALES
1.	1 Pair of county-issued tennis shoes	1 Pair of county-issued tennis shoes
2.	1 Pair of county-issued rubber shower shoes	1 Pair of county-issued rubber shower shoes
3.	1 Camp orientation manual	1 Camp orientation manual
4.	1 Religious text	1 Religious text
5.	1 Rosary (not to be worn)	1 Rosary (not to be worn)
6.	5 Personal letters	5 Personal letters
7.	2 Books	2 Books
8.	2 Approved magazines	2 Approved magazines
9.	1 County-issued toothbrush	1 County-issued toothbrush
10.	1 County-issued toothpaste	1 County-issued toothpaste
11.	1 County-issued deodorant	1 County-issued deodorant
12.	5 Family pictures	5 Family pictures
13.	1 Approved calendar	1 Approved calendar
14.	1 Bottle of county-issued shampoo (if not otherwise dispensed by staff during shower time)	NA
15.	1 Toothpaste	1 Toothpaste

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15.	1 County-issued comb	1 County-issued comb, brush
16.	1 Soft bristle brush (with black or clear handle)	NA
17.	2 Hair ties (black or white only)	NA
18.	Post-shower conditioning hair products (no aerosols)	Post-shower conditioning hair products (no aerosols)
19.	Skin Lotion	To be made available upon
20.	Soap	Soap should be provided in dispensers in the lavatory and showers
21.	Pencils	Checked out to youth by control center personnel within specified timeframes, and returned to the same personnel after use. An inventory of the dorm's pencils shall be kept and reviewed daily.
22.	Writing paper and envelopes	Provided to youth upon request during appropriate time frames, such as during letter writing periods, day room activities, etc.

(Meets standards set forth in Title 15, Section 1485)

512 JUVENILE- YOUTH'S PERSONAL PROPERTY IN RTSB FACILITIES (DIRECTIVE 1302)

INTRODUCTION

It shall be the policy of the Probation Department Residential Treatment Services Bureau (RTSB) to authorize youths in RTSB camp facilities to process a specific quantity of approved personal items.

EXPECTATIONS

Each camp shall provide a list of allowed personal items and their approved quantity to each youth at the time of their initial orientation to the facility (see RTSB manual Section 409 - Dorothy Kirby Center personal item list, PROB. 1585). Any expansion of this basic list of approved personal items must be authorized by the RTSB Bureau Chief prior to implementation. Any items used for treatment purposes, journals, homework, etc., must be approved in writing by the Duty Supervisor and must be posted on the current and pending board for all staff to review.

POLICY

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It should be clearly understood that occasional situations might occur which require that youths possess items that are related to their ongoing educational, medical or mental health or other treatment needs. In the interest of safety and security, education, medical needs and mental health probation staff are required to obtain approval from the Duty Supervisor prior to providing these items to youths. Notwithstanding before going, a youth may occasionally be found to be in possession of one or more of these items without knowledge or approval by the Duty Supervisor. When these situations occur, that shall initiate dialogue with the youth, assess the situation, contact educational, medical, mental health or probation staff as appropriate, regarding the situation, and obtain the Duty Supervisor's approval for ongoing possession of these item(s).

Strong safety and security practices dictate that staff are continually alert to their surroundings and to the actions of the youth under their supervision. It is important that these practices, daily safety and security checks shall be routinely performed to facilitate ongoing security of the facility and ensure safety of the youths and staff.

When performing routine safety and security duties, staff shall be cognizant of the type and quality of the items maintained in youth's personal storage area, as well as on their person. When excess personal items and/or contraband items are found, they shall be immediately confiscated.

Youths may maintain possession of the allowable quantity of approved personal items in a specific designated area in the dormitory or cottage while assigned to the facility. Authorized items and quantities may be changed pending on the youth's stage and privileges within the camp's Behavioral Management Program (BMP). These changes must be in writing, approved by the Duty Supervisor, and clearly documented in the youth's behavioral chart.

Staff in camp are prohibited from confiscating approved personal items except when a youth;

- Is in possession of an excess quantity of approved item(s).
- Use a personal item for other than its intended purpose.
- Carries a personal item on their person in violation of facility rules.
- Uses/threatens to use an item to engage in self-harm or injurious behavior.
- Uses the item or threatens to use the item as a weapon.
- Is housed in the HOPE Center
- Is pending transportation out of the facility to a medical/mental health facility
- Is pending transportation out of the facility to another detention facility
- Is placed on either an enhanced level of supervision (L-2 or L-3) on a Specialized Supervision Plan (SSP) that limits possession of personal items for safety reasons. (However, removal of personal items due to an enhanced level of supervision or SSP must be documented on the Mental Health Recording Form or

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“Green Sheet” and/or SSP Form in accordance with Directive 1188.) (Enhanced and Specialized Supervision Requirements for Youths in Juveniles Facilities).

NOTE: The above list is not comprehensive. There may be other instances where approved items may be subject to confiscation as approved by the Duty Supervisor.

When a youth carries an approved personal item on their person in violation of facility rules, the youth should be counseled regarding the rules regarding carrying personal items on movement and the item returned to him/her unless the youth carrying the item to engage in inappropriate activity.

The confiscation and disposition of contraband items, including excess personal items that are confiscated shall be completely documented on the Property Receipt and a photocopy of the Property Receipt attached to the Special Incident Report (SIR).

In situations where a crime is suspected of occurring, all items confiscated as evidence are to be handled in accordance with directive 1123 (Crime Scene Evidence Preservation).

While interacting with youths, especially when conducting searches and engaging in confiscation of contraband and/or excess personal items, staff must understand that modeling appropriate behavior assists in promoting pro-social skills. As such, staff shall set an example of courtesy and consideration in their interactions with youths, while at the same time affirming that the rules and regulations will be enforced by staff, and that youths should follow them.

Staff is prohibited from threatening to confiscate personal items from youths as a means of disciplining a youth. Engaging in these types of actions is considered a violation of Departmental Policy pursuant to Directive 1198 (Abusive Institutional Practices).

Occasionally, situations occur that require a significant portion of the facility, cottage or dormitory (including youth's lockers) to be searched for contraband items such as drugs, weapons, money, or other unauthorized items. When these situations arise, the search must be authorized by the Duty Supervisor or higher-ranking manager. The dorm search is a preventative security measure and is not to be used as punishment or conducted in a punitive manner. These searches shall be completely documented and all contraband discovered and/or excess personal items taken from individual youths should be noted on the Property Receipt and a photocopy attached to the SIR.

DOCUMENTATION RELATED TO THE CONFISCATION OF CONTRABAND OR EXCESS PERSONAL ITEMS

When confiscation of contraband items and/or excess personal items occur that is not related to a suspected criminal offense, the following procedures shall be followed;

1. Staff confiscating the item shall package the item in a clear plastic baggage (or other containers as necessary and appropriate), seal the package, and attach the photocopy of the Property Receipt, listing the confiscated items. The Property

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Receipt must be signed by the Deputy Probation Officer (DPO) confiscating the property; it must then be reviewed with and signed by the youth. One copy of the Property Receipt must be attached to the package containing the items and one copy given to the youth. If a youth refuses to sign the Property Receipt, an additional staff shall witness and countersign the Property Receipt. A copy of the Property Receipt must be placed in the youth's behavioral file and a copy kept in the property room.

2. Staff confiscating the item shall complete a SIR that notes the circumstances of the incident, the date, time, and location of the incident as well as attach a photocopy of the Property Receipt listing the items confiscated.
3. The SIR shall include the youth's identifying information (youth's full name, PDJ number and D.O.B.) and the expected disposition of the contraband items. (Ex: securely stored at the facility until the youth is released; stored at the facility unit the youth returns from and out-of-camp medical situation or the court matter resolved; turned over to the Camp Manager for disposal; or given to the parents during the next visit to camp). When returning property to a parent/guardian, staff shall provide a photocopy of the Property Receipt that contains a complete inventory of property to the parent or guardian requiring the parent sign the Property Receipt that he/she has received the property. One photocopy of the signed Property Receipt shall be given to the parent and one photocopy placed in the youth's behavioral file.
4. The staff confiscating the items shall maintain secure possession of the items until appropriately received by the Duty Supervisor, no later than the end of the day when the items were confiscated. The Duty Supervisor shall ensure that confiscated items are properly packaged and documented. The Duty Supervisor/Camp Director shall maintain secure possession of the packaged confiscated items until transferred to the Camp Service Manager for storage in a secure property room. Confiscated items are to be logged into the property room when received and logged out when returned to the youth or parent(s)/guardian(s). The secured property room shall be accessible only to supervisors, the Camp Service Manager and the Camp Director.
5. The Camp Manager shall review all actions taken as documented on the SIR or Physical Intervention Report (PIR) to ensure procedures are followed and appropriate action was taken.
6. The Camp Manager shall maintain in an annual file of SIR related to contraband and/or excess personal items that have been confiscated, including SIR related to all youths housed in HOPE Center.
7. Youths shall be allowed the opportunity to request some of or all of the personal items that have been confiscated as excess personal items when the items are no longer considered to be excess. The Duty Supervisor or Camp Manager shall review and approve this process.

DOCUMENTATION RELATED TO THE CONFISCATION OF PERSONAL ITEMS FOR YOUTHS TRANSFERRED

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When a youth is transferred from a facility for medical, mental health or court reasons, or the youth is assigned to the HOPE Center, or placed on an enhanced level of supervision or on a Specialized Supervision Plan, and the youth's personal items are temporarily confiscated, the following procedure shall be followed:

1. Staff temporarily confiscating the items shall package the item in a clear plastic package (or other containers as necessary and appropriate), seal the package, and label the package with the youth's full name, PDJ number, date of confiscation and date of transfer or HOPE Center assignment.
2. Staff temporarily confiscating the items shall document on the SIR pertaining to the transfer of the youth, the types and quantities of items confiscated.
3. Staff temporarily confiscating the items shall maintain secure possession of the items until appropriately received by the Duty Supervisor.
4. The Duty Supervisor shall maintain secure possession of the temporarily confiscated items and shall note them in a pre-designated secure storage location that is accessible only to supervisors, Camp Services Manager and the Camp Manager.
5. The Camp Manager shall review all actions taken as documented on the SIR or PIR to ensure procedures were followed and appropriate action was taken.
6. Upon the youth's return to the facility or removal from the enhanced level of supervision or Specialized Supervision Plan, the Duty Supervisor shall obtain the sealed package and shall facilitate the return of the items to the youth.

DOCUMENTATION RELATED TO THE CONFISCATION OF CONTRABAND OR PERSONAL ITEMS AS EVIDENCE IN A SUSPECTED CRIMINAL OFFENSE

In situations where a crime is suspected of occurring and items/evidence is collected that appears to be related to the crime, staff shall adhere to the procedural instructions contained in directive 1123 (Crime Scene Evidence Preservation), including immediate notification to the Duty Supervisor.

513 FAMILY VISITS

In addition to regular telephone contact with family members, in-person visits play an integral role in the reunification process. Youth shall be afforded the opportunity to visit with designated family members on Saturdays and Sundays and on special visits arranged by the DPO caseworker if deemed integral to the case plan and reunification process.

Upon arrival to camp, the youth shall provide information regarding relatives (e.g., mother, father, legal guardian(s), and grandparents). The DPO caseworker is to cross-reference this information with PCMS to ensure accuracy.

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Allowing visitors into the secure camp setting presents considerable concerns regarding safety and security. For this reason, camp staff must adhere to the detailed visiting procedures outlined in Section 1000 of this manual.

514 SEPARATION

This section outlines specialized living accommodations that include the Healing Opportunities and Positive Engagement (HOPE) Center. From time to time, situations arise that threaten the safety and security of the camp, necessitating the removal of a youth from the main population. Such removal is a temporary circumstance, and staff shall take proactive steps to assist the youth in returning to his/her normal program as soon as possible.

When removed from the general population, careful consideration should be given to positive youth development and trauma-informed care. Youth shall not be denied normal privileges, except when necessary to accomplish the objectives of separation. Separation may be imposed for the following:

- Disciplinary/behavioral reasons
- Medical/mental health reasons
- Assaultive behavior
- Disciplinary consequences
- Protective custody

When the objective of the separation is discipline, Title 15 Section 1390 shall apply as outlined in RTSB Manual Section 600 Behavioral Expectations and Discipline. When separation results in room confinement, the separation shall occur in accordance with WIC Section 208.3 and Title 15, Section 1354.5 – Room Confinement as outlined in RTSB Manual Section 515.

A youth with suspected developmental disabilities shall be segregated when his/her behavior indicates that her/his safety would be jeopardized in the camp general population. Not all youth with developmental disabilities require separation; however, juvenile supervision staff shall understand that such youth are often highly susceptible to assaults and abuse.

Separation Requires Due Process

The youth must be allowed to tell his/her side of the story. At minimum, the youth shall be interviewed to advise him/her of the placement and the opportunity to respond to the information. The grievance process must be available to a segregated youth.

Although separation may include restricting privileges, only those that correspond to the need for separation, the limitations of the facility, and the reasons for placement in separation may be limited.

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If separation is used as pre-disciplinary housing pending a disciplinary hearing, the decision to segregate must be based on the need to segregate for reasons of safety and security, rather than limiting privileges pending a disciplinary hearing. This means that the youth's conduct either made the camp setting unsafe or threatened the youth's safety in the general camp population.

Only those restrictions necessary to maintain the safety, security, and order of the facility pending disciplinary procedures should be imposed.

Separation can be used for protective custody either when the youth requests it or the camp administration determines there is reason to believe it is warranted. Camp staff must document those reasons supporting or not supporting protective custody in the youth's PCMS and in a SIR, which must be approved by the SDPO.

Camp staff will monitor separated youth for depression and/or suicide risk and shall ensure a daily review of separation youth to determine if separation remains necessary.

(Meets standards set forth in Title 15, Section 1354 (a-f))

515 ROOM CONFINEMENT

It is the policy of the Probation Department and RTSB that placement of a youth in a room with a locked door is an option, in accordance with WIC Section 208.3, to be utilized only in very rare instances when a youth's behavior poses an immediate risk of harm to any person. Youth must be placed in the least restrictive setting necessary to maintain safety and may only be placed in a room for the least amount of time necessary to achieve behavioral stabilization. The placement of a youth in room confinement shall be accomplished in accordance with the following guidelines:

- 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 the security of any youth or staff.
- Room confinement shall not be for the purpose of punishment, coercion, convenience, or retaliation by staff.
- Room confinement shall not be used to the extent that it compromises the mental and physical health of the youth.

Separation and/or isolation of youth for purposes of punishment are not effective and are prohibited. A youth may not be placed in room confinement in retaliation for any youth conduct or as a means of harassment or coercion. No youth may be separated from the general population or placed in a HOPE Center (in a single occupancy room) based solely on the youth's actual or perceived race, ethnic group identification, ancestry,

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national origin, immigration status, 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 (See RTSB Section 514 –Separation) or in accordance with Title 15 regulations regarding separation.

(Meets standards set forth in Title 15, Section 1352 (e))

In the event that the youth requires a temporary assignment to the Healing Opportunities and Positive Engagement (HOPE) Center for stabilization purposes, please cross reference this section with Section 1400 of this manual. The HOPE Center provides a temporary supervision alternative designed to minimize dangerous behaviors that compromise the safety and security of the youth and staff in the facility.

NOTE: This section does not apply to youth or wards in court holding facilities or adult facilities. Nothing in this section shall be construed to conflict with any law providing greater or additional protections to youth.

NOTE: This section does not apply during an extraordinary emergency circumstances that require a significant departure from normal institutional operations, including a natural disaster or a 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 the imminent and substantial risk of harm

NOTE: This section does not apply when a youth is placed in a lock cell or sleeping room to treat and protect against the spread of communicable diseases 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 an infirmary for an illness. Additionally, this section does not apply when a youth is placed in a lock cell 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 an infirmary for illness.

(Meets standards set forth in Title 15, Section 1354.5)

516 JUVENILE- EDUCATIONAL RIGHTS (DIRECTIVE 1381)

The purpose of this policy is to define the responsibilities of the Probation staff regarding the provision of accurate school data and developmental services information to the Court to assist in enforcing the educational and developmental services rights of each youth and to assist with determining a youth's general and special education needs and

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the youth's developmental service's needs.

Students in the State of Californian have certain educational rights that have been established by Federal and State Codes. It is the responsibility of the Probation

Department to work collaboratively with the courts, school districts and other juvenile justice partners to ensure that these rights are afforded to all youths under its jurisdiction. Further, for youths with developmental disabilities, the State of California has established specific rights for these individuals and it is the responsibility of the Probation Department to work collaboratively with the courts, regional centers and other juvenile justice partners to ensure that these rights are afforded to all applicable youths under its jurisdiction

Court Report Content Requirements

California Rules of Court Number 5.651 requires that the court, at every hearing, inquire about school attendance and achievement and make findings to ensure the youths are afforded their educational rights. This Rule of Court also requires that at every hearing, the court inquire the status of youths with developmental disabilities and make findings to assure that these youths with developmental disabilities needs are met. This Rule of Court also applies to all children for whom petitions have been filed under Welfare and Institution Codes (WIC) Sections 300, 601, and 602. At all hearings, including dispositions and joint assessment hearings, the court must ensure that, to the extent the information is available, the social worker or probation officer's report for the hearing provides the following information delineated in the Rule:

1. The child's age, behavior, educational and developmental status, and any discrepancies between that person's age and his or her level of achievement in education and of level of cognitive, physical and emotional development;
2. The child's or youth's educational, physical, mental health, or developmental needs;
3. Whether the child or youth is participating in developmentally appropriate extracurricular activities and social activities;
4. Whether the child or youth is attending a comprehensive, regular, public or private school;
5. Whether the child or youth may have physical, mental, or learning-related disabilities or learning characteristics indicating a need for developmental services or special education and related services as provided by the State or Federal Law;
6. If the child is 0 to 3 years old, whether the child may be eligible for or is already receiving early intervention services available under the California Early Services Act (Gov. Code, section 95000 et seq.), and, if the child is receiving services, the specific nature of those services;
7. If the child is between the age of 3 and 5 years and is or may be eligible for special education services, whether the child receiving the early educational opportunities provided by Education Code Section 56001; and if so, the specific nature of those opportunities;

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8. Whether the child or youth is receiving special education and related services or any other services through a current individualized education program should be attached to the report unless (i) A copy of the current individualized educational program should be attached to the report unless disclosure would create a risk of harm. In that case, the report should explain the risk*
9. Whether the child or child is receiving services under section 504 of the Rehabilitation Act of 1973 (29 U.S.C. section 701 et seq.) and if so, the specific nature of those services: (i) a copy of the current individualized educational program should be attached to the report unless disclosure would create a risk of harm. In that case, the report should explain the risk*
10. Whether the child or youth is eligible for developmental services or is already receiving developmental services and, the specific nature of those services: (i) A copy of the current individualized educational program should be attached to the report unless disclosure would create a risk of harm. In that case, the report should explain the risk;
11. Whether the parents' or guardians' educational or developmental services decision making rights have been or should be limited or restored;
12. If the social worker or probation officer recommends limiting the parents' or guardians' right to make educational decisions or developmental-services decisions, the reasons for those rights should be limited and those actions that the parent or the guardian may take to restore those rights if they are limited;
13. If the parents' or guardians' educational or developmental services decision making rights have been limited, the identity of the designated or appointed educational rights holder or surrogate parent;
14. Recommendations and case time goals to meet the child's identified education, physical, mental health, and developmental-service needs, including all related information listed in section 16010(a) as required by section 16010(b);
15. Whether any orders to direct an appropriate person to take the necessary steps for the child or youth to receiving assessments, evaluations, or services, including those for developmental services or for special education and related services, and requested; and
16. In this case of joint assessments, a separate statement by child welfare department and the probation department, each addressing whether the child or youth may have a disability, and whether the child or youth needs developmental services or special education and related services, or qualifies for any assessments or evaluation required by state or federal law.

**Disclosure is considered harmful if the report contains references to trauma or circumstances, which may induce psychological harm to the child or youth. In the event that there is a need for the court report to explain a risk; the report should be sent to court in an envelope addressed to the Bench Officer and marked as "confidential."*

Deputy Probation Officers (DPO) Responsibilities:

Effective for school Enrollment/Achievement Progress, Annual/Progress and

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Supplemental Reports:

When a parent is unavailable or unable to provide educational and/or developmental services decisions, the Court may limit the parents' right to make these services decisions and assign that right to another educational or developmental services representatives.

A recommendation to limit a parent's educational and/or developmental services rights and to appoint an educational rights holder and/or developmental services needs of the youth. A DPO can make a recommendation for an educational rights holder in the School Enrollment/Achievement Progress Report (Prob. 1568) and a recommendation for developmental services decision maker holder in the Annual/Progress Report (Prob. 1245) or the Supplemental Report (Prob. 24).

In the event that a School Enrollment/Achievement Progress Report (Prob. 1568) or an Annual/Progress Report (Prob. 1245) is not calendared by the court, the DPO can request an ex-parte a Supplemental Report (Prob. 24) to make a recommendation regarding educational rights and/or developmental services decisions. Procedures for arranging an ex-parte submission vary among court departments. Therefore, the DPO must contact the designated department court clerk via telephone for instructions.

DPOs shall:

- Include the above requisite information (to the extent available to the DPO) in below identified section of all PRE-PLEA/Disposition (PROB. 1570) and Joint Assessments (241.1 WIC) reports for the purpose of assessing educational and developmental needs as mandated by California Rules of Court Number 5.651:
 - Court report face sheet.
 - Health information.
 - School information.
 - Prior services summary.
 - Service delivery plan summary.

Court Report Face Sheet

- Indicate youth's age.

Health Information

- Describe any physical, mental health or developmental issues that might affect the youth's school achievement or require special programs.

School Information

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- Indicate type of school youth is attending (comprehensive, regular, public or private school).
- Indicate whether the youth is a special education student
 - If yes, indicate services received and whether youth is receiving appropriate services through the current individualized education plan (IEP). A copy of the current individualized educational program should be attached to the report unless disclosure would create a risk of harm. In that case, the report should explain the risk
 - If no, indicate whether the youth may have physical, mental, or learning-related disabilities or other special needs and is in need of special education and related services.
 - If no, and maintaining a 241.1 assessment, a separate statement by the DPO and DCFS social worker whether they believe that the youth may have a disability, and whether he or she is in need of special education and related services. Also, if the youth requires evaluation as required (Title 20, United States Code Section 1412 (a) (3), Education Code Section 56425, or Section 504 of the Rehabilitation Act of 1973).
 - Include youth's performance/behavior.
 - Include the youth's participation in developmentally appropriate extracurricular activities and social activities.
 - Identify the youth's educational needs.
 - Identify education and developmental achievements and any discrepancies in achievement in education and in cognitive, physical and emotional development.
 - Indicate whether holder of the educational rights has been directed, (by the court) to initiate assessment, evaluation, or services (including those for special education and related services).
 - Indicate whether the youth is, or may be eligible for developmental services through the regional center services or are already receiving regional center services. Attach copies of current Individual Family Plan (1436 Title 20, United States Code) and the current Life Quality Assessment (4570 WIC) to the court report.
 - Identify who holds the youth's educational and developmental services decision-making rights and indicate if parent/guardian rights have been limited. If the parent's or guardian's educational or developmental services decision making rights have been limited, identify the designated or appointed educational holder or (surrogate parent) and the developmental services decision maker.
 - Indicate whether the parent or guardian's educational rights or developmental decision-making rights should be limited.
 - If the DPO recommends limiting parents' or guardians' rights to make educational decisions, provide the reasons why those rights should be limited and any actions that the parent or guardian may take to restore these rights.

Prior Service Summary

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All prior services provided to youth shall be included with particular attention in the following areas:

- DCFS Subsection; Include the type of services/placements.
- CBO Subsection; Include the CBO name and type of service.
- Additional Information Section: Report all mental health services that the youth has been provided.

Service Delivery Plan Summary

Services to meet the youth's educational, physical, mental health and developmental needs shall be recommended in the Service Delivery Plan Summary.

- Recommendations and case time goals to meet the youths identified educational, physical, mental health, and developmental needs.

Supervising Deputy Probation Officer (SDPO) Responsibilities

- Train and instruct DPOs on obtaining and including complete information in court reports.
- As a part of the case clearance process prior to the completion of the court report, in regards to the youth's educational needs;
 - Discuss the dynamics of the case; include educational issues with the DPO.
 - Review the worksheet for completeness and determine if all available school and developmental data have been included.
 - Read and improve the completed report prior to submission to the court.

517 PROMOTING DIGNITY FOR FEMALE YOUTH HOUSED IN RTSB (DIRECTIVE 1401)

It is the policy of the Probation Department and RTSB to establish a standard of care to ensure that female youth can maintain a sense of respect and dignity during the time that they are under the care of the County of Los Angeles Probation Department's juvenile camps and the Dorothy Kirby Center (DKC).

On January 24, 2017, the County of Los Angeles, Board of Supervisors passed a Motion to improve the outcomes for young women and girls held in the Los Angeles County Probation Department's camps and juvenile halls. The implementation of this motion allows female youth to have autonomy over their own bodies and health by allowing them more options for personal feminine hygiene and a higher standard of healthcare to meet the unique needs of female youth in regard to reproductive health.

It is the goal of the Probation Department through partnership with Juvenile Court Health Services (JCHS) to provide a high level of care for the young women detained in our facilities and to empower them with knowledge and the ability to make their own

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reproductive choices.

Undergarment Issuance

All female youth shall be given the option of both *cloth* and *disposable* underwear upon intake into any juvenile facility as part of the clothing issuance process. Each female youth shall also be issued a new properly fitted bra.

Youth residing in camp shall also be provided with a mesh laundry bag, which they may utilize to clean their undergarments. Additional clean undergarments shall be made available for replacement should the youth's undergarments become soiled.

Youth at DKC are given the opportunity to do their own laundry on a daily basis. Each youth is responsible for washing their own sheets, blanket and clothing with the washing machines provided in the cottages. Clean clothing is kept on hand in the cottage to be given to the youth in case their clothing becomes soiled.

Each facility housing female youth shall maintain a supply of both cloth and disposable underwear, should they require replacement of any of the above items. Youth who choose to utilize disposable underwear during menstruation for sanitary purposes must be accommodated.

Feminine Hygiene Products

All female youth shall be given the option of both feminine hygiene *pads* and *tampons* for use during menstruation. Feminine hygiene products shall be placed in an easily accessible location in plain view within the camp dormitory or DKC cottage. At the beginning of every shift, staff shall ensure that there is an adequate supply available to the youth at all times. Youth must be allowed the opportunity to use the restroom as frequently as needed to safely and humanely use these products.

Informational pamphlets shall be made available to youth on the use of their choice of feminine hygiene product. Youth shall be informed that should they have any further questions regarding use of the product, a Request for Services form may be submitted to the facility nurse who shall provide additional information and educational materials.

Family Planning and Sexual Health resources for Female Youth in Probation Facilities

Per JCHS Policy, reproductive health services are available to all youth and they shall be allowed access to comprehensive family planning services.

- Age appropriate educational materials regarding reproductive health are available at all facilities.
- Educational materials regarding contraceptives and condoms are available for

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youth upon release.

- Any contraceptive method that a female youth has established prior to admission shall be continued if desired by the youth.
- Female youth may initiate hormonal contraception during their stay in detention facilities if requested. If necessary, youth may be referred to outside specialty clinics for forms of contraception that are not offered by JCHS.
- Female youth who are pregnant may be referred to an outside medical facility for options counseling and/or termination of pregnancy is requested.

Care Procedures for Pregnant Youth in Probation Facilities

Per JCHS Policy, all pregnant youth are to receive proper pre-natal and post-natal care and are provided with nutrition, guidance, treatment and counseling.

- All female youth entering the halls shall receive a urine pregnancy test upon admission. During the physical examination, history regarding the girl's menstrual and sexual history is obtained. Additional testing shall be performed at the discretion of the physician as needed to ensure a diagnosis of pregnancy is made in a timely fashion
- Youth shall receive a full history and physical examination by a JCHS physician who shall refer the pregnant youth to a high-risk OC clinic at LAC+USC Medical Center for pre-natal care. The high-risk OC clinic shall evaluate the youth and provide all appropriate care.
- Youth taking psychotropic medications shall be followed closely by treating psychiatrist and treating obstetrician.
- Upon release from Probation facilities, appropriate youth are referred to Public Health for services available for pregnant teens or teenage mothers.
- Youth beginning labor shall be sent to the appropriate medical facility providing the youth's pre-natal care if possible to ensure continuity of care. Any available pre-natal information shall accompany the youth to the medical facility, with phone numbers to call if additional information is necessary.
- Post-partum youth are followed by JCHS, and if post-partum depression is suspected, the youth is immediately referred to the Department of Mental Health.
- JCHS shall notify Probation of all pregnant youth. Pregnant youth shall be identified as "Fragile Youth" in the Probation Electronic Medical Records System (PEMRS).
- All pregnant youth shall receive pre-natal vitamins and a medical diet that includes supplementary snacks.

It is the responsibility of the Probation Department to ensure that all pregnant youth receive proper prenatal care while detained in the facilities.

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All youth that are admitted in Juvenile Hall receive a physical exam after intake; a pregnancy test is part of the JCHS nurse's intake exam. JCHS staff informs the youth of the results of the pregnancy test.

Pregnant youth that are adjudicated to a Camp Community Program (CCP) can be transferred to camp, however, they shall be returned to one of the (3) Juvenile Hall facilities for housing at the beginning of their 28th gestational week of pregnancy (3rd trimester).

At the 32nd gestational week of pregnancy, all pregnant youth shall be housed at Central Juvenile Hall (CJH) because of its close proximity to the Hospital, allowing them to receive prenatal care while detained. Parenting Classes shall be offered to all pregnant youth as part of their pre-natal care during the 3rd trimester at Central Juvenile Hall.

All youth who have been deemed to have a "high risk pregnancy " shall be housed at Central Juvenile Hall.

The Multi-Disciplinary Team (MDT) shall work with the pregnant youth and assist with any needs during and after the pregnancy. The team is comprised of Probation, DMH, JCHS, LACOE and the youth's parent/guardian or social worker. The team shall develop a plan for the youth to assist her with pre-natal and post-partum needs.

Once the youth has delivered the baby and returns to the Juvenile Hall, probation shall offer the following services to help her adjust to separation:

- Baby bonding (Special Visit) with the youth and her baby; visits shall be scheduled through the IBMP Coordinator.
- Youth shall be given the option to provide breast milk for their babies. Lactation rooms shall be designated in the Medical Unit. The breast milk shall be kept in specially designated refrigerator located in the Medical Unit. The baby's caregiver may pick up the milk for the baby during the visit, or as scheduled with the IBMP Coordinator.

(Meets standards set forth in Title 15, Section 1324 (j))

518 TRAUMA-INFORMED APPROACHES

Trauma-informed care must involve both organizational and clinical practices that recognize the complex impact trauma has on both youth and the youth's family. The following core principles of a trauma-informed:

- **Youth empowerment:** Using individuals' strengths to empower them in the development of their case plan (MDT Process);
- **Choice:** Informing youth regarding services options so they can choose the

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options they prefer, where appropriate

- **Collaboration:** Maximizing collaboration among stakeholders, youth, and their families in the MDT planning/process;
- **Safety:** Developing services and activities that ensure youths' physical and emotional safety; and
- **Trustworthiness:** Creating clear expectations with youth about what proposed services/treatments entail, who will provide services, and services delivery.

(Meets standards set forth in Title 15, Section 1324 (h))

519 CULTURALLY RESPONSIVE APPROACHES

It is the policy of the probation department and RTSB be through its partnership with the Los Angeles County Office of Department education (LACOE), continue its commitment to providing educational culturally enriching experience to youth under supervision. The departments juvenile real addition programs focus on providing the youth with education opportunities that engage their minds, build communication skills, and expose them to new thoughts and ideas. Many of the youth in juvenile rational residential treatment camps have had little opportunity to experience these local resources.

(Meets standards set forth in Title 15, Section 1324 (h)(i))

520 ACCESS TO LEGAL SERVICES

Staff shall ensure the right of youth to have access to the courts and legal services. Such access shall include:

- Access, upon request by the youth, to licensed attorneys and their authorized representatives
- Confidential consultation with attorneys
- Unlimited postage free, legal correspondence, and cost-free telephone access as appropriate

(Meets standards set forth in Title 15, Section 1377)

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Subject: RESIDENTIAL TREATMENT SERVICES BUREAU MANUAL BEHAVIORAL EXPECTATIONS AND DISCIPLINE	Section Number: RTSB-600
	Effective Date: July 21, 2020
	Approved By: Jennifer Kaufman, Bureau Chief

601 INTRODUCTION

A primary goal of camp programs is to effect positive probationer behavioral change using evidence-based practices. Cognitive-Behavioral Programs that stress positive reinforcement and changes in thinking provide the foundation for interventions used with camp youth. An inherent factor in these interventions is the focus on positive reinforcement, which is known to be a powerful change agent.

The RTSB is charged with providing a safe and secure environment while at the same time providing youth with rehabilitative interventions aligned with evidence-based best practices, including the use of positive behavior interventions and supports. Camp youth are expected to demonstrate pro-social behaviors throughout their stay, and Probation staff members are expected to communicate clearly to the youth the expectations for pro-social behavior.

While discipline may correct negative behavior, it serves as a temporary remedy that does not bring about lasting change in pro-social behavior. Discipline should be used only after other strategies (such as positive reinforcement and modeling) have not effectively eliminated problematic behavior. Its purpose is to supplement reinforcement techniques, rather than to replace them.

Discipline shall never be used as a form of revenge or retaliation. Discipline does not include corporal punishment, group punishment, physical or psychological degradation, or deprivation of the following:

- Bed and bedding;
- Daily shower, access to drinking fountain, toilet and personal hygiene items, and clean clothing;
- Full nutrition;
- Contact with parent or attorney;
- Weekly telephonic contact with family;
- Exercise;
- Religious services and practices;
- Clean and sanitary living conditions;

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- Medical services and counseling
- Sending and receiving mail;
- Education
- Rehabilitative programming
- Telephone calls

(Meets standards set forth in Title 15, Section 1390 (a)-(k))

602 FACILITY RULES

Probation staff shall ensure that camp youth obey all facility rules. This must be accomplished consistently and uniformly with trauma-informed approaches and positive behavior interventions by all staff, on all shifts, and at all times. Inconsistent enforcement of the rules creates confusion among the youth and does not reinforce the development of lasting behavioral change.

603 BEHAVIOR MANAGEMENT PROGRAM

The greatest support for behavior change occurs in programs that combine an understanding of basic behavioral principles with the teaching and practicing of new skills, the identification and modification of thought processes that lead to negative behaviors and the use of reinforcement to increase desired behaviors and reduce negative behaviors. Each facility's Behavior Management Program (BMP) provides behavioral reinforcement and feedback 24-hours a day in all activities and circumstances. The BMP allows youth to earn points and privileges as they demonstrate behavioral control and use skillful behavior in their daily activities. The focus and activities in the camp are geared towards personal growth and youth development. Each aspect of the facility operation (meal times, school, recreation, other activities, etc.), provides opportunities for staff to structure the environment, describe behaviors that they expect to see, and create opportunities for youth to demonstrate these behaviors and be recognized for them. The BMP includes various progressive phases that allow staff and youth to see and measure progress. Youth access greater independence and privileges as they demonstrate increased skills and behavioral control. Points earned by youth can be utilized to purchase various rewards on a daily and weekly basis that are valuable to the youth. The youth earn their way through the camp program and gain greater levels of privileges, including the possibility of early release from camp. Every interaction that occurs in camp can be viewed as an opportunity to work with youth and to support staff to create an environment that fosters long-term behavior change, decreased recidivism, and increased problem-solving skills and increased success in community

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reintegration.

The BMP consists of issuing points for desired behavior, daily rewards for accumulated points, increased “Stages” of privilege earned by demonstrating sustained positive behavior and sanctions for undesired behavior. The use of sanctions or the removal of privileges is considered and utilized prior to removing a youth from the larger group, whenever appropriate. Consequences for such lower level behaviors, might include essays, apologies, community service, privilege suspension, etc. Youth with sustained positive behavior earn the ability to request early release consideration. The BMP consists of the following elements:

- Points for desired behavior;
- Daily rewards for youth who achieve a minimum threshold of points by a designated time each day;
- “Made Days” for youth who achieve a minimum threshold of points for the entire day;
- Increased “Stages” of privileges for youth who are able to demonstrate sustained positive behavior through the earning of consecutive Made Days;
- Sanctions for undesired behavior;
- Consideration for early release for youth with lengthy sustained positive behavior, based on total Made Days earned and completion of required cognitive behavioral and other programming.

Designated staff in the living unit assess behavior and issue points to each youth on the Daily Merit Ladder grading sheet. Points shall be given for demonstration of compliant, pro-social behavior during activity periods throughout the day. Points in each period range from 0 to 2, with the possibility of earning bonus points for demonstrating targeted pro-social skills and for holding a camp job.

Daily rewards are awarded in order to acknowledge and encourage small increments of progress to youth overall positive behavioral change. A daily reward is earned when a point threshold (a minimum number of points) is achieved by a designated time in the day, typically 5:00 pm, and the youth does not have any Special Incident Reports (SIRs) or school referrals on that day. The youth then has the opportunity to choose a reward from an approved list of options at each camp. Daily rewards increase the likelihood that desired behaviors would be repeated.

Progression to higher “Stages” of privilege is achieved when a youth achieves a point threshold, called a “Made Day,” for a set number of consecutive days

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and the youth does not have any Special Incident Reports (SIRs) or school referrals on those days. Youth progress through the Stages by continuing to

accumulate consecutive Made Days, as the youth meet each point threshold and are promoted to a higher stage, their privileges in camp will increase. In addition, Made Days are totaled to determine when the Multi-Disciplinary Team (MDT) will convene to consider an early release recommendation.

Within the BMP, the use of sanctions or the removal of privileges should be considered and utilized in response to youth who demonstrate defiant or disruptive behavior that does not meet the minimum standard of compliance. All BMP privileges may be suspended as a sanction, depending on the nature of the rule violation. Youth may lose their Stage privileges through privilege suspension either for a specified time or by being dropped to lower Stages until they earn their way back. Sanctions may be rendered through a Special Incident Report (SIR) or via a Sanctions Form. The Sanctions Form provides the ability to render consequences for behaviors that do not rise to the level of a Special Incident Report (SIR). Consequences can include essays, thinking reports, apologies, community service projects, privilege suspension, etc. The effectiveness of the BMP is contingent upon the consistent implementation of the system and a collaborative effort among all staff. The RTSB Behavior Management Handbook provides the necessary instructions to effectively implement and maintain the BMP in RTSB.

604 CONTINUUM OF CORRECTION

Privileges may be suspended for various behavior infractions. Within the BMP, the use of sanctions or the removal of privileges should be considered and utilized as a response to undesired behavior. It is the policy of the Probation Department and RTSB that accommodations shall be provided to youth with disabilities, limited literacy, and English language learners. All BMP privileges may be suspended as a sanction, depending on the nature of the rule violation. Youth may lose their Stage privileges through privilege suspension either for a specified time or by being dropped to lower Stages until they earn their way back. Sanctions may be rendered through a Special Incident Report (SIR) or via a Sanctions Form. Behavior shall be addressed at the lowest level possible and all lower levels of intervention must be attempted and exhausted before more serious consequences are utilized.

Sanctions are consequences given for negative behavior. Sanctions can be given for all negative behavior, from major to minor rule violations. Sanctions allow for creative consequences that are tailored to specific misconduct. Sanctions are usually most effective when used early to intervene with problem behaviors before they escalate to

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Major Rule Violations, but sanctions are intended to have varying levels of severity, depending on the infraction. Sanctions also have the potential to be extremely effective at curbing negative behavior because they can be targeted toward the individual behavior of youth and require thought-provoking responses that get to the core of why the youth engaged in the misconduct in the first place.

Just as it is important not to inadvertently ignore or reinforce unwanted behavior, it is equally important not to assign too heavy or too punitive a sanction and lose the learning opportunity and potential of the sanctions consequence. Sanctions that are too punitive or too lenient will not effectively reduce unwanted behaviors in our facilities. It is important to assign a sanction consequence that may serve to trigger insight and learning. A sanctions assignment that is linked or connected to potential learning is more effective to behavior change than an assignment that is rote or requires little or no thinking on the part of the youth. An assignment that requires youth to describe what was going on for them when the negative behavior occurred and what they could have done differently has the greatest potential to reduce future negative behaviors and give staff opportunities to work with youth in a targeted and meaningful way.

Mildly and moderately disruptive behavior shall be considered as Minor Rule Violations. Minor Rule Violations may include, but are not limited to:

- Verbal abuse, profanity, racial remarks, name-calling or creating excessive noise or complaints
- Failure to follow instructions, participate in scheduled activity or running own program
- Instigating others to cause disruptive behavior
- Lying or misleading staff or falsifying information or making demands to staff
- Walking out of bounds or out of supervision area
- Damaging or losing county property or flooding sinks and/or toilets
- Unauthorized telephone use
- Trading food or property without permission
- Horseplay
- Gang Activity
- Gambling
- Theft
- Littering
- Improper dress
- Possession of minor contraband such as extra clothing, sheets, books, etc.

Discipline shall be accompanied by written documentation.

Severely disruptive behavior by the youth shall be considered as Major Rule Violations. Major Rule Violations may include, but are not limited to:

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- Assaultive behavior (includes gassing, spitting or throwing of urine/feces)
- Attempted escape (does not include “Out of Bounds”)
- Fighting
- Major group disturbance
- Possession of drug-related contraband and/or paraphernalia
- Property damage (\$400 or more)
- Property damage (under \$400)

If a Major Rule Violation includes one of the following enhancements, additional Made-Days will be added to the total Made Days required for early release consideration:

- Major Rule Violation that include gang, racial, and/or hate violations
- Major Rule Violation that require a Safe Crisis Management (SCM) Physical Intervention to suppress them
- Participation in a major/group disturbance or inciting/participating in riotous behavior or creating a disturbance after lights out
- Fabricating and/or exaggerating symptoms of self-injurious or suicidal behavior
- Fighting, gassing or assaulting or committing physical abuse on other youth or staff
- Making threats or intimidating or bullying others
- Tampering with security equipment
- Exchanging medication(s)
- Inappropriate or unacceptable sexual behavior
- AWOL or attempted AWOL
- Need for physical, chemical and/or mechanical restraint
- Possession or ingesting of drugs, vape paraphernalia and/or alcohol

Rule Violations:

In the instance of **Minor rule violations**, often youth may remain in their current privilege Stage and have their Stage privileges suspended for a specified number of days. Minor rule violations shall be documented on a Sanctions Form, reviewed, and approved by the SDPO prior to the youth serving the consequence. In addition, the youth may appeal to the SDPO.

In the instance of **Major rule violations**, youth will automatically be dropped to the next lower Stage. In addition, Major rule violations will result in additional Made Days needed to be eligible for early release consideration.

Major rule violations may also result in additional penalties and restorative actions, such

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as written apologies, etc. These additional penalties shall be described on the Special Incident Report (SIR) and approved by the SDPO.

Sanctions can be used with both Minor Rule and Major Rule Violations and allow for tailoring consequences to specific behaviors and situations. When considering a sanction assignment, it is important to take into account what might give or prompt insight in a youth or repair harm caused.

Sanctions Form:

Sanctions may be rendered through a Sanctions Form. The Sanctions Form provides the ability to render consequences for behaviors that do not rise to the level of a Special Incident Report (SIR). Recommended sanction might include essays, apologies, community service, privilege suspension, no action, etc.

Sanctions are used when behaviors are more pervasive or a cause of greater concern than what can be addressed by assigning a “zero” for a particular grading period. Sanctions may be used when a youth has earned multiple “zero” grades throughout the day and thus far the “zero” grading does not appear to be affecting or de-escalating the repeated negative or unwanted behavior. Sanctions may also be used when one particular behavior is in need of a specific consequence to discourage its being repeated and to create an opportunity for learning and insight for the youth. The decision to use a sanction, including the removal of privileges, should be considered for youth behaviors that do not rise to the level of serious infractions. The use of sanctions should be considered and utilized, whenever possible and appropriate, in advance of a youth escalating his/her behavior.

Examples of Minor Rule Violation behaviors that may or may not warrant a Sanctions assignment:

- Instances of multiple “0” grades within the day
- Repetitive youth acts of misconduct such as: continued FFI, disturbance of movements or dorm periods, verbally argumentative defiance and any disruptive behaviors that do not rise to level of Major Rule Violations
- Multiple school re-structuring episodes within the day
- Targeted Minor Rule Violations: any undesirable or negative behaviors within a particular camp culture (low daily school points, repeated refusal to participate in small groups, low daily dorm points, etc.)
- Any behaviors targeted to reduce potential for Major Rule Violation: horseplay, verbal harassment/bullying, etc.

Sanctions assignment options:

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The following are options and suggestions for use with community members when assigning sanctions. This is not, however, an exhaustive list of all potential consequences. Sanctions assigned for unwanted behavior can be creative and diverse, as long as they follow the standard of being applied individually and appropriately to the youth based on the targeted unwanted behavior.

Thinking Reports and Behavior Chain Analysis:

Thinking Reports, and the Behavior Chain Analysis (DBT camps), provide a process for youth to examine their behavior and identify triggers and vulnerability factors that link to unwanted behaviors. Describing the emotions, thoughts and body sensations that occur immediately before, during and after negative behaviors can provide a guideline for staff and youth to explore where, when and how to intervene in the behavioral cycle to make unwanted behaviors less likely to occur again.

Essays:

Essays are writing assignments designed to require a youth to spend time being thoughtful about their behavior. At minimum, an essay topic should require effort and thought for the youth to complete. The process of preparing the essay is meant to demonstrate that time must be spent as a consequence (loss of free time or time that could be spent doing something else). A potentially more effective essay assignment would include an essay topic designed to address the specific behavior being targeted by the Sanctions assignment.

Apology Letters:

Apologies are most effective when they are linked to behaviors that personally offended or wounded someone. When behaviors are, hurtful and directed at another in a hurtful way, apology letters or verbal apologies should require that youth think through their behavior enough to explain what went wrong and make a clear statement of remorse or responsibility. Apologies may be delivered to groups or an individual, based on the circumstances.

Community Service Assignments:

Community Service Assignments allow youth to repair all or a portion of the harm done in disrupting the camp environment or damaging property. The length/amount of community service should be proportionate to the harm done and have a realistic chance of completion. Staff must ensure that the youth is required to complete the assignment and that the time and skills required are within the scope of what can be done in the camp.

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Privilege/Activity Suspensions:

Within the BMP, privileges can be suspended or removed for various behavior infractions. All BMP privileges may be suspended through the Sanctions Form, depending on the nature of the rule violation. Youth may lose their Stage privileges through privilege suspension for a specified time or stage events and other BMP events may be denied to the youth as a form of privilege suspension.

Stage Drops:

More serious violations or persistent youth violations may be addressed through a Stage drop to a lower Stage in the BMP program. As mentioned previously, incidents of assault and fighting are examples of serious violations that require a youth to be dropped from their current Stage to the previous Stage. Once dropped, the youth must then earn the required number of Made Days for the Stage dropped in order to achieve prior Stage again and resume the associated privileges.

Other Sanctions:

Sanctions may be tailored to particular behaviors with the approval of SDPO. Staff are encouraged to be creative with Sanctions assignments and to consider which consequences may increase the likelihood that a youth will cease an unwanted behavior. All Sanctions are to have the approval of the Duty Supervisor prior to the Sanctions assignment being assigned to the youth.

Penalty Made Days:

Penalty Made Days may be assigned for serious infractions. Approval for any penalty days must be given by the SDPO. Penalty Days should be reserved for behaviors that can quickly become dangerous, such as physical horseplay that does not rise to the level of a fight, volatile dorm disruptions, etc. No more than two additional Made Days may be assigned for any one behavior outside of the list of Major Rule Violations. A consequence of one additional Made Day can also be assigned when a youth refuses to complete an earlier Sanctions assignment.

Specialized Supervision Plan (SSP)

- Creating Specialized Supervision Plan to describe an individualized support strategy to address and support youth in learning new responses for behavior.

As-Needed Multi-Disciplinary Team

- As-Needed Multi-Disciplinary Team meetings may be held to with the youth's DPO and DMH clinician to address youth's specific problematic target behavior and identify skills and strategies to decrease target behavior. This may include

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the development of Behavior Targets/Goals, which are specific and measurable goals for the youth that are achievable in a realistic timeframe in order to demonstrate they have learned new behaviors and ways to manage their stress and reactions. The youth's progress shall be updated weekly and goals adjusted as needed, with full engagement, commitment and participation of the youth.

Notice of Potential Violation (Prob. 1111)

This form is used to notify the court of potential probation violations that are still being addressed at the camp level.

No Action

Through use of trauma-informed approaches and positive behavior interventions, no action may be taken by staff in the event that youth recovers quickly from the undesired behavior(s).

Probation Violation (777 WIC) Notice of Hearing Filing

This process involves court intervention, which may lead the court to order further sanctions, such as an extension in the length of stay. The Camp Director must review the filing of a 777 and submit to Senior Director for approval and the Bureau Chiefs' office will make the final determination.

New charge (602 WIC) Filing

If the youth's behavior has resulted in the commission of a new crime, then criminal charges may be filed.

605 DOCUMENTATION

Documenting undesired behavior and steps taken to correct it provides a tool for tracking the youth's progress in his or her camp program. It communicates to other staff the youth's status and issues that may need to be addressed and provides information that may be noted in any future MDTs. Documentation is typically accomplished via PCMS Case Notes or a Special Incident Report (SIR). Caseworkers shall document negative behavior in case records, noting corrective measures instituted, as well as the youth's response.

606 DUE PROCESS

Discipline shall be imposed in accordance with due process. Only deputized staff are authorized to impose discipline for violation of rules and the imposition of discipline shall not be delegated to any detainee. The level and formality of due process shall be in direct relationship to the severity of the discipline imposed.

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Special provisions shall be made to provide such information to youth who are impaired, illiterate, or who do not speak English. Due process in the more restrictive forms of discipline requires the following:

- Verbal and written notice of violation prior to a hearing.
- Clear statement on the SIR that the rule violation is major and that the youth is entitled to a hearing.
- SDPO review of SIR and written approval of the recommended sanction.
If the SDPO determines that the rule violation is not major, then no hearing will be scheduled.
- A separate document provided to the youth within 48 hours after the occurrence of the incident that informs the youth of the following:
 - All penalties are held in abeyance pending the outcome of the hearing.
 - A supervisor or designee (DPO II or higher) who is not a party to the incident shall conduct the hearing.
 - The youth shall have the opportunity to state the facts of his/her case, including mitigating information, and to present evidence and testimony from others.
 - The youth may receive assistance of another staff member in the hearing process, preferably chosen by the youth or a non-involved staff member who is known to be neutral and is appointed by the SDPO / designee.
- Provision for Administrative Review.

Any disciplinary action resulting in separation of the youth for more than 8 hours or an extension of custody time requires a disciplinary hearing. This is an automatic process initiated by staff, which the youth does not have to request.

Due process must occur in a timely manner. However, staff may need to isolate youth immediately who need more structure and/or who pose immediate threats to themselves, staff, or other camp youth. When such an emergency is under control, the disciplinary due process shall take place.

(Meets standards set forth in Title 15, Section 1391(a)-(g)).

LOS ANGELES COUNTY PROBATION DEPARTMENT

Subject: RESIDENTIAL TREATMENT SERVICES BUREAU MANUAL CASE PLANNING & PROCEDURES	Section Number: RTSB-700
	Effective Date: July 21, 2020
	Approved By: Jennifer Kaufman, Bureau Chief

701 INTRODUCTION

Case management is an integral part of the Probation Department's mission to effect positive probationer behavioral change. It provides a systematic approach to identifying needs and providing targeted interventions. The Residential Treatment Services Bureau (RTSB) maintains an extensive record-keeping system to chronicle its own operations and to report on the status (including legal and proper care) of all youth in its care. Through its reports, the RTSB is able to retrieve accurate accounts of specific incidents or operations and to develop a database for statistical analyses. The Director at each facility ensures that there are written procedures governing the generations, review, dissemination, retention, purging, and destruction of all reports and records. This section provides an overview of case planning and procedures, which is supplemented by intensive training at the RTSB Academy.

702 GENERAL DUTIES AND RESPONSIBILITIES

The DPO is the caseworker and is assigned a caseload of camp youth to oversee. The caseworker is responsible for assuring that the camp youth receives a consistent continuum of care, based on previous services received. This continuum of care must also include case planning needs for the youth's re-entry into the community in order to assure the best possible outcomes.

Essential to good casework practice is clear communication with case plan participants: past, present, and future. This includes the youth, family members, and various service providers. The caseworker must also be knowledgeable about all documentation pertaining to the youth in order to make the most informed decisions about case plan goals and interventions. Finally, the caseworker must approach case planning in a systematic and organized manner in accordance with weekly casework flow detailed below.

Camp DPO Responsibilities:

- Reviewing the case and documenting any special court orders and/or instructions
- Orienting the youth and logging in the next court date.

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- Ensuring that all Court Reports are complete and submitted in a timely manner
- Documenting all case contacts in PCMS, such as telephone calls, face-to-face contacts, court calls, etc.
- Ensuring that the CHQ assessment has been received and placed in the PDJ file, and documenting this in PCMS
- Ensuring and documenting the fact that the PDJ file has been received within 30 days of assignment. If it has not arrived, the DPO must immediately notify the CHQ DPO via email.

Camp SDPO Responsibilities:

- Documenting the rejection of all new and returning youth arriving at the camp. The case note entry should include the reason and date of rejection.
- Ensuring that all transfers/releases are documented. This includes, but is not limited to:
 - youth going to juvenile hall for medical, dental, or court
 - youth transferred to the HOPE Center at another camp for disciplinary reasons
 - youth released home directly from camp
- Reviewing and documenting any special orders by the court.
- Thoroughly reviewing and assigning the case to the designated DPO. Once the SDPO assigns the case, he or she shall document this information in PCMS.
- Ensuring that the youth receives an orientation within 24-hours of camp arrival and that this has been documented.
- Ensuring that the DPO has entered and/or updated any changes in the youth's contact information, such as address, Apt. #, zip code, telephone number, etc.
- Ensuring that the camp has received CHQ's assessment for the youth and providing it to the DPO.
- Documenting all case contact in PCMS, such as telephone calls, face-to-face contact, court calls, etc.

(Meets standards set forth in Title 15, Section 1324(f))

703 THE MDT PROCESS

It is the policy of the Residential Treatment Services Bureau (RTSB) that Initial and Transitional Multi-Disciplinary Team (MDT) meetings are conducted for all youth in RTSB facilities to facilitate case planning and continuity of care.

An MDT meeting is a case planning meeting where staff from all partner agencies meet with the youth and parents/guardians to share information relevant to the youth's risks and needs; participate in goal setting; produce a flexible, responsive case plan to guide

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camp and transition services; and review progress. The MDT meetings drive the development of a comprehensive case plan for the youth in camp and create continuity of care through an individualized aftercare plan for services and supports as the youth transitions back to the community.

The goal of every MDT meeting and case plan is to address areas of risk and need while supporting and building strengths within the youth and family system. This goal is accomplished through the provision of interventions, services and referrals targeted at increasing protective factors and reducing criminogenic risk factors to reduce recidivism. The areas of criminogenic risk most commonly addressed in camp include anti-social attitudes, feelings and values and skill deficiencies involving problem-solving, impulsivity and poor self-control. Services in the case plan to assist the youth in these areas include education, mental health and substance abuse counseling, cognitive behavioral skills groups, and career-technical and prosocial activities.

MDT meetings are a collaborative effort between:

- Probation Department
 - Residential Treatment Services Bureau (RTSB)
 - Camp Community Transition Program (CCTP)
 - Other units such as Placement, IGSP, etc. as appropriate
- Department of Mental Health (DMH)
- Los Angeles County Office of Education (LACOE)
- Juvenile Court Health Services (JCHS)
- Parent(s)/Guardian(s)
- Various School Districts
- Department of Children and Family Services (DCFS)
- Department of Public Social Services (DPSS)
- Regional Center for the Developmentally Disabled, as appropriate
- Other interested parties, as needed

An MDT meeting may be held at any point in the youth's camp stay—some are held at pre-determined intervals and others are held in response to behaviors and progress of the youth or changes in the youth's circumstances.

The MDT and case planning process begins before the youth's arrival in camp with a Multi-Disciplinary Assessment (MDA) conducted by the Camps Assessment Unit (CAU). Following the youth's arrival in camp, an Initial MDT is held in the first two weeks. A Transitional MDT is held prior to the youth's release from camp. As-Needed MDTs may be held whenever a youth's behavior or other circumstances warrant a review.

MDA: Usually completed within seven days of the youth's CCP order and consists of

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a comprehensive assessment of the youth's risks and needs, including a series of Medical, Mental Health, Education and Probation assessments to classify and place each youth in the appropriate camp. Information and recommendations from the MDA, including preliminary service recommendations and a case assessment summary, are forwarded to staff in the camp where the youth is placed.

Initial MDT: Held within ten business days of the youth's arrival in camp. The Initial MDT meeting is the opportunity for the treatment team in camp to come together to review the youth's situation, talk to family members whenever possible, review information and recommendations gathered from the MDA and other documents and develop a detailed case plan with the youth and family describing the services and goals for the youth's camp program. Changes may be made to the preliminary recommendations from the MDA as the Initial MDT will more clearly define areas of challenge and strength for the youth. The camp case plan is documented in the MDT Minutes and includes the development of specific goals and behavioral targets for the youth to achieve in camp. The youth's caseworker and partner agencies will then implement the agreed upon case plan with the youth.

Mid-Point Review MDT: Held within sixty to ninety days following the camp entry. The team should conduct a review of service progress, family engagement, behavioral goals, academic progress, etc. The meeting should include specific focus/documentation on progress of transition plan and follow-up actions required.

Transitional MDT: Occurs 45-60 days prior to a youth's release from camp. The discussion in the Transitional MDT meeting includes review and follow-up on the goals and treatment plans established during previous MDTs. It ensures that progress toward goals and behavior targets are tracked and reviewed and that any success or difficulty for the youth in reaching these targets is discussed. The Transitional MDT provides key information to all partner agencies involved in preparing the youth and family for the youth's transition back into the community. The Transitional MDT will place specific focus and emphasis on treatment progress, on-going treatment needs and areas for follow-up that are vital to community reintegration. A transition/reintegration plan is developed, documented in the MDT Minutes and incorporated into the pre-release court report and discharge plan. This process requires a completed home evaluation and notification to the Field Aftercare Deputies.

No youth may be released without a Transitional MDT.

As-Needed MDT: Can occur any time during the youth's camp stay when immediate intervention is required. An As-Needed MDT can be called as a result of the youth's positive or negative behavior or disciplinary concerns, mental health issues or crises, the need for new treatment services, any change in the youth's circumstances including updates to the transition plan or any other factors requiring review. The As-Needed MDT reviews the circumstances surrounding the youth's specific behaviors or other issues to be addressed, documents the youth's responses to interventions and works with the youth and the team to develop a plan to address the circumstances or difficulties. An As-Needed MDT may result in a modification to the youth's case plan. All As-Needed MDTs are documented in MDT Minutes.

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MDT Coordinator Role

The MDT Coordinator is the lead Probation staff responsible for scheduling, conducting and documenting the MDT meetings. The MDT Coordinator facilitates the fostering and supporting of a collaborative partnership among all participants throughout the MDT process. The Coordinator works to generate consensus by engaging and motivating all team members to actively participate in the process, advocating for the youth and family when needed, and redirecting conflict and power struggles. The MDT Coordinator keeps the focus of the meeting on the youth and family, facilitating participation of the youth and family in the final case plan decisions by being strength based, avoiding blaming or judgment, asking open-ended questions, and fostering respectful interactions.

The duties and responsibilities of the Coordinator include:

Scheduling MDT meetings, providing meeting notification to all participants, making room and equipment arrangements, allowing enough time for each meeting, ensuring meetings occur within required timeframes (Initial MDT and Transitional MDT), planning each meeting and gathering relevant documents, facilitating the meeting, completing all meeting minute documentation, meeting data collection, and providing any necessary follow up actions or documentation.

MDT Schedule and Calendar: The MDT Coordinator will use the Probation MDT Dashboard program, a component of the LACOE Educational Passport System (EPS), to schedule and notify participants of MDT meetings, changes to the MDT meeting schedule, and to provide teleconference dial-in information for participants not able to attend meetings in person. The Coordinator will ensure that the Parent Notification letter is mailed to the youth's parent/guardian prior to the Initial MDT meeting. Whenever possible, attempts shall be made to accommodate all MDT participants when scheduling MDT meetings. Focus and intent will be placed on scheduling MDT meetings to include participation by the youth's Probation caseworker and DMH primary clinician. Transitional MDT meetings are to be scheduled in the Probation MDT Dashboard by the 20th of the month prior to the meeting month, whenever possible. The Probation MDT Dashboard generates a monthly calendar of scheduled meetings. The MDT Coordinator will distribute the monthly calendar of scheduled meetings to members of the MDT team (Probation, DMH, LACOE, JCHS, and other meeting participants) at the end of the month prior to the meeting month.

Collecting/Organizing Information: The goal of every MDT Meeting is to collect and discuss all relevant information regarding the youth's progress, to review and coordinate services, and collaborate on case plan and transition plan development. In instances when a partner agency representative is unable to attend a scheduled MDT, the MDT Coordinator will collect written documentation from the absent agency regarding a youth's need for services, plan for rendering services and/or progress with services. The MDT coordinator will serve as proxy in situations where an MDT must occur without the presence of the assigned Probation caseworker and will ensure that

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the youth is present in camp to attend the meeting. Specific information to be collected for MDT meetings includes:

- Initial: the CAU initial case plan and summary, any information gathered during the camp orientation, relevant PCMS notes and any other information pertinent to the Initial MDT.
- As-Needed: Special Incident Reports (SIRs), Physical Intervention Reports (PIRs), Specialized Supervision Plans (SSPs) and school referrals; progress updates from partner agencies; and details of any new information impacting the youth's case plan.
- Transitional: The youth's caseworker or other designated staff must send a home evaluation request to the Central Processing Team (CPT) 90 days prior to the youth's anticipated release. The CCTP field officer's response must be available to the MDT coordinator prior to the Transitional MDT and will be included in the transition planning discussion to ensure that the youth is placed in an appropriate home environment. The CCTP officer will provide recommendations and information regarding reporting instructions, school enrollment, counseling and community referrals, completion of community service hours, employment information and a discussion of expectations for the youth in the community. DMH will provide information on service recommendations for mental health and substance abuse. LACOE and/or school districts will provide information on the youth's school enrollment, including a date and time for the youth and parent to report to school following release. If transition plans change (housing situation/location, transition timeline, etc.) following the Transitional MDT, an As-Needed MDT will be held to discuss the new information and update the youth's case plan.

MDT Meeting Facilitation: The MDT Coordinator is responsible for facilitating all MDT meetings. The Coordinator will organize and structure the discussion, modeling professional and courteous interactions and seeking input from all who are present. The MDT Coordinator will facilitate communication amongst the partners in the meeting, even when there is disagreement or conflicting opinions. Each meeting is an opportunity to help each youth to be successful in camp and find ways to learn and apply skills necessary for growth and pro-social behavior.

Youth and Family Liaison: In order to ensure successful MDT meetings, the MDT Coordinator will remain focused on youth and family engagement throughout the MDT process. The MDT meeting provides the opportunity to engage and motivate a youth and their family to ensure everyone can work together towards identifying strengths, risks, barriers and challenges that may have an impact on the youth's ability to be successful while in camp and successful when reintegrating into the community.

Documentation: The MDT Coordinator will promptly document MDT minutes of

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each MDT meeting on the MDT Meeting Minutes Form (see MDT Information and Resources Folder on the MDT Shared Drive, MDT Meeting Minutes) during the week in which the MDT meeting occurs. The Coordinator is responsible for ensuring that all MDT documentation is promptly forwarded electronically to all partners who participated in the meeting to review and ensure the accuracy of the Minutes. Once finalized, copies shall be forwarded to all partners, including the youth's camp caseworker (DPO of Record), DMH Coordinator and LACOE Coordinator, for implementation and follow-up. The Coordinator will file hard copies of the meeting documentation in the camp's MDT Binder and place all minutes on the MDT shared drive. Minutes from the Initial MDT must be attached to the youth's 30-Day Progress Report. In the case of a Transitional MDT meeting, the youth's caseworker will attach a copy of the Transitional MDT documentation to the final court report and to send a copy to the Central Processing Team (CPT) with the completed release packet for the CCTP Aftercare Deputy. Information that is pending at completion of the MDT meeting shall be provided in a timely manner and the MDT Minutes updated (including date of update) and the revised MDT minutes distributed to all partners, camp binder, and MDT shared drive.

Data Collection: The MDT Coordinator will promptly input participation data (identifying participants in MDT meetings) into the Probation MDT dashboard following the completion of the MDT meeting.

(Meets standards set forth in Title 15, Section, Section 1324(j), 1351(d) (e) (f), 1355(a) to (B)(4))

704 INITIAL CASE PLAN ACTIVITIES

When first assigned a case, the DPO shall take the following steps:

1. Document Receipt of Case: The DPO shall note in the Record of Supervision section of PCMS that date s/he received the case assignment.
2. Review PDJ File and Other Pertinent Documentation: The PDJ file is the Probation Department's documentation that follows the youth from one assigned DPO to the next. It reflects services that each DPO provided to the youth and helps to assess the level of criminality. It should also provide the current DPO with an idea of what worked and what did not. The PDJ file also contains all of the Probation Department's reports submitted to the court, as well as all of the minute orders issued by the court. If the PDJ file does not arrive to camp within one week of the youth's arrival, then the assigned caseworker is to contact the previously assigned DPO and arrange for it to be provided. The PDJ file should include the current educational assessment from the Camp Assessment Unit, which includes reading and math scores.
3. Orient the Youth and Family: Provide the youth and his/her caregivers with an overview of the case planning process, detailing their roles in the case

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planning and implementation process.

4. Verify All Residence and Identifying Information: Verify and update demographic data in PCMS, including home address (and apartment number), telephone numbers, family members, etc.
5. Verify upcoming court dates and conditions of probation and prepare the 30-day report to be submitted to the court

705 ONGOING CASE MANAGEMENT ACTIVITIES

The casework DPO shall continue to monitor the youth's compliance with the case plan, as well as the appropriateness of the case plan pursuant to the youth's regular weekly activities, which shall include, but not be limited to written documentation that provides the following:

- Objectives and time frame for the resolution of problems identified in the assessment
- A plan for meeting the objectives that includes a description of program resources needed and individuals responsible for assuring that the plan is implemented

The DPO shall adjust the case plan as necessary, documenting any changes in a revised case plan and in PCMS.

1. Check Mailbox/Email for New Information: Look for updated minute orders, reports, and other documents. The DPO is responsible for submitting all court reports on time. Minute orders with upcoming court dates will be placed in the mailbox.
2. Contact Camp School: Request information regarding test scores, prior scholastic services, and any educational needs the youth will require in camp. It is quite common for camp youth to have Individual Education Programs (IEPs), and the caseworker must ensure that the school is providing these services. Inquire about the youth's school performance for each current week. This should include information regarding both behavior and scholastic progress.
3. Contact Youth's Mental Health caseworker: Speak to the youth's mental health clinician to obtain information as appropriate on the youth's status and level of participation in DMH classes.
4. Contact Parents & Monitor the youth's Phone Call to Parents: Speak with the parents to obtain an update and provide the youth with an opportunity to speak with them by phone.
5. Attend scheduled MDT meetings for the youth: The MDT plan encompasses all

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of the youth's goals while at camp as well as the aftercare and transition plan for when they are released back into the community. It is important for the DPO of record to attend or be aware of the plans so that the court reports submitted can accurately reflect the goals the team has set for the youth. The DPO should collaborate with the camp's MDT coordinator to ensure that the MDT meeting is held on a day on which the youth's DPO is on duty.

6. **Weekly Charting in PCMS**

The DPO shall also meet weekly with the youth and update weekly PCMS entries providing detailed and individualized information about the youth in the following areas:

- Initial objectives
- Youth's camp progress
- Youth's next court date
- Educational Objectives
- Mental Health Objectives Assistance with any needs or concerns
- Provide the youth with access to available resources to meet their needs
- BMP Program Progress (Made days / points / stage)
- Any SIR/PIR in which the youth was involved
- Previous/Next MDT
- Communication with parents, guardian, attorney, clergy, Probation Officer, other public official, or other supportive adult
- Program Participation (ART/DBT/Substance Abuse)
- Youth's Transitional Objectives and final case plan objectives shall be developed with input from the family, supportive adults, youth, and Regional Center for the Developmentally Disabled

(Note: other supportive adults must be vetted by the Court, DCFS (if applicable) and the Probation Department prior to any participation with the youth or the youth's case plan)

(Meets standards set forth in Title 15, Section 1356(a)(b)(c))

706 CASE PLAN ACTIVITIES – PRE-RELEASE

Prior to the youth's camp release, the DPO shall ensure that the following steps have been completed.

1. **Review Parental Participation:** Verify that the parent(s) have completed any court-ordered activities such as restitution and participation in the Field DPO home evaluation.
2. **Review Transitional MDT** for any changes in the youth's plan.
3. **Follow-Up with the Central Processing Team (CPT):** Check PCMS to ensure CPT acknowledged receipt of the 30-day release notification.

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4. Once the youth's last-minute order has been received, verify his/her release date and contact the youth's field Probation Officer to notify them of the date.
5. Contact Camp School: Obtain the youth's final transcripts, grades, and test scores.
6. Complete a Discharge Planning Services form to ensure that the youth is connected with a provider to continue the services he/she was receiving in camp.
7. Review Post-Camp Release Instructions with the youth: Review the instructions and confirm that the youth understands them. Obtain the youth's signature on the instructions, and provide him/her with a copy.
8. Prepare Court Citation: Prepare the citation of the youth's post-camp court appearance, ensure that the youth and parent sign it. Forward a copy of the citation to the court. Ensure that the youth and parent acknowledge the date on which he/she must report to the court and his/her Field Probation Officer after release.
9. Ensure that all records and identifying information is updated in PCMS. Ensure that the youth's LARRC is updated.

(Meets standards set forth in Title 15, Section 1324(f) (5))

Medi-Cal Administrative Activities (MAA)

The DPO contributes to the continuity of care necessary to ensure a successful transition back into the community by identifying the youth's needs and linking them to an array of support services and making Medi-Cal Administrative Activities (MAA) Referrals. This process ensures that when the youth returns to the community, he/she will continue to receive similar services to those received while in camp.

An assessment process occurs before the youth arrives in camp during the orientation process. The assigned officer reviews the youth's family history, protective factors, and at-risk factors. Further, once assigned to a camp, the youth is provided with a DPO case manager to monitor his/her progress while detained. During each of these initial contacts, as well as during the ongoing and pre-release case management review, the DPO will make electronic notations as the services provided while in camp. Additionally, during visitation, the DPO is encouraged to meet with the parent/legal guardian to discuss the programming, youth's progress, and referrals for services that are available upon release. Upon release from camp, the DPO shall provide the youth and parent/legal guardian with information on services available and/or suggested for the youth in the community. By identifying and linking the youth with services that the youth may need to achieve successful community reintegration, this coordinated and integrated treatment approach enhances the opportunities for positive outcomes for youth,

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families, and communities.

(Meets standards set forth in Title 15, Section 1324(m))

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Subject: RESIDENTIAL TREATMENT SERVICES BUREAU MANUAL ADDITIONAL CASEWORK ACTIVITIES	Section Number: RTSB-800
	Effective Date: July 21, 2020
	Approved By: Jennifer Kaufman, Bureau Chief

801 INTRODUCTION

Case management is an ongoing activity. Good case management enhances communication between service providers, ensures smooth transitions and continuity of services, and increases the likelihood that the youth will make pro-social changes in his/her life. The assigned caseworker serves as the core of the case-plan implementation process, and appropriate case management is an essential function. This section addresses additional activities involved in the casework process.

802 USING THE LOS ANGELES RISK & RESILIENCY CHECKUP (LARRC)

The case plan is based on a thorough review and analysis of the youth's areas of risk and need. Case plans written without this foundation will do little to assist the youth in making positive changes. With this in mind, the Department uses the Los Angeles Risk & Resiliency Checkup (LARRC). The LARRC is an assessment tool that measures the risk and protective factors of our youth and their families. Information from the LARRC assists DPOs with case planning, service referrals, and camp assignment. It also provides documentation to substantiate Departmental recommendations to the court. Additionally, this assessment tool provides the most reliable predictive information about the youth based on six Criminogenic needs. (Studies have indicated that this tool best identifies the factors that most likely predict the probability that the youth may re-offend.) When completing the LARRC, the DPO shall consider all pertinent information. This includes information contained in the PDJ file, PCMS, educational records, parental statements, and information from other people who have knowledge about the youth. The DPO can also obtain information from a variety of computer systems available, such as PCMS.

The LARRC should be completed and/or updated by the time the youth arrives to camp. For youth, whose LARRC assessments are missing, inaccurate, or incomplete, the assigned casework DPO must complete it within 30 days of case assignment, using the automated system (assessments.com). The caseworker shall place a completed copy of the LARRC in the youth's PDJ file and make a formal record of completion in the youth's PCMS. Additional information regarding the LARRC can be found in the Juvenile Manual, Section JM-800 (Sub-section 811).

803 GENERAL MEDICAL CONSENT FORM

The caseworker must check the youth's behavior chart to ensure that the signed General

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Medical Consent form has been obtained. When not found, the camp caseworker must proceed as follows:

- Verify receipt of a signed General Medical Consent by checking with the nurse and/or contacting the DSB medical consent coordinator at the juvenile halls.
- If the DSB medical consent coordinator has the signed General Medical Consent, the consent is downloaded to Probation Electronic Medical Records System (PEMRS).
- Once obtained, place a copy on the left side and at the bottom of the behavior file and provide a copy to the camp nurse.
- Notify the camp general medical consent coordinator via a PCMS entry that the signed General Medical Consent form has been received with a copy for youth to the nurse and a copy placed in the behavior file.

When following the procedure above does not result in obtaining the General Medical Consent, the caseworker must contact the parent/guardian by phone and request that he or she mail the signed form or bring it to camp during Saturday or Sunday visiting. (The parent/guardian should have received this form via U.S. Mail when the youth was initially detained at juvenile hall.) The form must be received within the same week that the caseworker made the phone call

If the parent/guardian has not provided the form at the time of the Sunday visit, the caseworker is to arrange for the parent/guardian to sign the form when he or she comes to camp for the Sunday visit.

As a last effort, the camp caseworker is to request that the camp nurse call the parents at home and discuss the importance of providing the signed General Medical Consent form.

The caseworker must make all efforts to obtain the signed form within 14 calendar days of the youth's arrival at camp, and this information must be documented in PCMS. If the parent/guardian has not provided the form within this period, the caseworker must submit an ex-parte report to the court requesting that the court provide minute order authorizing general medical consent.

The camp is to maintain a list of youth who have a signed General Medical Consent on file.

(Meets standards set forth in Title 15, Section 1434.)

804 RECORD MAINTENANCE

The caseworker is responsible for ensuring that all relevant court information, Incident

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Reports, mental health documents, medical grams, and green slips are filed in the youth's behavior chart or noted in PCMS and that the PDJ file is kept up to date and in proper order.

The SDPO is responsible for ensuring that all of the necessary information above is entered into PCMS. The SDPO is also responsible for recording the following:

- Documenting rejection of all new and returning youth to the camp, including the date of rejection and the reason.
- Ensuring that all transfers and releases are documented, which includes but is not limited to:
 - Youth transport to Juvenile Hall for medical, dental or court
 - Youth transferred to HOPE Center at another camp
 - Youth released from camp to home

805 COURT REPORTS

Preparing accurate and timely court reports is another essential case management function. The Department is responsible for providing the court with information pertaining to the youth's progress in his/her court-ordered camp program. The following describes various types of court reports that the camp caseworker may have to provide to the court.

Progress Reports

When the court orders the youth to camp, the bench officer expects to receive regular reports providing information as to the youth's progress. The camp caseworker supplies this information to court via the 30-Day Camp Progress Report (Prob 1431) and the 60-day, 120-Day, and 210-Day Progress Report (Prob 1432). Each court may have different demands as to which progress reports they require. The DPO must consult the minute order provided after each court date to determine the due date of the next court report. These reports can be found on ProbNet through the Forms link.

The camp caseworker must make note of the court dates for these reports by reviewing the court's orders in the PDJ file. If the court order containing these dates is missing, the caseworker can look for the court dates in PCMS or JAI. If the information is not in PCMS or JAI, the caseworker should contact CHQ and/or the court for guidance. The caseworker shall take proactive steps to ascertain the court dates to ensure timely submission of the progress reports.

In preparing the report, the caseworker must review the court order to determine any specific information the court wants included in the report. The caseworker must gather information from several sources, including the school, other camp DPOs, the nurse, mental health staff, community-based organizations, the parents, and other camp service providers. This takes time and requires advance planning; the caseworker must

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consider this when managing his/her schedule of duties at camp.

The report must be mailed at least (10) days prior to the hearing date, but each camp has specific timeframes in which the final report must be submitted to clerical staff for processing and submitting to the court on time.

777 WIC Notice of Hearings

The 777 WIC Notice of Hearing is used when the youth's behavior has deteriorated beyond the control of all other corrective measures and it appears that the youth has violated his/her conditions of probation. In camp, this report is used to recommend that the court order additional time in camp or commitment to the Department of Juvenile Justice (707(B) WIC offenses only). The DPO must secure the SDPO's, Camp Director's, Senior Director and Bureau Chief approval prior to initiating a 777 WIC Notice of Hearing.

The 777 WIC Notice of Hearing form (Prob 25) can be accessed on ProbNet under the Forms link (Juvenile Court Report Templates). Procedures for setting on the violation hearing in court are as follows:

1. Contact Intake and Detention Control (IDC) to provide advance notice of the detention.
2. Submit the following documents to IDC at the time of intake:
 - Juvenile Hall Entrance Form (Prob 1295, Rev. 12/98)
 - Probable Cause Declaration (PCD) (Prob 1331, Rev. 11/01), attaching the current Juvenile Automated Index (JAI) printout. The PCD must include the following information on the youth:
 - Date placed on probation
 - Court Department placing the youth on probation
 - Current probation grant (CCP)
 - Aggregated maximum confinement time on all sustained cases
 - Remaining confinement time
 - All conditions of probation ordered
 - Listing of alleged violation and brief statement of facts to support each alleged violation.
3. Submit four copies of the following 777 WIC Notice of Hearing packet to the County Clerk at the court location within the guidelines for a detained felony filing (consult with IDC if a copy of felony filing guidelines is not immediately available)
 - Notice of Violation/777 WIC Notice of Hearing report
 - Witness list (DA-893-0)

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- All supporting documents (e.g., school reports, police reports, etc.)
4. Attach a copy of the last complete Pre-Plea/Disposition report and a copy of the Title IV-E Findings minute order to the Court Officer's copy of the 777 WIC Notice of Hearing report (label the report, Court Officer, in the upper right corner).
 5. Fax a copy of the report face sheet to the IDC site where the youth was admitted to Juvenile Hall to ensure that the youth is placed on the movement to court broadcast:
 - Eastlake (323) 221-4879
 - Barry J. Nidorf (818) 362-7859

Absent DSB approval, youth shall be transported to juvenile hall the day prior to the court hearing.

Additional information on 777 WIC Notice of Hearings can be found in Section JM-3300 of the Juvenile Manual. Please note that any change of plan, including the filing of a 777 WIC Notice of Hearing, requires that a 30-Day Modification form be scanned and emailed to the Central Processing Team (CPT).

778 WIC Petitions

This is a petition to request a change of plan or modify any previous order of the court. In camp, this petition is used when the DPO determines that the youth should be released to suitable placement rather than to home, or when the DPO is recommending an early release. This change of plan is not the result of a violation of the youth's conditions of probation.

The petition shall include pertinent information regarding the youth's current situation and address the most appropriate alternative plan, as well as how the plan will benefit the youth. The petition must include factual information and supporting documentation. The form can be downloaded from ProbNet, under the Forms link (Juvenile Court Report Templates). Procedures for camp DPOs are as follows:

- Clear the recommendation with the SDPO's approval. (When recommending Suitable Placement, obtain approval from the Out of Home Screening Unit, according to Departmental policy.)
- Complete and submit the Set-On Slip to the County Clerk.
- Complete the 778 WIC petition and address the following issues in narrative form in Section 3:
 - Specific behaviors, problems or a change in circumstance
 - Reasons for request to change, modify or set aside the previous

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- order
 - Necessity for requested court action
 - Goals and purposes for making the recommendation
- Complete and attach:
 - Witness List.
 - When recommending Suitable Placement:
 1. Foster Care Case Plan
 2. Transitional Independent Living Plan (for youth 14 years of age or older).
 3. Copy of the last complete Pre-Plea/Disposition report and a copy of the Title IV-E Findings minute order (for cases where youth has been previously detained) and attach to the Court Officer's copy of the 778 WIC petition (label the report "Court Officer" in the far upper right corner).
- Submit the 778 WIC petition with all appropriate documentation to the court and retain in the PDJ folder.

Refer to the Juvenile Manual, Section 909 of JM-900, for more information. Please note that any change of plan, including the filing of a 778 WIC petition, requires that a 30-Day Notification form be scanned and emailed to the Central Processing Team (CPT).

602 WIC Petition Requests

Probation may submit a 602 WIC petition request to the District Attorney when it appears that the youth has committed a new crime. A sustained 602 WIC petition will result in additional maximum confinement time.

As noted with respect to other petitions, the filing of a 602 WIC petition requires that a 30-Day Notification form be scanned and emailed to the Central Processing Team (CPT).

Admonishment of Rights

When interviewing a youth in contemplation of filing a 777 WIC Notice of Hearing or a 602 WIC petition request, the DPO must advise the youth of his/her constitutional rights (Miranda Rights). The DPO should always read from a Miranda Rights admonishment form acknowledging whether he or she has either waived or invoked his/her rights. Refer to JM-700 of the Juvenile

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Manual for the advisement and DPO requirements.

806 CAMP TRANSITION PRE-RELEASE HOME EVALUATION (DIRECTIVE 1286)

INTRODUCTION

The purpose of this procedure is to reinforce the departmental policy in order to perform expectations of juvenile field staff relative to the camp transition pre-release home evaluation process. Effective immediately, the following procedure shall be standard in completing all pre-release home evaluations (Pre-Release Home Evaluation Process B instructions).

EXPECTATIONS

Home evaluations are to be completed for all youths prior to release from camp. The purpose of the home evaluation is to assess the suitability of the home and to initiate plans for the youth's successful transition back to the community. All home evaluations are to be conducted in a culturally sensitive and caring manner.

POLICY

Residential Treatment Services Bureau (RTSB) Staff:

- Complete the Camp Release Notification Form (Pre-Release Home Evaluation Request/Transitional MDT Notification) and email to CCTP (EDL-PROB CPT CPT@probation.lacounty.gov) 90 days prior to the youth's projected release date (expectation - those cases approved for early release from camp).

Camp Community Transition Program (CCTP) Staff:

- Complete the Pre-Release Home Evaluation Form (Prob. 1426E) based on information obtained in the Camp Release Notification Form generated by sending Camp DPO.
- Scan/email the Pre-Release Home Evaluation Form to be identified SDPO within one (1) business date from receipt from camp.
- Process the Pre-Release Home Evaluation Form within one (1) business day from receipt from the Juvenile Field and email the form to the Camp Director.

Camp Community Transition Program (CCTP) and Intensive Gang Supervision Program (IGSP) Staff:

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- Complete the Pre-Release Home Evaluation Form (Prob. 1426E) based on information obtained in the Camp Release Notification Form generated by sending Camp DPO.
- Scan/email the Pre-Release Home Evaluation Form to be identified SDPO within one (1) business date from receipt from camp.
- Process the Pre-Release Home Evaluation Form within one (1) business day from receipt from the Juvenile Field and email the form to the appropriate EDL distribution group.

Juvenile Field DPO and SDPO (CCTP and IGSP):

1. Complete SDPO portion of the home evaluation section (indicate 1-2).
2. SDPO assigns the home evaluation to the identified DPO within one (1) business day of receipt.
3. SDPO sign/dates completed receipt from DPO.
4. DPO Enters available information in Home Evaluation Section #3-10.
5. DPO Contacts (telephone) parent/guardian to arrange date/time to conduct pre-release home evaluation.
6. DPO conducts the home evaluation within eight (8) business days of receipt.
7. DPO complete the remaining sections of the Pre-Release Home Evaluation Form (through #24) and sign/date form, and then submits completed forms to SDPO.
8. SDPO scan/email the completed form to CCTP within eight (8) business days of receipt.

807 COMMUNITY RE-ENTRY PLAN

The community re-entry plan (formerly known as the camp packet) assists in facilitating the youth's successful and appropriate reintegration into the community upon release from camp. The plan consists of a packet of the following documents:

- Camps Release Transfer Summary (with current address and telephone contact numbers)
- Transition Instructions
- Transitional MDT Plan
- Conditions of Probation
- School transcripts
- Mental health and Substance Abuse referrals (Discharge Plan)
- Any other referrals if applicable

Community-Based Organization referrals or information (if applicable) The Central Processing Team (CPT) and the Camp Community Transition Program(CCTP) must receive this packet at least 14 calendar days prior to the youth's release, and the DPO shall therefore scan the packet four weeks before

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the release date via email to:

EDL-PROB CPT

Many camps have specific criteria for logging out and sending these packets. It is incumbent on the caseworker to know the camp-specific process and comply with the specific criteria.

The caseworker must instruct the youth to report within 24 hours of release to one of eight area office locations (South Central, San Gabriel Valley, Crenshaw, Firestone, Van Nuys Interview Center, Centinela, and the Antelope Valley Sub Office) as indicated by the CCTP's Zip Code List (available under the Forms link on ProbNet). The caseworker may check the youth's PCMS case notes which will indicate which area the youth has been assigned.

808 EARLY RELEASE

With judicial approval, a DPO may recommend to release a youth at a date of their choosing within the range of their camp program. In order for a youth to be released prior to the midpoint of their camp program range (ex: the 6-month mark in a 5-7-month camp program) they must attain eligibility through the integrated Behavior Management Program. This serves as an incentive to engage in pro-social behaviors and reward a youth for their progress. In order for a youth to be released prior to his/her minimum camp program range, a 778-court report must be prepared and approved by the SDPO.

809 RELEASE PROCEDURES

The caseworker must follow the release procedures outlined below.

Documentation of Release Date in PCMS

The camp release process begins upon receipt of the court minute order confirming the release date. The court generates this minute order based upon the DPO's projected release date specified in the progress reports that he or she submits to the court. When this minute order is received at camp, it must be logged into PCMS. Although camp clerical or other support staff receive and distribute minute orders, the DPO of record (caseworker) is responsible for ensuring that documentation in PCMS occurs.

Confirm Release Date with Parents

The caseworker confirms the release date with the youth's parent/guardian and makes arrangements with the parent to pick the youth up from camp on this court-specified date and time. The caseworker must advise the parent to bring a suitable change of clothing and one of the following acceptable forms of

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identification:

- Valid driver's license with photo
- Valid state identification card with photo
- Department of Justice ID card with photo
- Passport with photo
- Military ID card with photo
- Immigration and Naturalization Service (INS) ID card with photo
- Certificado de Matricula Consular ID card with photo (valid for 60 days from date of issuance).

If the parent is unable to make transportation arrangements or fails to bring proper identification, the caseworker must consult the on-duty SDPO to discuss alternatives.

If the parent is unwilling to take custody of the youth, the caseworker must immediately notify the on-duty SDPO.

Aftercare Paperwork

The caseworker confirms that all aftercare/transitional requirements are satisfied as outlined in RTSB-807 above.

Procedures at Time of Release

Staff shall adhere to the following procedures when releasing youth:

- After confirming the youth's release date via the documents mentioned above, the caseworker will make a notation in Daily Camp Movement Log. The caseworker will write the youth's name, scheduled release date and pertinent information. The aforementioned information shall also be documented in PCMS.
- The camp SDPO shall be notified by the staff assigned to the office that a parent, guardian, or designated person has arrived and is seeking the release of a youth. The staff assigned to the office shall verify the identification of the youth and that of the parent/guardian. In addition, the parent/guardian information must be compared to the information contained on the release instrument;

The SDPO shall verify the information on the release instrument (the court's minute order).

- Prior to calling for the youth, staff shall review the PCMS entries and the PDJ file, to ensure there are no other detaining orders, warrants or holds.

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- The staff assigned to the office shall notify the dorm/camp of the youth's pending release.
- The youth, along with his or her release packet and personal property, such as any clothing and valuables, will be immediately delivered to the office for processing.
- Each youth shall be dressed in his or her personal clothing.
- The staff assigned to the office shall notify JCHS medical staff, LACOE school staff, and DMH personnel of the youth's pending release from camp. This will ensure proper medical clearance and allow for a continuation of medical, educational, and mental health services if necessary.

(Meets standards set forth in Title 15, Section 1351 (a)-(f))

Release Documentation and Logging

The caseworker ensures that the youth's name, release date, PDJ number, DOB, and name of parent/guardian information is properly entered into all facility movement logs, office logs, or other designated locations. The caseworker also ensures that the following release paperwork is placed in the camp-designated location:

- Citation (for youth's post-camp court appearance)
- Copy of minute order confirming the release date
- Copy of youth's transitional instructions
- Any other documents requiring the parent's signature

It is imperative that these documents are readily available, particularly in the event that the youth is scheduled for release when the caseworker is off shift.

Releasing the Youth to the Parent

When the parent arrives at the facility to pick up the youth, the caseworker or designee must make a copy of the parent's acceptable form of identification; valid driver's license, state ID, DOJ ID, passport, military ID, Department of Immigration and Naturalization Service ID (outlined above). The DPO will reference and confirm the release information, and ensure all appropriate paperwork is signed and filed in the youth's PDJ file. The DPO will document the release date and time in PCMS and in the appropriate facility logbooks.

Staff shall ensure that all of the youth's personal property is provided upon release.

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Releasing the Youth to another Jurisdiction or Agency

When other justice/law enforcement agencies attempt to secure a release of a youth under Probation jurisdiction, camp staff shall release a youth detained by Los Angeles Superior Court when there is a written release order from the appropriate Los Angeles County Superior Court authorizing the release to another justice agency;

When arrest warrants are presented by an agency attempting to secure a release of a youth under our jurisdiction, camp staff shall only release a youth detained by the Los Angeles Superior Court when there is a written release order authorizing the release to another justice agency;

Transfer of Files

The caseworker must ensure that the PDJ file is in compliance with transfer procedures noted in the Juvenile Manual and initiate transfer of this file to the appropriate CCTP unit.

The caseworker must ensure that the behavior chart is sent, via county courier, to the respective juvenile hall related to the youth's home court.

In all instances where release circumstances are unclear or questionable, the youth will not be released until clarification is obtained from the court.

As indicated under the TMDT section of this manual, the MDT is the vehicle that creates the continuity of care necessary to ensure a successful transition, as well as, preserve the continuity of the information obtained throughout the youth's stay. More importantly, by identifying the youth's needs and then linking him/her to an array of support service during the post-release process, the youth will continue to receive similar to the services the youth was participating in or receiving while detained, which include, but not limited to, medical and behavioral health, education, probation supervision, and community-based services.

(Please cross reference this section with Sections 703 & 706 of this manual)

810 INTERCOUNTY TRANSFER (ICT)

Section 750 of the Welfare and Institutions Code allows cases to be transferred to another county whenever the residency of the custodial parent or legal guardian changes from one county to another.

If the custodial parent or legal guardian has moved while the youth is in camp, the camp DPO must verify the out of county address (through documentation such as a rental agreement or utility bill) and notify the court in the regularly calendared camp progress report. In the final camp progress report, the casework DPO shall recommend that jurisdiction of the case be transferred to the respective county, and

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process the Department's paperwork pursuant to Section JM-1700 of the Juvenile Manual, sub-section 1704-3 (relating to transfer of active cases).

In cases where the youth will be living in an adjoining county, the casework DPO must send the Community Re-Entry Plan paperwork to the appropriate CCTP office so that the CCTP officer can provide cursory supervision while the court awaits acceptance of jurisdiction from the receiving county court. The appropriate CCTP office is as follows:

Counties North of L.A. County (Kern and Ventura):

Van Nuys Area Office, CCTP

Counties of L.A. County (Riverside and San Bernardino)

South Central Area Office, CCTP 2

Counties of South L.A. County (Orange and San Diego)

South Central Area Office, CCTP 1

Non-Adjoining Counties

CPT will collaborate with CCTP for Case assignment to other CCTP units

811 INTERSTATE COMPACT (ISC)

Interstate Compact is an agreement between states to provide courtesy supervision for a youth who has moved outside the court's jurisdiction. Because California laws do not apply in other states, court jurisdiction cannot be transferred. The Juvenile Manual provides detailed information regarding interstate compact cases in Section 1900-1906.

Once the camp DPO becomes aware of the need for an Interstate Compact request, a court date is initiated for this purpose. The camp DPO may also include the Interstate Compact information if an upcoming camp progress report date exists. Form IA/VI (located in ProbNet and www.ajca.us) accompanies the court report. When the court grants the request, the minute order reflects the court's consent allowing the youth to leave to the state. The Judge's signature on form IA/VI is also required.

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The camp DPO completes an Interstate Compact packet to include the court order allowing the youth to leave the state. The packet is sent to the Juvenile Out of County Unit (OCU) at the Northeast Juvenile Justice Center for processing, which is then for youth to Sacramento's Interstate Compact (ISC) unit. The address is:

Juvenile Out of County Unit
 Northeast Juvenile Justice Center (NEJJC)
 1601 Eastlake Ave
 Los Angeles, CA 90033
 (323) 226-2061

The NEJJC will ensure the fluency of the process between Sacramento and the assigned Los Angeles County field DPO. This includes addressing missing/additional information and the tracking of sent material. The Alhambra DPO will receive "Notice of Acceptance" reports and for youth them to the assigned field probation officer. Quarterly reports received will also be for youth to the assigned field probation officer.

The NEJJC will also assist in the coordination of taking back a youth. Periodically a need will arise for a juvenile to return to the State of California. NEJJC will coordinate this effort with the Department's Transportation Bureau.

The NEJJC, in working as an intermediary, will provide pertinent information to the receiving state related to the youth (i.e. modifications, terminations etc.)

The ISC Process – Step by Step:

Outgoing – To be completed by Field DPO once the Field DPO becomes aware of the need for an ISC transfer

- Petition Court; Submit Set-On (Prob. 981) calendaring the matter and prepare court report requesting ISC transfer. This may also be accomplished in a camp progress report if the date exists and the ISC process can proceed in a timely manner. The purpose is to obtain the court's permission for the youth to leave the state. Complete an appearance progress report (Prob. 1245) or supplemental report (Prob. 24). Provide information as to why the youth wants to move, the proposed address, who will be the guardian, and how the move will benefit the youth; form IA/VI accompanies court report. The forms can be downloaded from ProbNet, under the Forms link.
- Receive minute order from court indicating permission to transfer to another state is granted
- Assemble packet. Packet includes the following:

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- Form IV
- Form IA/VI
- Court Order – Adjudication and Disposition
- Court Report with legal and social history
- Conditions of Probation
- Petition and/or arrest report, and any other pertinent information deemed beneficial to the receiving state
- Send packet to NEJJC OCU and this unit will:
 - Check packet for completeness and accuracy
 - Send packet to the Compact Administrator in Sacramento
 - Receive “Notice of Acceptance” from Sacramento
 - Notify Field DPO of record of acceptance
- If the youth intends to reside with someone other than parents, the DPO of record shall submit the packet to the OCU requesting a home assessment and await a response from the receiving state before presenting the plan to the court. The DPO shall not recommend to the court that the youth be allowed to relocate without first determining that the proposed home is suitable. In matters of this nature, the packet is assembled and submitted without the judge's signature on form IA/VI. The judge's signature is secured when the court report is submitted with the form attached.
- Prior to the youth’s departure, a travel permit is completed. Upon the departure, form “V” is completed. Both forms are then submitted to Sacramento via the NEJJC area office.
- A 30-Day Notification form must also be sent to the Central Processing Team (CPT).

812 REPORTING SERIOUS ILLNESSES, INJURIES, AND ATTEMPTED SUICIDES TO THE JUVENILE COURT

The assigned caseworker or designee shall report, without delay, all serious illnesses, injuries, and attempted suicides involving youth in the care and custody of the Probation Department, who are housed in the juvenile halls, camps, or in suitable placement or treatment facilities. The SDPO or the casework SDPO shall ensure that this is accomplished and that the youth's parent or guardian is notified.

A serious illness is defined as one that requires removal to a hospital for treatment, overnight confinement in a Probation Facility Medical Observation Unit, and/or that is chronic and potentially life threatening, and for which there is no record of the illness having been previously reported to the Court. A serious injury is considered one that results in significant visible or internal physical trauma requiring medical

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intervention by a licensed health care practitioner, whether it is life threatening or not.

All attempted suicides shall be reported to the Court, whether or not physical injury occurred.

Those incidents occurring within the scope of the Residential Treatment Services Bureau, shall be immediately reported to the appropriate Court on an Information for Court Officer (Juvenile) form.

(Meets standards set forth in Title 15, Section 1341)

813 REFERRALS TO THE PROSPECTIVE AUTHORIZATION UTILIZATION AND REVIEW UNIT

DIRECTIVE 1245 --- JUVENILE-PROSPECTIVE AUTHORIZATION AND UTILIZATION UNIT

INTRODUCTION

This policy services as the RTSB DPO's procedure for making and sending referrals to the Prospective Authorization, Utilization and Review (PAUR) Unit regarding pre-release services in the community.

OVERVIEW

This policy provides the RTSB DPO with information on the referral process, available services, eligibility criteria, and the referral process for Family Preservation (FP), Wraparound, Functional Family Therapy (FFT), and Functional Family Probation (FFP). These services have been expanded to provide services to youths to prevent removal from their homes (front end) and those youths returning to the community from out-of-home care (back end). The goal of FP, Wraparound, FFT, and FFP services is to ensure the physical, emotional, social, and educational development of youth in their natural environment.

The Prospective Authorization and Utilization Unit (PAUR) will be the single point of contact for DPOs to refer cases for FP, Wraparound, FFT, and FFP services. The PAUR will assist the DPO in determining the best treatment approach for the youth and family based on the LARRC risk and needs. If it is determined that these programs are not the best treatment option or if services are not available in the youth's community, the PAUR will assist the DPO in finding appropriate alternative treatments to address the youth's risks and needs.

REFERRAL PROCESS

To make a referral to FP, Wraparound, FFT, or FFP programs, the RTSB DPO of Record shall complete the PAUR Referral for Community Based Services Form

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(Attachment 1). The RTSB DPO for the youth submits the completed referral form to their supervisor who must send it to the PAUR unit via scan/email to paur@probation.lacounty.gov. The assigned PAUR Program Analyst will review the referral to confirm eligibility, appropriateness for service, and assign it to an available agency. Once the referral is processed, the PAUR Analysts will enter a case note in

PCMS. The Referral for Community Based Service form is available on ProbNet in the Juvenile Forms section.

PROGRAM DESCRIPTIONS

Family Preservation agencies provide services to reduce family conflict, stabilize the family unit, and help develop strengths that will assist the family with problem solving. The Family Preservation program is a less intensive treatment program for youths assessed to have a low/moderate risk of reoffending. New family preservation cases are scheduled service for an initial period of six months. The PAUR Analysts may approve up to six additional months of service as two, three-month extensions. Services beyond one year must be approved by the PAUR Supervisor. The DPO of Record requests an extension by completing the PAUR Request to Update Service Form (Attachment 2). The DPO must sign the request, obtain their SDPO's signature, and send it to the PAUR unit via scan/email to paur@probation.lacounty.gov in a timely manner.

The program offers the following services to Probation Youths and their families:

- Anger Management Classes
- Auxiliary & Discretionary Funding
- Child Focused Activities
- Gang Awareness
- Group Counseling
- Health and Mental Health Referrals
- Individual Counseling
- In-home Outreach Counseling (IHOC)
- Parent Training/Fatherhood Program
- Parenting Classes
- Referral for Psychological Evaluations
- Substance Abuse Assessment
- Substance Abuse Counseling & Treatment
- Substitute Adult Role Model (SARM)
- Teaching & Demonstrating Worker (T&D)
- Temporary Emergency Housing
- Tutoring
- Workshops on Child Care

ELIGIBILITY CRITERIA

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- Youth must have a PDJ number.
- Youth must be less than 18 years of age.
- Youth must reside within the County of Los Angeles.
- Youth and parent/guardian must consent to participation in the program.
- Youth must currently live at home, (or returning home within a month) and be suitably placed with a relative.
- Youth should have a current LARRC assessment (within six months) with a Low or Moderate score. Youths who are assessed as high risk on the LARRC require the authorization of the PAUR Supervisor. Generally, these Youths will require a higher level of Probation supervision as is found with the CDP, School Based, and the FFP units.

Note: Youths with a history of arson or sex offenses require the authorization of the PAUR Supervisor.

LEVELS OF FP SERVICES

Base Rate:

- Targets families who are experiencing instability or conflict, wherein the youth is able to attend a community school program.
- Provides four in-home outreach counseling (IHOC) visits per month.
- Facilitates a Multidisciplinary Case Planning Committee meeting (MCPC) within 15 days of the referral effective date and every 75 days thereafter with the DPO of Record, youth, caregiver and other family members, IHOC worker, and other appropriate agencies. The purpose of the MCPC meetings is to collaboratively develop a service plan, establish treatment goals, and analyze the family's progress to youth the completion of those goals.
- Provides supplemental services as needed and identified in the case plan. For example, supplemental services may include additional in-home counseling sessions, individual counseling, and mentoring services.
- Monthly progress reports to the DPO of Record detailing dates of family participation, program progress, and a summary of home visits and services provided.

Therapeutic Day Treatment:

- Targets youths that are incapable of functioning in a regular school setting, or are too far behind in credits to graduate on time.
- Provides transportation for youths to and from home and school five days per week.
- Six hours of educational instruction per day are provided along with recreational activities in a school program set at the youth's individual level.
- Provides a meal or snacks to youths on a daily basis.

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- Provides daily group counseling and weekly individual counseling at the school site.
- Provides one IHOC visit per month.
- Facilitates a MCPC within 15 days of the referral effective date and every 75 days thereafter with the DPO of Record, youth, caregiver and other family members, IHOC worker, and other appropriate agencies. The purpose of the MCPC meetings is to collaboratively develop a service plan, establish treatment goals, and analyze the family's progress to youth the completion of those goals.
- May provide supplemental services as needed and identified in the MCPC case plan.
- Monthly progress reports to the DPO of Record detailing dates of participation, program progress, and a summary of home visits and services provided.

Transition Services:

- Targets Youths that are close to successfully ending family preservation services.
- Designed to assist the family in functioning without further FP intervention.
- Two in-home outreach counseling visits per month.
- No supplemental services are provided with Transition Services; however the family may be linked to community resources.
- Monthly progress reports to the DPO of Record detailing dates of family participation, program progress, and a summary of home visits and services provided.

In order to transfer service from one agency/service to another, the RTSB DPO must complete the PAUR Request to Update Service Form (Attachment 2). The RTSB DPO must sign the request, obtain their SDPO's signature, and send it to the PAUR unit via scan/email to paur@probation.lacounty.gov for processing.

Auxiliary Funds

The Family Preservation clients may be eligible to receive auxiliary funds. These funds may be used for such items as clothing, appliances, furniture, utility payments, and emergency rent payments with the purpose of helping to stabilize the family unit.

The DPO and Family Preservation must submit the following forms to the PAUR unit:

- FP Program Auxiliary Fund Authorization
- Family/Household Budget Worksheet
- FP Agency/IHOC Support Letter
- Rental Agreement (if rental assistance requested)
- Return of Security & Rental Deposit Agreement (if rental assistance is requested)

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The original auxiliary fund request packet shall be for youth to the PAUR for review and transmittal to the Department of Children & Family Services (DCFS) for final approval, processing, and disbursement of funds or resources. It should be noted that auxiliary fund requests may take up to 60 days and are not guaranteed. The request forms must include the vendor/property owner's tax ID number.

All terminations of service must be requested by the current DPO of Record in a timely manner. The DPO of Record approves a service termination by completing the PAUR Request to Update Service Form. The DPO must sign the request, obtain their SDPO signature, and send it to the PAUR unit via scan/email to paur@probation.lacounty.gov. Services should be terminated if the youth is removed from the home.

WRAPAROUND

Wraparound is a family-centered, strengths-based intervention designed to maintain children in their community with normalized and inclusive community options, activities, and opportunities. Private, community-based Wraparound agencies facilitate the

Wraparound process, which includes a Child and Family Team (CFT) for each child and family enrolled in the program. The CFTs develop, implement, and monitor individualized Child and Family Plans of Care that include strengths, needs, services, and supports to address the needs of the child and family in order to maintain the child in a safe, permanent, community-based setting. The initial Plan of Care is created within the first 30 days of service and reviewed at 6-month increments.

Wraparound is an appropriate intervention for youths exhibiting problems in school functioning, family relationships, substance abuse, and mental health. Wraparound is designed to prioritize criminogenic needs and protective factors of each youth receiving services.

Each youth that is referred for Wraparound services will be evaluated for by a local Interagency Screening Committee (ISC) comprised of DCFS, DMH and Probation representatives. The ISC will then refer the youth to one the community-based Wraparound providers.

Referrals made to the PAUR for Wraparound will be for youth to the Supervising Deputy Probation Officer who supervises Probation Liaisons throughout the county who serve as the Probation representatives on the ISC. Wraparound services last up to 12-months and any extension beyond must be approved by the Probation Department.

Eligibility Criteria:

- youth must have a PDJ number.
- youth must be a youth of the Court (WIC 601 or WIC 602).
- youth must be at risk of removal from his/her natural community.

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- If residing within a Placement facility, youth must be scheduled to return home within one month.
- youth's home address must be within the County of Los Angeles.
- youth and parent/guardian must consent to participation in the program.
- youth should have a current (within six months) LARRC assessment.

FUNCTIONAL FAMILY THERAPY

Functional Family Therapy (FFT) is a short-term family focused prevention/intervention program with a proven history of success in treating youth and families coping with severe behavioral problems. FFT averages approximately 12 meetings over a 3-4-month period of time. The target population includes probation youth between 11-18 years old and their families who are struggling with issues related to delinquency, violence, substance abuse, behavior problems and family conflict. FFT focuses on the criminogenic needs and protective factors that impact the youth in his or her own environment. FFT differs from Family Preservation in that FFT is a more intensive treatment, generally appropriate for moderate and high risk Youths. Meetings are held weekly in the youth's home or in other suitable community settings with the youth and family present.

FFT is broken into four distinct phases; Engagement, Motivation, Behavior Change, and Generalization. Referrals for FFT shall be made to the PAUR unit in the manner outlined above. FFT is available countywide and is provided by two Probation teams, Starview Inc., and Shields for Families.

Eligibility Criteria:

- youth must have a PDJ number.
- youth must be a youth of the Court (WIC 601 or WIC 602).
- youth must be at risk of removal from his/her natural community.
- If residing within a Placement facility, youth must be scheduled to return home within one month.
- youth's home address must be within the County of Los Angeles.
- youth and parent/guardian must consent to participation in the program.
- youth should have a current (within six months) LARRC assessment.

814 OUT OF HOME SCREENING PROCESS (DIRECTIVE 1368)

INTRODUCTION

This Directive affirms the Department's direction regarding the ongoing implementation of Evidence-Based Practices (EBP) in all operational areas where appropriate.

The primary purpose of the OHS process is to provide consistency to the Out of Home screening and referral processes and to ensure that all such recommendations comply with applicable laws and Departmental policies.

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The OHS Unit shall be the single point of contact for DPOs to clear all recommendations for Out of Home placement prior to submitting the court report to the court.

EXPECTATION

Deputy Probation Officers (DPOs) shall utilize the Out of Home Screening (OHS) process in all instances when a recommendation for Camp Community Placement (CCP), Suitable Placement (SP), or commitment to the Division of Juvenile Justice (DJJ) is being considered.

POLICY

DPOs making a referral to the OHS Unit are required to consider a range of factors that include, but are not limited to: criminal history; seriousness of the current offense; level of sophistication; and previous efforts made to treat and rehabilitate, including referrals to community-based resources.

The youth's criminogenic risk and protective factors, as determined by the Los Angeles Risk and Resiliency Check-Up (LARRC) assessment tool, must be fully assessed to determine if the OHS referral will meet the needs of the youth, protect the community and ensure the safety of the youth. The DPO shall consider the least restrictive dispositional option available, and shall clearly articulate why less restrictive options have been considered and ruled out. In instances when an Out of Home recommendation is considered, the needs of the youth and type and level of treatment required must be compatible with the type of Out of Home recommendation being considered. The following guidelines shall be followed when Out of Home placement is being considered:

- DJJ referrals may be indicated and/or considered when the following elements are present:
 - 707(b) offense;
 - Substantial risk to the community; and
 - Risk score as assessed by the LARRC is "high."
- CCP referrals may be indicated and/or considered when the following elements are present:
 - Delinquent/criminal act that indicates a significant risk to community safety;
 - A medium to high score on the LARRC, which was updated/completed within 30 days of referral to the OHS unit;
 - Mental health issue(s) controlled or stabilized through medication; and
 - Community-level alternatives have been utilized or considered.

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- CCP referrals should generally not be considered when the following factor(s) are present:
 - LARRC has not been completed within 30 days prior to the referral to the OHS unit;
 - LARRC risk score is “low.”
 - youth has IQ below 70;
 - youth has been referred to the Regional Center and is in the process of being assessed for eligibility;
 - youth has been, or is currently, a Regional Center client;
 - youth is Developmentally Disabled (DD) or Severely Emotionally Disturbed (SED);
 - youth is under 15 years old and has no prior placement history or involvement with the Community Detention Program (CDP);
 - youth has been previously hospitalized for mental disorder(s);
 - youth has been diagnosed with a Psychotic disorder;
 - youth has been determined to be “Medically Fragile” (requiring round-the clock-care by medical personnel);
 - youth has an attempted suicide while in custody;
 - youth has a previous Level 14 placement or is in need of Level 14 placement;
 - youth alleged with a 707(b) WIC offense that is serious, violent or sexual in nature;
 - youth’s active case(s) contain an underlying/sustained 707(b) offense and alleged conditions of probation violations on a 777 petition warrant a recommendation for DJJ; and/or
 - Community or other detention alternative programs have not been considered or utilized.

- SP referrals may be indicated and/or considered when there is:
 - Minimal risk posed by the youth to the safety of the community;
 - A low to medium score on the LARRC, which was completed/updated within 30 days of referral to the OHS unit;
 - Documentation that indicates that community-based alternatives have been considered and determined to be unsuitable for the youth;
 - A home situation that is unsuitable, unsafe and/or the continued placement of the youth in the home is refused by the parent(s) or guardian(s); and/or
 - A mental health issue and/or a substance abuse issue are/is contributing to the youth’s delinquency.

Pursuant to Directive 1041 (issued 7/7/2005), a 778 WIC petition is a request for a less restrictive plan (usually HOP or Suitable Placement), but can also be used to present an alternative to the current plan. When a 778 WIC petition containing a suitable placement, recommendation is being prepared, the OHS process shall be utilized in a

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manner consistent with this Directive.

Per Juvenile Manual, Section 813 (Case Clearances), the DPO must meet with the SDPO to review the case for out of home placement suitability and its formalized recommendation prior to submitting an OHS referral. The clearance conference may consist of a brief discussion focused on a few main issues or a full conference, depending on how complicated, serious or notorious the case might be. Companion cases coming up for disposition after being investigated by two or more DPOs call for joint clearance whenever possible.

The following case clearance and referral processes shall be followed in all instances:

- The DPO shall present the *OHS Case Clearance Form* (ProbNet>Forms>Juvenile Forms>OHS Clearance Referral) to the SDPO at the time the case clearance conference is initiated;
- Upon concluding the case clearance conference, the SDPO shall make a determination as to the appropriateness of the Out of Home recommendation. If appropriate, the SDPO shall sign the *OHS Case Clearance Form* indicating approval;
- Upon approving the recommendation, the SDPO shall consult with the office/facility Director. If approved, the Director shall sign the *OHS Case*

Clearance Form indicating approval. The SDPO shall enter a PCMS case note summarizing the case clearing activity; and

- Upon receiving Director approval, the referring DPO shall ensure that the form is completed in its entirety, and shall email it to the OHS Unit at OutofHomeScreening@probation.lacounty.gov. The email address can be found in the Probation Department email system as PROB-Out of Home Screening.

OHS DPO shall:

- Log the receipt of the referral form in the OHS Unit Tracking System;
- Contact the referring DPO (or the SDPO if the referring DPO is unavailable) to review the case within one (1) business day of receiving the OHS referral;
- Make a determination as to the appropriateness of the out of home recommendation;
- Verbally advise the referring DPO whether or not the out of home recommendation is approved;

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- Document the findings of the review on the OHS Case Clearance Form and sign the form;
- Make a PCMS entry regarding the case clearance findings (PCMS>Case Notes>Out of Home Screening Decision); and
- Log the case clearance disposition in the OHS unit tracking system.

In the event the referring DPO disagrees with the OHS decision and wishes to appeal the decision, the referring SDPO shall consult with the OHS Unit SDPO and review the case. If concurrence is not achieved during this consultation, the referral shall be for youth to the office/facility Director and the OHS Director for a collaborative resolution.

In situations where the Out of Home recommendation is denied, OHS will direct the referring DPO to the Prospective Authorization and Utilization Review (PAUR) Unit.

The PAUR Unit will provide assistance in identifying appropriate community-level treatment alternatives that may provide the type and intensity of supportive services indicated which are most likely to reduce risk and needs, increase protective factors, and strengthen and empower the youth and the family. These alternatives may include, but are not limited to Wrap-Around Services, Family Preservation, Functional

Family Therapy, Juvenile Day Reporting Center and/or services provided through the Juvenile Justice Crime Prevention Act (JJCPA).

When Out of Home placement is denied by OHS and “Home on Probation” (HOP) is designated to be the most appropriate recommendation, the referring DPO shall be required to prepare a court report containing content that is consistent with a HOP recommendation. The HOP report shall not be annotated or constructed in such a manner that its content would lead the court to believe that an out of home disposition is the most appropriate disposition for the youth. The same process applies to an OHS denied CCP recommendation in which SP was approved in its place. The referring DPO shall be required to prepare a court report containing content that is consistent with a SP recommendation.

Each office/facility shall maintain an *Out of Home Screening Referral Log* (ProbNet>Forms>Juvenile Forms>Out of Home Screening Referral Log>. Upon the completion of the OHS process, the following information shall be noted on the log:

- Youths Name and PDJ Number;
- Type of Referral (DJJ, CCP or SP);
- DPO Name;
- DPO Caseload Number;
- SDPO Name;
- Date case was approved by Director for referral to OHS;

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- Date the case discussed with the OHS Unit by referring DPO;
- OHS Unit Decision (approved or denied); and
- Final recommendation noted in court report; and
- Type of Report (PPR, 777 or 778).

Each month, the OHS Unit shall compile all CCP, DJJ and SP orders made by the courts from the applicable operations. The OHS Director shall facilitate an audit of actual recommendations submitted to the court against the recommendations that have been approved by OHS as documented in the PCMS. This review shall include an evaluation of court reports in which the court's recommendation was contrary to the Department's recommendation. In situations where it does not appear that the case was appropriately cleared by OHS or involves an inappropriately written report, the respective office/facility Director shall be notified by the OHS Unit and the Director shall review the matter and report their findings to their respective Bureau Chief.

815 BIRTH CERTIFICATE AND IDENTIFICATION (DIRECTIVE 1352)

INTRODUCTION

The Los Angeles County Probation Department in collaboration with the Los Angeles County Registrar Recorder/County Clerk's office (RR/CC), will provide probationers born in the county with Birth Certificates at no cost. The primary goal of this initiative is to assist the probationer with obtaining valid identification. The procurement of a birth certificate is the first step in this process.

Identified Deputy Probation Officer (IDPOs) will be trained and sworn by the RR/CC and given the authority to accept birth certificate applications thereby eliminating the need for a notarized certificate of identity. This initiative supports the Department's mission to facilitate positive behavior change. By assisting with procurement of Birth Certificates, the Probation Department provides valuable support to probationers needing school enrollment, employment services, and acquiring other vital resources such as, California Identification Cards and Social Security Cards. An IDPO is required to be in the area office during business hours and available to assist with the Birth Certificate process.

EXPECTATIONS

Birth Certificates can only be provided to those born in Los Angeles County. Probationers born out of the county, state and other counties will be referred to their respective agency in that jurisdiction. The IDPO will provide this information to the clients meeting these criteria. There are likely to be costs incurred for Birth Certificates from outside Los Angeles County.

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Each juvenile operation will work in collaboration with the IDPOs to accept and process birth certificate applications. IDPOs will be trained and deputized by the Registrar Recorder's office/County Clerk thereby eliminating the need for a notarized certificate of identity. Due to state law, only DPOs who have been trained by RR/CC will be permitted to accept and process applications. There may be instances in which Reserve Deputy Probation Officers are authorized to become an Identified RDPO for the purposes of this initiative. This law prohibits secretaries, clerks, and interns, non-RDPO volunteers, student workers, etc. from accepting applications.

DPOs based offsite - the area officer shall schedule an appointment with the IDPO as necessary to complete the Birth Certificate process.

PROCEDURE

DPO OF RECORD

- DPO of Record will verify the status of probationer's birth certificate by reviewing files and meeting with the clients.
- If it is determined that a birth certificate is needed, the DPO of Record will complete the Request for Services Form (down in Probnet under Forms - Juvenile Forms) and submit the completed form via email or hand deliver to the IDPO and log request in PCMS. A copy of the Request for Services Form will be maintained in the PDJ file.
- The DPO of Record shall make PCMS case note entry of this request.

IDENTIFY DPO (IDPO)

- The Identified DPO will complete the birth certificate application (found under ProbNet under Forms>Juvenile Forms) and transmittal document and send the original to the Field Administrative Services (FAS) designee in Downey Headquarters via County messenger to:

Probation Department Headquarters
Attention Room C-29
9150 E. Imperial Highway
Downey, California 90242

- The IDPO keeps a file copy in drop file. The IDPO will make a PCMS case note reflecting this activity as follows;
Case Note Type>Downey Headquarters; Case Note Sub-type>Juvenile Special Services Bureau.

Field Administrative Services (FAS)

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- The management for processing all birth certificate requests will be held at the FAS designated team member in Downey Headquarters. The FAS designee will deliver to RR/CC for processing.
- Upon receipt of the original application, the FAS designee will deliver to RR/CC for processing.
- PCMS case note entries for this initiative will be made as follows:
 - Case Note Type>Downey Headquarters; - Case Note Sub-type>Juvenile Special Services Bureau.
- Two required case notes will be entered;
 - The first case note will indicate that the original application has been received.
 - The second case note will indicate the date the original application was delivered to RR/CC.

Additional case note entries will be made based on additional information or circumstances arising which necessitates official documentation.

- The field administrative designee for District 4 will maintain a log of all birth certificate applications. This log will include the name, PDJ number, date the application was received, date the application was sent to the RR/CC, the date the original application was received from RR/CC, and the date the birth certificate was sent by County mail to the sending area office.

RR/CC:

- The county Registrar Recorder/County Clerk's office in Norwalk will process the application and prepare the original birth certificate.
- RR/CC will contact the FAS designee when birth certificates are ready and available for pickup by Probation.
- There is an expectation turnaround time of seven (7) business days to process and deliver the original birth certificates to the Probation Department.

FIELD ADMINISTRATIVE SERVICE DESIGNEE

- Upon receipt of the birth certificate, the designee will enter documentary case notes noting this in PCMS then send the original Birth Certificate to the DPO of Record.
- Enter into the log as noted above.

DPO OF RECORD:

- Upon receipt of the original birth certificate, log in PCMS, make a copy for the file and have the client sign off for the original.
- Submit the signed receipt to the IDPO for record keeping.
- Provide the client with the original Birth Certificate.

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Subject: RESIDENTIAL TREATMENT SERVICES BUREAU MANUAL CAMP SERVICES	Section Number: RTSB-900
	Effective Date: July 21, 2020
	Approved By: Jennifer Kaufman, Bureau Chief

901 INTRODUCTION

This section will address various camp services, which include visiting, medical services, mental health services, and educational services.

902 VISITING PROCEDURES

During their stay in camp, youth have the opportunity to receive visits from parents, or persons standing in loco parentis, children of youth, designated family members, service providers, attorneys, law enforcement, and so forth. All service providers, including LACOE, ISD, DMH, JCHS, etc., are considered visitors for purposes of this section. Visiting provisions for other family members, such as siblings, and supportive adults, please refer to Section 904, "Special Visits" and Section 907, "Supportive Adult Visits." These visits may be allowed in conjunction with the youth's case plan or in the best interest of the youth. The camp may provide access to technology as an alternative, but not as a replacement to in-person visiting.

Special procedures relating to visiting have been developed to maximize the quality of visits while at the same time ensuring the safety and security of both the youth and others within the facility.

All persons and items entering the facility are subject to search. The Probation Department may use metal detectors, vapor tracer units and/or narcotic detection canines to search for controlled substances and other contraband. 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 visitation shall be solidified during the MDT process and communicated to the youth, person denied and the camp manager or designee.

Visiting Instructions

Staff shall adhere to the following procedures when admitting visitors to the facility:

- Staff shall maintain a professional demeanor during visiting hours and treat visitors with respect and dignity. Staff shall be courteous and compassionate with visitors while remaining assertive and without criticism

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or judgment.

- Staff shall conduct visits only in areas where their view of the visiting parties is unobstructed. In addition, staff shall maintain visual supervision at all times during the visit. Staff shall not monitor conversations between the youth and visitors unless a clearly defined safety and security need exists.
- Staff must scan visitors for illegal substances using the vapor tracer units that are stored in a secure location. Employees who have received appropriate training are the only staff authorized to use the devices. Signs must be posted prominently in the camp lobby indicating that narcotic detection devices are in use and that visitors are subject to search. If evidence of narcotics is detected, the visitor shall not be allowed in the facility. Probation staff shall not detain the visitor, but instead shall note the information in a Special Incident Report. The visitor may be denied further access to the facility pending an administrative review by the camp Director.
- Those entering camp shall be subject to a metal detector wand search.
- Visitors suspected of being under the influence of alcohol and/or a controlled substance shall be denied entrance.
- Visits may be curtailed or postponed based on the safety and security of the youth, staff, others and the facility. The decision shall be made by the Director or SDPO only and documented in PCMS and addressed by utilizing the MDT process.
- Family therapy and professional visits shall be accommodated outside the provision of the standards set forth in Title 15, Section 1374.

Visiting Requirements – Photo Identification

In order to be allowed entrance into the facility, all visitors must bring current government-issued picture identification. Acceptable forms of identification include:

- Valid Driver's license with photo
- Valid state identification with photo
- Department of Justice Identification with photo
- Passport with photo
- Military identification with photo
- Photo identification card issued by the Immigration and Naturalization Service
- Certificado de Matricula Consular identification cards (honored for only 60 days from the date of issuance).

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Only the SDPO or the Director can approve questionable identifications. Photocopied, non-picture, altered, laminated, or expired identifications will not be accepted.

Additional Visiting Requirements

Staff must ensure that visitors also adhere to the following requirements:

- Visitors may bring only two keys on a key ring with no attachments, together with their photo identification, into the facility. Keys must remain in the visitor's pocket or on his or her lap during visits. Keys may not be placed on the table or in the youth's hands.
- Visitors with disabilities who have wheelchairs, crutches, walkers, or other medically necessary equipment shall be escorted to an appropriate location for visiting.
- Visitors with medical devices/implants shall be required to present a letter signed by their physician detailing the specific type of device and its location on the visitor.
- Visitors with extensive tattooing that cannot be covered with clothing (e.g., on the face or neck) shall be escorted to an appropriate location for visiting.
- Medication that is not a life or death necessity is not allowed. Staff shall escort visitors to the entrance of the facility if medication needs to be taken. Nitroglycerin tablets and inhalers are exceptions and are allowed. Youth shall not handle or use the visitor's medication.
- Visitors are not allowed to walk about during the visit. If a visitor leaves the visiting area, his or her visit may be terminated.

Dress Code

Staff shall enforce the dress code detailed below. Visitors who do not follow this dress code will not be allowed to visit.

- All visitors must be appropriately dressed and shoes must be worn at all times.
- Clothing considered inappropriate includes white t-shirts as outer wear, strapless tops, spaghetti straps, transparent (see-through) outfits, tank tops, short skirts or short dresses (higher than mid-thigh), shorts, halter tops, tight fitting clothing, and low-cut tops or clothing exposing the mid- section of the stomach.
- Also, not allowed are clothing bearing inappropriate messages and/or insignias, non-camp related sports insignias, bandanas, sun glasses, hat, broaches, stickpins, open-toed shoes, or shoes with heels higher than two

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inches.

Items Not Allowed During Visitation

The following items are prohibited. The presence of these items will result in either no future visitation or termination of a visit:

- Pens, pencils, markers, paper clips, staples, scissors, rulers, tweezers, pointers, laser pointers, money, wallets, backpacks, fanny packs, purses, jewelry, cellular phones or pagers, cameras, electronic devices, pocket knives or box cutters, cigarettes or pipes, lighters or matches, alcoholic beverages, chewing gum, unauthorized and/or illegal drugs, mouthwash, toothpaste or toothbrushes, glass or metal containers, firearms or any item built to the purpose of propelling an object, ammunition, OC spray, handcuffs, handcuff keys, or any object that can be used as a weapon.
- Food
- Orthopedic shoes for youth shall be accepted only if the medical green slip or court order is current and presented with the shoes. These types of shoes are to be left at the entrance of the facility for verification. Visitors are not allowed to take such shoes into the facility. Once verification is made, the shoes will be delivered to the youth. If the shoes are unauthorized, they will be placed with the youth's personal property. Verification shall not take place until after visiting is concluded. Staff shall issue a signed and dated receipt to the parents when receiving the shoes acknowledging that the County shall not take responsibility for lost shoes.

Post-Visit Searches

Staff shall search the youth upon conclusion of any visit pursuant to Departmental policy.

(Meets standards set forth in Title 15, Section 1374.)

903 SATURDAY AND SUNDAY VISITING

Designated relatives are allowed to visit camp youth on Sundays between 1:00 p.m. and 4:00 p.m. The Saturday visiting hours vary by camp. Only those approved to visit shall be allowed into the facility. These visits are limited to parents, legal guardians, or grandparents only. A legal guardian is any person who has been granted guardianship by order of the court. A legal guardian must bring verification to the facility in order for the visit to be approved.

Parents, guardians, or grandparents may not bring personal items into the facilities for the youth.

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Staff must act professionally during visiting hours and shall treat visitors with respect and dignity. Staff shall be courteous and compassionate to the visitors while at the same time being assertive. Staff shall not criticize nor act in a judgmental manner.

904 SPECIAL VISITS

Visits by those who are not parents, guardians, or grandparents are considered special visits. Such visits require prior permission that can be obtained through a court order, the camp caseworker, SDPO, or the Director. Special visits include visits with other family members such as sibling, supportive adults, or the caregiver of youth's children. The purpose of special visits is not to reward the youth but rather to provide additional opportunities for family and supportive adult contact to further the goal of reunification. 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 camp manager or designee. Facilities may provide visitation opportunities outside of normal visiting hours to accommodate special visits. Additionally, family therapy and professional visits will be accommodated as a special visit and coordinated through the camp manager or designee.

Persons under the age of 21 are not allowed to visit unless authorized by court order, the camp caseworker, SDPO, Assistant Director, or the Director.

The caseworker or designated staff must be present for the duration of the visit. All other standard visiting rules and procedures apply to special visits.

(Meets standards set forth in Title 15, Section 1374.)

905 PROGRAM-RELATED VISITS

Some camps have programs in which youth receive special visitors, such as the Mommy and Me and the LA Dads programs. Program coordinators shall provide the list of participants to the on-duty SDPO at least 48 hours prior to the activity in which the program participants will be visiting. The SDPO shall ensure that all visiting policies and procedures are followed.

906 VISITING AND INTERVIEWING BY MEDIA AND LAW ENFORCEMENT

There are occasions when outside police agencies and attorneys wish to interview youth, or when the media request to interview a youth.

General Requests for Interviewing

All general requests for interviewing, photographing, videotaping, or voice recording of youth must be handled in accordance with Los Angeles County

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Superior Court Rule 17.2 (c)(1-8), which states, in part:

A person or media representative must obtain a court order from the Presiding Judge of the Juvenile Court if he or she seeks to interview, photograph, videotape, or voice record a youth they know is under juvenile court jurisdiction and has been removed from the physical custody of their parent or legal guardian, and confidential information regarding the youth's case or dependency youth status may or will be disclosed as a result of interviewing, photographing, videotaping, or voice recording.

Requests may be sent to:

**Los Angeles County Probation Department
Public Information Officer
9150 E. Imperial Highway
Downey, CA 90242**

This rule does not prevent dependent or delinquent youths from initiating contact with any person or media representative without court permission.

Interviews by Law Enforcement Agencies

Any requests by police to interview, photograph, or fingerprint youth in camp shall be referred to the Director, Assistant Director, or SDPO.

If the youth has an offense pending in court and the law enforcement officer wishes to discuss this offense, then the youth's attorney of record must approve this interview. The attorney must provide approval in writing and it will be placed in the youth's PDJ file.

If the law enforcement interview is related to an offense that is not pending in court, then the law enforcement officer must indicate which type of case he or she wishes to discuss with the youth as part of the Law Enforcement Agency Information section of the Admonition and Waiver of Rights form (Attachment I).

The DPO will bring the youth to a private location for the interview. The DPO shall witness the law enforcement officer giving the youth his or her Miranda Rights and acknowledge that the youth understood the rights as outlined. If the youth waives, then The Admonition and Waiver of Rights form is to be completed and placed in the youth's PDJ file. If the youth invokes his or right to remain silent, no interviews are to be allowed, and the DPO must complete and sign the Waiver of Rights Review section, placing it in the youth's PDJ file.

The DPO shall remain during the interview, but shall not make comments or intervene, unless the youth invokes his or her rights. If at any time the youth invokes his or her right to remain silent, the DPO must terminate the interview and duly document this in the Waiver of rights section.

If the youth is under 14, then the interview must be preceded by both a Miranda

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warning and an intelligent waiver that is admissible in court (known as the Gladys R. waiver). If the youth waives his or her right to remain silent, the DPO must query the youth about his or her understanding of right and wrong before accepting this waiver. The DPO must complete the Gladys R. Questionnaire (Attachment II).

In this questionnaire, the youth provides examples of the difference between right and wrong. If the DPO forms the opinion that the youth does know the difference between right and wrong, then the interview may proceed as outlined above. If the DPO forms the opinion that the youth does not seem to understand the difference between right and wrong, the youth shall not be interviewed. The DPO shall sign and date the Gladys R Questionnaire, filing it in the youth's PDJ file.

If a youth is to be interviewed as a witness to a crime, the same procedures shall take place with the exception of administering the Miranda rights. If, during the interview, the youth becomes a suspect of the investigation, the Miranda waiver shall be completed. If the youth then waives his/her rights, the interview may continue. If the youth invokes his/her Miranda rights, the interview shall immediately be terminated.

907 SUPPORTIVE ADULT VISITS

Supportive Adults are identified by the youth and can be parents, guardians, extended relatives, neighbors, teachers, coaches, clergy, and other positive individuals in the youth's life. Visits by supportive adults provide social, moral, and/or emotional support, which assist in reinforcing and sustaining the psychological well-being of a youth. It is encouraged by the Los Angeles County Probation Department as these visits foster positive social interaction and establish a nurturing environment of trust and support.

A Supportive Adult will be contacted by request of the youth and if he or she approves of the relationship with the youth, they will have to submit to a background check prior to receiving visitation authorization. Persons under the age of 21 are not allowed to visit unless authorized by the camp caseworker, SDPO, Assistant Director, or the Director. All other standard visiting rules and procedures apply to supportive adult visits.

(Meets standards set forth in Title 15, Section 1374.)

908 MEDICAL SERVICES

Medical services are provided by Juvenile Court Health Services (JCHS) personnel. They treat illnesses and injuries and address acute symptoms and/or conditions in order to maintain or establish, to the extent possible, good health while youth are in camp. Medical, behavioral/mental and dental services shall be

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reviewed at least quarterly, at documented administrative meetings between the health and facility administrators and other staff, as appropriate.

Medical Consent

Each camp is responsible for ensuring that each youth's parent has signed a medical consent and that the consent has been placed in the youth's medical file. Camp Directors shall determine the most optimal means of compliance for their facility.

Medical Privacy

Privacy and confidentiality are rights afforded to all camp youth within the context of safety and security. Probation staff shall make every effort to facilitate the provision of medical services in areas that are free from distractions and afford privacy. All non-medical personnel, including other youth, shall remain away from the area where JCHS staff are rendering medical services. Youth shall not be used to translate confidential medical information for other non-English speaking youth.

Nurse's Clinic

The clinic is conducted at regularly scheduled intervals throughout the day, during which time the nurse dispenses medication and sees youth with medical concerns. The nurse will refer youth to the doctor's clinic, an authorized hospital, or to JCHS at the juvenile hall if they require a higher level of medical evaluation and/or treatment.

Staff shall maintain professionalism in all contacts and references to medical personnel and the services they provide. The use of unofficial titles, terms, or nicknames (e.g., complainer's list) is prohibited. Such references place a negative connotation on the use of the nurse's clinic, and in some cases may discourage youth from accessing services. Staff shall provide youth with the opportunity to sign up for the nurse's clinics, and youth shall be allowed to add their name to the list at any time. Staff shall then provide this list to the nurse.

Only qualified medical practitioners can assess an individual's medical needs. Under no circumstances are staff to ask youth why they want to see the nurse or try to evaluate the validity of the youth's request. Staff shall not discourage or prevent youth from taking prescribed medication, seeking medical attention, or attending scheduled medical appointments.

Camp SDPOs are called upon regularly to administer medication and treat youth injuries/illnesses when there is no nurse on duty. The Supervisor is expected to provide these services in a confidential manner consistent with training provided by JCHS personnel. At no time, shall he/she try to make decisions related to serious injuries. The SDPO shall contact the doctor at CJH to obtain direction to provide appropriate treatment.

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Doctor's Clinic

The doctor's clinic is conducted less frequently than the nurse's clinic, and the doctor will arrange to visit the camp setting. The nurse will arrange for youth to be seen, as appropriate.

Medical Services Outside of Camp

The nurse will arrange for youth to receive additional services, such as dental and eye care, which require the youth to leave camp for a short period.

Emergency Medical Services

Should a youth require emergency medical services, staff shall contact the nurse immediately. If the nurse is not at camp, staff are to consult with the SDPO, who will supervise the arrangement of appropriate services.

If an emergent medical situation exists, staff shall inform the SDPO, who will coordinate by calling 911 for paramedic assistance. If it is determined that immediate paramedic assistance is not necessary, the SDPO shall contact the on-duty doctor at Central Juvenile Hall. The SDPO shall be prepared to provide general information related to the youth and the injury. He/she shall follow the doctor's instructions. If medical removal is necessary, the SDPO shall coordinate staff to transport the youth to the appropriate county hospital, unless advised to go to the nearest hospital. Staff shall take the youth's medical and behavior files with them for subsequent admission to juvenile hall. Staff shall not permit hospital personnel to review a youth's behavior chart.

Once the youth is diagnosed and released from the hospital, staff shall take the youth to the nearest juvenile hall for admittance pending medical clearance by JCHS personnel and subsequent return to camp. CHQ staff shall arrange for movement back to camp, once JCHS provides the medical clearance.

On the other hand, should the youth require admittance to the hospital, the accompanying camp staff shall contact camp AD, who in turn shall contact the OD at the nearest juvenile hall and arrange for juvenile hall staff to take over supervision of the youth. Once relieved by juvenile hall staff, the camp staff member shall take the youth's behavior chart to the juvenile hall's Officer of the Day. Camp staff shall then immediately return to camp, unless otherwise instructed by the camp SDPO.

(Meets standards set forth in Title 15, Sections 1324(b) & 1407(a)-(c))

909 MENTAL HEALTH SERVICES

The Los Angeles County Department of Mental Health (DMH) provides

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mental health services for camp youth. Only qualified mental health personnel can make mental health diagnoses. Probation staff shall not assess the mental health needs of youth, nor the validity of their requests to seek mental health counseling.

Staff shall complete a Request for Mental Health Consultation for youth who may be exhibiting suicidal, bizarre, or uncharacteristic behavior, as well as after any fight, HOPE Center referral, or any incident necessitating staff's physical or chemical intervention (as outlined in the Safe Crisis Management section of this manual).

Staff shall not advise, discourage, or prevent youth from taking prescribed medication or from seeking mental health counseling. Staff shall not make derogatory and/or insensitive remarks regarding a youth's mental health status or need for counseling.

Youth's Right to Privacy

Privacy and confidentiality are rights afforded to all camp youth within the context of safety and security. Probation staff shall make every effort to facilitate the provision of mental health services in areas that are free from distractions and afford privacy. Youth shall not be used to translate confidential mental health information for other non-English speaking youth.

Making Mental Health Referrals

Staff shall use the Request for Mental Health Consultation form. DMH staff will also use this form to communicate the consultation findings to Probation. Place the completed form in the Mental Health mailbox and a copy in the youth's behavior chart. DMH staff shall process according to DMH guidelines.

Mental Health Referral Follow-Up

After consultation and assessment, the identified DMH staff member shall ensure a notation be completed in PEMRS and that copies of the completed Request for Mental Health Consultation form are distributed as follows:

- Camp caseworker (who shall file the paperwork in the youth's behavior chart)
- Assistant Director
- Camp Director
- JCHS (nursing)
- Los Angeles County Office of Education (School)

(Meets standards set forth in Title 15, Section 324(b).)

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The Los Angeles County Office of Education (LACOE) operates schools in the camp setting. Educational services are an integral part of the daily program in camp. These services comply with the State Education Code, policies of the County Board of Education, and procedures for the RTSB. All youth who have not graduated, including those with a General Education Development (GED) certificate will immediately be enrolled and must attend school each weekday. Only school administration can confirm a youth's graduation status.

Probation works collaboratively with the school in accommodating youth requiring special services, such as credit recovery, and those with Individual Education Plans (IEPs) or those preparing for HiSET.

Probation and school staff shall also communicate to each other any significant information regarding camp youth that affects the safety and security of the facility. Probation staff shall ensure that the school office is notified if, for any reason, the youth is removed from school.

With respect to discipline, school staff are responsible for taking appropriate disciplinary action within the school setting. If a youth is removed from class for disciplinary reasons, the teacher will send the youth to the school office, and submit a school referral. The school will for youth a copy of the referral to Probation, who will give it to the assigned caseworker.

Should a youth file a grievance regarding school-related issues, the on-site LACOE administrator shall handle the grievance and return it, with the school's findings, in a timely manner to the camp Director. A school liaison will be assigned at all times when school is in session. Staff shall respond to requests from the school for assistance, and will contact the camp office should additional backup be necessary. Office staff shall ensure that the on-duty supervisor is notified.

(Meets standards set forth in Title 15, Section 1324(b).)

911 SERVING FOOD IN CAMP (DIRECTIVE 1340)

INTRODUCTION

The purpose of this procedure is to provide food-handling guidelines to Residential Treatment Services Bureau (RTSB) staff serving food to youths and/or serving youths that are serving food and living in its dorms, cottages and HOPE Centers. The following guidelines are intended to assist the probation staff and youths in preventing food contamination during the food serving process.

EXPECTATIONS

The following food handling guidelines apply to staff and/or youths who are serving prepared, ready to eat, fully covered, individually wrapped trays of food and/or the

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offering and/or serving of single-serve food items in living units, dorms or HOPE Center Centers. Also for staff and/or youths serving bulk hot and cold food from serving carts in dorms or serving pans in cottages.

The food serving process includes preparation for the meal service and the serving of pre-prepared food items to youths.

The California Code of Regulations (CCR), Juvenile Title 15, Section 1464, requires facilities to have a written Food Service Plan (FSP) that complies with applicable California Retail Food Code laws. In addition, Section 1465 requires written procedures that ensure supervisory staff and food handlers comply with appropriate food handling and personal hygiene requirements.

POLICY

All RTSB staff working in any dorm, cottage, HOPE Center or dining hall shall adhere to all applicable FSP policies and/or procedures. Food Service Plan policies and procedures that apply to RTSB staff are contained in the FSP booklet which is located in every dorm, cottage, HOPE Center and dining hall.

In accordance with California Retail Food Code Article 4, Section 113953, food may only be served in dorms, cottages or HOPE Centers where at least one hand-washing sink can achieve a temperature of at least 100° Fahrenheit. Staff shall immediately report any sink not functioning with warm water to the facility Service Director or Camp Service Manager in accordance with Directive 1086.

The Food Service Manager, the Service Director or designee or the Food Service Consultant shall conduct ongoing audits of hand-washing sinks used in conjunction with food serving. At a minimum, the audits shall be conducted by the Food Service Manager or designee (bi-monthly), the Service Director or designee (monthly), and the Food Service Consultant or designee (quarterly).

In accordance with the California Retail Food Code Article 6, Section 113973, disposable plastic or latex gloves shall be worn after proper hand-washing to serve unwrapped food items. If bulk foods are being served from food carts or service pans, hair coverings shall also be worn.

Youths assisting with food serving shall be supervised at all times and shall be instructed on proper hygiene procedures including proper hand-washing techniques and the utilization of disposable plastic gloves and hair coverings.

Youths who want to assist with food serving may not have any medical restrictions or conditions.

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PROCEDURES

Prior to serving food in dorms, cottages, or HOPE Center centers:

1. Wear a hair covering if serving bulk food from a cart or service stand.
2. Wash hands thoroughly using the following proper hand washing techniques:
 - Wet hands with water than apply soap or detergent beyond wrists.
 - Rub hands together to make a lather for at least 20 seconds.
 - Rinse soap and detergent off hands.
 - Dry hands with a paper towel.
 - Use the same paper towel to turn off the water and to open the door to exit the room.
 - Deposit the soiled paper towel in a trash receptacle inside the room if the receptacle is near the exit and the paper towel cannot be disposed of without having to touch the door, thus contaminating hands. If not, deposit the paper towel in a trash receptacle outside of the room.
3. Place disposable plastic or latex gloves on hands to begin food service process.
4. Observe the following hygienic practice during the food serving process at all times;
 - Avoid touching the nose, mouth, hair, and skin or other surfaces during the food serving process.
 - Do not cough or sneeze onto the food or around the food.
 - Wash and re-glove hands after coughing, sneezing or blowing nose.
 - Wash and re-glove hands after touching any body parts.
 - Prior to initiating the food service process, cover all wounds or cuts on hands and/or arms completely.
 - Be free from flu, gastrointestinal, intestinal or other contagious or foodborne illnesses.
 - Cease serving food and report to the Supervising Deputy Probation Officer or Deputy Probation Officer when ill.
 - Rewash hands and re-glove hands after any unhygienic practice.

CAMP SERVICES

ATTACHMENT I



TERRI L. McDONALD
Chief Probation Officer

ADMONITION AND WAIVER OF
YOUTH'S INFORMATION



COUNTY OF LOS ANGELES PROBATION DEPARTMENT

9150 EAST IMPERIAL HIGHWAY, DOWNEY, CA 90242 (562) 940-2618

Youth's Name: _____ PDJ #: _____
Date of Birth: _____ Age: _____

YOUTH'S ADMONITION & WAIVER OF RIGHTS:

- / You have the right to remain silent.
- / Anything you say can and will be used against you in a court of law
- / You have the right to talk to a lawyer before we talk to you and have him/her present while we talk to you.
- / If you cannot afford to hire a lawyer, one will be appointed to represent you before any questioning, free of charge.
- / Do you understand each of these rights as stated above? (write yes or no and initial in space provided)

youth's Signature: _____ Date: _____

WAIVER OF RIGHTS REVIEW:

- / Did the youth Remain Silent? (write yes or no in space provided)
- / Did the youth Ask for his/her Lawyer? (write yes or no in space provided)

If so, provide the information for the lawyer the youth asked for:

Lawyer Name: _____
Address: _____
Phone: _____

DPO/Transportation/DSO Signature: _____ Date: _____

LAW ENFORCEMENT AGENCY INFORMATION

Law Enforcement Agency Name: _____

Law Enforcement Officer's Name & Badge #: _____

Officer's Contact No.: _____

Reason for Interview:

- ____ Present Offense-Pre-Detention Hearing. ____ Another alleged offense
- ____ Present Offense-Post Detention Hearing. (must have attorney present or attorney waiver)
- ____ Witness ____ Other (explain)

Officers Signature: _____ Date: _____

Rebuild Lives and Provide for Healthier and Safer Communities

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ATTACHMENT III

GLADYS R. ISSUE

/roc 2100

To be used for all arrestees *under 14 years of age*. To be given after Miranda rights have been waived.

A. *From youth*

1. Do you know the difference between-doing what's right and doing what's wrong?

2. Give me an example of something that is right to do.

3. Give me an example of something that is wrong to do.

4. Do you go to school? _____
5. What have they taught you in school about it being wrong to

6. What has your mother or father taught you about it being wrong to

7. Does your mother or father punish you for doing something they have told you is wrong?

B. *From youth's Parents*

1. Have you taught your child the difference between right and wrong?

2. Have you taught him that it is wrong to

3. Do you send your child to school? _____
4. Can he read and write? _____
5. Do you think your child knows it is wrong to _____

Note: Extra care should be taken in advising young subjects of Miranda rights. Determine that he knows the meaning of lawyer, judge, court, words such as silent, appointed, etc. Indicate these explanations in his waiver.

LOS ANGELES COUNTY PROBATION DEPARTMENT

Subject: RESIDENTIAL TREATMENT SERVICES BUREAU MANUAL SPECIALIZED PROGRAMS	Section Number: RTSB-1000
	Effective Date: July 21, 2020
	Approved By: Jennifer Kaufman, Bureau Chief

1001 INTRODUCTION

The RTSB has developed several specialized programs that assist youth in developing pro-social behaviors and effecting positive behavioral change. These programs include behavior management programs, work crews, religious services and practices. Additional specialized programs have been developed in collaboration with community-based organizations and volunteers.

This section will provide detailed information on specialized programs available in camp, including religious, medical, mental/behavior health, and substance abuse treatment and school. All staff assigned to any of these programs whether contracted or not, including all other personnel who are non-probation employees are required to attend an initial orientation program. This orientation will include:

- An overview of the Probation Department, including its structure and functions;
- Discussion of work conditions;
- Discussion of policies and procedures including, but not limited to, safety and security, anti-discrimination policies, discipline guidelines, sexual harassment, workplace violence/threat management, and employee conduct.

Support Personnel newly assigned to a position shall also receive an orientation to that assignment by facility supervisor or designated personnel within the first week of their arrival.

- Discussion of assigned duties and standards, performance expectations, and the work schedule;
- Discussion of privacy policies (including, but not limited to policies regarding CORI); and
- Introduction to staff and a tour of the assigned location.

(Meets standards set forth in Title 15, Section 1324 (e))

1002 BEHAVIOR MANAGEMENT PROGRAMS

Behavior management programs (BMPs), as detailed in RTSB-600, lay the foundation for delivering evidenced-based interventions that lead to positive probationer behavioral change. Each camp is responsible for developing and implementing BMP.

1003 WORK CREWS

In conjunction with the Management Services Bureau, it is the policy of the Probation Department and RTSB that youth have fair and consistent assignment and opportunity to participate on various work crews during their stay in camp. Work assigned to a youth shall be meaningful, constructive and related to vocational training or increasing a youth's sense of responsibility. Crews include ground and maintenance, kitchen, and laundry. Youth earn assignment to a work crew through their successful participation in the camp's BMP.

Work crews cannot provide services for the direct benefit of probation staff. Additionally, crews cannot perform work for the direct benefit of private citizens without permission from the camp Director. Lastly, a work program shall not be imposed as a disciplinary measure.

Work Crew Selection Criteria

Youth must complete an application and meet camp-specific criteria for appointment to a work crew. The criteria are tied to the camp's BMP. Youth assigned to a work crew must meet the following minimum criteria:

- Stage 3 or higher
- Medically cleared
- No history of escape or attempted escape from camp, juvenile hall, or other locked facility
- Minimum grade point average of 2.0
- No behavioral reports/write ups in the past 10 days
- Caseworker approval

The supervisor in charge of the work crew program must approve the selection of youth for crew. Subsequent to selection and based on individual circumstances, youth may be temporarily suspended or removed from crew as approved by the on-duty supervisor.

Security

The crew leader (either the crew instructor (CI) or an assigned DPO/GSN) is responsible for ensuring proper security during all work crew activities. This includes tool management, instruction on proper tool usage, and monitoring use of supplies, especially sharp objects (such as nails, screws, staples, etc.).

Supervision

It is the crew leader's responsibility to maintain direct supervision and conduct periodic counts of all youth during work crew activities. At no time are youth allowed to be out of the crew leader's line of sight, unless another staff member assumes supervision.

Crew leaders shall maintain supervision of the youth throughout the work period, beginning from point of first contact (such as picking up the youth from the dorm or

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other designated area) until completion of the work crew activity and subsequent return of the youth to the general population. Crew leaders shall provide a written list of work crewmembers to office personnel or the designated staff member responsible for the camp population counts. The list shall include the names of each work crewmember, as well as the total count of crewmembers.

If, for any reason, youth are being transported within the community necessitating travel via Departmental transportation, crew leaders shall obtain all needed supplies (including food and water) from the facility prior to departure. Crew leaders shall not unnecessarily stop the vehicle at any location within the community.

Supervision Ratios

Crews working outside the camp perimeter shall total no more than five youth per each crew leader. Crews working inside the camp perimeter shall total no more than eight youth per each crew leader. The crew leader may reduce this ratio at his or her discretion. Further, the crew leader may deny participation on the work crew of any youth should the crew leader have concerns about safety and security.

1004 RELIGIOUS SERVICES

Religious programming provides youth an opportunity for religious services and practices at least once each week. Youth are able to participate in and practice faith-based services, receive religious instruction, and enjoy the benefits of spiritual guidance in accordance with the teachings of their religious faiths.

In addition to providing religious services and practices, various religious organizations are responsible for registering and orienting religious volunteers through the Probation Department's Volunteers In Service To Others (VISTO) office. The organizations are also responsible for coordinating religious programs and services while observing the camp's safety and security regulations.

Coordinating Organizations

With the exception of Catholic and Jewish services, the Protestant chaplain shall coordinate services through proper Departmental clearance procedures. The Probation Department works with the following organizations in coordinating religious programs:

Catholic Services
Office of Detention Ministries
Archdiocese of Los Angeles
3424 Wilshire Boulevard
Los Angeles, CA 90010-2241
(213) 637-7000
(213) 637-6161 (Fax)

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Jewish Services
 Beit T'Shuvah
 8831 Venice Boulevard
 Los Angeles CA 90034
 (310) 204-8910 or 5200
 (310) 204-8908 (Fax)

Board of Rabbis
 5700 Wilshire Boulevard, Suite 2511
 Los Angeles, CA 90036
 (323) 761-8600
 (818) 363-5488 (After Hours)
 (323) 761-8603 (Fax)

Protestant and Other Services
 Chaplain's Eagles
 16350 Filbert Street
 Sylmar, CA 91342
 (818) 364-5087
 (818) 367-8938 (24-Hour Exchange)

Any group or person wishing to volunteer in the religious program shall be referred to the organizations listed above.

These organizations volunteer their services and receive no monetary compensation. They must maintain complete and accurate records of all religious volunteers granted or denied access to the camps. The records must clearly document the reason why access was denied, and they shall be available for review at any time by the Chief Probation Officer or designee.

Operational Aspects

The VISTO office works with the coordinating organization to process and clear all religious volunteers.

The Director or designee monitors the administration and coordination of religious services at each camp to ensure compatibility with the overall program and conformity with departmental policy.

Camp Procedures

The youth may attend services of any denomination on the days when services take place. A youth may request and be permitted to see any of the regularly assigned chaplains/clergy for counseling, regardless of the youth's particular faith and practices. Additionally, special religious diets shall be made available to youth upon request.

Youth participation is voluntary. Behavior permitting, staff shall not deny youth the

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right to participate in religious services and religious counseling. Should a youth choose not to attend religious worship, alternative programming shall be provided. Youth shall neither be disciplined nor penalized because they choose to attend or not to attend worship services. Probation staff shall neither encourage nor discourage a youth's participation in any religious services.

References in official Probation records shall be limited to the youth's participation in practices, services, counseling, and any commendations provided by the religious organizations. Staff members shall not minister or conduct any type of religious services.

(Meets standards set forth in Title 15, Section 1372)

1005 COMMUNITY BASED ORGANIZATIONS

Many camps work with community-based organizations (CBOs) in the camp setting. These organizations provide various types of programs and may follow up with the youth after release from camp.

The camp director shall approve all CBO programs. The Director may discontinue the programming (either temporarily or permanently) at his or her discretion due to behavioral, logistical, and/or staffing concerns.

1006 VOLUNTEERS

DIRECTIVE 1314 --- JUVENILE-PROVISIONAL CLEARANCE FOR TEMPORARY VOLUNTEERS FOR JUVENILE INSTITUTIONS BUREAUS

INTRODUCTION

It is the policy of the Juvenile Institutions Bureaus that a potential volunteer may be allowed provisional clearance to enter a camp facility to observe an activity, provide limited services or for special event(s).

EXPECTATION

Temporary volunteers will be required to complete the Provisional Clearance Temporary Volunteer(s) form (Prob. 1599) and the VISTO Volunteer Application a minimum of ten (10) days prior to the requested start date and meet minimum clearance requirements. This does not pertain to one-time events, which require prior approval from the Bureau Chief and above.

POLICY

Requesting Provisional Clearance

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It is the responsibility of the Camp Manager to forward the following required documents to the Requestor within one (1) business day of the request:

- Provisional Clearance for Temporary Volunteer(s) Form (Prob, 1599)
- VISTO Volunteer Application

Upon receipt of the required documents, the Camp Regional Manager shall:

- Conduct First Level Review (Approval/Denial) and scan/email the Bureau Chief within two (2) business days of receipt for Second Level Review. All first level denials require an explanation.

Provisional Clearance Requirements

The Bureau Chief shall forward the VISTO application to Human Recourses Background Unit within one (1) business day of receipt, for completion of background records checks.

The Background Unit staff shall check the following systems to ensure there are no background issues preventing the volunteer from visiting a juvenile camp:

- JDIC/CLETS
- APS
- TCIS
- CCHRS
- PIMS

All backgrounds and record check information obtained about a temporary volunteer is strictly confidential and is to be kept secure at all times.

The background record check documentation shall be reviewed by the Bureau Chief for final provisional clearance approval; approval shall be noted on the Form and a copy forwarded to the Camp Regional Manager (prior to the event), who shall log the information in the Provisional Volunteer Clearance Log (Prob. 1600)

Notification to Temporary Volunteer

The Camp Regional Manager shall contact the temporary volunteer by telephone or email at least two (2) business days prior to the requested visit start date and inform him/her of approval or denial of the short-term visit. The volunteer must be reminded that the provisional background clearance results determined by the Department have no bearing on the final clearance by the Department's Background Unit. If the application is denied, only the applicant will be provided with the reason why clearance was denied.

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Day of Short-Term Visit

On the initial day of short-term visit, Probation staff shall:

- Verify pre-approved scheduled visit/activity
- Verify identity of visitor by checking valid government issued identification
- Provide instructions to the temporary volunteer regarding safety and security while in the camp

Safety and Security

In order to ensure the safety and security of the youth and visitor in the camp, Probation staff remain present during all activities with youths.

Volunteers are required to:

- Sign in and out of the facility in the appropriate logbook
- Wear visible visitor identification at chest level at all times while in the facility
- Comply with the Department's policies, particularly with respect to maintaining confidentiality.

All volunteers shall comply with the visiting procedures outlined in RTSB-1000.

Volunteer Injuries and Medical Claims

Should a volunteer become injured at camp, staff may provide first aid or access emergency services. The SDPO or designee shall submit an SIR to the camp Director for review and for youth to the VISTO office at 1299 E. Artesia Blvd., Carson, Ca 90746 within 10 days. The on-duty supervisor or designee shall instruct the volunteer to contact the VISTO office at (310) 761-3937 as soon as possible.

(Meets standards set forth in Title 15, Section 1324 (D) (e))

1007 JUVENILE- SUBSTANCE ABUSE TREATMENT

(DIRECTIVE 1285)

INTRODUCTION

It is the policy of the Residential Treatment Services Bureau (RTSB) to provide a safe and secure environment in which rehabilitative efforts, including substance abuse treatment and education opportunities, are available for youths.

EXPECTATIONS

Youths that are detained in camp and have a substance abuse problem with or without

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a co-occurring mental health disorder are eligible to participate in Substance Abuse Treatment Services, which may include both individual and group treatment. Services for youths who are eligible for co-occurring mental health and substance abuse services will receive these services through the Department of Mental Health (DMH). Youths who have a substance abuse issue and do not have an open mental health case will receive substance abuse services through contracted substance abuse providers and/or designated DMH providers. These services are developmentally/gender appropriate and will address behaviors related to use, abuse, addiction and relapse prevention.

POLICY

Referrals for substance abuse treatment can be made through the youth's self-referral, partner agency referral or Probation staff referral. All referrals will be processed through a formalized referral process. All service referrals require documentation in the Probation Case Management System (PCMS) within 48 hours of receipt by the Multi-Disciplinary Team (MDT) Coordinator describing action taken on the referral.

(Document under heading > PCMS - Case Notes - Substance Abuse - Camp Referral Resource).

Effective immediately, the following outlines the process to refer youths for Substance Abuse Treatment Services in camp;

MDT Process

The youth's substance abuse treatment needs are identified during the MDT process and the youth will be referred to the necessary services during the course of the initial MDT.

MDT Coordinator Responsibilities

The MDT Coordinator at the camp shall maintain a current list of youths referred for substance abuse treatment services at their respective camps, including the date of the referral, the referral source and treatment start date.

The MDT Coordinator shall be responsible for maintaining a corrected log for services that are provided to the youths at the facility each month. This log shall be completed by the fifteenth (15th) day of the following month that services were provided.

Youth's self-referral process

Youths are introduced to the Request for Service Form (Prod. 1567) upon entry to camp during the orientation phase and forms can be found throughout each camp location. During the orientation phase or anytime during the camp commitment, a youth can self-refer for substance abuse services by completing the Request for Services Form and

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placing it in the “Access to Care Box” at each camp. The facility Grievance Officer or Nurse shall retrieve forms daily from the box and forward a photocopy of any forms requesting substance abuse treatment services to the MDT Coordinator.

Juvenile Court Health Services (JCHS) Referral Process

During the camp’s medical admission process, JCHS Physicians and Nurses shall assess youths for substance abuse issues and provide medical care or detoxification and/or withdrawal according to their established policies. Initially, the Substance Abuse Referral Form (SAR) is completed by JCHS and shall be submitted to the MDT Coordinator.

If a youth indicates to the Admissions Nurse that he or she will like to participate in a Substance Abuse Program, then they shall follow the above referral process.

Los Angeles County Office of Education (LACOE) Referral Process

If a youth indicates to a LACOE staff that he or she would like to participate in a Substance Abuse Treatment, LACOE shall refer the youth by completing the SAR and submitting the completed form to the MDT Coordinator.

Department of Mental Health (DMH) Referral Process

DMH conducts a Mental Health Assessment for each youth prior to camp admission. Youths determined to have both a mental health disorder and a substance abuse disorder (generally defined as co-occurring disorders) shall be treated by DMH in accordance with their policies and processes.

Youths with substance abuse disorders and no co-occurring open mental health case shall be referred by DMH for Substance Abuse Treatment Services through the MDT Coordinator using a SAR.

Probation Referral Process

Direct supervision staff that become aware of a youth’s substance abuse services need shall refer the youth for substance abuse treatment services by completing and submitting an SAR to the MDT Coordinator.

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Subject: RESIDENTIAL TREATMENT SERVICES BUREAU MANUAL CAMP SUPERVISION	Section Number: RTSB-1100
	Effective Date: July 21, 2020
	Approved By: Jennifer Kaufman, Bureau Chief

1101 INTRODUCTION

Camp youth must be supervised at all times by Probation staff. Effective supervision is a core concept in the creation of a camp environment that fosters positive probationer behavioral change, while at the same time enhancing safety and security. Inadequate supervision results in the escalation of negative behavior, which can lead to disruptions and disturbances.

This section will address proactive supervision, as well as elements involved in supervision that will maintain the safety and security of the youth, staff, and facility.

1102 SUPERVISION DEFINED

Supervision is defined as directing, controlling, and monitoring the activities of one or more youth. Supervision consists of a variety of elements. For example, a staff member with good supervision skills exhibits the following:

- Develops a positive rapport with the group
- Is observant and alert
- Exercises sound judgment
- Knows program expectations
- Possesses good verbal skills

Supervision style sets the tone for the group. Staff members are expected to act as positive role models. Often, success or failure is generally attributed to the staff member's skills and motivations.

1103 POST POSITION COVERAGE

All staff shall be at their assigned post, on time and ready to work. Staff must remain on duty until all incoming staff have cleared a population count and have assumed control of the youth. Staff shall complete the following activities during shift exchange:

Population count clearance: Incoming staff shall make a head count and communicate the count to the outgoing board counselor. Additionally, the outgoing board counselor must articulate the location of all youth not in the living unit. The counts must match before the incoming staff shall take over the board. Any issues

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shall be documented in the dorm logbook.

Group tone: Incoming staff shall confer with outgoing staff about needs and concerns for the group tone. The outgoing board counselor shall ensure the tone is under control before relinquishing the board to incoming staff. Any issues of concern shall be documented in the dorm log book.

1104 PROACTIVE SUPERVISION

Proactive supervision involves the effective management of camp youth as they participate in the daily activities of the camp's program. The term implies that staff will be active participants in supervising the camp youth in such a way that many problems can be avoided. Skilled staff are able to identify and address problematic situations before they escalate.

All staff are expected to be proactive in their daily supervision duties. This includes:

- Maintaining constant observation of youth
- Conducting scheduled and impromptu population counts in all locations throughout the facility.
- Looking for opportunities to provide positive reinforcement
- Correcting problematic behavior through use of the continuum of correction techniques (outlined in RTSB-702)

Typically, youth will not engage in aberrant behavior when they know that staff members are actively supervising them. Youth become aware of this proactive approach when staff pay attention to detail, provide immediate correction of all rule infractions, confer immediate reinforcement of positive behavior, and correct negative behavior.

1105 PROPER USE OF AUTHORITY

When the camp DPO is assigned to lead supervision of a scheduled activity, he or she is often referred to as running the board or the board counselor. This DPO has the authorized command of the youth and shall structure and direct group activities, adjusting the group as needed, based on demonstrated behaviors and the group tone.

Staff shall treat each youth with dignity and respect. Should problems arise, staff will address the behaviors rather than the youth's personality or personal attributes.

Staff shall remain composed. They shall not respond to youth with profanity or sarcasm. Staff shall never use corporal punishment to address negative behavior.

Staff are responsible for proactively supervising the group and surrounding area. This is a critical component of safety and security. At no time, shall staff allow a camp youth to take over and run the board.

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Staff shall not engage in group punishment. Group punishment is defined as a form of retaliation where uninvolved youth are targeted for the negative actions of another. An example of group punishment is suspending the earned BMP privileges of all youth in the dorm due to the negative actions of one youth.

(Meets standards set forth in Title 15, Section 1390.)

1106 GROUP CONTROL

Effective group control is directly related to supervision, which is comprised of several components as noted below.

Structuring and Limit Setting

At the beginning of any activity, the assigned DPO shall clearly explain the details of what is planned for the period, and what is expected from the youth. This is referred to as structuring. Do not assume that the youth will understand or remember the activity from the previous day. It is important to review the details as if the youth are hearing it for the first time. Additionally, the DPO shall clearly outline expectations for the youth, highlighting both the benefits and consequences of compliance.

While structuring, the DPO must also set limits. For instance, when structuring the youth in the dorm about nurse's clinic, if the DPO does not want youth to stop at the water fountain along the way, the DPO must clearly state that youth are not to use the water fountain unless they request and receive permission to do so.

Clear structuring and limit setting allows all youth to understand what is about to occur and exactly what is expected of them. This type of structuring should leave no room for questions.

Movement/Positioning

Staff must be alert whenever youth are moving from one area to another. This holds true whether one youth or a group of youth are moving.

Types of movement and necessary staff positioning will vary, depending on number of staff available and the number of youth involved. Positioning should be devised so that staff can see all youth in the group. The goal of appropriate positioning is to effectively monitor the whole group.

In some instances, staff are assigned to various posts along the path of the movement. In other instances, staff accompany the youth from one point to the other. In general, staff should not walk directly in front of a group of youth because the staff member cannot see what the youth are doing. Similarly, if a staff member is walking directly behind the youth, he or she can only see the back of the last youth in the group.

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It is best to position staff to the side of large groups at various points (front, middle, back) so that staff can cumulatively see all of the youth in the movement. Repositioning may be necessary, based on group movement and the positions of other staff. Staff shall not congregate together while supervising youth.

The daily schedule is replete with high-risk periods, such as school movements, showers, late dorm, and recreation, when a problem might occur and escalate quickly. For this reason, staff members must be positioned to ensure that all youth can be seen. Likewise, staff must be alert. This requires teamwork and good communication among all staff members.

Periods involving medical activity, such as nurse's or doctor's clinics, require sensitivity to the youth's privacy. Staff must maintain visual supervision of all youth at all times, while also affording privacy and confidentiality for the youth receiving medical treatment.

Anticipating Problems

Attentive supervision will assist in detecting potential problems. This involves visual scanning and listening. Staff must avoid becoming distracted during supervision. This includes focusing only on one youth while supervising a group activity or engaging in prolonged conversations with others.

If a potential problem is detected, the staff member must address it using the appropriate level of correction.

Should the staff member running the activity require additional staff to assist in properly supervising the youth, the staff member shall immediately notify a supervisor.

Discerning Affiliations

Understanding why certain youth congregate together and why they do not, may assist in detecting changes in tension and overall camp tone. Staff must be aware of gang affiliations and prevent groupings of gang members during the various daily activities. Additionally, staff must also be mindful of racial tensions and monitor youth for grouping based on race or ethnicity.

1107 USE OF POSITIVE REINFORCEMENT AND SANCTIONS

Within the context of evidence-based practices, camp staff are expected to address and correct negative behaviors. They are also expected to provide opportunities to help youth develop pro-social behaviors. When a youth demonstrates productive, positive behavior, the DPO shall positively reinforce that behavior through the use of positive comments or BMP Points upgrades. This focus on positive behavior tends to encourage similar behavior among other camp youth as they vie for the positive attention from staff.

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Sanctions include non-verbal and verbal expressions of disapproval, written documentation of negative behavior, etc. (See RTSB-600).

1108 ABUSIVE INSTITUTIONAL PRACTICES POLICY (DIRECTIVE 1198)

While supervising, and interacting with Youths, staff must understand that modeling appropriate behavior assists in prompting pro-social skills, such as staff shall set an example of courtesy and consideration in their contacts with fellow staff members and Youths while at the same time setting and enforcing clearly defined limits and ensuring that rules and regulations are followed.

Care must be taken to avoid harsh scolding, directing personalized criticism, intentional embarrassment, antagonizing of a youth or otherwise creating or maintaining an environment that a reasonable person would view as threatening or intimidating.

When it is necessary to reprimand youths, or to lower their daily grades for misconduct, it should be done without critical or derisive comments being personalized to the Youths by staff.

Staff shall not use sarcasm, ridicule, profanity or threats involving their interactions with youths. Praise and encouragement, on the other hand, are proven to help promote desired behaviors.

Staff shall clearly understand that this is considered to be a violation of departmental policy to engage in any of the following inappropriate and/or abusive acts to youths.

VERBAL ABUSE TOWARD YOUTH

- Directing/applying derisive or demeaning names to youth;
- Denouncing and/or harshly scolding, slandering or berating youth;
- Using contemptuous language directed at youth, which may include vulgar or profane words; and
- Verbal interactions that a reasonable person would view as abusive.

ABUSIVE INSTITUTIONAL PRACTICES

- Inflicting verbal or physical abuse;
- Applying corporal punishment;
- Denial of medical or mental health care;
- Denial of appropriate nutrition;
- Denial of appropriate shelter, bedding, clothing or sanitary living conditions;
- Denial of or impeding of access the Grievance and/or Access to Care processes;
- Requiring youth to assume prolonged rigid, fixed or unnatural positions such as lying face-down on floor, seated on metal bed rails, pipes, or surfaces by design intended to create discomfort, for corrective or disciplinary purposes;
- Intentionally creating an unsafe supervision environment;
- Intentionally housing a youth in an unsafe or dangerous situation

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- Creating a threatening and/or intimidating environment by coercing youth through the use of threats or any form of intimidation
- Activities or actions that a reasonable person would view as abusive
- Threats Toward Youth
- Threatening to deny or remove guaranteed rights from youth, including but not limited to, access to medical care, education opportunities, religious services and/or counseling, parental visits or attorney contact
- Causing a youth to fear physical harm through the use of a statement or explicit act
- Other behaviors that a reasonable person would view as threatening to the well-being of youth

Creating or Maintaining a Threatening or Intimidating Environment

- Intentional behaviors or statements made by staff, which would cause a youth to fear for personal injury or harm
- Withholding of privileges, access to care services or guaranteed rights
- Creating or maintaining an environment that a reasonable person would view as abusive
- The following techniques shall not be utilized by staff at any time:
 - Slamming - The use of physical force by staff, intended to cause a youth to impact with an object (e.g., wall, floor or structure), in such a manner as to potentially result in injury to the youth
 - Bob Sled Positioning - The act in which youth are ordered by staff to sit on the ground with their knees close to their chests and their arms interlocked around their knees; the use of this practice is forbidden
 - Uncomfortable/inappropriate Positioning: The act of placing any youth in an uncomfortable and/or inappropriate position for prolonged periods of time that may be viewed by a reasonable person as punitive or abusive

1109 MOVEMENT COMMUNICATION

Staff must be aware of various movements occurring in camp. This is accomplished through the daily schedule and through announcements over the PA or via radio, depending on the particular camp operation. Staff are expected to report for all supervision periods and movements on time. During major movements, such as movements to school or to the dining hall, absent supervisor approval, all staff must be present to assist.

On rare occasions, staff may need to send a youth from one location to another without staff accompaniment. In such instances, the sending staff shall alert office personnel, who will visually monitor the youth's movement. The sending staff shall also communicate to the receiving staff that the youth is on his or her way. If this occurs via radio, the receiving staff shall verbally acknowledge hearing this communication.

1110 POPULATION COUNTS

Another integral component of camp supervision is conducting regular population

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counts to ensure all youth are present and accounted for. Population counts shall be conducted after each major line movement in accordance with specific camp procedures. They shall also be taken at the beginning and end of each activity.

In the event of a population count discrepancy, all programming will be suspended until resolved. The SDPO shall be notified in such instances. Population counts shall be recorded in the main facility logbook and pursuant to camp-specific procedures.

Staff shall never allow a youth to conduct and provide population counts.

1111 STAFF EQUIPMENT

Camp staff use various types of equipment during the course of supervision. This equipment must remain in the care, custody, and control of camp staff, and at no time shall a youth be allowed access it. Staff shall be mindful of the following procedures:

- Staff shall keep department-issued safety equipment (such as radios, pepper spray, keys, identification, and restraints) on their person at all times.
- Keys shall be affixed to the uniform with a lanyard. Staff shall not place them on counter tops or leave them in doors. At no time, shall a youth have any keys in his or her possession.
- Staff shall not allow youth to touch pepper spray canisters or restraints, door release buzzer, nor shall a youth be allowed to use county radios.

1112 CAMP RADIOS AND PUBLIC ADDRESS (PA) SYSTEMS

Each camp has devised a means of communication among staff who may be assigned to various locations within the camp. Some camps use radios (or walkie-talkies); others may use PA systems; others may use only telephones; and some may use a combination. Regardless of means of communication used, staff are to be mindful of the purpose of the communication equipment, reserving use for relaying necessary information to other camp staff.

1113 MODIFIED PROGRAM

Proactive supervision allows camp staff to develop a sense of the camp's tone. Camp staff are able to discern tension among camp youth or perceive that the program is beginning to lack organization and structure. When this occurs, the likelihood of an unsafe situation or incident transpiring is high.

In such instances, the staff member running the activity shall notify the SDPO, who may institute a modified program. This consists of slowing down the day's schedule of programming, conducting all activities (including movements) in small groups, and possibly suspending scheduled programs.

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1114 INTEGRATION

At all times, camp staff must work to youth integration of all activities. Tensions have the potential to rise when youth become racially or otherwise segregated, whether intentional or not.

Camp Directors shall ensure that their camps maintain a gang matrix. Through use of this matrix, staff shall monitor bed assignments and supervision periods to ensure, to the degree possible, that youth from the same gang are not grouped together. The integration of activities applies to all periods, movements, and selection for special event assignments.

1115 GRADING/MERIT LADDER

In accordance with BMP, staff shall ensure that all youth are graded each day using the RTSB-approved grading system. Grades shall be totaled daily, creating the camp merit ladder. The merit ladder shall be posted in all living units.

1116 ADDITIONAL CONSIDERATIONS FOR SUPERVISION

Escape Prevention

Engaging in vigilant supervision and conducting frequent population counts both reduce the risk of AWOL and substantially reduce response time should one occur.

Staff assigned to conduct the daily perimeter check should regularly check for unlocked doors. Gates, ropes and ladders along the fence-lines should be properly stored. Staff should also check for property damage and inoperable lighting. See RTSB-1300 for further details.

Group Security

Each employee shall be responsible for preventing escapes. Population counts shall be conducted regularly as detailed in Section RTSB-1300. Staff shall position themselves in locations where they can see all youth. On the field, youth are to be kept in areas that are easily controlled and structured as to their boundaries. Youth are to remain seated if not directly participating in an activity.

Shift and Board Exchange

When entering, and leaving an assigned post or the facility, staff shall be alert for any potential safety hazards and immediately bring them to the AD's attention.

Security issues inside the camp perimeter. Possible issues include:

- Laundry room appearance (doors and chemicals)

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- Quarter-master room (doors and equipment)
- Dayroom (contraband and equipment)
- Casework room (doors, files, and office supplies)
- Items that appear out of place

Security issues outside the camp perimeter. Possible issues include:

- Out of place items
- Objects that could be used as weapons
- Unsecured doors and windows
- Broken items
- Contraband
- Suspicious persons or vehicles

Shower, Restroom, Dining Hall, Recreation, and Dormitory Supervision

Activities involving the entire camp population tend to be high-risk periods necessitating proactive supervision. Additionally, staff shall adhere to the following:

- Staff shall be properly positioned to ensure that all youth can be seen.
- Staff shall provide clear instructions before, during, and after all movements and activities.
- Staff shall authorize activities consistent with the availability of staff to maintain a safe and secure environment.
- Staff shall have supplies and materials needed for the particular activity readily available prior to beginning the activity.
- Staff shall maintain visual observation of the youth, not allowing for distraction from the task at hand.
- Staff shall control the group tone.
- Staff shall stop and redirect the group or the individual youth as needed.
- Staff shall communicate supply, repair, or other needs with each other and the SDPO.
- Staff shall not allow youth to loiter in or around the control center.

Additionally, youth may assemble and issue shower rolls only under the supervision of a designated staff member.

During movements and activities, staff must be observant of potential weapons in the area. These items shall be confiscated, documented, and immediately brought to the attention of the SDPO.

Food Preparation and Service

Staff shall have a list of youth assigned to kitchen patrol (KP) and/or messenger duties.

Designated staff shall actively supervise KPs during food preparation and service. Staff shall clearly structure youth for movement to meals. Staff shall clearly structure

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them regarding meal service and expectations.

Youth are not allowed to give away or trade food with other youth.

Staff shall document whether a youth exhibits unusual eating habits (e.g., not eating, eating very little, or eating too much). Staff shall take note if a youth has refused his/her meal twice in a row and submit an appropriate referral to inform Medical and Mental Health.

Youth shall be allowed to engage in low chatter during meal time once all youth have been served and seated. If low chatter becomes too loud or problematic, staff shall stop the low chatter, restructure the group, and attempt low chatter again. If problems continue, low chatter shall be terminated.

Staff shall ensure that all utensils have been collected and are accounted for.

Youth are not allowed to loiter.

Staff shall be positioned in the dining hall so that all youth can be seen.

KPs shall be supervised either by staff or the cook at all times.

1117 STAFF EXPECTATIONS

Staff members are expected to remain attentive while supervising camp youth. They shall not join youth in sports if assigned supervision responsibilities. Staff shall not use their personal cell phones and electronic devices while inside the camp area accessible to all youth.

1118 SWIMMING POOL USE POLICY (DIRECTIVE 1258)

- It is the policy of the Probation Department that all youths detained in juvenile hall or camps are kept safe while swimming in detention (i.e. juvenile hall or camp) facility swimming pools. In order to ensure safety of those youths in detention facility swimming pools, the Lifeguard Responsibilities shall include the following: **Check presence and readiness for use of lifesaving equipment prior to swimming activity:**
 1. Aluminum rescue pole (shall be at least 15 feet long)
 2. Life ring attached to line that is at least 30 feet long;
 3. Raised Lifeguard Chair
 4. Buoy Line/Floating Rope at the five (5) foot depth must separate the shallow end of the pool from the deeper end
 5. A Spineboard/backboard
 6. First Aid Equipment
 7. Pool log shall be checked to ensure pool is cleared for use; and
 8. Pool phone must be operational at all times.
- Youths *shall not* be allowed to swim if placed on a no-swimming activity by the Department of Health Services

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- Specifically instruct non-swimmers to remain in the shallow part of the pool that is three (3) feet deep. The lifeguard shall conduct a swimming test to determine the swimming ability of each youth. Only those youths who can swim the length of the pool shall be allowed in the deep end of the pool.
- The lifeguard and any other staff present shall ensure compliance with posted rules and regulations. At no time, shall a swimmer be allowed to:
 1. Run or jump around the pool;
 2. Engage in breath-holding contests;
 3. Dive from the deck;
 4. Spit in or around the pool
 5. Chew gum or eat around the pool; and
 6. Horseplay or wrestle in the pool or surrounding pool area.
- Complete the *Swimming Pool Use Form* indicating those youths who are participating in swimming. The form shall be completed and submitted to SDPO in camp at the end of the swimming pool session.
- The SDPO shall sign and date the form and submit the form to the Camp Director. The form shall be maintained by the camp in a folder marked *Swimming Pool Use Forms*.

LIFEGUARD EXPECTATIONS

- All staff performing lifeguard duties must be actively certified by the Department to do so. Employees who have not received department approved training or whose certifications have lapsed shall not serve in the capacity as a lifeguard for any reason.
- The lifeguard shall ensure that he/she adequately documents which youth passed and failed the swim test. If a youth does not take or refuses the swim test the lifeguard is responsible for ensuring that the youth is not allowed to walk around the pool area or enter the water.
- The lifeguard shall make every effort to ensure that the youth who are not capable swimmers are not allowed into the deep end of the pool, he/she shall employ the rope buoy to ensure separation of the youth.
- It is the lifeguard's primary responsibility to ensure a safe environment for all youth to swim. The most effective way to accomplish this is to constantly scan the pool areas for any unsafe conditions or youth who may need assistance. Effective scanning requires the lifeguard to actively observe swimmers' behaviors and look for signals that someone needs help either on the pool deck or in the water.
- Lifeguards should either be sitting on the lifeguard stand or standing on the pool deck.
- When sitting in the lifeguard stand, lifeguard should be sitting tall and erect. Bottoms are in the chair, feet are flat on the platform.
- When standing on the pool deck lifeguard should be centrally located to all youth in the pool. The lifeguard should stand at the pool's edge to eliminate anyone walking

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between them and the pool. This will ensure that the lifeguard's view is never obstructed and their path to a potential victim is not blocked.

1119 SAFETY CHECK POLICY (DIRECTIVE 1192)

This policy establishes the safety check policy for the Residential Treatment Services Bureau (RTSB), including the Dorothy Kirby Center (DKC) in accordance with the State of California, Title 15 – Juvenile Facilities Minimum Standards, Section 1328, “Safety Checks.”

THIS POLICY PERTAINS TO ALL STAFF ASSIGNED TO RTSB FACILITIES. HENCEFORTH, IN THIS POLICY, RTSB FACILITIES SHALL BE REFERRED TO AS A FACILITY OR FACILITIES.

POLICY

In compliance with this mandate to provide a safe and secure environment for the youths under its care, it shall be the policy of the Probation Department to ensure the safety and security of all of youths in all facilities. In support of this requirement, juvenile supervision staff shall conduct safety checks that consist of direct visual observation of all youths in facilities at minimum intervals that do not exceed fifteen (15) minutes between visual safety checks during time periods when Youths are asleep, in their rooms or in dormitories.

This department has revised its *Safety Check Sheets*, which shall be placed in use upon issuance of this policy, to meet the Title 15 – Juvenile Facilities Minimum Standards requirements. The *Safety Check Sheets* for use during the day shifts (6:00 a.m. to 2:00 p.m. and 2:00 p.m. to 10:00 p.m.) and the night shifts (10:00 p.m. to 6:00 a.m.) are formatted different. Staff shall fully comply with these instructions when documenting safety checks. Each facility Director shall ensure that shift-appropriate *Safety Check Sheets* are immediately placed in use within each designated facility and on each shift as appropriate.

PROCEDURE

A *Safety Check Sheet* (or multiple *Safety Check Sheets*) shall be posted at specific locations as designated by the facility Director within the living units, dormitories, cottages and special handling units and assessment units of the facility to ensure that all youths residing in the location can be appropriately observed by staff at required intervals.

At the Dorothy Kirby Center, these locations shall include, but may be not limited to the end of the hallways and corners around areas of podular living areas. In Residential Treatment Services Bureau, these locations shall include but not be limited to each separate wing of each dormitory area that is furthest from the control center.

In the Residential Treatment Services Bureau camps and Dorothy Kirby Center, Special Handling Units and Assessment Units, a *Safety Check Sheet* shall be posted at the end

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of each hallway and on the individual room doors of each youth assigned to the Special Handling Unit or Assessment Units. *Safety Check Sheets* placed on the room doors of individual youths shall have the youth's name, any special coding (including Enhanced Supervision and Specialized Supervision statuses) and the date and time the form was placed on the door annotated at the top of the *Safety Check Sheet*.

A *Safety Check Sheet* shall consist of direct visual observation of all assigned youths at intervals that do not exceed fifteen (15) minutes between observations. Direct visual observation refers to an assigned staff performing one uninterrupted "line-of-sight" visual observation of each youth every fifteen (15) minutes. Audiovisual monitoring is not intended to replace, nor is it acceptable in lieu of direct visual observation. Monitoring devices can be effective and useful to supplement personnel, direct visual supervision, but cannot be substituted for direct visual observation.

Staff must observe each youth to ensure that the youth is alive, not in duress, not experiencing any observable trauma, nor engaging in any activities that might endanger themselves, other youths and/or the safety and security of the facility. While observing the youth, staff shall ensure that the youth's head, neck and arms are visible, especially during sleeping hours. Juvenile supervision staff is expected to observe and respond appropriately to all emergent situations.

Safety checks shall occur at irregular time intervals and shall not exceed fifteen (15) minutes between safety checks so that youths cannot predict the time safety checks will occur. At least four (4) safety checks shall be made per hour. All safety checks shall be documented and recorded on the *Safety Check Sheet*. Notification by juvenile supervision staff on the *Safety Check Sheet* are to be handwritten in ink and shall contain the date, the initials of the staff member conducting the check, and the actual time the safety check was completed, and any significant observable conditions.

The actual time the safety check was completed shall always be entered on the *Safety Check Sheet*, such as 3:12 p.m. (the exact time). Noting a time span, such as 3:12 p.m. through 3:17 p.m., is not acceptable to indicate a safety check was performed.

Notations on the institutional *Safety Check Sheet* shall only be made by supervision staff to indicate that an actual safety check was completed. Any notation, in advance of real time, such as filling out times, signatures, or comments prior to completing the actual safety check is strictly prohibited. Any notation that represents a safety check was performed when, in fact, it was not made, or the failure to perform a required safety check, is violation of this policy. One roll of *Safety Check Sheets* shall be utilized to record the required information for a single safety check. Sequential safety checks shall not be quoted vertically on the *Safety Check Sheets*.

Notations for the comments field on the *Safety Check Sheet* shall be used to indicate unusual observed conditions. Additionally, staff is required to note the time(s) and indicate the comments section of the *Safety Check Sheet* when all youths are removed from the unit, rooms, cottage or the dormitory and/or returned for any reason, for example field recreation, religious services, special services, etc. Any room that is not

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occupied by a youth shall be closed and locked in order to avoid the room being used for unobserved and potentially inappropriate activities by the youths.

Safety checks must be conducted during sleeping hours as well as during the day. When all youths are outside of their assigned rooms or the dormitory, and are under constant direct supervision of staff during programming (in day rooms or outside for recreation, etc.), employment of head counts shall substitute for safety checks. Safety checks, however, must continue during group programming for those youths remaining in their rooms or dormitory due to illness or other reasons. When the entire group of youths is out of their rooms or dormitory, staff shall, at times the youths are exiting the rooms or dormitory, make a notation just below the last safety check indicating that the time the youths were out of their rooms or the dormitory, and the reasons for the absence from the rooms or dormitory. A safety check shall be made immediately upon all youths being returned to their rooms after the activity is concluded.

SUPERVISOR RESPONSIBILITY

Supervisors must regularly review and audit *Safety Check Sheets* to ensure compliance. Supervisors shall ensure a new shift-appropriate *Safety Check Sheet* is posted at the beginning of each day shift (6:00 a.m. to 10:00 p.m.) and the night shift (10:00 p.m. to 6:00 a.m.) and shall ensure that juvenile supervision staff does not record safety checks outside of what is able to be provided on the form. The supervisor shall ensure all institutional *Safety Check Sheets* completed/utilized during each shift each day are completed and in a file that is maintained by the facility.

At least once per eight (8) hour shift, as time and circumstance permit, a supervisor shall make an unannounced inspection of the institutional *Safety Check Sheet* in the building(s) under his/her supervision and with a red ink pen, legibly note their name and the actual time of the inspection on the line just below the last safety check notation made by the juvenile supervision staff. As circumstances require, supervisor staff may be required by the facility to conduct multiple unannounced inspections of the *Safety Check Sheets* to ensure appropriate and timely safety checks are being conducted.

INSTRUCTIONS FOR COMPLETING SAFETY CHECK SHEETS

A *Safety Check Sheet* (or multiple *Safety Check Sheets*) shall be posted at the specific locations as designated by the facility Director within the living area, dormitories, cottages and HOPE Centers of the facility to ensure that all youths residing in these locations are visibly observed by staff at required intervals and that the observation is recorded.

Safety checks shall occur at irregular time intervals that shall not exceed fifteen (15) minutes between safety checks so that youths cannot predict the times safety checks will occur. At least four (4) safety checks shall be made per hour. All safety checks shall be documented and recorded on the *Safety Check Sheet*. All notations by supervision staff as well as the staff on the *Safety Check Sheets* are to be handwritten in ink and shall contain the date, the initials of the staff member that is conducting the

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check (write the full name in the case of a supervisor) and the actual time the safety check was completed.

The actual time the safety check was completed shall always be entered on the *Safety Check Sheet*, such as 3:12 p.m. (at exact time). Noting a spanned time such as 3:12 p.m. to 3:17 p.m. is not acceptable to indicate that a safety check was performed.

The department has revised the *Safety Check Sheets* that are to be placed in use effective with the distribution of Directive 1192. Copies of this revised *Safety Check Sheet* are attached to those instructions.

- Two *Safety Check Sheets* have been designed for use in Residential Treatment Services Bureau camps facilities.
- Two *Safety Check Sheets* have been designed for use at the Dorothy Kirby Center of the Residential Treatment Services Bureau.

Please note for all RTSB and Dorothy Kirby Center facilities, one *Safety Check Sheet* is designed for use during day shifts (6:00 a.m. to 10:00 p.m.) and one *Safety Check Sheet* is designed for during night shift hours (10:00 p.m. to 6:00 a.m.)

SECTION A: In these sections, the staff shall, in ink, note identifying information related to the shift, facility, day of week, date, dormitory wing, unit, dormitory, cottage or HOPE Center that the *Safety Check Sheet* is being prepared for. If multiple *Safety Check Sheets* are being prepared for a unit or dormitory, then note the specific section/area of the unit or dormitory where the safety check will be posted in the facility or any other area. If the *Safety Check Sheet* is posted on a specific youth's room or door in HOPE Center, then note the youth's name and room number in the appropriate area on this form.

SECTION B: This section contains only two *Safety Check Sheets* utilized on the 10:00 p.m. to 6:00 a.m. shift. In Section (B), outgoing 2:00-10:00 shift shall note on the full names of youth(s) of the 2:00-10:00 shift that relinquish control of the unit/dormitory/cottage/HOPE Center to the 10:00-6:00 shift staff at 10:00 p.m.

SECTION C: Staff assuming supervision duties during a specific shift that will require them to conduct safety checks shall note their full names (first name and last name) in this section. The noting of just the staff's last name or first initial (or employee number) and last name is not acceptable. On the RTSB camps day shift *Safety Check Sheet*, there are twelve (12) separate areas in Section (C) available for camp staff that are assigned to perform supervision duties in a dormitory at any time from 10:00 a.m. to 10:00 p.m. to note their full names. On this camp-specific day shift form, there are no specific 6:00-2:00 shift or 2:00-10:00 shift designees such as staff can be assigned to the dormitory at any time during the sixteen (16) hour period.

SECTION D: Staff that is assigned to the unit, dormitory, cottage or the HOPE Center for the shift that will be annotating the *Safety Check Sheet* during the shift shall

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place their initials in Section (D) immediately to the right of their named noted in Section (C). The staff shall input their initials exactly as they will be initiating *Safety Check Sheet* when annotating completed safety checks throughout the shift. If multiple staff will be annotating the *Safety Check Sheet*, then all of the staff shall note their names in Section (C) and shall then place their initials in Section (D).

SECTION E: This section pertains only to *Safety Check Sheets* utilized on the 10:00 p.m. to 6:00 a.m. shift in Section (E), the oncoming 6:00-2:00 shift shall note the full name(s) of the 6:00-2:00 shift staff that assumed control of the unit, dormitory, cottage or HOPE Center at 6:00 a.m.

SECTION F: This section pertains only to safety checks utilized on 10:00 p.m. to 6:00 a.m. shifts. The oncoming 10:00-6:00 shift staff shall note, by circling the correct response on the general conditions of the unit, dormitory, cottage or HOPE Center that they are assuming responsibility for after making their initial safety check. If the unit, dormitory, cottage or HOPE Center is in an unsafe state, the oncoming staff shall not accept responsibility of it and shall contact the Duty Supervisor and advise the Duty Supervisor of the situation. The 10:00-6:00 staff shall only accept supervision responsibility of a unit, dormitory, cottage or HOPE Center after it is safe and secure.

SECTION G: Staff shall note the population of the unit, dormitory, cottage or HOPE Center at the designated times during the shift in this section.

SECTION H: This section pertains only to *Safety Check Sheets* utilized on the 10:00 p.m. to 6:00 a.m. shift. This section of the 10:00-6:00 shift *Safety Check Sheet* requires the attention of staff on all three shifts during shift change activities. The principal 2:00-10:00 shift staff shall conduct the final security check at 10:00 p.m. and relinquish control of the unit to the 10:00-6:00 shift at 10:00, shall be required to sign (not print) their name utilizing their formal signature. The 10:00-6:00 shift staff that conducts the initial security check for the 10:00-6:00 shift at 10:00 p.m. and assumes control of the unit from the 2:00-10:00 shift staff shall be required to sign their name utilizing their formal signature. The following morning, the 10:00-6:00 shift that conducts the initial security check for the 10:00-6:00 shift at 6:00 a.m. and assumes control of the dormitory, cottage or HOPE Center from the 10:00-6:00 shift shall be required to sign their full name utilizing their formal signature.

SECTION J: This section pertains only to safety checks utilized on the 10:00 p.m. to 6:00 a.m. shift. The 10:00 p.m. to 6:00 a.m. shift shall note the presence of, quality of, the working condition of safety equipment in the dormitory/unit/cottage/HOPE Center. If the safety equipment is missing or inoperable, the Duty Supervisor should be contacted and appropriate comments noted in the comments section.

SECTION K: This section pertains only to safety checks utilized on the 10:00 p.m. to 6:00 a.m. shift. The shift that provides relief to staff in the unit, dormitory, cottage or HOPE Center shall note their full name(s), initials and their time(s) of the break(s). Staff providing relief shall determine the number line position where the staff wrote their names and initialed in Section (C) and shall use appropriately numbered line in Section

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(K) to note the breaks provided to that particular staff. For instance, staff providing relief to the staff noted on line 3 of Section (C) shall annotate the breaks for their particular staff on line 3 of Section (K).

SECTION L: Staff shall conduct safety checks that consist of direct visual observation of all Youths in the unit/dormitory/cottage/HOPE Center at minimal intervals that do not exceed fifteen (15) minutes between visual safety checks during all of the shifts. The exact times of all safety checks conducted shall be clearly and legibly noted, followed by the staff's initials. Notations on the institutional *Safety Check Sheets* by supervision staff shall only be made to indicate that the actual safety check was completed. Any notation in advance of real time, such as filling out times, signatures or comments prior to completing the actual safety check, is strictly prohibited. Supervisory staff conducting inspections of the posted institutional *Safety Check Sheet* shall be legibly noted with red ink pen, their full name and actual time of the inspection on the line just below the last safety check notation made by the juvenile supervision staff. For the *Safety Check Sheets* that are utilized during daytime hours (6:00 a.m. to 10:00 p.m.), the "Comments" column shall be used to include information about activities being conducted at that time, the status of the unit and any unusual conditions or occurrences. Simply writing "okay" is not acceptable.

SECTION M: This section pertains only to safety checks utilized on the 10:00 p.m. to 6:00 a.m. shift. The 10:00-6:00 shift staff shall note the conditions of the unit, dormitory, cottage or HOPE Center, and shall note any unusual conditions or recurrences. Staff shall also note the movements of any Youths into and out of the unit during the shift.

SECTION N: After the shift has ended and the *Safety Check Sheet* has been turned in to the Duty Supervisor, a supervisor at the facility shall be assigned to conduct a review of the *Safety Check Sheets* to assess for compliance with policy and procedure by staff. Upon completing the assessment, the supervisor shall assign and date the *Safety Check Sheet*, for youth inappropriately documented *Safety Check Sheets* to the facility director for review and file the remaining *Safety Check Sheets* in accordance with the facility requirements.

SECTION O: This section pertains only to *Safety Check Sheets* utilized on the 10:00 p.m. to 6:00 a.m. shift at the Dorothy Kirby Center. In this section, all requests to use restrooms by youths in the cottage during the 10:00-6:00 shift shall be documented and notated with the youth's name, room number, the time the youth was allowed to use the restroom.

SECTION P: This section pertains only to *Safety Check Sheets* utilized on the 10:00 p.m. to 6:00 a.m. shift at the Dorothy Kirby Center. At the end of the 10:00-6:00 shift, the DKC staff responsible for the cottage during the 10:00-6:00 shift shall sign the *Safety Check Sheet* and turn it in to the Duty Supervisor.

SECTION Q: This section pertains only to safety checks utilized in the Residential Treatment Services Bureau camps during daytime hours between 6:00 a.m. to 10:00

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p.m. The section, the full name (first name and last name) of the dorm coordinator for the facility for the 6:00 a.m. to 2:00 p.m. shift and the 2:00 p.m. to 10:00 p.m. shift, respectively, shall be noted.

The Department has revised the *Safety Check Sheets* that are to be placed in use effective the distribution of Directive 1192 (Safety Check Policy). Blank copies of the *Safety Check Sheets* are provided in this section.

For RTSB and DKC facility, one (1) facility-specific *Safety Check Sheet* is designed for use during the day shift hours (6:00 AM to 10:00 PM) and one (1) *Safety Check Sheet* is designed for use during the night shift (10:00 PM to 6:00 AM).

- Two (2) Safety Check Sheets have been designed for use in RTSB camp facilities;
- Two (2) safety Check Sheets have been designed for use at DKC of RTSB.

Staff, as instructed by the facility Director, shall ensure that only the Safety Check Sheet designed for use at that particular facility are placed in use on the appropriate shift.

1120 REDUCING YOUTH-ON-YOUTH VIOLENCE

Cross reference with (DIRECTIVE 1193)

INTRODUCTION

In compliance with the BSCC mandate to provide a safe and secure environment for the youths under our care, it is the policy of the Probation Department to maintain uniform safety and security measures, provide appropriate behavior management and supervision strategies to keep youths safe and reduce the opportunity for youths to engage in incidents of *Youth-on-Youth Violence* (YOYV) or assaults upon staff or civilians.

EXPECTATION

It is the expectation of the Probation Department that when resolving YOYV situations, only the least restrictive measure(s) necessary to provide for the safety of the youths and/or others to resolve the crisis situation and restore order within the custodial setting shall be utilized by staff. These measures may include intervention in a youth's negative behavior utilizing non-threatening, "non-verbal," "para-verbal," or "verbal" intervention techniques, which serve to reinforce the expected and desired behavior; thus affording the youth an opportunity to "self-correct" and adopt behavior that is within acceptable limits whenever possible. The utilization of Safe Crisis Management Physical or Chemical Intervention Techniques to manage a crisis situation shall be employed only as a last resort.

POLICY

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Each facility shall implement violence reduction strategies, which may include but are not limited to the following:

- Maintaining an effective behavior management program at the facility;
- Closely monitoring incidents involving YOYV and assaults, and making appropriate adjustments to camp programming and/or staffing to address increased levels of violence within a camp setting;
- Filing 777 WIC Notice of Hearings, 602 WIC Petitions; and/or 1111 WIC (*Notice of Potential Violation to the Juvenile Court*);
- Referring Youths who engage in multiple incidents of YOYV to Individualized Behavior Management Planning (IBMP) or Multidisciplinary Teams (MDT) for specialized classification and programming assessment;
- Referring Youths engaging in YOYV to Mental Health for assessment; and
- Conducting a post-incident interactive YOYV Avoidance Contract process with the involved youth(s).

PROCEDURE

Youths in the Department's care are often troubled and their behavior may sometimes be aggressive and/or harmful to themselves or others. These behaviors may result in crisis situations of varying degrees. Staff should be continuously alert to and proactive in situations in which the potential for conflict exists. Proper positioning of staff and alternative group supervision assists in anticipating potentially volatile situations resulting from escalating behavior, and aids in early detection, intervention and conflict resolution. If done properly, this approach to group supervision by staff can help avoid incidents of YOYV or assaults and/or having to resort to physical or chemical intervention to maintain control.

Staff shall always be prepared for the emergence of negative behavior(s). when such behavior(s) occur, an intervention assessment shall be initiated, consisting of the following:

- Assess the behavior being presented;
- Assess the youth(s) involved with observed behavior(s);
- Assess the immediate environment in which the behavior is occurring;
- Assess staffs' ability to handle the emerging behavior(s);
- Assess the issues (if any) that may result in the need for physical and/or chemical intervention;
- Develop and implement an intervention plan in your mind;
- Identify resources and/or interventions that may be needed to resolve the issues(s) as time and circumstance permit.

INVOLVED PARTIES

In accordance with Directive 1027 (Preliminary and Follow Up Incident Notification Procedures), Directive 1194 (Safe Crisis Management), and Directive 1427 (Physical Intervention Policy for Juvenile Facilities and the Transportation Section), all staff members who are involved in, witness to and/or on-duty in the camp, cottage or other location at the

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time of the YOYV or assault incident occurs during the shift shall assist in the de-escalation of the incident. A written report of all incidents, which result in physical harm, use of force, or serious threat of physical harm shall be maintained. Staff involved in, or that witness the incident shall complete a Special Incident Report (SIR) or Physical Intervention Report (PIR) (if SCM Physical or Chemical Intervention was utilized), immediately following the incident, but no later than the end of the 8-hour shift (6:00AM to 2:00PM; 2:00PM to 10:00PM; or 10:00PM to 6:00AM) in which the incident occurred, or as otherwise directed by the Duty Supervisor if additional time is necessary and authorized by the Facility Director or designee. Staff shall be sensitive to the fact that there exists a degree of urgency in completing the SIR/PIR as soon as possible. In RTSB, including DKC, immediately after any incident of YOYV is contained, the Duty Supervisor shall be contacted and advised of the incident's occurrence.

Note: Refer to RTSB Manual Sections 1919 (Deaths at Camp Facilities) and 2121 (Preliminary and Follow Up Incident Notification (PIN/FPIN) Procedures) for written reports that result in a death of an employee, youth or other person(s).

Any youth involved in an incident of YOYV or assault, shall be referred to medical staff for assessment within 30-minutes following containment of the occurrence. It is expected that medical staff shall assess the youth(s) immediately upon presentation. Medical staff shall document the findings of their examination on the SIR or PIR as appropriate, citing their observations and any treatment proffered, along with the date and time of the youth(s) examination.

In situations where there is no nurse on duty, upon containment of the incident, the youth shall be referred to the Duty Supervisor for assessment of any injuries. The Duty Supervisor shall ascertain from the youth whether he or she has sustained any injuries. If the youth does not appear to have sustained a serious injury, the Duty Supervisor shall log the incident into the Duty Supervisor's Log Book, and ensure that the youth is referred to the nurse as soon as practicable, upon the nurse's return to the camp facility. Upon the youth being presented, Medical staff shall document the findings of their examination on the SIR or PIR, citing their observations and any treatment proffered, along with the date and time of the youth's examination.

POST-INCIDENT SUPERVISORY ASSESSMENT PROTOCOL

Supervisors are required to conduct and formally document post-incident assessments of all YOYV and assault incidents and shall:

- Assess the safety of the youths involved in the incident;
- Ensure that the youth(s) were assessed by medical staff;
- Determine whether or not SCM Physical or Chemical Intervention was utilized to bring the incident to conclusion in situations where only SIRs have been written;
- Conduct an interactive process with the youth(s) involved in the incident and have the youth(s) participate in a YOYV Avoidance Contract, wherein they

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explain to the supervisor how the incident occurred and was brought to conclusion, and also agree to participate in efforts to avoid future YOYV and/or assaultive behaviors, or be sanctioned (Attachment A).

The RTSB Duty Supervisor, within two (2) hours of receiving notification that an incident of YOYV or an assault has occurred, that does not appear to have resulted in a use of force, shall:

1. Locate the youths involved in the incident;
2. Ensure that the youths were assessed by medical staff (or the Duty Supervisor, if no nurse is on duty);
3. Determine whether or not SCM Physical or Chemical Intervention was utilized to bring the incident to conclusion;
4. Conduct an interactive YOYV Avoidance Contract process with the youth(s);
5. During the interview process with the Youths, if it is determined that SCM Physical or Chemical Intervention was utilized but not reported, conduct and document a Child Safety Assessment (CSA), obtain complete questionnaires from each youth involved in the incident, as outlined in the Supervisory SCM Review Process, and instruct staff to complete Physical Intervention Reports.

1121 MOVEMENT OF YOUTHS FROM THEIR ASSIGNED ROOMS AND STAFF POSITIONING IN DOROTHY KIRBY CENTER AND CAMPS, HOPE CENTER, AND CORRIDORS AND HALLWAYS (DIRECTIVE 1222)

In order that the Residential Treatment Services Bureau (RTSB) may provide a safe and secure environment for officers and the youths in our care, the following protocols and procedures shall be followed when moving youths to and from their individually assigned rooms in HOPE Centers in Camps and in the Dorothy Kirby Center (DKC).

MOVING YOUTHS FROM THE DAY ROOM TO THEIR ASSIGNED ROOMS

Officers shall ensure the following occurs prior to instructing a youth to report to his/her assigned room:

1. Prior to any movement, the Officer assigned to handle the board shall instruct the youths on exactly what shall occur during the upcoming movement. During this instructional session, any questions a youth may have shall be answered.
2. During the instructional session, which may occur in the day room, office, hallway, recreational area or on the recreational field, the youths shall remain seated or standing together and in such a manner that they are able to hear the instructions of the Officer. Once the youths have been instructed on how the movement to the rooms is expected to occur, the process of sending the youths to their assigned rooms may begin.
3. Each youth shall be instructed to stand once his/her name and room number are called (the youth shall not proceed to his/her assigned room until instructed to do so). Youths shall be sent from the chairs or dining room tables to their rooms "on quiet," one room at a time.
4. The Officer assigned to back up the Board Officer shall position him/herself down the hallway/corridor nearest the unlocked room of the youth that shall be sent

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down first. This Officer shall remain in communication with the Board Officer and the other officers during the movement activity. The Backup Officer shall notify the Board Officer once the youth is secured before another youth is sent down the hallway/corridor by the Board Officer. Safety dictates that the officer in the hallway shall not enter a room occupied by a youth without Backup Officer present in the hallway. An officer shall remain posted within proximity to the emergency phone/alarm at all times.

5. During the movement of youths from their location to the assigned room, the balance of the group shall remain on quiet and seated in the day room or standing in line as instructed. Youths shall be sent to their assigned room by name and room number in consecutive order. The Board Officer shall send one youth at a time to the assigned room as coordinated with the Backup Officer. There shall be a safe interval between each youth sent down the hallway. The youth assigned to the furthest room shall be instructed to proceed as instructed to his/her first room first. This youth shall be followed by the youth with the room next furthest and continue until the youths have been sent to their assigned rooms. The movement shall end with the youth in the nearest room going into his/her assigned room and the door locked by the officer stationed in the hallway/corridor. The bulk bunk rooms (juvenile hall only) shall be handled in the same manner with only one youth at a time going into the double bunk room.
6. Upon receiving a youth in the hallway, the Officer assigned to cover the hallway/corridor shall ensure each youth proceeds down the hallway/corridor as per the instructions given and enters into the assigned room. The Officer in the hallway shall also ensure that the door is closed as each youth enters his/her room and that the door is locked.
7. During this movement, the Board Officer shall be in a position which allows for the group to be supervised, allows for easy communication and line of sight with Backup Officer and allows for proximity to the emergency phone/alarm (juvenile hall only). The Backup Officer shall stand at the point of the hallway where the youth is being placed in the room. The third officer, if available, shall be positioned so that this Officer can observe the youth coming out of the day room and walking down to the Backup Officer and his/her assigned room. If an additional Officer is available, that additional Officer shall be positioned in the hallway/corridor.
8. In podular-designed buildings (DKC), where the bedrooms are located along the perimeter walls of the day room, the Board Officer shall stand in front of the group. The Backup Officer shall be positioned nearest the room of the youth currently being sent to his/her room. The third Officer, if available, shall be positioned behind the group where the Officer may watch the youth get up from his/her seat and walk to the room and the Backup Officer.

This process shall be revised when youths are being brought from their rooms or out of their rooms. The youths nearest the front of the hallway or in rooms with the lowest number shall be brought up from their rooms first. The Backup Officer shall open one room at a time, securing room once the youth is out and allowing a safe period of time before the next door is opened. The Board Officer shall be positioned adjacent to the tables or chairs whenever the group is being directed and stand at the front of the group.

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If a third Officer is available, the Officer shall be positioned to the rear of the group so that the third Officer may watch each youth as he/she exits the assigned room and walks to youth the main group in the day room.

POSITIONING OF OFFICERS

Supervising Deputy Probation Officer (SDPO):

During any movement or activity, the SDPO shall be responsible for oversight and strategic placement of all officers during activity or movement. In adjoined units, the movement of large groups of youths to and from assigned rooms will be staggered so that the movement of youths is occurring only one side at a time. During the movement of large groups of youths to and from the assigned rooms, the SDPO shall be positioned outside of the control center and in the day room of the side being moved.

Board Officer:

The Camp Officer assigned to the unit board is responsible for knowing, at all times the whereabouts of every youth assigned to the unit. In an effort to effectively accomplish this, the Board Officer shall always be with the main group, maintain an accurate pop-board, and remain positioned in front of the group at all times. The Board Officer shall make every effort to always maintain a clear line of sight between him/herself and the Backup Officer. During the movement of youths to and from the assigned rooms, the Board Officer shall be positioned in the day room or wherever the main group of youths is located.

Backup Officer:

The Backup Officer shall make every effort to maintain a clear line of sight between him/herself and the Board Officer and support compliance with all instructions given to the group. During the movement of youths to and from the assigned rooms in linear-designed buildings, the Backup Officer shall position him/herself in the hallway/corridor nearest the door to be unlocked and opened. In all instances, only one door shall be unlocked at a time. During the movement of youths to and from the assigned rooms in popular-designed buildings (DKC), where the rooms are along the perimeter of the hallway, the Backup Officer shall be positioned nearest the room to be unlocked.

Additional Officers:

When there are additional Officers assigned in a building other than Board Officer and Backup Officer, the SDPO has the discretion to assign the Officer to assist in supervision of the movement or assign to other assignments. Generally, during the movement of youths to and from their assigned rooms, additional officers should be positioned as follows:

When there is one (1) additional Officer:

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In the modular-designed buildings (DKC), the third Officer shall be positioned in the day room, at the back of the main group. In the linear-designed buildings, the third officer shall be positioned in the T-area just outside of the day room so that the Officer may provide a visual link to the line of site of the Board Officer and the Backup Officers.

When there are two (2) additional Officers:

In the modular-designed buildings (DKC), the fourth officer shall be positioned alongside the main group in the clear view of another officer. In linear-designed buildings, the fourth officer shall be positioned in the hallway and provide backup to the officer unlocking and locking doors.

1122 CROSS GENDER MOVEMENT OF YOUTH WITHIN JUVENILE FACILITIES (DIRECTIVE 1434)

The purpose of this directive is to address Los Angeles County Probation Department's (Probation) policy on the cross-gender movement of youth within Detention Services Bureau (DSB) and Residential Treatment Services Bureau (RTSB) juvenile facilities. This policy is intended to memorialize departmental practices and enhance youth and officer safety as it applies to current policies regarding cross-gender supervision and is in alignment with the local, state, and/or federal legislation, such as the Prison Rape Elimination Act (PREA) (2003).

It shall be the policy of Probation that the Officer of the Day (OD) in juvenile halls or the Supervising Deputy Probation Officer (SDPO) or designee in camps shall oversee the movement of youth throughout the facility. The juvenile facilities shall ensure that every effort is made during the movement of youth to be completed by an officer of the same sex as the youth. In the event that officers of the same sex as the youth are not available, an officer of the opposite gender may be assigned with prior approval from the OD/SDPO or designee.

Note: *This does not apply for youth in camp facilities moving from one location to another under the visual supervision of personnel from both sending and receiving destinations. Only applies when the physical presence of cross-gender supervision personnel are walking with youth from one location to another.*

All cross-gender movements shall be approved by the OD/SDPO or designee. OD/SDPO or designee shall ensure the safe and timely movement of youth within the facility. The OD/SDPO or designee shall be notified via telephone or radio of the need for a cross-gender movement prior to escorting youth to locations within the facility by indicating the following:

- Reason for the movement
- Starting and ending point of the movement
- Gender of the youth and officer available for the movement

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Note: *Transgender youth shall be afforded the opportunity to be escorted by an officer of the gender in which they feel comfortable. The OD/SDPO or designee shall indicate the gender of the officer the transgender youth requested in the comments section on the Cross-Gender Intra-Facility Movement form (Prob. 1688) (Attachment A).*

Officers escorting youth shall maintain contact with the OD/SDPO or designee and provide notification upon completion of movement. These notifications shall begin and end at each location and/or upon the exchange of youth from one officer to another. All movements shall, be documented on the *Cross-Gender Intra-Facility Movement* form (Prob. 1688). At the end of each shift, OD/SDPO or designee shall sign the forms and include in the *OD Report* for juvenile halls or *Daily SDPO Bureau Report* for camps.

Officers shall immediately notify the OD/SDPO or designee of any incidents that occurred during the movement and shall document any incident pursuant to current departmental policies regarding Special Incident or Physical Incident Report.

Facility:

Date:

[illegible]

Date _____

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1123 JUVENILE COLLECTION OF DNA SAMPLES

INTRODUCTION

Every youth indicated of a felony or qualifying misdemeanors (sex and arson, or attempted to commit such an offense) is required to submit a DNA sample and palm print impression for the DNA and forensic identification database and data bank presented to penal code (PC) Section 296, et seq. Youths are required by the statute to provide, specimens, samples and impressions within ten calendar days of the court order or notification by the probation officer. The department is responsible for collecting the samples within five (5) calendar days of the court order for notifying the court of the youth's compliance or failure to comply.

Note - The juvenile court routinely issues orders for compliance and may order the collection of a DNA sample at any time, as long as the youth is on probation. However, submission of the DNA sample and palm print are mandatory even when the courts do not include this requirement in their court orders.

The Juvenile Hall (at two (2) locations) will be responsible for collection of DNA samples for detained and non-detained youths. Transportation shall be arranged so that the youth's DNA may be collected at Juvenile Hall.

(Meets standards set forth in Title 15, Section 1363)

LOS ANGELES COUNTY PROBATION DEPARTMENT

Subject: RESIDENTIAL TREATMENT SERVICES BUREAU MANUAL ENHANCED SUPERVISION AND SUICIDE PREVENTION	Section Number: RTSB-1200
	Effective Date: July 21, 2020
	Approved By: Jennifer Kaufman, Bureau Chief

1201 SUICIDE PREVENTION PLAN

In collaboration with Juvenile Court Health Services (JCHS) and the Department of Mental Health (DMH), the Probation Department developed a policy clearly delineating the Department's suicide prevention plan. Staff shall consider the needs of youth experiencing past or current trauma. All responses towards youth shall be respectful and in the least invasive manner consistent with the level of suicide risk. The plan can be found in Directive 1186 and 1188; and, encompasses the following:

- Policy
- Definition and Explanation of Terms
- Procedure
- Level 1 Regular Supervision Requirements
- Level 2 Enhanced Supervision Requirements
- Level 3 Enhanced Supervision Requirements
- Level 4 Enhanced Supervision Requirements
- Specialized Supervision Requirements
- Continuity of Care for At-Risk Youth
- Duties of Youth Supervision Staff
- Training
- Understanding the Motivation for Suicide or Self-Harm
- Identification and Referral of at Risk-Youth
- Interagency Communication Regarding Self-Harming Youth
- Intervention to Prevent Self-Harming or Suicidal Behavior
- Reporting
- Investigating Serious Suicide Attempts and/or Suicides
- Mortality/Morbidity Review Process

(Meets standards set forth in Title 15, Section 1329)

1202 ENHANCED AND SPECIALIZED SUPERVISION REQUIREMENTS FOR YOUTHS IN JUVENILE FACILITIES (DIRECTIVE 1188)

This policy revises the Probation Department's Enhanced Supervision Policy and introduces a Specialized Supervision Policy for all juvenile detention facilities and the transportation sections in accordance with Title 15 of the State of California Bureau of State and Community Corrections. A juvenile detention facility, for the purpose of this

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policy, shall consist of the Detention Services Bureau, juvenile halls, the Residential Treatment Services Bureau camp and Dorothy Kirby Center facilities. This policy pertains to all probation staff assigned to juvenile detention and treatment facilities and the transportation sections within these Bureaus.

This policy supersedes revised policy Directive 1132 (Enhanced Supervision Requirements for Detained Youths), issued on May 22, 2007, and outlines the circumstances during which Enhanced Supervision and *Specialized Supervision Plans* (SSP) shall be utilized to maintain the safety of Youths deemed to be at risk of self-harm, or that require specialized housing and/or supervision.

POLICY

In compliance with its mandate to provide a safe and secure environment for youths under its care, it shall be the policy of all juvenile detention facilities to maintain uniform preventive measures and enhanced supervision protocols to proactively address self-injurious and/or suicidal behaviors and to keep at-risk youths safe. Staff must be aware of various indicators of these behaviors that result in the employment of appropriate Enhanced Supervision and Specialized Supervision precautions for at-risk youths, as well as the importance of making timely referrals to Mental Health for initial and ongoing assessments, classifications and treatments.

Juvenile detention and treatment facilities shall ensure that an appropriate level of Enhanced Supervision or Specialized Supervision is afforded to youths who are experiencing emotional distress and/or attempt to harm themselves while detained, including while the youth is pending transfer to another location, or while being transported to another location. The varying levels of Enhanced and Specialized Supervision Requirements outlined below are intended to ensure consistent and uniform interpretation of supervision requirements by Probation, the Department of Mental Health (DMH), Juvenile Court Health Services (JCHS) and the Los Angeles County Office of Education (LACOE).

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 deviation of programs, services or activities for youth at risk of suicide shall be documented and approved by the facility manager.

II. DEFINITION AND EXPLANATION OF TERMS

To assist in better understanding the important components of this policy, the following terms are defined below. Staff shall be familiar with them and utilize them as an aid in understanding this policy.

Alert Log (Formerly referred to as Self-Harm Log): Youths who are potentially or actively at risk of self-harm or suicide (on L2, L3 and L4 status) or that require other Specialized Supervision precautions shall be noted on each facility's Alert Log

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(Attachment A). A new Alert Log shall be created each day in each facility and provided to all staff and agencies coming into contact with the youth at the facility.

Appurtenance: An appurtenance device or piece of equipment that extends out from the wall or other fixed objects to which objects or other items may be attached. Youths that are on constant considered to be at risk of self-harm should only be assigned to rooms that are free of appurtenances to which the youth could potentially attach bedding, clothing or a lanyard type object (shoelace, cords, etc.) in order to harm themselves.

Supervising Deputy Probation Officer: The Officer of the Day (OD) in juvenile hall, Supervising Transportation Deputy (STD) in the Transportation Section and the Acting Director (AD) in camp and/or the Residential Supervisor (RS) at DKC, shall be jointly referenced in this document as the “Duty Supervisors” where applicable. The Duty Supervisor is responsible for the safety and security of the facility or operations. The Duty Supervisor shall be responsible for assisting assigned staff to all units and specialized supervision post within the facility.

Emergency Equipment: Each unit in the facility and each camp shall have basic emergency equipment, which includes a first aid kit, a rescue breathing device, a biohazard kit, handcuffs, and a working flashlight and an emergency cut-down tool.

Level I – Regular Supervision (L1): This level of supervision is the least intensive level of Enhanced Supervision and is afforded to all youths in the Probation Department’s care, who are not at risk of suicide or self-injury. This level of supervision consists of staggered safety checks at intervals not to exceed fifteen (15) minutes between observation (at least four per hour) of all youths housed in any dormitory, Z on unit/dormitory safety check sheet with the actual time of observation documented.

Level II – Enhanced Supervision (L2): Level 2 Supervision is an increased level of supervision for youths who are not actively suicidal, but may experience persistent suicidal ideation and/or have a recent prior history of serious self-injurious behavior or a prior history of serious suicide attempt and appear to be at risk currently. Alternatively, this youth may present a constellation of risk factors that warrant an

increased level of supervision. The placement of any youth on this level of supervision requires that Probation Detention System (PDS) and Probation Caseload Management System (PCMS) to be updated with both a Level 2 and a “Suicide” (“S”) code.

Level III – Enhanced Supervision (L3): Level 3 Supervision is reserved for youths in juvenile detention facilities that are at high risk of suicide, either by threatening suicide with a clearly articulate plan for achieving suicide and the mean to carry out the plan and has recently engaged in the act of attempted suicide or serious self-harming behavior and whose current medical or mental health state require that they may be separated from their regular living unit for a specified period. The placement

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of any youth on this level or supervision requires that PCMS be updated with both a Level 3 and a "Suicide" ("S") code.

Level IV – Enhanced Supervision (L4): Indicates that a youth has been determined to be either actively suicidal or has engaged in serious self-injurious behavior and has been transferred from a facility to a higher level of care (psychiatric emergency camp facility) for psychiatric assessment. The placement of any youth on the level requires that PCMS be updated with both a Level 4 and a "Suicide" ("S") code and that the youth be supervised in accordance with Level 3 supervision requirements.

Mental Health Recording Form: The Department of Mental Health (DMH) form, commonly referred to a mental health green sheet, is utilized to advise the detention facility of DMH's post assessment findings and recommended level of supervision, housing and activities for an at-risk youth.

Specialized Supervision: This type of supervision is reserved for a subgroup of youths in the facility whose past behaviors and actions strongly suggest that they may act impulsively to engage in suicidal and/or self-harming behavior, or that require individualized Special Supervision Plan (SSP) to provide for ongoing safety and security of the youth while detained for a variety of reasons. Upon identification, the Facility Director (juvenile hall Senior Director, CMYC Senior Director, or stand-alone camp Director) shall designate these youths as *Specialized Supervision* status and shall ensure that a SSP is created and implemented on these youths' behalf. The SSP shall note the specific type of supervision to be afforded to the youth during waking and sleeping hours, respectively, and any other specialized supervision instructions for the youths, including movement into and out of various areas within the facility.

Shift Leader: The Senior Detention Services Officer (Sr.DSO) at juvenile hall, the Senior Detention Services Officer in transportation and the Deputy Probation Officer in camp or Dorothy Kirby Center shall be jointly referenced in this document as the "Shift Leader" where applicable. The term Shift Leader denotes the individual in the area, unit, location, facility or operation that has the lead staff responsibility for that area.

Unobstructed Line of Sight View: An unobstructed line-of-sight view is one that allows the staff to visually observe an at-risk youth in an environment that is free from visual impediments or visual obstructions. Specifically, the staff member assigned to provide

supervision to the at-risk youth must be positioned in such a manner as to clearly observe the youth and be able to easily determine if the youth is engaged in self-harming behavior(s) so that appropriate interventions can occur. When the youth is engaged in an interview with the Mental Health Clinician, physician or attorney, confidentiality requirements may impact these visualization requirements to some degree. In these circumstances, it is expected that staff will be positioned themselves in such a manner as to provide privacy while still observing the youth's activities from a position that provides the most appropriate line-of-sight supervision of the youth.

III. PROCEDURE

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Youths who are potentially actively or at risk of self-harm or suicide, on L2, L3 or L4 statuses that require other Specialized Supervision precaution shall be noted on each facility's Alert Log (Attachment A). The Alert Log shall be provided each day to all Individuals and agencies within the juvenile detention facilities having contact with youths. This log shall note the names of other identifying information such as PDJ number, regular living unit, date, enhanced supervision level assigned, and time placed on the supervision level, the name of the clinician/administrator placing the youth on the level, a notation regarding the youth's psychiatric medication status, and the date of the next scheduled Mental Health assessment or administrative review for the youth. This log shall be updated daily by the facility administrator after collaboration between Probation and DMH.

Any deputized Probation staff at any facility that becomes aware of, or perceives that a youth attempts to harm him or herself, or that observes self-harming behavior(s) on the part of any youth, shall take immediate action to stop the self-harming behavior, and shall immediately thereafter provide direct continuous visual supervision of the youth to ensure the youth's continuing safety (i.e. Level 3 type of supervision). The staff shall immediately thereafter inform the Duty Supervisor of the youth's behavior and prepare a *Special Incident Report* and a request for *Mental Health Consultation form*. The Duty Supervisor shall be responsible for determining the appropriate type of supervision and housing necessary to keep the youth safe pending assessment by a Department of Mental Health (DMH) clinician or transport to another facility or psychiatric facility.

(Meets standards set forth in Title 15, Section 1329 (e)(1)(A), (e)(2), (h))

Upon the Duty Supervisor determining the most appropriate type of housing and supervision for the youth pending assessment by DMH, the Duty Supervisor shall ensure that the staff's Special Incident Report notes, at the minimum, the following:

- The circumstances surrounding the youth's at-risk behavior or staff observations including specifically what the youth did or said that indicated his/her risk of self-harm;
- The name of the staff observing the youth's behavior;
- The immediate supervision action taken by the staff member to keep the youth safe pending notification of the Duty Supervisor;
- The date and time the youth's behavior was reported to the Duty Supervisor;
- The type of housing and level of supervision determined to be most appropriate for the youth by the Duty Supervisor pending assessment by DMH;

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- The date, time and the name of the staff preparing the *Request for Mental Health Consultation* form;
- Any special precautions that should be taken on behalf of the youth as directed by the Duty Supervisor, if any;
- The date and time the youth was placed in a designated housing location and the appropriate level of supervision initiated and provided as directed by the Duty Supervisor;
- The name of the staff providing the level of supervision directed by the Duty Supervisor;
- If the youth is pending transportation to another facility or a mental health facility, document types of housing and supervision that were initiated to keep the youth safe, the name of the staff supervising the youth and the time the supervision;
- Upon transportation being initiated, note the date and time the youth left the facility and names and work assignments of the staff transporting the youth;
- Provide a copy of the *Special Incident Report* and the *Request for Mental Health Consultation* form to the facility's Alert Log Coordinator; and
- If the youth was transported out of the facility, provide a copy of the 714-C document to the facility's Alert Log Coordinator.

Upon completing the initial assessment, the DMH clinician shall provide a completed *Mental Health Recording* form to the detention facility's Duty Supervisor, which shall outline the assessment findings and a recommended level of supervision for the youth. The *Mental Health Recording* form summary should include the specific triggers and warning signs for the youth along with specific guidelines for probation staff on coping strategies, supervision needs or other actions to mitigate the youth's risk of self-harm. The detention facility shall ensure that an appropriate level of supervision is afforded the youth that is commensurate with the DMH clinician's recommendation.

Upon the Duty Supervisor being telephonically advised, or being advised via a copy of the *Mental Health Recording* form, the initial DMH clinician's formal placement of the youth on L2, L3 or L4, or any subsequent change in level of supervision up youth or down youth, the Duty Supervisor shall instruct a staff member to initiate a *Special Incident Report* on behalf of the youth. The report shall note, at a minimum, the following:

- The date and time the youth was assessed by a Mental Health clinician and the level of supervision recommended. Note of the recommended level of supervision involves a change in level of supervision up youth from the level of supervision the youth is currently on;

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- The type of housing and level of supervision determined to be most appropriate for a youth by the Department of Mental Health clinician;
- Any special precautions/housing requirements that should be initiated on behalf of the youth as directed by the DMH clinician, if any;
- The date of the youth's next scheduled follow-up evaluation by the DMH clinician
- The date and time the youth was placed on the appropriate housing location and appropriate level of supervision initiated as directed by the Duty Supervisor;
- If the recommendation is for L3 supervision, note the name of the staff providing Level 3 supervision;
- If the youth is determined to be L4 by the DMH clinician and is pending transportation to another facility or mental health facility, document the types of housing and supervision that were initiated to keep the youth safe, the name of the staff supervising the youth pending transport from the facility, and the time of the supervision period to departure from the facility;
- Upon transportation being initiated, note the date and time the youth left the facility and the names and work assignments of the staff transporting the youth; and
- Provide a copy of the *Special Incident Report* and 714-C form to the facility's Alert Log coordinator.

Note: If the youth is placed on L3 by the Duty Supervisor and is then seen immediately thereafter by a DMH clinician, one clear and comprehensive *Special Incident Report* which clearly outlines all of the activities taken on behalf of the youth for this particular incident shall be completed.

The following procedural expectations shall be adhered to by staff at all times:

- Any youth verbalizing or engaging in self-harming behavior(s) of any kind shall be considered to be at risk of self-harm or suicide. A *Special Incident Report* documenting the youth's action shall be completed and the youth's Behavior File and PCMS shall be updated with "S" code. This requirement shall be adhered to without exception at all times.
- Any youth on L2, L3 or L4 status shall be considered to be at risk of self-harm or suicide and shall be coded with an "S" code and their updated level status (L2, L3 or L4) noted on the facility's Alert Log. This requirement shall be adhered to without exception at all times.
- Youths on L2, L3 or L4 status shall be supervised at all times in accordance with the instructions provided in Section, V, VI and VII. Staff shall be alerted to the

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potential of these Youths to move out of visual supervision in order to engage in self-harming behaviors, especially while using the restroom.

- Without exception, staff shall provide continuous direct visual and auditory supervision of L2, L3 and L4 youths while they are using the restroom, taking care to provide a modicum of privacy to the Youths while ensuring the youths

themselves are not out of direct visual supervision and do not have the opportunity to harm themselves.

- The Behavior File of any youths that engage in self-harming behavior(s), including suicide attempts, verbalizing an intent to harm themselves, or is placed on L2, L3 or L4 status, shall be immediately annotated with their current level status via a 3-inch high, red-colored "S" code and the level status on the left side of the cover sheet. In addition:
 - In camp, PCMS, the Camp Population Sheet, the Bed Chart in all dormitories and the HOPE Center shall be updated to reflect an "S" code and the current level of status (L2, L3 or L4).
- Any youth placed on a Specialized Supervision Plan (see Section VIII) while detained in a camp or a juvenile hall shall be coded with an "X" code in PCMS, the Population Sheet and the Bed Chart, the youth's name and coding place in the facility's Alert Log, the "X" code shall be removed from each youth of these areas upon determination of the Specialized Supervision Plan by the facility Director.
- Staff observing any Behavior Files or PCMS reports noting any youth was previously coded "SI," shall consider the youth to be a potential risk for self-harming behavior, including:
- Upon admission to any facility, any youth whose behavior file or PCMS file indicates the presence of "S" or "SI" code shall immediately be placed under direct and continuous visual supervision by staff. The staff shall immediately thereafter inform the Duty Supervisor of the youth's status. The Duty Supervisor shall be responsible for determining the most appropriate type of supervision and housing necessary to keep the youth safe pending assessment by the Department of Mental Health clinician.
- Youths with an "S" code (or an older "SI" code) shall be considered a candidate for placement in a single or double bunk room in any facility until such time a DMH clinician provides written documentation indicating that youth is not currently at risk of self-harm. Upon receiving the clearance documentation, facility staff shall then refer the issue to the building supervisor in juvenile hall or the Duty Supervisor in RTSB facilities for consideration. The youth may only be placed in a room after the supervisor notes their written authorization for the youth to be assigned to a room. This documentation must remain a permanent part of the youth's behavior file. In RTSB facilities, this clearance may be accomplished by the Duty Supervisor approving the Initial Assessment and Classification form

(Directive 1196 – Residential Treatment Services Bureau Assessment and Classification Policy) upon the youth's initial admittance to the RTSB facility.

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- The medical, mental health and Behavior Files of all youths transferred to RTSB facilities shall be reviewed by appropriate credentialed staff immediately upon arrival at the facility to ensure that JCHS and DMH have appropriately cleared the youth for assignment to a treatment facility. Youths that lack this clearance shall be immediately returned to the juvenile hall for reassessment.
- Once an "S" code is affixed to the Behavior File, or coded into PCMS, it shall not be removed unless it was entered in error. Removal of any erroneous coding must be approved in writing by the Juvenile Hall Senior Director or the Regional Camp Director.
- The "S" or "SI" codes shall serve as a permanent reminder to all staff that come into contact with the youth that the youth may have engaged in self-harming behavior at some level while detained in a Probation Department detention facility.
- Closed-circuit camera supervision shall not be utilized as a primary method of supervision for youths placed on L2 or L3 statuses. Closed-circuit cameras and other aids may be utilized to supplement actual direct visual supervision.
- In RTSB facilities, staff shall be specifically assigned responsibility for supervising youths at a risk of self-harm throughout the day. These assignments must be clearly noted in each time block on the daily schedule. Staff assigned to supervise L3 youths (either a single youth or a group of no more than three youths) shall have no other supervision duties. Staff assigned to supervise L2 youths may have other supervision duties, but one of their primary responsibilities is to ensure the safety of L2 youths.
- Utilization of suicide gowns, safety helmets and other soft restraints: The removal of youth's clothing (with the exception of belts and shoelaces) and the use of physical restraints (e.g. soft restraints, flex-cuffs or handcuffs) shall be avoided whenever possible and use only as the last resort when youths physically engage in serious self-harming behavior.
- On occasion, it may be necessary to remove a suicidal youth's clothing and replace it with a suicide-resistant safety garment. The recommendation to place the youth in a suicide-resistant safety garment shall, in most centers, be made by DMH clinician to the facility's Duty Supervisor. In the absence of DMH clinician, the Duty Supervisor may authorize the placement of a youth in a suicide-resistant safety garment, but only after all alternatives to place a youth in a safety garment have been explored. As the youth's behavior begins to improve, consideration should be given to removing the safety garment and placing the youth in regular facility clothing. This decision should be made jointly by both Duty Supervisor and the DMH clinician, if available.

The Probation Department's enhanced and specialized supervision requirements are as follows:

IV. LEVEL I REGULAR SUPERVISION REQUIREMENTS

Level I supervision is commonly referred to as "Regular Supervision." This is the least intensive level of supervision for all youths in the Department's care. The level of supervision consists of staggered safety checks at a minimum of every fifteen (15)

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minutes at random or varied intervals between observations (at least four per hour) of all youths housed in individual rooms or dormitories. Each of these staggered observations shall be recorded on the unit/dormitory safety check sheet, with the actual time of observation documented.

Staff shall routinely summarize the behavior of Youths on this level of supervision in the behavior record and shall communicate to DMH any change(s) in behavior of any youth(s) or any perceived need for increased supervision by completing a *Request for Mental Health Consultation* form.

V. LEVEL 2 ENHANCED SUPERVISION REQUIREMENTS

Level 2 enhanced supervision (L2) is an increased level of supervision for youths who are not actively suicidal, but may experience persistent suicidal ideations and/or have recent prior histories of serious self-injurious behavior, or a prior history of serious suicide attempt and appear to be at risk currently. L2 is used as a “step-down” level of supervision from L3. Alternatively, this youth may present a constellation of risk factors that warrant an increased level of supervision. The procedures for supervising L2 Youths during waking hours, during sleeping hours and when assigned to specialized units is noted below:

Waking-hours supervision of L2 Youths in living units, cottages or dormitories:

Youths on L2 supervision shall be afforded full education, recreational and other programming opportunities and shall be assigned to the unit day room, cottage day room or dormitory during waking hours. L2 Youths must remain in close proximity to and in continuous direct line of sight of staff at all times including when youths use the shower or restrooms.

- Youths on L2 enhanced supervision may not be assigned to work assignments for any reasons, nor should they be assigned to perform housekeeping duties of any kind that will result in contact with or possessions of tools, cleaning solutions or other chemicals.
- Direct line of sight supervision means that the youth shall be in full view of staff providing supervision and that the staff shall be able to directly view the hands, wrists, arms, neck and facial areas of the youth at all times.

Waking-hours supervision of L2 Youths in the HOPE Center, medical unit or other specialized unit:

When assigned to these locations, the youths may be assigned to rooms with a secured door that is immediately adjacent to the unit staff office. A Safety Check Sheet shall be posted on this door and documented as indicated below.

Sleeping-hours supervision of L2 Youths in all facilities: During sleeping hours, the L2 youth may be:

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- Assigned to a room with a secured door that is immediately adjacent to the staff office. A Safety Check Sheet shall be posted on the door and documented as indicated below. In juvenile hall, an L2 youth may be housed with a roommate if both youths meet the double bunking criteria and roommate is not “S” or “SI” coded or on L2 status:
 - **Safety Check Sheet: Whenever any L2 youth is assigned to any room any time in a regular or specialized unit (day or night) in accordance with this policy, a Safety Check Sheet shall be posted on the youth’s room door and shall be appropriately documented in accordance with Directive 1192 (Safety Check Policy for Juvenile Custodial Facilities). The youth must be observed by staff at a minimum of six (6) times per hour at staggered intervals, and not to exceed ten (10) minutes between observations. Each of these staggered observations shall be documented on the unit/dormitory Safety Check Sheet with the actual time of observation documented;**
- Assigned to sleep in a dormitory bed in a camp. Dormitory supervision requires that a youth be placed in a bed (a lower level bed if bunk beds are utilized) that is immediately adjacent to the dormitory control center, directly in continuous and direct line of sight of assigned supervision staff at all times;
- Assigned to sleep in day room or living units or specialized living units under direct staff supervision. Day room supervision shall be consisting of a dedicated staff member that has no other assignment, that shall remain in close proximity to the Youths (approximately 8-12 feet from the youths), directly in the line-of-sight during sleeping hours and shall provide direct and continuous, uninterrupted visual and audial supervision of up to eight (8) youths as directed by the Duty Supervisor;
- Staff that has worked the 2:00 p.m. to 10:00 p.m. shift and are assigned, or volunteered, to work on the next consecutive shift (10:00 p.m. to 6:00 a.m. shift) shall not be assigned to provide direct day room supervision of any L2 Enhanced Supervision Youths;

The following documentation efforts shall be undertaken on behalf of all youth on L2 Supervision Status:

- When placed on L2, the youth shall be coded as L2 and suicidal “S” by updating PCMS, the Behavior File, the Population and Grade Sheet in juvenile hall, the

Camp Population Sheet or the Cottage Population Sheet at the Dorothy Kirby Center.

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- The Youths on L2 status shall be noted on the facility's Alert Log. This log shall be updated daily after collaboration between Probation and DMH.
- The Youths on L2 status and "S" code shall be noted on the unit/dormitory/cottage Bed Chart. A fresh Bed Chart shall be created and updated on a daily basis in juvenile hall detention facilities and the old Bed Chart secured in a file in the facility.
- The youth's Behavior File at the detention facility shall be annotated with a 3-inch, red-colored "S" code on both sides, outside and front cover and the left inside cover sheet; the L3 status shall be noted on the inside left cover sheet.
- Probation staff shall summarize observation behaviors and the perceived emotional state of the youth in the Behavioral Record and communicate to DMH and/or JCHS any change in behavior or need to change the level of supervision by completing a *Request for Mental Health Consultation* form.
- JCHS staff on each shift shall record in the medical record the status of youths who are assigned to the medical unit and shall communicate to DMH any change in behavior or need to change the level of supervision.
- The DMH shall review supervision orders in consultation with Probation's Alert Log Coordinator and JCHS Nursing Supervisor at the juvenile hall or the Camp Nurse at RTSB facility.
- Youths on L2 supervision shall be reassessed by DMH at least once every seventy-two (72) hours.
- JCHS staff and/or the Duty Supervisor shall consult with the on-call psychiatrist for any request to change the level of supervision if there is no DMH staff on duty in the facility.

VI. LEVEL 3 ENHANCED SUPERVISION REQUIREMENTS

Level 3 Enhanced Supervision status is the highest level of supervision afforded youths within juvenile facilities. L3 supervision is reserved for youths with mental health issues that are at high risk of suicide, either by threatening suicide with a clearly articulated plan for achieving suicide and the means to carry out the plan, or has recently engaged in an act of attempted suicide or serious self-harming behaviors and whose current medical and mental health state may require that they be separated from their regular living unit for a specified period.

Staff assigned to supervise L3 youths at any time shall have no other supervision assignments or unit/dormitory/cottage responsibilities, and shall remain in close proximity (within 8-12 feet) of youth(s) on L3 status directly in the line of sight, during waking and sleeping hours and shall provide direct and continuous, uninterrupted visual and audial supervision of the youth(s). This includes those youths those times when the youths attend court, outside medical appointments,

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school, and recreation, visits the medical unit, participates in any non-Mental Health interview, or uses shower or restroom. Staff assigned to an L3 Enhanced Supervision post shall not leave their assigned posts without proper relief by another staff assigned by the Shift Leader, Duty Supervisor or the Unit Supervisor to assume the L3 supervision post position. L3 supervision staff shall ensure that the Youths' hands, wrists, arms and entire neck and facial areas are visible at all times.

- Supervisory staff shall only assign experienced staff to provide supervision for Level III enhanced supervision status youths. An experienced staff member is defined as one that is CORE and POST qualified and has a minimum of six (6) months' experience as a peace officer in the probation department. These peace officers include GSNs, DPO, or SDPO series staff.
- Staff that has worked in 2:00 p.m. to 10:00 p.m. shift or the 10:00 p.m. to 6:00 a.m. shift shall not under any circumstance be assigned (voluntarily and otherwise) to work the next consecutive shift and provide L3 supervision; Section 170 staff members shall not be assigned to supervise L3 status youths unless they are CORE and POST qualified and have prior approval of the director on duty.
- L3 youths placed on this status by the Duty Supervisor, Mental Health Clinician, Nurse or Physician shall have an Enhanced Supervision Observation Form initiated immediately upon being placed on L3 and at the beginning of each subsequent shift that the youths remain on L3. The Enhanced Supervision Observation Form shall be documented throughout the initiated shift and throughout each subsequent eight (8) hour shift (or portion thereof) during this youth's assignment to L3 supervision status. The form should be completed in accordance with the instructions provided for the Enhanced Supervision Observation Form (Attachment B).
- L3 Youths may need to be housed separately from the regular living unit, cottage or dormitory settings in the Special Handling Unit (HOPE Center), Assessment Center (AC), Enhanced Supervision Unit (ESU), or other specialized unit as circumstances require. Each separation from the cottage or dormitory is designed to allow for better direct supervision of the youth in a more structured setting and reduce the opportunity for the youths to harm themselves.

L3 Youths may require assignment to a room in the HOPE Center, ESU, AC or the specialized unit due to behavior problems and/or to address the immediate safety/security needs of the unit or facility. When this need arises, the youth shall be assigned a room, with the door open, that is free of appurtenances that the youth could use to attach bedding, clothing or lanyard type objects (shoelaces, cords, etc.) in order to harm him/herself.

- L3 Youths, while assigned to HOPE Center, medical unit, Enhanced Supervision Unit or other specialized supervision unit, shall not be isolated from other youths in the housing location, confined to their room during waking hours or excluded

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from facility programming without written specification and/or authorization of DMH or JCHS staff, or for security reasons as defined by Probation.

- L3 Youths shall participate in programs, recreation, exercise, and attend school while on L3 status which, may be suspended only upon a written finding by the Camp Manager or designee that a youth represents a threat to the safety and security of the facility. The findings shall be documented on a SIR, PEMRS and/or PCMS.
- L3 Youths may not be assigned to work assignments in juvenile hall or camp for any reason; nor should they be assigned to perform housekeeping duties of any kind that will result in contact with or possession of cleaning solutions or other chemicals.
- L3 Youths may be supervised in one or two settings dependent on their current level or risk and/or behavior. These two settings are "Individualized Supervision" or "Small Group Supervision." The specific instructions for supervising Youths in these settings during waking hours (6:00 a.m. to 10:00 p.m.) and sleeping hours (10:00 p.m. to 6:00 a.m.) are provided below:

Waking hours supervision of L3 Youths: Youths that have been placed on L3 enhanced supervision status will generally be supervised in small group (SG) settings during waking hours.

- In RTSB facilities, when a youth is placed on L3 supervision, they may be assigned to the Special Handling Unit or Assessment Center, or they may remain in the dormitory or cottage as designated by the Camp Director in consultation with the DMH clinician and the Duty Supervisor.
- Small Group Supervision of L3 Youths may occur in RTSB facilities, but only in a day room, dormitory, classroom setting and/or outdoor recreational settings. In some day room settings, the dayroom area is bordered by individual rooms and offices. When small group supervision is occurring within the day room or other

inside areas, all room and office doors must be secured. While participating in outdoor recreation and other small group activities, the youths shall remain grouped closely together to facilitate direct and proximate visual and auditory supervision.

- In situations where two or more youths on Small Group L3 status are assigned to different school classrooms, a single staff member must be assigned to supervise each youth in accordance with L3 supervision requirements in each classroom.
- When it is necessary for any youth on a Small Group Supervision L3 status to leave the HOPE Center, Enhanced Supervision Unit, Specialized Unit, dormitory or cottage to attend court, participate in facility or out-of-facility medical or Mental Health appointments, or participate in a special visit (attorney visit, parent/guardian visit or other interview) at any time, a single dedicated staff

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member shall accompany the youth and supervise the youth in accordance with L3 supervision requirements.

- Occasionally, due to safety and security considerations, it may be necessary to place Small Group L3 Youths in a room. When this occurs, one staff member may be assigned to supervise no more than two L3 Enhanced Supervision Small Group status youths assigned to immediately adjacent side-by-side rooms at the same time, provided the staff's position immediately in front of the door, in front of and

in close proximity (8-12 feet away at most) to the youth in the two rooms and has an unobstructed line-of-sight of view of the full bodies of both youths, including hands, wrists, arms, necks, faces of the youths throughout the two fully-opened room doors.

Individual L3 Supervision Requirements during waking hours: Some youths in L3 status have demonstrated patterns of physical aggression, assaultive behavior and/or active self-harming behaviors and are generally not suitable candidates for Small Group L3 Supervision. These youths, upon designation by the Duty Supervisor or Director, may require separation from the specialized unit population. Youths who meet this criterion shall be supervised during waking hours by a single designated staff member who has no other assignment except to supervise the L3 youth. The separation may include placement in a room with the door fully open, provided the staff is positioned in close proximity (8-12 feet away at the most) to the youth in the two rooms and has an unobstructed line of sight view of the full body of the youth. In the event of a separation incident, please cross reference this section with Section 513 of this manual.

Sleeping Hours Supervision Requirements for L3 Youths: During sleeping hours, youths on L3 Enhanced Supervision status may be supervised using one of the three situations indicated below:

- Assigned to sleep in individual rooms with the door open fully. One staff member may be assigned to supervise no more than two L3 Enhanced Supervision status
- Youths assigned to immediately adjacent side-by-side rooms at the same time provided the staff is positioned immediately and in close proximity (8-12 feet away at the most) to the youth in the two rooms and has an unobstructed line-of-sight view of the full bodies of both youths, including the youths' hands, arms, necks and heads.

Assigned to sleep in the camp dormitory in a bed that is immediately proximate to the control center. One staff member may be assigned to supervise no more than two L3 Enhanced Supervision status youths assigned to immediately adjacent side-by-side beds at the same time provided the staff is positioned in close proximity (8-12 feet away at the most) to the youth in the two beds and has an obstructed line of sight view of the full bodies of both youths, including youths' heads, necks, arms and hands. If bunk beds are in use in the dormitory, youths must be situated on the lower bunks.

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- A small group of up to four L3 Youths that qualify for small group supervision may be assigned to sleep in the day room area in the HOPE Center, Enhanced Supervision Unit or other specialized unit under direct continuous supervision of a dedicated staff member that is immediately present in the day room area, has no other assignment and is assigned to provide uninterrupted direct visual and auditory supervision of the youths.

The Following Documentation Efforts Shall Be Undertaken On Behalf Of All Youths Placed on L3 Enhanced Supervision Status:

- At the time the youth is placed on L3 Enhanced Supervision status, the youth shall be coded both with L3 and suicidal "S" code by updating PCMS, the unit Population and Grade Sheet in juvenile hall and the Camp Population Sheet or Cottage Population Sheet at the Dorothy Kirby Center.
- The youth's L3 status shall be noted on the facility's Alert Log. This log shall be updated daily after collaboration between Probation and DMH.
- The youth's L3 status and "S" code shall be noted on the unit/dormitory/cottage Bed Chart. A fresh Bed Chart shall be created and updated on a daily basis in juvenile detention facilities, and the old Bed Chart secured in a file in the facility.
- The youth's Behavior File at the facility shall be annotated with a 3-inch, red-colored "S" code on both the outside and front cover and the left inside cover sheet; L3 status shall be noted on the inside left cover sheet.
- Probation staff shall summarize the observed behavior and perceive emotional state of the youth in the Enhanced Supervision Observation Form and shall communicate to DMH and/or JCHS any change in behavior or need to change level of supervision by completing a *Request for Mental Health Consultation* form.
- A search of their clothing, persons, room or dormitory area as appropriate shall be conducted at the beginning of the AM and PM shifts, and when the youth returns to the unit or dormitory following any outside activity or visit. These searches shall be conducted in accordance with Probation Department Directive 1056 (Strip Search and Visual Body Cavity Search Procedures) and Directive 1119 (Searches in Detention Facilities).
- All searches, behaviors, appointments, visitors and other occurrences during the shift shall be noted on the Enhanced Supervision Observation Form.
- JCHS staff on each shift shall record in the medical record status of youths who are assigned to medical unit and shall communicate to DMH any changes in behavior or need to change the level of supervision.

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- DMH staff shall review supervision orders in consultation with Probation's Alert Log Coordinator and the JCHS Nursing Supervisor at the juvenile hall or facility nursing staff at RTSB facility.
- Youths on L3 status shall be reassessed at least every twenty-four (24) hours, or more often as clinically indicated by DMH.
- JCHS staff and/or the Duty Supervisor shall consult the on-call psychiatrist for a request to change the level of supervision if there is no DMH staff on duty in the facility.
- The Management Services Bureau shall conduct monthly safety assessments of the HOPE Center, CARE and other specialized supervision or dormitory-type unit/cottages where L3 Youths are housed to ensure that appurtenances are not present, and if they are found, they are expeditiously removed.

VII. LEVEL IV (L4) ENHANCED SUPERVISION REQUIREMENTS

L4 Enhanced Supervision status indicates that the youth has been determined to be either actively suicidal or has engaged in serious self-injurious behavior and is pending or has been transferred from the facility to a higher level of care (psychiatric emergency care facility) for psychiatric assessment. The placement of a youth on this level of supervision requires that PCMS be updated with a "suicide" ("S") code and that the youth has been supervised in accordance with individual L3 supervision requirements. While at the psychiatric emergency care facility, and while hospitalized at the psychiatric care facility hospital, the youth shall remain designated as L4 Enhanced Supervision status until returned to the facility. Youths on L4 status shall be supervised in accordance with L3 status "Individualized Supervision" requirements at all times.

NOTE: L4 Youths shall participate in programs, recreation, exercise, and attend school while on L4 status which, may be suspended only upon a written finding by the Camp Manager or designee that a youth represents a threat to the safety and security of the facility. The findings shall be documented on a SIR, PEMRS and/or PCMS.

Upon return to the facility, the youth's L4 status shall automatically be changed from L4 status to L3 status, and an *Enhanced Supervision Observation Form* shall be initiated, and the youth shall be immediately interviewed and assessed by the on-duty DMH clinician. If there is no clinician on duty, the youth shall be assessed the next business day. L3 status supervision precautions should continue upon entering into the facility until such time as the youth's level is changed by the DMH clinician. The Duty Supervisor shall determine the most appropriate type of L3 supervision (small group or individual supervision) for the youth.

Documentation Requirements: Recording Orders and Review of Orders for Youths on L4 Enhanced Supervision Status:

- The youth's L4 status shall be noted on the facility Alert Log. This log shall be updated daily after collaboration between Probation and DMH.

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- The youth's Behavior File at the camp or juvenile hall shall be annotated with the youth's current level on the inside left face sheet, and a three-inch, red-colored "S" code shall be placed on both the outside front cover and the left inside cover sheet;
- Upon the youth's return from the psychiatric treatment facility, the youth's status shall be changed from L4 to L3 and an *Enhanced Supervision Observation Form* shall be immediately initiated and the facility's Alert Log updated with the youth's change of status.

VIII. SPECIALIZED SUPERVISION REQUIREMENTS

Specialized Supervision status is reserved for a subgroup of youths' in the facility whose detention statuses (protective custody, administrative hold, potential victim, potential predator, court ordered separation, escape risk, current offense or prior detention behaviors, etc.) are such that they require enhanced safety, security and supervision precautions be taken on their behalf; or whose past behaviors and actions strongly suggest that they may act impulsively to engage in predatory, suicidal and/or self-harming behaviors even though they are not currently considered to be at risk of self-harm by DMH, but have been determined by the facility administrator to require the initiation of specialized supervision practices.

Upon identification, the facility Director/Senior Director shall designate those youths as "*Specialized Supervision Plan*," (SSP) shall ensure that a SSP status is created and implemented on the youth's behalf and shall ensure that the youth's SSP status is noted on the facility's Alert Log.

The SSP shall note the specific type of specialized housing (including specific placement within dormitories), searches, security, supervision and/or treatment practices, etc. that are to be afforded to the youth during waking and sleeping hours, respectively. The SSP shall also address visitation and movement requirements.

Copies of this plan shall be placed in the youth's Behavioral Chart, the facility's Mental Health log binder and a copy of the plan shall be retained by the facility Alert Log Coordinator. This plan shall be in effect for a minimum of thirty (30) days from its initiation. For Youths that require continuation of the SSP precautions, the facility director may extend this SSP once for an additional thirty (30) days by annotating, signing and dating the original form. A new SSP must be created every sixty (60) days for the youth that will remain on a plan for a longer term.

Staff assigned to provide supervision for SSP Youths, who are assigned to work in units, locations where SSP Youths are housed prior to assuming supervision of the youth, review the plan and ensure compliance with all aspects of the plan throughout the shift.

Any questions or concerns related to the proper supervision of the youth shall be referred to the Shift Leader or Duty Supervisor.

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The facility's Alert Log Coordinator shall maintain copies of active and terminated SSPs in respective files and shall coordinate with the facility Director(s) on a daily basis to ensure that they are updated, renewed or terminated as necessary and appropriate in accordance with SSP as noted above.

The designation of a youth as SSP status requires that the PCMS, the Behavior Chart and the Unit/Dormitory/Cottage Population Sheet and the Bed Chart be updated with an "XX" code. When the youth is removed from the Specialized Supervision Status, the "XX" code is to be removed from the above noted documents.

Youths placed on this level of supervision shall be referred to as SSP Youths. SSP Youths shall be included on the facility's Alert Log and designated with an "XX" code and an "Enhanced Supervision Level/Probation" column.

Youths placed on SSPs may, at the direction of the facility Director/Senior Director, require supervision in accordance with L2 or L3 Enhanced Supervision requirements, even if they are not currently determined to be at risk by DMH. When these situations occur, the coding of the youth on the Alert Log shall be as follows:

- For Level 2 supervision while on Specialized Supervision Plan, indicate XX2.
- For Level 3 supervision while on Specialized Supervision Plan, indicate XX3.

All youths on SSPs shall have their current DMH status noted in the Alert Log next to their SSP code. There will be instances where the youth's Enhanced Supervision status and SSP codes on the Alert Log are different. When this occurs, the youths shall be supervised at the highest level of supervision noted on the Alert Log in all instances.

The Following Documentation Efforts Shall Be Undertaken On Behalf Of All Youths On Specialized Supervision Plan Statuses:

- Youths placed on SSP with an XX3 supervision status shall have an Enhanced Supervision Observation Form initiated immediately upon being placed on XX3 and at the beginning of each subsequent shift the youth remains on XX3. The Enhanced Supervision Observation Form shall be documented throughout the initiating shift and throughout each subsequent eight (8) hour shift (or portion thereof) during the youth's assignment to XX3 Supervision status. The form should be completed in accordance with the instructions provided for the Enhanced Supervision Observation Form (Attachment B).
- Probation staff shall summarize the observations, observed behavior and perceived emotional state of the youth in the Enhanced Supervision Observation
- Form and shall communicate to DMH and/or JCHS any change in behavior or need to change the level of supervision by completing a *Request for Mental Health Consultation* form;

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- All searches, behaviors, appointments, visitors and other occurrences during the shift shall be noted on the Enhanced Supervision Observation Form for youths on XX3 supervision status.

IX: CONTINUITY OF CARE FOR AT-RISK YOUTHS

To ensure continuity of care through identified At-Risk Youths, the following procedures shall be followed regarding the identification of At-Risk Youths, DMH reassessment timeline requirements and step-down processes for youths on enhanced levels of supervision.

Identification of At-Risk Youths: Youths who are potentially or actively at risk of self-harm or suicide and designated as L2, L3, L4, XX2, XX3 or on a SSP shall be noted on the facility's Alert Log. The log shall be updated daily after collaboration between Probation and DMH. The Alert Log shall be provided each day to all individuals and agencies within the juvenile detention facility having contact with the youths.

Placement on, adjustment to and removal from the Alert Log is accomplished via a PCMS update, a completed *Request for Mental Health Consultation* form, a completed *Mental Health Recording* form, or a SSP.

Reassessment of L2 Youths: Youths on L2 status shall be reassigned by DMH clinician at least every seventy-two (72) hours. DMH supervising staff shall monitor compliance with this assessment requirement.

Youths who remain on L2 status shall have their status reviewed every eighth day by DMH supervising clinician to reassess the need for continued L2 status. The DMH supervisor shall ensure that appropriate clinician documentation is present in the DMH chart to justify this continued level of supervision.

Reassessment of L3 Youths: Youths on L3 status shall be reassessed by DMH clinician at least once every twenty-four (24) hours or more often if clinically indicated for the duration of their assignment to L3 status.

Youths who remain on L3 status shall have their L3 status reviewed every fifth day by a DMH supervising clinician to reassess the need for continued L3 status. The DMH Supervisor shall ensure that appropriate clinical documentation is present in the DMH charts to justify this continued level of supervision.

Step-down Requirements for L4 Status Youths: Upon return to the facility from a psychiatric care facility or medical facility, the youth's L4 status shall automatically change from L4 to L3 status. The youth shall be immediately interviewed and assessed by the on-duty DMH clinician. If there is no clinician on duty, the youth shall remain on L3 supervision and shall be assessed the next business day. The youth shall thereafter be reassessed in accordance with L3 assessment processes outlined in Section VI.

Step-down Requirements for L3 Status Youths: L3 status youth's step-down (reduced) from L3 to L2 status shall remain in their current location/unit for assignment

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for a minimum of twenty-four (24) hours after a change in status and shall be supervised as L2 in that location. Within twenty-four (24) hours of being “stepped down,” the Youths shall again be reassigned by DMH and cleared as appropriate for release to their regular living units, cottage or dormitory on L2 status if they are housed in HOPE Center or other specialized units. The youth shall thereafter be reassessed in accordance with L2 assessment process outlined in this section.

Step-down Requirements for L2 Status Youths: L2 status Youths who are on step-down (reduced) to L1 status shall be reassessed by DMH within three (3) days of being “stepped down” to assess the youth’s mental state. The youth shall thereafter remain on a DMH caseload and then shall be seen as clinically indicated, but at least once every thirty (30) days until released from the facility.

Note: Youths only may be stepped down (reduced) one level after each instance of reassessment by DMH. Additional reductions must occur in accordance with the timeframes outlined above.

Enhanced Supervision Requirements/Assessment Process for Newly Admitted Youths with “S,” “SI” or L2, L3 or L4 Coding in Behavior File or PCMS: Youths newly admitted off-street to any juvenile hall that during the prior detention were on L2, L3 or L4 status, or have an “S” or “SI” code in their Behavior File or the PCMS shall immediately be placed on L3 status and referred to Mental Health via a *Request for Mental Health Consultation* form and shall remain on L3 status until formally assessed by a DMH clinician and their appropriate supervision level determined. Once determined, the youth shall be placed on, and stepped down, from that clinically determined level in accordance with the step-down process outlined above. If placed on L1 supervision status, the youth may be immediately placed in a regular housing unit, dormitory or specialized unit setting (HOPE Center or assessment center, etc.) that is consistent with any SSP the youth may be on.

Enhanced Supervision Requirements for Newly Admitted Youths with Self-Reported or Observed Self-Harming behaviors: Youths newly admitted off-street to any juvenile hall that were observed by arresting officers, IDC Officer or juvenile hall admission staff to have engaged in self-harming behaviors, or that self-report previous self-harming behaviors and/or self-harming thoughts at any time in the present or past shall immediately be placed on Level 3 Enhanced Supervision status, and referred to Mental Health via a *Request for a Mental Health Consultation* form, and shall remain on L3 status until formally assessed by a DMH clinician and their appropriate supervision level determined. Once determined, the youth shall be placed on a step-down from that clinically-determined level in accordance with the stepdown process outlined above. If placed on L1 status, the youth may be immediately placed in a regular housing unit, dormitory or cottage or specialized unit setting (HOPE Center or assessment center, etc.) that is consistent with any SSP the youth may be on.

Enhanced Supervision Requirements for Youths Placed on Level 2 or Level 3 by Non-Mental-Health Clinicians (Duty Supervisors, Administrators and/or Medical Staff) Pending Assessment by DMH Clinician: In response to certain situations, and

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in the absence of a DMH Clinician, a currently detained youth may require placement on L3 status by the Duty Supervisor, Facility Director or Mental Health Staff pending assessment by DMH Clinician. When these situations occur, the youth shall be placed on an L3 Enhanced Supervision status and shall be referred to Mental Health via a *Request for Mental Health Consultation* form. Upon assessment by the DMH clinician, if the youth is placed on L2 Enhanced Supervision status, the youth shall be housed, supervised and stepped-down in accordance with the facility's general L2 requirements. If placed on L1 supervision status, the youth may be immediately placed in regular living housing unit, dormitory or cottage or a specialized unit setting (HOPE Center or assessment center, etc.) that is consistent with any SSP the youth may be on.

Ongoing Assessment of Youths Entering Facilities on Movement: Staff coordinating the movements of Youths into facilities shall be especially alert to those youths returning to the facility from court hearings, medical appointments and/or special visits. Each of these situations may have potentially involved a negative outcome for the youth, which may result in the youth contemplating self-harming behavior and/or acting out. Staff coordinating these movements shall be alert to the potential of these situations and shall engage the youth(s) verbally and inquire as to the results of the court appointment or visit to ascertain the emotional state of the youth as best they can. If it appears that the youth is emotionally unstable, staff shall immediately provide direct continuous visual supervision of the youth to ensure the youth's continued safety. The staff shall immediately thereafter inform the Duty Supervisor of the youth's behavior and prepare a *Special Incident Report* and *Request for Mental Health Consultation* form. The Duty Supervisor shall be responsible for determining the most appropriate type of supervision and housing necessary to keep the youth safe pending assessment by the Department of Mental Health clinician or transport to another facility or psychiatric facility.

X. DUTIES OF YOUTH SUPERVISION STAFF

Duty Supervisor Responsibility: The Duty Supervisor shall be responsible for assigning appropriate staff for supervision of youths placed on L2, L3, L4, XX2 and XX3 statuses at the facility and shall maintain a copy of the facility's Alert Log with the name of each youth in the facility requiring L2, L3, L4, or XX2 or XX3 supervision. The name(s) of the staff designated to supervise each youth on L3, L4 or XX3 statuses shall be listed on the Duty Supervisor's Shift Condition Report in the juvenile hall and in the camp's Duty Supervisor Log on each regular eight (8) hour shift (AM, AM and 10/6 shift).

Shift Leader Responsibilities: The Shift Leader shall be responsible for ensuring that staff assigned to supervise Enhanced and Specialized Supervision status youths are appropriately instructed as to their specific duties, including proper positioning and supervision responsibilities, so that they may be able to provide safe and effective supervision. The Shift Leader shall:

- Ensure a copy of the current Facility Alert Log is present in the unit/dormitory/cottage;

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- Oversee the shift-change-over with each staff designated for supervision of L2, L3, L4 and XX status Youths in their unit, dormitory, cottage, HOPE Center or offsite Mental Health facility;
- Ensure each staff is properly briefed on the youth's conduct during the previous shift;
- Ensure that a search of each L2, L3 or L4 status youth's person, room and bedding is conducted (on the AM and PM shift), prior to approving the previous shift's release from supervision duty; and,
- Ensure the Enhanced Supervision Observation Form is completed by each staff member responsible for supervising a youth on L3 or XX3 status, and that the off-going staff member's form is signed by the oncoming shift's staff member prior to the shift exchange being conducted;
- Ensure assigned supervision staff reviews the Behavior Charts, Bed Charts and population and grade sheets at the beginning of each shift, to ensure proper "level" and "S" coding of the youths assigned to various unit locations;

The Shift Leader (or GSN on the 10:00 p.m. to 6:00 a.m. shift), at the beginning of each shift shall ensure that all emergency equipment assigned to the unit, cottage or dormitory (which includes a first aid kit, a rescue breathing device, biohazard kit, handcuffs, a working flashlight and an emergency cut-down tool) are in their proper place. Staff must also verify that the above equipment is fully accessible for use in the event of an emergency. The presence of this equipment shall be documented on the daily shift reports, as appropriate to their work locations. If any safety equipment is missing, or not fully accessible, the Duty Supervisor shall be notified immediately.

The Shift Leader shall advise and direct subordinate staff on programming requirements that must be carried out; communicate effective means of dealing with problems presented by youths; and ensure staff maintains appropriate supervision techniques and proper positioning during the supervision of Youths on enhanced specialized supervision statuses.

General Staff Supervision Instruction: Staff assuming Enhanced or Specialized Supervision responsibilities shall be properly briefed regarding the youth's conduct during the previous shift and shall review, at a minimum, critical behavior information documented and recorded relative to the youth(s), for at least the previous twenty-four (24) Hours. Staff shall ensure that they comply with the following instructions at all times when supervising youths on Enhanced and Specialized Supervision statuses:

- Staff assigned to provide day room, individual room or dormitory supervision are assigned to post positions and shall not leave their assigned post positions unless properly relieved by another staff member;
- Staff shall be aware of the locations of the cut-down tool and other emergency equipment in the unit prior to assuming supervision of the youth(s);
- Staff shall be in full view of backup staff at all times;

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- Staff assigned to supervised youths on the 6:00 AM to 2:00 PM. and 2:00 PM to 10:00 PM shifts shall conduct a search of the youth's person and room prior to the Shift Leader approving the previous staff release from supervision duty. All articles accessible to or in the youth's possession that are determined to be potentially dangerous (including shoelaces, extra clothing, personal items, hair bands, plastic food service gloves, pencils, belts, certain undergarments, plastic containers with lotion and shampoo, toothbrushes, water bottles, etc.) shall be removed from the youth's possession as appropriate. The off-going staff shall assist with supervision of the youths during the search processes;
- Searches shall be conducted in accordance with Probation Department Directive 1056 (Strip Search and Visual Body Cavity Search Procedures) and Directive 1119 (Searches in Detention Facilities);
- Youths at imminent risk of engaging in self-harm shall not have any pencils, pens, toothbrushes or other devices with which they may harm themselves; nor should they be provided with reading materials that have staples or paperclips;
- Staff shall ensure that no youth leaves their immediate room, dormitory or other immediate areas of supervision for any reason without the direct authorization of staff supervising the youth, the Shift Leader or the Duty Supervisor. Staff providing supervision shall immediately utilize Safe Crisis Management (SMC) de-escalation and/or physical intervention techniques to prevent the youth from leaving the immediate area of supervision without authorization;
- Staff assigned to supervise L3 or XX3 status youths shall ensure that an Enhanced Supervision Observation Form is initiated and documented as outlined in Section VI;
- Staff shall ensure that youth's hands, wrists, arms and entire neck and facial area shall be visible at all times. Youths shall not be allowed to cover their heads, necks, hands or arms with blankets or sheets, as Youths may attempt to harm themselves in areas not visible to staff;
- Staff shall remain alert at all times and may not read or utilize personal electronic devices (cell phones, games, blackberry-type devices and/or personal computer or electronic devices, etc.) while assigned to supervise the Enhanced or Specialized Supervision status youths;
- All movement and activities of youth(s) shall occur in an orderly manner that is managed by the staff providing direct and proximate visual supervision with the approval of the Shift Leader;

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- All youths shall be afforded opportunities to engage in program and activities, such as education and large muscle exercise, as his/her behavior permits and as recommended by DMH and/or the Shift Leader or Duty Supervisor;
- Staff shall conduct themselves in a professional manner and shall employ a nonthreatening manner of supervision that utilizes and reinforces the environment that is safe and structured-focused.
- **All Enhanced and Specialized Supervision youths confined to a room shall routinely have their doors open at all times with staff approximately positioned in the doorway. Emergency situations (e.g. assault of youths), however, may dictate that the door be temporarily secured and the Duty Supervisor notified. Pending the arrival of the supervisor, staff shall stand at the doorway of the youth's room and shall continuously observe the youth pending the arrival of the Duty Supervisor, who shall assess the situation and provide direction to staff. Situations such as this shall be fully documented in a *Special Incident Report*;**
- Staff shall be alert to situations where youths verbalize the intent to harm themselves, or initiate efforts to harm themselves, such as tearing clothing or bedding into strips, scratching on themselves, standing on beds and/or striking body parts against walls or other fixed objects, or begin breaking lights, cameras, windows, doors, or other fixtures in the room;
- When these situations begin to occur, staff shall immediately alert the Shift Leader and/or Duty Supervisor regarding these behaviors and take immediate action utilizing appropriate SCM techniques to de-escalate the situation and/or assist the youth to a safer position/location, where they can no longer harm themselves or others, or destroy County property;
- Any unusual incidents involving an Enhanced and Specialized Supervision status youth shall be immediately reported to the Shift Leader and documented on an SIR or PIR as appropriate. Unusual incidents include, but are not limited to the following:
 - Suicidal threats, gestures and/or attempts;
 - Especially loud and/or exhibiting aggressive defiant type conduct;
 - Aggressive behavior (threats, fights and assaults, etc.);
 - Any incident involving Physical Intervention by staff;
 - Use of any type of Soft, Hard or Plastic Restraints; Attempted escape;
 - Refuses to eat; Refuses to take medication, or hoarding of prescribed medications;

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- Refusal to attend medical appointments; Refusal to attend school.

GUIDELINES TO UNDERSTANDING/DOCUMENTING THE FACILITY'S ALERT LOG:

Each facility shall maintain an accurate list of youths on Enhanced Supervision status and/or on a Specialized Supervision Plan on the facility's Alert Log. Youths with statuses that of a Level 2, Level 3 or Level 4 shall be readily identifiable at each facility. This list is to be reconciled and a new list generated daily, including weekends and holidays. The Alert Log must be distributed to all intended recipients by 8:00 p.m. To assist staff in understanding the Alert Log, the following is offered:

TOP AREA FORM

Date: This is the date the Alert Log was completed and published. The Alert Log is generally completed in the evening on the date indicated and is placed in use until the next Alert Log is published. For example, an Alert Log published on January 12th will be in use until the next Alert Log is published in the evening of January 13th. The date should be entered in "MM/DD/YY" format (i.e. "03/25/09").

Time: This is the time the Alert Log was completed and published.

Alert Log Informational Categories:

Unit/Camp/Cottage: Notes unit/dormitory/cottage which the youth is currently assigned to.

Youth's Name: Notes the youth last and first name.

PDJ Number: Notes the youth completed PDJ number.

Enhanced Supervision Level: Notes the level of Enhanced Supervision and/or the Specialized Supervision Plan (SSP) the youth is currently on at the facility. As there are both Mental Health-generated Enhanced Supervision Plans (MH1, MH2, MH3 and MH4) and Probation designated SSP statuses (XX, XX2 and XX3), both statuses are noted. If an area in Probation SSP section is left blank and shaded, it means the youth does not have a Probation designated SSP status, but does have a DMH level as noted on the left. If youth has a Probation designated SSP status, but no DMH level at Level 2, 3 or 4 is currently available, a DMH level of "MH1" should be recorded as the default MH level. When reviewing both of these categories, the highest supervision status that is recorded "**BOLD**" font is to be followed by staff assigned to supervise the youth.

Staff Supervision Required: Notes exactly how the youth is to be supervised by assigned staff:

- **SG** – Small Group Supervision: One staff and up to 3 Level 3 Youths;
- **1:1**- One staff member on one Level 3 youth;
- **2:1**: Two staff members to one Level 3 youth;

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- **NR – No Room:** The youth shall be supervised in accordance with Enhanced Supervision requirements noted; however, the youth may not be placed in a room. **The youth must remain under staff visual supervision at all times and shall be supervised in accordance with the department's Enhanced Supervision policy at the level noted on the Alert Log.**
- **PP:** Level 2 Supervision youth shall be briefly supervised at all times as per the Enhanced Supervision policy when out of rooms and shall have ten (10) minute safety checks performed during sleeping hours, or when assigned to a room in the HOPE Center Medical Unit or otherwise specialized unit.

MH Meds: Notes whether or not the youth is currently taking psychotropic medication.

Date and Time youth was Placed on Current Level: Notes the date and time the youth was placed on the current Enhanced Supervision level that is shown on the Alert Log.

Last Date youth was Seen by the Department of Mental Health: Notes the last date on which the youth was assessed for self-harming behaviors by the Department of Mental Health (DMH). Youths on SSP that have an MH1 Enhanced Supervision designation shall generally are note being followed by DMH and, therefore, may not have a recent, or next, or assessment date available.

Date of Next Appointment: Notes the next date on which the youth is to be reassessed by DMH.

Therapist's Name and Phone Extension: Notes the youth's assigned therapist and extension, if a therapist is assigned.

On IBMP or MDT Plan: Notes whether or not the youth is on an active IBMP or MDT plan.

PCMS Update: Notes whether or not the Probation Case Management System (PCMS) has been updated to reflect the enhanced supervision level assigned to the youth.

INSTRUCTIONS FOR COMPLETING THE ENHANCED SUPERVISION OBSERVATION FORM:

All staff members assigned to supervise youths in L3 Enhanced Supervision status, or XX3 Specialized Supervision status in juvenile hall or camp, shall immediately initiate a Probation Department Enhanced Supervision Observation Form upon assuming supervision of a youth and initiate a new form on each subsequent eight (8) hour shift during the youth's assignment to Level 3 Enhanced Supervision status. The form should be completed in accordance with instructions provided below:

SECTION A – DATE AND LOCATION: Note the date, facility and shift for each of the Probation Department's Enhanced Supervision Observation Forms being prepared.

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SECTION B – YOUTH’S INFORMATION: Note the youth’s name, date of birth, PDJ number and current location of the youth (for example, HOPE Center unit, enhanced supervision unit where the youth is located).

SECTION C – LEVEL 3 ENHANCED SUPERVISION ASSIGNMENT DATE: Note the date and time the youth was initially placed on L3 or XX3 supervision status. A form shall be initiated immediately upon the placement of the youth on L3 status and at the beginning of each subsequent shift that the youth remains on L3. The form shall be fully documented throughout the initiating shift and throughout each subsequent eight (8) hour shift during the youth’s assignment to L3 or XX3 supervision status.

SECTION D – STAFF INFORMATION: Note the full printed name, employee number, employee signature, time assuming observation responsibility and rank of the staff assigned to supervise the youth.

SECTION E – SEARCHES: Note the time the youth’s room was searched and the time the youth’s person was searched in accordance with Probation Department Directive 1056 (strip search and visual body cavity search procedures) and Directive 1119 (searches in detention facilities).

SECTION F – VISITS: Note the name of any visitors that visit the youth, including the Department of Mental Health clinicians, nurses, clergy, Field Probation Officers, or other outside visitors. Note the agency of the visitor represented and the time of the visit(s) for each youth involved. Also note any visit/appointment attended by the youth outside of the unit/facility.

SECTION G – BEHAVIOR(S) OBSERVED: Place an “X” in the box that identifies any potential problematic behavior(s) observed. Note any other behaviors that are of concern that are not listed in the “Other” sections.

SECTION H AND I – OBSERVATION COMMENTS: In this section, staff shall make observational notations during each four (4) hour supervision period of the shift or a portion thereof that the youth was on L3 or XX3 supervision. Staff shall note the specific time frames of the actual observation during each four (4) hour period. Staff shall note the programming activities that the youth engaged in and the youth’s compliance with the unit program (meals, all unit activities, school activities, appointments, visits, etc.) and/or problems that arose during each four (4) hour supervision time frame. This section shall also be used to communicate to DMH or Health Services any changes in behavior.

SECTION J – SHIFT CHANGE DOCUMENTATION: In this section, the outgoing staff (staff relinquishing supervision) shall note their name and the time/date relinquished supervision responsibilities to staff receiving them. This is to be done at the end of the shift.

SECTION K – SHIFT CHANGE DOCUMENTATION: The oncoming staff members shall note their name and the time they assumed supervision of the youth. The

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oncoming staff shall then initiate a new Enhanced Supervision Observation Form upon which to document their observations during the next shift.

SECTION L – SHIFT LEADER REVIEW OF DOCUMENTATION: The Shift Leader in the current unit or camp shall conduct formal review of the Enhanced Supervision Observation Form and assure that it has been properly and completely documented. After this review is completed and any required adjustments to the form are made by the staff supervision of the youth, the Shift Leader shall sign and approve the Enhanced Supervision Observation Form and place it in the youth's Behavior File.

INSTRUCTIONS FOR COMPLETING A SPECIALIZED SUPERVISION (SSP) FORM: Each section in this plan must be annotated by the director or designee. Please do not skip any areas.

PLAN INFORMATION: Note the date the SSP is to be initiated, the date it is to end and the name of the facility the SSP is to occur at. An SSP can only be in effect for thirty (30) days. It can be extended for an additional thirty (30) days (as outlined in Section XVII) only after the first thirty (30) day SSP concludes.

YOUTH'S INFORMATION: Note the youth's name, PDJ number, date of birth and any other special coding's in this section.

DIRECTOR AUTHORIZING INFORMATION: Note the printed name and phone number of the director authorizing the Specialized Supervision Plan.

SECTION 1 – REASON FOR SSP: Check all boxes that apply (if more than one reason) regarding why the youth is being placed on an SSP. If there is no reason, check box noted below, note the reason in the "Other" area.

SECTION 2 – JUSTIFICATION FOR SSP: The Director shall articulate the reason for the SSP as it relates to the safety, security and confidentiality needs. In this section, the Director shall outline the staff, the clear reason for the SSP and any other information the director believes the staff should be aware of so far as to adequately and safely house and care for the youth to keep him/her free from harm. If an IBMP or an MDT led to the creation of the SSP, then the specific issue pertaining to the SSP creation should be outlined, especially if it requires the placement of the youth in a specific room or area of the dormitory for supervision purposes, etc.

SECTION 3 – HOUSING TYPE: Check the box that notes whether the youth may be housed in a room, or whether the youth must be housed in a day room/dormitory type setting. Use the "Other" area to provide additional information as needed.

SECTION 4 – HOUSING LOCATION: Check the box that indicates where the youth shall be housed. If the desired housing location is not listed, note the location to be housed in "Other." Also use "Other" to provide additional information as needed.

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SECTION 5 – LEVEL OF SUPERVISION TO BE PROVIDED: Check the box that indicates the level of supervision (Level 1, Level 2 or Level 3) to be assigned to the youth while on the plan, at a minimum.

SECTION 6 – TYPE OF SUPERVISION TO BE PROVIDED: Check the box that indicates the type of supervision to be afforded the youth by assigned staff.

SECTION 7 – MOVEMENTS IN THE FACILITY: Check the box that indicates how the youth may be moved about the facility when out of the unit. If the desirable requirements are not listed, note the movement requirements in the “Other” area.

SECTION 8 – RECREATION: Check the box that indicates how the youth may recreate in the facility. If the desired recreation requirements are not listed, note the recreational requirements in the “Other” area.

SECTION 9 – SCHOOL ATTENDANCE: Check the box that indicates how the youth may attend school. If the desired school attendance requirements are not listed, note the school attendance requirements in the “Other” area.

SECTION 10 – VISITS: Check the box that indicates the visitation privileges for the youth. If the desired visitation privileges are not listed, note the visitation privileges in the “Other” area.

SECTION 11 – PHONE ACCESS: Check the box that indicates the phone access privileges for the youth. If the desired phone access privileges are not listed, note the phone access privileges or lack of thereof in the “Other” area.

SECTION 12 – PERSONAL ITEMS: Check the box that indicates the personal items the youth is allowed to possess. If the desired personal items allowed are not listed, note the changes to personal items allowed in the “Other” area.

SECTION 13 – OTHER COMMENTS: In this section, provide any comments of interest regarding the youth (safety, security or other information) that will allow the staff to better manage and/or provide more appropriate supervision for the youth while on the SSP.

SECTION 14 – DIRECTOR SIGNATURE APPROVING: The director shall sign and date the SSP upon completion.

SECTION 15 – SSP EXTENSION: At the end of the first thirty (30) days on the SSP, the facility director may extend this plan for an additional thirty (30) days by annotating this section. The plan may only be extended once for thirty (30) days. After sixty (60) days on the plan, a new SSP must be prepared.

1203 SUICIDE PREVENTION POLICY FOR JUVENILE FACILITIES

Cross reference with (DIRECTIVE 1186)

INTRODUCTION

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This policy establishes the suicide prevention policy for Residential Treatment Services Bureau and the Dorothy Kirby Center (DKC). Each juvenile custodial facility for the purposes of this policy shall consist of any facility. This policy pertains to all staff assigned to these facilities.

POLICY

In compliance with this mandate to provide a safe and secure environment for youths under its care, it shall be the policy of the Probation Department to maintain uniform preventive measures and enhance supervision protocols to proactively address self-injurious and/or suicidal behaviors in each facility. Staff must be aware of various indicators of those behaviors that result in appropriate supervision precautions for affected youths as well as the importance of timely referrals to Mental Health for their initial and ongoing assessments, classification and treatment.

Any deputized Probation staff that becomes aware of, or perceives any youth's intents to harm him or herself, or that observes self-harming behavior(s) on the part of any youth, shall immediately place the youth on a Level 3 Enhanced Supervision status to ensure the youths continue in safety. The staff shall immediately inform the Duty Supervisor of the youth's behavior and prepare a *Request for Mental Health Consultation* form and Special Incident Report or Physical Intervention Report as appropriate. The Duty Supervisor shall be responsible for determining the appropriate type of housing and level of enhancement service (Level 2 or Level 3) needed to keep the youth safe pending assessment by the Department of Mental Health Commission.

Youth identified at risk of 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 deviation of program services or activities for youth at risk of suicide shall be documented and approved by the facility manager.

DEFINITION AND EXPLANATION OF TERMS

To assist in better understanding the important components of this policy, the following terms are defined below. Staff shall be familiar with them and utilize them as an aid in understanding this policy.

Alert Log: Youths who are potentially or actively at risk of self-harm or suicide (L2, L3 and L4 Enhanced Supervision statuses) or that require other specialized supervision precautions shall be noted on each facility's Alert Log. A new Alert Log is created each day in each facility and provided to all staff and agencies coming into contact with the Youths at the facility.

Duty Supervisor: Acting Director (AD) in a camp and/or the Residential Supervisor (RS) at the Dorothy Kirby Center shall be jointly referenced in this document as the "Duty Supervisor" where applicable. The Duty Supervisor is responsible for the safety and security

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of the facility operation. The Duty Supervisor shall be responsible for assisting staff to all units and specialized supervision posts within the facility.

Emergency Equipment: Each unit in the facility and each camp dormitory shall have emergency equipment, which includes a first aid kit, a rescue breathing device, a biohazard kit, a face shield, handcuffs, flashlight(s) and an emergency cut-down tool.

Level 1 – Regular Supervision (L1): This level of supervision is the least intensive level of enhanced supervision and is afforded to all youths in the Probation Department who are not at risk of suicide or self-injury. This level of supervision consists of staggered safety checks at intervals not to exceed (15) minutes between observation (at least four per hour) of all youths housed in any dormitory, individual rooms or day rooms.

Level 2 – Enhanced Supervision (L2): Level 2 Supervision is an increased level of supervision for youths who are not actively suicidal, but may experience persistent suicidal ideation and/or have a recent prior history of serious self-injurious behavior or a prior history of serious suicide attempt and appear to be at risk currently. Alternatively, this youth may present a constellation of risk factors that warrant an increased level of supervision.

Level 3 – Enhanced Supervision (L3): Level 3 Supervision is reserved for youths in juvenile detention facilities that are at risk of suicide, either by threatening suicide with a clearly articulated plan for achieving suicide and the means to carry out the plan, or has recently engaged in acts of attempted suicide or injurious behavior and whose current medical or mental status requires that they be separated from the regular living unit for a specific period. When youths are placed on a Level 3 supervision, a designated staff member shall remain in close proximity to the youths, directly in line of sight, during waking and sleeping hours and provide direct and continuous, uninterrupted visual and audio supervision of these youths. This includes those times when the youths attend court, outside medical appointments, attend school, visit Medical Housing Unit, participate in any non-mental health interviews or use the shower or restroom.

Level 4 – Enhanced Supervision (L4): Indicates that a youth has been determined to be either actively suicidal or has engaged in serious self-injurious behavior and is in the process of being transferred to a higher level care (psychiatric emergency care facility) for psychiatric assessment. Youths on L4 supervision status shall be supervised in accordance with L3 supervision protocols.

Mental Health Recording Form: A Department of Mental Health (DMH) form utilized to advise facility staff of DMH's post assessment findings and recommendation levels of supervision, housing and activities for an at-risk youth.

Shift Leader: The Deputy Probation Officer II in camp or the Dorothy Kirby Center shall be jointly referenced in this document as the "Shift Leader" where appropriate. The term Shift Leader denotes the individual in the area, unit location, facility or operation that has the lead staff responsibility for that area.

Specialized Supervision: This level of supervision is revised for a subgroup of youths in the facility whose past behaviors and actions strongly suggest that they may act impulsively to engage in suicidal and/or self-harming behaviors, or that require an

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individualized Special Supervision Plan to provide for ongoing safety and security of the youths while detained for a variety of reasons. Upon identification, the facility director shall designate these youths as “Specialized Supervision” status and shall ensure that Specialized Supervision Plan is created and implemented on those Youths’ behalf. The Specialized Supervision Plan shall note the specific type of supervision to be afforded to the Youths during waking hours and sleeping hours, respectively, and any other specialized supervision instructions for the youths, including movements into and out of various areas within the facility.

PROCEDURES: The following measures comprise the department’s suicide prevention program facilities:

- Section I: Training of Staff
- Section II: Understanding the Motivation For Suicidal or Self-Harming Behaviors
- Section III: Identification and Referral of Self-Harming Youths
- Section IV: Interagency Communication Regarding Self-Harming Youths
- Section V: Intervention to Prevent Self-Harming or Suicidal Activities
- Section VI: Reporting Suicide Attempts or Suicides
- Section VII: Investigating Serious Suicide Attempts and Suicides
- Section VIII: Mortality/Morbidity/Suicide Review Process

I. TRAINING

All facility staff who have regular contact with youths shall initially be trained in the recognition and handling of potential suicide youths in CORE training. CORE training shall consist of eight (8) hours of instruction at a minimum. Newly hired staff shall receive such training through the training academy. The CORE training shall include an understanding as to why the environments of youth detention facilities are conducive to suicidal behavior, potential predisposing factors to suicide, high-risk suicide, warning signs and symptoms, identifying suicidal youths despite the denial of risk, a review of the Department’s policy for suicide prevention, suicide prevention policy, use of emergency cut-down tool and the liability issues associated with successful suicides within custodial environments.

That staff that has completed their CORE training requirements, all mental health, medical and education staff that have regular contact with youths in facilities shall receive four (4) hours of suicide prevention refresher training each fiscal year. The refresher training workshop shall include a review of predisposing risk factors, warning signs and symptoms,

identifying suicidal youths despite the denial of risk, training in the use of emergency and safety equipment, review of any changes to the department of suicide prevention program. It should also include a general discussion of recent suicide attempts or successful suicides, re-instruction in the use of the emergency cut-down tool and liability issues.

All sworn facility staff that have regular contact with these youths in juvenile hall custodial facility shall also receive Standard First Aid and Cardio Pulmonary Resuscitation (CPR) training at specified intervals.

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(Meets the standards set forth in Title 15, Section 1329 (a) and (b) (2))

II. UNDERSTANDING THE MOTIVATION FOR SUICIDE OR SELF-HARM

It is important to recognize that youths may injure themselves when they do not intend to kill themselves; however, the motivation for both behaviors is the same. Self-inflicted injuries may be a rehearsal for a future suicide attempt. Suicide attempts by Youths a demand that life get better, not that it be over. Most youths, in effect, are trying to kill the problem, not themselves.

A. GENERAL TYPES OF MOTIVATION

The four general types of suicidal or self-harming motivation include the following:

Attachment: Youths form close emotional ties with people and things. When those ties are endangered or broken, they may resort to self-inflicted injury as a cry for help and attempt to regain those attachments. When the cry for help is ignored, the youth may escalate the degree of behavior to a potentially life-threatening level.

Escape: When circumstances in their lives (e.g. guilt, depression or anger) are difficult or seemingly impossible to bear, youths may seek to escape them through a self-injurious behavior. Escape may be the intention, but suicide becomes the potential mode.

Control: In order to gain control over some aspect of life when all other forms of self-determination have been lost, a youth may result to self-injurious behavior. Failure to respond to these (need to be in control) messages may escalate the danger to others as well as to the youth.

Release: To release feelings of physical or psychological pressure, youths may resort to self-injurious behavior. Self-injury or death is not a generally intended outcome, but may result when the relief afforded by the self-injury is no longer sufficient.

B. RECOGNITION OF RISK

Recognition of warning signs when they are being communicated is the first element of assessment process and is an integral part of any prevention program. Common warnings signs include the following:

- Suicidal threats (verbal and/or written);
- Direct threats ("I am going to kill myself.");
- Indirect threats ("I might as well be dead.");
- Anger;
- Mental illness;
- Prior suicidal behavior(s);
- History of suicidal behavior(s);
- Physical illness (including frequent complaints of illness);
- Substance abuse/addiction;

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- Cultural prevalence (how a culture reviews and defines a suicide);
- Sexual orientation (conflicting internal and societal messages);
- Suicide contagion (exposure to the suicidal behavior of several Youths);
- History of sexual abuse;
- Personality traits (Youths with strongly imprinted traits are at risk);
- Stress (associated with isolation and confinement);
- High risk periods (initial admission, following a justification etc.);
- Preoccupation with death (talking, reading and writing about death);
- Making final arrangements, giving away prized possessions;
- Reminiscing about a dead person;
- Changes in behavior, appearance, thoughts or feelings;
- Feelings of HOPE Centerless or helplessness;
- Social withdrawal, isolation, loss of involvement in interests or activities;
- Increased risk taking;
- Sudden weight or appetite change;
- Inability to concentrate or think rationally;
- Sleeplessness or sleepiness;
- Increased irritability or anger;
- Crying easily;
- Moodiness, uncommunicative;
- Lethargy, exhaustion;
- Extreme anxiousness;
- Unexplained headaches, dizziness or nausea;
- Loss of self-esteem.

Most of the preceding warning signs can be also described as symptoms, such as they indicate the possibility of suicide, but are not viewed as definite predictors of suicidal behaviors. The more the symptoms point to youth an overall an unchanging theme of hopelessness, the greater the likelihood that they are indicators of suicide. Upon observing such signs, staff shall ask the youth directly if he or she is contemplating suicide. If the youth indicates that he or she is contemplating harming themselves, appropriate self-harm and/or suicide precautions (supervision and housing) shall be immediately be initiated by the staff to keep the youth safe pending assessment by Department of Mental Health Clinician. The Duty Supervisor shall be contacted immediately and advised of the situation.

C. DETERMINING THE LEVEL OF RISK

Determining how close an at-risk youth is to suicide is the second element of assessment process. Once it is recognized that the youth may be contemplating suicide, it is vital to determine the level of risk by assessing the current situation in light of the following:

Current Suicide Plan: Plans and separation on the part of the youth reflect intent. Once a plan has been made, the obligation to finish becomes stronger. Staff should ask the youth the following questions:

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How does the youth plan to commit suicide: Specificity of the plan seriously increases the potential risk of death. Completed preparations and easy access to the express means also increase the risk considerably.

How prepared is the youth to commit suicide: Consider if the method allows for reversal, but do not discover reversible actions. The youth may not be aware of the lethal potential of any actions being considered.

How soon will it happen: The sooner the intended act, the greater the risk. A youth whose behavior indicates suicide is imminent should not be left alone under any circumstances.

Has the youth ever attempted suicide before: Past attempts indicate self-destructive actions are acceptable to the youth. Staff should ask the youth what happened previously and if the youth attempted to make a current attempt a more acceptable option.

Does the youth want to talk to someone: Support systems can sustain an individual during stressful periods of life. For those without internal support systems (HOPE Center, self-confidence, etc.), external resources become crucial. Staff should determine if the youth feels alone and isolated, and what available resources or interventions would be acceptable to address his/her needs.

D. GENERAL MODE FOR UNDERSTANDING SUICIDE

Suicide is an interaction of five components of this model:

- Population at risk – certain populations are at greater risk.
- Stressful events increase suicide risk.
- Critical response.
- Decision.
- Opportunity.

Characteristics of the Population at Risk:

- High suicide rate is males (ages 15-25);
- Lack of social support;
- History of suicide (for self or family);
- Adolescence (especially substance abusers and those continually in trouble);
- Mental illness and/or drug addiction.

Stressful Events:

- Anything that causes a problem or change in the youth's life;
- Assault;
- Setback in legal proceedings;
- Bad news from family;
- Discharge from psychiatric hospital;

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- Transfer (especially to a higher level of confinement);
- Stressful events in general:

Stressful events in general:

- Death or illness of family member or friend;
- Illness;
- Other perceived losses or rejection;
- Arrest or events leading to arrest;

Stress is very subjective and can be accumulative.

- Critical Response to Stressful Events;
- Common critical responses;
- Feelings of helplessness;
- Feeling of loneliness, fear and anger;
- Expressions of agitation, self-hatred, suicide intent;
- Inability to see alternatives or to feel pleasure;
- Fantasies of death;
- Change in behavior and mood;
- Organize personal concerns (give away belongings);
- Lethargy, sleep problems, lack of interest;
- Isolation/withdrawal;
- Change in daily routine;
- Hostile rejection to help.

Critical responses can be detected by observing, listening and asking

- Persons who attempt suicide most often indicate their intent.
- Suicide can be prevented with knowledge of the warning signs.
- The signs may be overt/direct (e.g. "I wish I were dead.") or covert/subtle.
- For adolescents, suicide is often an impulse act.

Decision:

- Decision to commit suicide is viewed by the youth as an ESCAPE from unbearable pain, not necessarily a desire to end their life.
- After the decision, the youth's behavior often changes, either by becoming agitated as if ready to act or peaceful.
- The decision to commit suicide may be impacted by intoxication or substance abuse.

Opportunity:

- Opportunity is the means and unsupervised time to commit suicide.

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- There may be opportunities that are not obvious, so careful routine checks are essential.

The following are three essential steps to take after identifying a youth who you think is suicidal:

- Immediately take steps to keep the youth safe pending other interventions;
- Obtain medical and/or mental health services;
- Increase the level of supervision.

III. IDENTIFICATION AND REFERRAL OF AT-RISK YOUTHS

What a youth says and how they behave during arrest, transport to the facility and at intake are critical in determining suicidal behavior. The scene of the arrest is often the most volatile and emotional time for the youth. Arresting and transporting officers should pay close attention to the youth during this time. Suicidal behavior may be manifested by the anxiety or hopelessness of the situation. Onlookers such as family members and friends can often confirm previous behaviors. Any pertinent information regarding the youth's wellbeing must be communicated by the arresting or transporting officer to the admissions staff.

In compliance with its mandate to provide a safe and secure environment for youths in its care, all facility staff shall maintain awareness of suicidal or self-harming activities, share information as necessary and make appropriate referrals to mental health staff. To better service all youths entering into a facility, and to provide a safer environment, all youths should be assessed for potential suicide risk utilizing the following:

Camp Orientation Interview Process: The Orientation Officer shall, as a part of the intake interview, question the youth regarding any potential self-injurious behavior, suicidal behavior and/or past suicidal activities. If the youth indicates involvement in any of these activities, the orientation officer shall verbally notify the Duty Supervisor of the subject youth's statement and/or any observation and shall document the statement/behaviors on the juvenile hall entrance record intake and PCMS. The Duty Supervisor shall direct the admission staff to refer the youth to the Department of Mental Health via a *Request for Mental Health Consultation* form.

Initial Intake Screening Questionnaire Process: Facility staff shall complete an initial intake screening questionnaire form for each youth newly admitted to the facility, including those youths assigned to a camp HOPE Center from another camp facility. This form shall be completed before the youth leaves the admissions area, or is placed in a room or in a HOPE Center in all instances. This form offers a series of yes/no questions to each youth relative to their medical, mental health and educational histories, inclusive of whether or not they have had previous attempted or contemplated self-harm or suicide. If the youth admits to any previous suicidal ideation, self-harming activities or suicide attempts, the youth shall be referred to the Department of Mental Health (DMH) via a *Request for Mental Health Consultation* form. Admission staff shall place a copy of the initial intake screening questionnaire on the left side of the youth's behavior chart and provide copies to Juvenile Court Health Services (JCHS), DMH and the Los Angeles County Office of Education (LACOE). This document shall remain a permanent part of the youth's behavior chart.

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Probation Case Management System (PCMS) Review Process: Orientation staff shall review the PCMS to determine whether or not the youth was previously coded as a self-injurious (SI) or suicide (S) risk, or was on Level II, III or IV supervision status during the previous detention, if any. If any are noted, the youth shall be referred to DMH via a *Request for Mental Health Consultation*. The review of the PCMS is required in addition to any communications by and/or notations made by the intake and detention and control officer on the juvenile hall entrance record. Staff that does not have access to PCMS shall contact the nearest juvenile hall and request that the PCMS system be accessed and a copy of the record affixed to the facility for review.

Behavior Chart Review Process: Admission staff shall conduct a review of youth's behavior chart to determine if the youth was coded as a self-injury or suicide risk, or was on L2, L3 or L4 status during a previous detention. If any are noted, the youth shall be referred to DMH via a *Request for Mental Health Consultation*. Orientation staff shall also ensure that a 3-inch, red-colored "S" code is annotated on the outside front cover and inside left-side cover sheet in the behavior file.

Medical Admission Screening Process: JCHS nursing staff shall conduct a medical assessment of all newly admitted youths. As a part of the admissions process, nursing staff shall inquire as to any current or previous self-harming and/or suicidal activities utilizing a psychosocial assessment tool. If any are noted, the youth shall be referred to DMH via a

Request for Mental Health Consultation. Nursing staff that feel the youth represents a suicide threat shall place the youth on L3 status, contact the Duty Supervisor and complete a JCHS *Notification of High Risk Juvenile* form, which shall be provided to both Mental Health and the facility Duty Supervisor.

Mental Health Screening Process: The Department of Mental Health staff shall conduct a mental health screening of all youths newly admitted to juvenile hall utilizing the Massachusetts Youth Screening Inventory II (MAYSI-2) within 72 hours of arrival. This screening is followed up by an interview by the Department of Mental Health clinician.

These two processes are utilized to help identify those Youths who present self-injurious and/or suicidal tendencies. If any are noted, the clinicians shall place youth on an appropriate level of supervision (Level II or III supervision), complete a TCMS update form, complete a *Mental Health Recording* form and contact the Duty Supervisor.

Formalized Orientation Process: As part of the formalized orientation process, facility staff shall newly admitted youths a series of questions in an effort to identify those who may have self-injurious and/or suicidal tendencies. If a youth admits to any current or previous suicidal ideations, self-harming activities or suicide attempts, the youth shall be referred to the DMH via a *Request for Mental Health Consultation*.

Education Screening Process: LACOE conducts educational screenings on all youths admitted to facilities. Occasionally, during the process, a youth will indicate either current or previous suicidal ideations and/or self-harming activities. When this occurs, the youth shall be referred to DMH via a *Request for Mental Health Consultation* referral form and

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school official shall contact the facility's Duty Supervisor and advise the Duty Supervisor of the situation.

Physical Examination Process: JCHS physicians conduct physical examination of a newly admitted youth to juvenile hall (off street). As a part of the physical examination process, physicians inquire as to any current or previous self-harming and/or suicidal activities. If any are noted, the youth shall be referred to DMH via a *Request for Mental Health Consultation*. Physicians who feel the youth represents a suicide threat will coordinate with nursing staff to initiate an L3 supervision process. Nursing staff shall place the youth on L3 supervision status, immediately contact the Duty Supervisor telephonically or in person, and complete a JCHS *Notification of High Risk Juvenile* form, which shall be provided to both DMH and the Duty Supervisor.

Daily Observation: Throughout a youth's stay within the facility, staff shall be alert to those youths that involve themselves in self-harming and/or suicidal activities. When these activities are noted or observed, it is incumbent upon all Probation, JCHS and LACOE staff to immediately refer those youths to the DMH via a *Request for Mental Health Consultation* form and contact the Duty Supervisor so that appropriate suicide precautions (supervision and housing) can be initiated to keep the youth safe pending assessment by DMH clinician. HOPE Center (HOPE Center) or Assessment Unit Mental Health Clinician Assessment: The DMH clinician assigned to the facility shall, upon coming on duty during the 6:00 a.m. to 2:00 p.m. shift and during the 2:00 p.m. to 10:00 p.m. shift, conduct rounds of the HOPE

Center and assessment unit and shall assess youths identified by staff or observed by the clinician to be experiencing adjustment difficulties or other mental health-related issues. The clinician shall also determine whether existing mental health needs contraindicate the placement of a youth in the HOPE Center or assessment unit and whether a different level of supervision is indicated for the youth.

(Meets standards set forth in Title 15, Section 1329 (b) (3))

IV. INTERAGENCY COMMUNICATIONS REGARDING SELF-HARMING YOUTHS

It is critical that arresting officers and staff from Probation, DMH, JCHS and LACOE as well as parents guardians and other caregivers share information regarding potentially suicidal or self-harming activities so that appropriate precautions (supervision and housing) can be initiated to keep youth safe. The following practices have been implemented to facilitate the sharing of information:

Request for Mental Health Consultation: In each instance when Probation, JCHS or LACOE become aware of a youth's desire to harm himself or herself, they shall initiate appropriate supervision practices to keep the youth safe and communicate this information via a *Request for Mental Health Consultation* form to DMH.

(Meets standards set forth in Title 15, Section 1329 (c))

Mental Health Consultation Request for a youths transfer to the HOPE Center, Involved in a youth-on-youth Violence or Safe Crisis Management Physical Intervention Incident: When

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a youth is sent to HOPE Center, involved in a fight or an assault, or is involved in an incident where safe crisis management physical intervention techniques (physical restraint) are utilized, he/she may undergo some emotional stress. In each of these situations, a *Request for Mental Health Consultation* form shall be initiated and for youth to DMH so that they may assess the youth's mental state post incident. The shift leader in the HOPE Center shall be responsible for ensuring that a copy of these referrals are received and placed in the file of each youth sent to the HOPE Center.

Mental Health Recording Forms: Each time DMH clinician assesses a youth, the clinician shall prepare a *Mental Health Recording* form (commonly referred to as a green sheet), which shall generally indicate to Probation and JCHS staff the youth's current mental health state, any recommended changes in current level of supervision and any other information the clinician feels probation staff should be aware of how to appropriately care for the youth.

Mentally Medical Chart Recordings: Medical staff shall, as necessary, record in mental health record their observation of youths who are on L2 or L3 supervision status within the medical unit and shall indicate to Mental Health any observed changes in behavior that may necessitate a change to the youth's level of supervision.

Facility Alert Log: Youths who are potentially or actively at risk of self-harm or suicide (L2, L3 or L4 status) or that are on a specialized supervision plan shall be noted on the facility's Alert Log. The Alert Log shall be provided each morning via fax or email to all individuals and agencies within the facility that has contact with the youths. This log shall be updated daily after collaboration between Probation and DMH, has contact with the youth. Placement onto and removal from Alert Log is accomplished via a PCMS update and a completed *Request for a Medical Health Consultation* form, or a completed *Mental Health*

Recording form at the facility. This Alert Log shall consist of the names and other identifying information (PDJ number, regular living unit or camp, date placed on supervision level, name of clinician placing youth on the level, and the date of the next mental health review at a minimum) of youths. Discrepancies shall be reviewed and collected via the PCMS update process. At all facilities, adjustments to the Alert Log shall be coordinated between the Duty Supervisor, DMH and JCHS as necessary and appropriate after discussion and approval. The Duty Supervisor at the facility shall facilitate changes to the other log. There must be a new Alert Log printed and posted each day, and copies of all older log(s) retained in the facility director's office.

Probation Caseload Management System Update: Each time the level of supervision of a youth in juvenile hall is raised from Level 1 to Level 2 or Level 3 to Level 4, or lowered, a PCMS update form is to be completed by the individual initiating the change. Only the Duty Supervisor, Nursing staff or Mental Health Clinician are authorized to initiate a PCMS update for changes in Enhanced Supervision Levels.

Facility Population and Grade Sheet: Each time the level of supervision of a youth in the facility is changed either up youth or down youth, the facility population sheet and the Duty Supervisor's Alert Log are to be notated to reflect those changes.

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Level 3/4 Enhanced Supervision Observation Form: Each youth placed on L3 or L4 status shall have an L3/L4 *Enhanced Supervision Observation* form initiated and maintained on each shift during the youth's assessment of L3 or L4. This form shall be used to communicate to DMH or JCHS any changed behavior or perceived need to change the level of supervision.

Movement Coordinator Collaboration – Transfers of L2, L3, L4 Enhanced Supervision and Specialized Supervision Status Youths: Movement coordinating staff at the facility, at the direction of the Duty Supervisor, are responsible for coordinating movement of youths into and out of camp and shall be cognizant of suicidal and self-injurious youths, L2, L3 or *Specialized Supervision Plan* youths, that are scheduled for movement to camp, court, medical appointments or other juvenile halls, or to the Department of Juvenile Justice. The coordinating staff shall ensure that PCMS Transmittals, or other transmittals, reflect those special codes and/or enhanced levels of supervision, and that staff assigned to transport these youths (including the Sheriff's Department) are aware of enhanced levels of supervision required. Movement coordinating staff sending these youths on movement shall notify the receiving facility that youths require L2, L3 or specialized supervision are being transferred to the receiving facility.

Staff coordinating movements of these youths in the facilities shall be especially alert to those youths not already on Level 2, Level 3 or Level 4 that are returning from court hearings, medical appointments and/or special visits. Each of these situations could potentially have resulted in some level of negative outcome for the youth, which may result in the youth contemplating self-harming behaviors and/or a desire to act out. Staff coordination movements should be alert to the potential of these situations and should engage the youth(s) verbally and inquire as to the results of the court appointment or visits to ascertain the emotional status of these youths as best they can. If it appears that a youth

is emotionally unstable, appropriate direct supervision, as instructed by the Duty Supervisor, shall be provided to the youth pending assessment by a DMH clinician.

Youths Transferred in from Other Juvenile Halls and Camps: Notwithstanding the previous requirements, movement coordinator staff, clerical admitting staff and other staff as directed by the facility Director shall be responsible for reviewing incoming transmittals on all new transfers into the facilities from other facilities to determine if any of the youths are currently assigned to L2 or L3 enhanced supervision status or are on specialized supervision plan. If any of these incoming youths are determined to be on L2, L3, Enhanced Supervision status or Specialized Supervision Plan, the movement coordinator shall at the receiving

facility be responsible for notifying the facility Duty Supervisor regarding the youth's specialized supervision status so that appropriate supervision practices can be immediately initiated to keep the youth safe pending assessment by the DMH clinician, initiating *Request for Mental Health Consultation* form, and notifying the facility Alert Log Coordinator of the youth(s)' arrival so that the facility's Alert Log can be appropriately updated.

Mental Health Transfer Summary: When Youths with mental health issues are transferred between probation facilities, DMH shall for youth to the receiving facility a "*Mental Health Transfer Summary*" consisting of, but not limited to the following: *Child/Adolescent*

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Assistance form, MAYSI-II results, *Belief Symptoms Inventory* (BSI) form, relevant medication logs and relevant progress notes pertaining to L2, L3 or L4 observations.

Shift Leader Briefing: Once daily, at the beginning of the day's shift, the shift leader shall conduct a shift briefing with the staff. A part of that briefing shall consist of a review of the unit/facility's at risk youths, which shall include a review and discussion of the Alert Log and mental health recording documents pertaining to the youths in the living unit, camp or DKC facility that may exhibit emotional and/or behavior problems as well as a reminder to those staff of the ongoing role in preventing self-harming or suicidal incidents. The shift briefing shall be documented in the shift leader's shift condition reports in juvenile hall or the camp duty supervisor log in camps.

Individual Behavior Management Planning (IBMP) or Multi-Disciplinary Team (MDT) Meeting: Each facility hall or camp shall conduct regularly-scheduled individual behavior management planning or multidisciplinary team meetings, during each identifying youths that are involved in self-harming and/or suicidal behaviors are referred for discussion. At these meetings, specialized supervision, housing and/or educational plans shall be created as necessary and appropriate. This meeting shall consist of representatives from Probation, from DMH, JCHS and LACOE as necessary and appropriate. Camp facilities and the Dorothy Kirby Center shall convene multidisciplinary team meetings as time and circumstance dictate to address self-harming and/or suicidal youths in their facility.

Suicide Prevention Assessment Committee: A portion of the weekly IBMP and MDT meetings at each juvenile hall shall be dedicated to the assessment, discussion and classification of self-harming incidents that occur during the previous seven (7) day period. The committee will also keep minutes of these meetings and make further recommendations for minimizing future attempts and eliminating identified physical hazards

within the facility. Each camp that houses suicidal and/or self-harming youths shall convene a Suicide Prevention Committee meeting on a monthly basis in order to address any suicide attempts or serious self-harming incidents occurring during each previous month.

Court and Parental Notification of Self-Harming Activity: Camp staff shall ensure that youth's parents, the court, the probation officer and/or social worker are notified of any self-injurious harm or suicidal activities presented to Probation Directive 867, entitled *Reporting Serious Injuries, Illness and Attempted Suicides to the Juvenile Court*.

Suicide Prevention" Code Blue" Drills: In an effort to ensure an efficient emergent response to suicide attempts, Code Blue drills shall be conducted throughout all probation

departments, institutional facilities on a scheduled basis as directed by the facility Director. These drills shall be documented on special incident reports and copies of these reports maintained in the Camp Director's Office.

V. INTERVENTION TO PREVENT SELF-HARMING OR SUICIDAL BEHAVIORS

The assessment of suicide risk and the prevention of suicide attempts are an ongoing process and should never be viewed as uniformly separate issues. Because a youth may present self-injurious and/or suicidal behaviors at any point during their stay in a facility,

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suicide prevention interventions (including appropriate housing and suicidal supervision precautions) shall commence at the point of intake and continue until he/she is released from the facility.

The most important suicide prevention/intervention tool available to staff is the performance of required safety checks not to exceed staggered intervals of 15 minutes between safety checks for all youths and 10 minutes for L2 status youths that are housed in rooms. Historically, data regarding institutional suicides indicates that a majority of suicides successfully completed in detention facilities are perpetrated by individuals that were not previously identified by authorities as being potential suicide risks. Accordingly, staff that is supervising youths intently, performing required safety checks and providing appropriate supervision to youths assigned to L2 and L3 statuses, are less likely to have suicide attempts succeed while they are on duty.

(Meets standards set forth in Title 15, Section 1329 (b) (1))

Staff assigned to living units, dormitories, colleges or the HOPE Centers shall at the beginning of each shift ensure that all emergency equipment (which may include a self-aid kit, an Ambu bag and/or face shield, biohazard kit, disposable gloves, cut-down tool, handcuffs, soft restraints, safety helmets and suicide gowns) assigned to the unit are in the proper place and fully accessible for use in the event of an emergency. The presence of this equipment shall be recorded in the dormitory and HOPE Center Log Book in camp. If any safety equipment is missing or not fully accessible, the Duty Supervisor shall be notified immediately.

The primary assessment and intervention agency in camp is DMH. Any youth suspected of harboring self-injurious and/or suicidal ideations shall be immediately referred to DMH for treatment. Until the youth is seen by DMH, staff shall show concern and encourage the

youth to express feelings in order to lessen his/her sense of isolation and anger, while at the same time providing appropriate suicide supervision precautions until assessment by DMH. These, however, are supportive measures only and as such, should in no way refrain, interfere with or delay the process of a DMH referral.

Youth involved in incidences of self-harm shall be referred to DMH for assessment and treatment designed to minimize their desire and/or ability to engage in incidents of self-harm and increase coping skills. Referral is accomplished when a staff member submits a *Request for Mental Health Consultation* form to DMH. A DMH clinician shall evaluate the youth as soon as possible and make a recommendation for an appropriate level of supervision of the youth.

The levels of on-site facility supervision allow for Enhanced Supervision and Specialized Supervision to occur at Level 2 or Level 3. Youths requiring ongoing specialized programming designed to minimize self-harm shall, as appropriate, be referred for an assessment by the camp's Multi-Disciplinary Team.

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An immediate verbal notification of the assessment findings which increase the supervision level of any youth to L2 or L3 Enhanced Supervision status or recommend the transfer of the youth to a higher level of care presented to WIC 5150 shall be immediately made to the Duty Supervisor by the DMH clinician either telephonically or in person, followed by written notification to the Duty Supervisor.

The Duty Supervisor shall be notified in writing via a completed copy of a "*Request for Mental Health Consultation*" or a copy of a green "*Mental Health Recording*" form for any youth placed on enhanced supervision status. Since these supervision levels may be used for a number of different clinical and behavioral conditions, DMH must state the specific reason for the order accompanied by specific recommendations for housing and management of the youth.

Mental Health should distribute copies of the completed "*Request for Mental Health Consultation*" form to the facility Senior Director/director, youth's home unit/camp, unit/camp supervisor, Duty Supervisor, special handling unit/specialized unit currently housing the youth, JCHS, DMH office and LACOE (if the referral name came from LACOE).

DMH is generally the agency that places youths on enhanced supervision status. However, Probation, JCHS or the court may independently place a youth on enhanced supervision status for mental health-related reasons pending assessment by DMH. When this occurs, the youth shall be referred to DMH immediately.

NOTE: In crisis situations, if there is no Mental Health staff on duty in a facility, Health Services shall consult with the on-call Psychiatrist for any requested change in level of supervision. If there is no medical staff on duty in the facility, the Duty Supervisor shall consult with the on-call Psychiatrist.

ATTEMPTS TO GAIN AN ELEVATED POSITION: In accordance with Directive 1188, Enhanced and Specialized Supervision Requirements for Youths in Juvenile Facilities.

Attempts by a youth to gain access to a roof, stairwell, tree or backstop may require a deputized Probation Officer to initiate, "Immediate Use of Physical Intervention" because the youth presents an **immediate** threat to the safety of themselves due to the nature and severity of the situation.

Note: De-escalation strategies will be initiated prior to the use of all physical intervention whenever possible.

YOUTH IN AN ELEVATED POSITION: If the youth is successful in their attempt to gain an elevated position, the following procedures should be followed to ensure the safety of the youth and staff.

- a. Initiate and follow "Code Blue" procedures whenever life threatening suicide attempts are observed.
- b. Request back-up assistance from other staff and continue to provide direct supervision of the youth in crisis.
- c. Request supervisory assistance.
- d. Request DMH assistance.

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- e. Back-up staff shall notify Movement Control or the facility's main security office of the emergency before providing support.
- f. The Duty Supervisor will call 9-1-1 for emergency services in all cases that appear to be life threatening or if a serious injury may occur.
- g. The Duty Supervisor will oversee the extraction to be conducted by staff and coordinate emergency services by contacting Movement Control or the facility's main security office regarding the location and nature of the emergency for medical staff and/or paramedics to be directed to the appropriate area.
- h. De-escalation:
 - Counsel the youth to gain compliance.
 - Direct youth to comply while explaining the significance of non-compliance.
 - If the youth is de-escalated and becomes compliant, the youth will be provided direct continuous visual supervision to ensure their continued safety (i.e. Level 3 – Enhanced Supervision) pending DMH assessment.
 - A Specialized Supervision Plan shall be generated to address the youth's supervision, security, treatment practices, searches, etc. that are to be afforded to the youth during waking and sleeping hours.
- i. The Duty Supervisor will determine whether force is needed to facilitate compliance if the situation becomes life threatening (objectively reasonable), and will act in accordance with the Physical Intervention Policy if force is deemed necessary.

Suicide Attempt Procedures: Residential Treatment Services Bureaus have established the following procedure to be adhered to in addressing those youths who become involved in self-injury attempts ranging from small scratches to death. Staff shall consider all self-inflicted injuries as significant and as possible precursors to an actual suicide attempt. When handling suicide attempts, staff shall:

- Initiate the follow "Code Blue" procedures whenever life-threatening suicide attempts are observed;
- Request backup assistance from other staff before approaching the youth;
- Control self-harming behavior immediately;
- If a youth has attempted hanging, retrieve the emergency cut-down tool. **Two staff shall then join to lift the youth, relieve pressure on the neck and remove the noose or utilize the cut-down tool to remove the noose.** CPR shall be employed and continued as necessary until medical staff or emergency fire paramedic personnel have arrived and assumed life-saving efforts;
- Request backup staff shall notify Movement and Control or the facility's main security office of the emergency before providing assistance;
- Request fire department emergency services in **all** cases of serious attempted hangings, asphyxiation or serious injury;
- Ensure that Movement and Control or the facility's main security office is notified regarding the location and nature of the emergency so that medical staff and/or paramedics can be directed to the appropriate area to provide assistance;
- Facilitate medical staff and/or paramedic decisions regarding when and where the youth is to be moved and determine whether or not the youth's injuries are to be treated at the facility;

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- Ensure seriously injured youths are transported by ambulance to the nearest emergency hospital upon the advice of the attending medical staff or emergency rescue personnel;
- Ensure that youths involved in making suicidal threats and gestures are constantly observed by staff pending assessment by the DMH staff;
- If necessary, confine a self-injurious youth to his/her room for critical safety and/or security reasons pending arrival of medical staff, paramedics, the Duty Supervisor or DMH staff. If this type of confinement is necessary, a staff member shall provide constant visual observation of the Youths in the room when doing door pending assessment of the situation by the Duty Supervisor or other supervisory staff;
- Immediately refer youths engaging in self-harming behaviors or engaging in suicide threats or gestures as well as those attempting suicide and DMH for assessment;
- In serious situations, telephone DMH and request an immediate consultation for a youth if a clinician is on grounds and available. If there is no DMH clinician on grounds, the on-call psychiatrist is to be contacted;
- Complete a *Special Incident Report* or a *Physical Intervention Report* (if physical force was used), which clearly articulates the behaviors observed, contacts made and actions taken on behalf of the youth;
- Ensure that a PCMS update form is initiated and a special coding of suicide attempts (S) is added to the system;
- Prepare a "Request for Mental Health Consultation" form and for youth it to DMH;
- Chart on all self-harming and suicidal behavior, including threats and gestures as well as actual suicide attempts. Medical staff shall chart on these incidences as well;
- Ensure that each incident where a PCMS update after a suicide attempt occurs, the youth's behavior chart is amended with an "S" code affixed to the outside front of the behavior chart in red lettering that is 3 inches in height. A white code shall be affixed to the inside left front cover sheet of the behavioral chart;

VI. REPORTING

- The Deputy Supervisor shall immediately notify the facility Director of any successful suicide, serious suicide attempt or serious self-injurious incident
- The Camp Director or Dorothy Kirby Center shall notify the respective Bureau Chief of the incident as appropriate;
- The camp Director or Dorothy Kirby Center Director shall notify the Regional Director of the incident as appropriate and the Regional Director shall notify the Bureau Chief;
- The youth's parent or guardian shall be contacted as soon as practical and advised of the youth's behavior/status. In addition, the court and the youth's Probation Officer shall be advised of the youth's actions presented to Directive 867 (Reporting Serious Illnesses, Injuries and Attempts at Suicides to the Juvenile Court); and,
- The incident shall be referred to the facility's Multi-Disciplinary Team for review and classification at the next scheduling meeting.

VII. INVESTIGATING SERIOUS SUICIDE ATTEMPTS AND/OR SUICIDES

- Should a successful suicide occur, local law enforcement shall be immediately notified;

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- The facility Director shall assure that full cooperation is provided to local law enforcement agency charged with investigating the incident;
- The facility Director shall ensure that the *Death in Custody Report*, as required by the Bureau of State and Community Corrections is completed and for youth to the California Department of Justice.
- The Department shall conduct an internal investigation of these incidents.

VIII: MORTALITY/MORBIDITY/SUICIDE REVIEW PROCESS

In the event of a completed suicide or a serious suicide attempt that requires medical hospitalization, a mortality/morbidity/suicide review process shall be initiated by the facility's Director, which may include a psychological autopsy in this case of a fatality. A multidisciplinary review team consisting of representatives from Probation, DMH, JCHS, LACOE and other members as designated by the facility administrator, Bureau Chief or Chief Probation officer shall participate in this review. This review shall be conducted separate and apart from any internal or confluent investigation being conducted by other parties and shall be completed within 30 days. The investigation shall address the following areas:

- A review of circumstances surrounding the incident;
 - Who was involved
 - How did it happen
 - What actually occurred
 - When did it happen
 - Where did it happen
 - Why did it happen
- Review of compliance with procedures (i.e. what policies and/or procedures were in place to safeguard the youth and whether or not they were violated);
- A review of all related trainings received by staff involved;
- Review of potential medical and mental health reports involving the youth with a particular focus on those reports that indicate the youth was at risk of harm;
- Review of any possible precipitating factors that may have caused the youth to attempt self-harm or suicide;
- Recommendations, if any, for changes in policy, training, physical plan, medical or mental health services and internal operational procedures.
- Critical stress debriefing. After a serious incident occurs, supervisor staff shall meet individually with the involved youth(s) and staff to review the incident and make an assessment regarding the need to make crisis counseling available to the involved staff. Supervisor staff shall conduct facility administrator and DMH. DMH shall facilitate appropriate counseling services for those affected youth staff as necessary.
- The facility director shall provide a written report to the Bureau Chief regarding the incident.

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Subject: RESIDENTIAL TREATMENT SERVICES BUREAU MANUAL DAILY OPERATIONS	Section Number: RTSB-1300
	Effective Date: July 21, 2020
	Approved By: Jennifer Kaufman, Bureau Chief

1301 DAILY OPERATIONS

1302 INTRODUCTION

The section addresses various matters involved in the daily operation of a camp.

1303 SCHEDULE

Each camp is responsible for developing a daily schedule that shall be distributed to staff the evening prior. The schedule shall detail each camp activity and the staff members' responsibilities relating to each activity. All staff shall report to their duties on time. All staff shall be present and on time to assist with regular line movements and meals, whether named on the schedule or not.

Each camp shall develop a monthly schedule identifying all staff and their assigned shifts. The monthly schedule shall include:

- Regular days scheduled to work
- STC training
- Vacation
- Shift vacancies

Once the master schedule is issued, it shall be maintained in the AD's office. Approved changes will be updated in ink by the approving supervisor.

1304 PERSONAL HYGIENE, SHAVING, AND HAIRCUTS

The daily schedule shall include time periods during which the youth will tend to their personal hygiene needs. Youth shall have the opportunity to brush their teeth after every meal. Youth shall be able to use the restroom during scheduled periods and any time, unless issues of safety and security do not permit it. Youth shall use the shower each day. Youth shall have access to a razor, unless their appearance must be maintained for reasons of identification in Court. All youth shall have equal opportunity to shave face and body hair. Facility administrator may suspend this requirement in relation to youth who are considered to be a danger to themselves or others.

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Youth shall be permitted to shave every day and to receive haircuts on a monthly basis. Procedures for shaving and haircuts are detailed below.

If the youth requires any special accommodations to perform personal hygiene tasks such as showering, changing or using the restroom (such as a youth with a cast on his/her arm) the staff shall attempt to provide the youth with the means to facilitate his/her needs or refer the youth to JCHS to assist them with their need.

(Meets standards set forth in Title 15, Section 1413(e) and 1487).

Shaving Procedures

Youth are allowed the use of disposable razors only, which are kept in a designated area available only to staff. Staff shall issue a razor to the youth and monitor the youth during shaving. The youth shall return the razor to the responsible staff member, who shall place the used razor in a receptacle designated for disposal.

Haircut Procedures

Staff members, as well as licensed barbers and cosmetologists, may give haircuts to camp youth. The same regulations that apply to barbers in the community apply to staff providing hair care services at camp. Youth are not allowed to cut the hair of other youth. A #2 clipper safety guard shall be used for all male youth to ensure appropriate hair length.

Staff shall adhere to the following procedures:

- Equipment used for cutting hair shall be stored in a designated area available only to staff. Staff shall not leave equipment unattended.
- Equipment used for cutting hair shall be disinfected according to health and safety regulations before each use.
- All sterilizing chemicals shall be stored in secure areas available only to staff.
- All disinfectant solutions must be registered by the Environmental Protection Agency (EPA) and possess bactericidal, fungicidal, and veridical capabilities. If an EPA-registered disinfectant, this information will be printed on the product's label.
- All non-electrical instruments and equipment shall be disinfected as follows:
 - Scrub each implement with a clean brush in a solution of soap and water to remove all organic matter.
 - Rinse implements thoroughly in clean water.

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- Pat the implements dry, using a clean paper towel or cloth in order to prevent dilution of the disinfectant.
- Completely immerse the implements in the disinfectant for at least 10 minutes.
- Remove the implements wearing gloves or using clean tongs.
- Rinse the implements with clean water and pat dry. Oil any scissors or pointed implements to prevent rusting and to maintain a clean cutting edge.
- Store the implements in a clean, covered container to prevent contamination.
- All electrical instruments shall be disinfected as follows:
 - Remove all foreign matter.
 - Disinfect all removable parts as indicated above.
 - Use commercially-prepared disinfectant sprays on electrical instruments that cannot be immersed.
 - Store electrical instruments in a clean, covered container that is properly labeled.

All containers used for disinfecting purposes must be properly labeled and equipped with a tight-fitting lid. The disinfectant solution must be changed weekly or whenever cloudy or dirty.

1305 CLOTHING AND BEDDING EXCHANGES

Each day, staff shall provide the youth with a clean pair of , socks, and t-shirt. Youth shall exchange pants and sweatshirts once each week, or whenever they become soiled. Clothing shall be clean, reasonably fitted, durable, easy laundered and in good repair, and free of holes and tears.

Youth residing in camp shall also be provided with a mesh laundry bag, which they may utilize to clean their undergarments. Youth shall receive their own under back at exchange. Additional clean undergarments shall be made available for replacement should the youth's undergarments become soiled.

Youth at DKC are given the opportunity to do their own laundry on a daily basis. Each youth is responsible for washing their own sheets, blanket and clothing with the washing machines provided in the cottages. Clean clothing is kept on hand in the cottage to be given to the youth in case their clothing becomes soiled.

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Youth shall exchange their sheets and bath towels each week or whenever they become soiled. You shall be given one blanket or more, upon request.

It is the policy of the probation department and RTSB that suitable clothing is issued to pregnant youth.

Each camp is responsible to develop a schedule for exchanging clothing and bedding that is in compliance with this policy.

(Meets standards set forth in Title 15, Section 1480 (a-d), 1482, & 1500 (e))

1306 PROGRAMS, RECREATION, AND EXERCISE

The daily schedule shall include programs, recreation and exercise periods for all youth a minimum of three (3) hours per day during the week and five (5) hours per day on Saturday, Sunday, and non-school holidays. Recreation shall include the opportunity for at least one hour of supervised unscheduled activities such as leisure reading, letter writing, watching television, listening to music, and playing games, maximizing the time that the youth spend out of their rooms/off their bunks. Thus, the intent to minimize the amount of time youth are in their rooms or their bed area. Activities shall be supervised and include orientation and may include coaching of youth. All youth shall be provided with the opportunity for at least one hour of daily programming to include, but not 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. Programs shall be based on the youth's identified needs from their Initial Institutional Assessment and Institutional Plan. Such programs may be provided under the direction of LACOE and can be administered by county partners such as DMH, community-based organizations, faith-based organizations or Probation staff. Youth shall be allowed at least one hour of daily outdoor activity, one hour of unscheduled activities and access to programs as outlined in Title 15, Section 1371 such as:

- 1) Cognitive Behavioral 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

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- 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 Civil Engagement
- 17) Career and leadership opportunities
- 18) Other topics suitable for the youth population

Weather permitting, the youth shall be afforded the opportunity to participate in at least one hour of outdoor exercise daily involving large muscle group activities. When outdoor exercise is not available, youths shall be permitted one hour of indoor large muscle activity. The camp director shall ensure that a copy of the recreation schedule that details the recreation, exercise, and camp programming activities shall be posted in the dorm in an area accessible to the youths.

Access to programs, recreation, and exercise may be suspended for up to 24 hours only upon a written finding by the camp manager or designee that a youth represents a threat to the safety and security of the facility. The facility administrator or designee shall document the reasons why suspension of recreation and programs occurred. Youth on a separation status shall be provided an opportunity for at least letter writing and entertainment.

A written annual review of programs, recreation, and exercise shall be conducted by the facility Director to ensure content offered is current, consistent, and relevant to the population.

1307 The Daily School/Recreation/Programing Log

Each camp under the Residential Treatment Services Bureau (RTSB) has the fundamental responsibility to provide programming activities in compliance with Title 15, Section 1371, Minimum Standards for Juvenile Facilities (effective 04/01/2014) outlined by the Board of State and Community Corrections.

All youth housed in the camps shall be guaranteed the basic needs such as school, recreation activities, counseling, and any other programs deemed necessary to assist and rehabilitate the youth while in a camp setting.

This report shall reflect the names of all youth in each living wing/unit. This report is initiated and completed prior to 10:00 p.m. and be submitted with the Supervisor daily packet. Camps can make the necessary adjustments to the time for recreation and programming activities. However, ensure at least three (3) hours of daily recreation activities are provided on weekday and five (5) hours on weekend and/or non-school days.

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DPO Responsibilities:

The Daily School/Recreation/Programing Log report shall be completed daily by the Community Sponsor from each unit/wing to ensure that each youth has been accounted for in regard to school hours, recreation activities (including large muscle exercise), counseling, and any other programming the youth has participated in.

Each day (6:00 a.m. to 10:00 p.m.), the Title 15 Programming report shall be filled out by the Community Sponsor for each living unit. The exiting Community Sponsor shall ensure the form is properly filled out before the receiving Board Counselor takes over.

SDPO Responsibilities:

At the end of each day, the Supervising Deputy Probation Officer (SDPO)/Duty Supervisor is to ensure that all Daily School/Recreation/Programing Logs forms are submitted with the daily SDPO packet to the Camp Secretary. It is the duty of the Duty Supervisor to check and ensure that all youth have their required school hours, recreation hours, and programming checked off.

Camp Manager

It is the responsibility of the camp manager or designee to provide operational oversight, establish effective quality assurance measures and ensure that all Supervisory staff are reviewing The Daily School/Recreation/Programing Log form on a daily basis. The forms are to be submitted daily with the Bureau Chief Packet to EDL-PROB ART doc probartdoc@probation.lacounty.gov.

(Meets standards set forth in Title 15, Section 1371(a-c).)

1308 MOVEMENT LOG

Each camp shall maintain a daily movement log. It shall be the 8 ½" x 13" red standard diary book. This log is the official camp record regarding the movement of camp youth. The following categories shall be included for each youth listed in the logbook:

- Name
- PDJ Number
- Date of Birth
- Reason for Movement
- Time In/Out

Assigned office staff shall be responsible for recording the movement of all youth in and out of the facility in a timely manner.

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1309 THE HOPE CENTER LOGS

Each camp with a HOPE Center shall maintain a separate HOPE Center logbook. This log shall be used both to document movement of youth in and out of the building and to communicate pertinent information to all staff. The HOPE Center log shall include the following information for all youth admitted to, or released from, the HOPE Center:

- Name
- PDJ Number
- Time In/Out
- Location sending youth to the HOPE Center (e.g., juvenile hall, disciplinary removal (D/R), camp, or dorm)
- Reason for referral to HOPE Center
- SIR received
- HOPE Center room number assigned
- Name of staff member referring youth to the HOPE Center
- Name of staff member who received the youth in the HOPE Center
- Mental Health referral completed

1310 SUBPOENAS

Periodically, subpoenas concerned with criminal matters and complaints are brought to a camp facility for service. In addition to subpoenas requiring the appearance of a staff member or youth in court, a Subpoena Duces Tecum (SDT) requires the production of documents. These can be issued in either a civil or a criminal matter. The following procedures and guidelines assist staff in expediting these matters, whether service is made by law enforcement or private process servers.

Subpoenas

Sections 827 and 828 of the Welfare and Institutions Code, along with 1424 of Juvenile Laws and Court Rules, clearly establish the confidentiality of juvenile records, as well as who may access them. The Probation Department recognizes these requirements and sets forth the following guidelines to provide procedures consistent with the policies for the release of those records, documents, and information.

- A copy of all work related subpoenas will be routed through the camp Director's office and provided by both the employee and supervisor. In the event a staff member receives a subpoena directly, he or she shall provide a copy to the supervisor, who shall then forward it to the Director.
- The following types of documents should be scanned and emailed to the custodian of records at the Civil Litigation Office immediately upon receipt, if the documents are commanding either the personal appearance of employees

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- or the production of Department, County, or personnel records.
- Subpoena Duces Tecum
- Civil Subpoena (Duces Tecum) for Personal Appearance and Production of Documents
- Deposition Subpoena for Production of Business Records
- Notice and Motion for Pitchess Hearing (also known as a Pitchess Motion)
- Notice to Defendant
- Send the original, via county messenger, to the Civil Litigation Office as follows:
Los Angeles County Probation Department
Civil Litigation Office --- Custodian of Records
9150 E. Imperial Highway
Downey, CA 90242

Any questions regarding this procedure may be directed to the Civil Litigation Office at (562) 940-2664.

Subpoena Duces Tecum (SDT)

Under WIC 827(a), certain parties or agencies are eligible to review or receive copies of juvenile records in the Probation Department's control, upon signed and certified approved of the judge presiding over the instant (current) matter.

Upon receipt of the SDT, which has been signed by the bench officer, the receiving camp must for youth it to the custodian of records at the Civil Litigation office, following the procedures detailed above. Upon receipt, the custodian of records or designee shall present original requested documents and a copy of the documents to the judge at the prescribed date and time. The custodian of records or designee must retain physical custody of the original documents at all times. These documents shall not be mailed, faxed, or otherwise for youth to the court. The custodian of records must maintain a record of all SDTs received and executed.

Appearance Subpoena – Criminal Matter

When a law enforcement officer comes to a camp in order to serve a criminal subpoena, the supervisor shall ensure that:

- The staff member to be served is made available, in private, for service
- If the staff member is unavailable and the subpoena is directly related to his or her employment with the Probation Department, the supervisor shall accept the subpoena and personally ensure that the individual is served.
- If service is accepted, the date, time, and name of the person serving the subpoena shall be recorded in the Office Log Book for future reference.

CIVIL SUMMONS

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Periodically, the Department is named in a civil suit. Normally, civil suits are served at Probation headquarters; however, service is occasionally made to a camp Director. When this occurs, the following steps shall be taken:

- Immediately upon service, the camp Director or designee shall notify the Department's civil litigation office, Monday through Friday, 8:00 a.m. to 5:00 p.m., by calling (562) 940-2664.
- A copy of the summons shall be scanned and emailed to the custodian of records at the Civil Litigation Office.
- The original summons shall be mailed as follows:
Los Angeles County Probation Department
Civil Litigation Office --- Custodian of Records
9150 E. Imperial Highway
Downey, CA 90242

Note: Federal civil actions require a response within 20 days from date of service. Local and state courts request a response within 30 day from date of service. Since County Counsel responds on behalf of the County, it is imperative that complaints or subpoenas be for youth to the litigation coordinator immediately to allow sufficient time to response in a timely manner. Failure to do so may result in a default judgment.

Civil Summons – Staff Individually Named (Job Related)

If a staff member is individually named in a lawsuit and the process service arrived on grounds to serve the employee, the following shall occur:

- Immediately upon service, the supervisor shall notify the camp Director. The Director or designee shall notify the Department's civil litigation office, Monday through Friday, 8:00 a.m. to 5:00 p.m., by calling (562) 940-2664.
- A copy of the summons shall be scanned and emailed to the custodian of records at the Civil Litigation Office.
- The original summons shall be mailed as follows:

Los Angeles County Probation Department
Civil Litigation Office --- Custodian of Records
9150 E. Imperial Highway
Downey, CA 90242

Civil Summons – Not Job Related

If the process service arrives on grounds to serve a civil suit on an employee and

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the summons is not job related, the following shall occur:

- If the employee agrees to accept service, the process server shall accomplish this in a private area.
- If the employee is not available, service shall not be accepted.

1311 SUPERVISION

The provision of a safe and secure environment is the primary responsibility of all camp staff. Detailed information regarding supervision practices is located in section RTSB-1100 of this manual.

1312 SECURITY CHECKS

It is the responsibility of camp staff to maintain a safe and secure environment for youth and staff through compliance with specific procedures. The camp facility Director or designee shall annually review, evaluate, and record all internal and external security measures including, but not limited to, key control, equipment, and staff training.

(Meets standards set forth in Title 15, Section 1326)

Camp staff are responsible for maintaining a safe and secure environment for youth and staff. This is accomplished through compliance with specific procedures.

Physical Counts

Staff shall conduct a physical count of all youth at the onset of each activity and movement. The count is the responsibility of both incoming and outgoing board staff, and it shall be conducted jointly. The results of the physical count shall be recorded in the appropriate logbooks.

Any discrepancy from the correct count shall be reported to the SDPO immediately. Staff shall be responsible for maintaining an ongoing record accounting for the location of each youth during the supervision period. The SDPO shall be responsible for verifying that all youth are accounted for at all times.

Security Checks

Before 10:00 p.m. each evening, a designated DPO shall conduct a thorough security check of the camp grounds and buildings, paying close attention to doors, locking mechanisms, screens, bolts, light fixtures, vents, etc. If there is a physical security problem that requires immediate maintenance, the SDPO shall be contacted to initiate a work order for camp maintenance personnel. The designated DPO shall document the results of the security check through camp specific procedures.

All staff shall ensure that doors are locked at the appropriate times. Utility closets,

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laundry rooms, staff offices, storage areas, and recreation rooms are to be locked at all times. Staff shall directly supervise youth who enter these areas; at no time are youth to be left unattended in these areas.

1313 SAFETY CHECKS

Juvenile Supervision Staff Responsibilities

To ensure the safety and security of youths, a designated juvenile supervision staff shall provide safety checks that consist of direct visual observation of youths at a minimum of every 15 minutes, at random or varied intervals, during hours when youths are asleep or when youth are in their rooms, confined in holding rooms or confined to their bed in their dorms.

A safety check shall use direct visual observation of youths, not to exceed 15 minutes between observations. Direct visual observation means through the eyes of a person, not through the lens of a camera; audiovisual monitoring is not intended or acceptable in lieu of direct visual observation. Monitoring devices can be effective and useful to supplement personal, direct visual supervision, but cannot be substituted for direct visual observation.

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.

Staff must see each youth to assure that he/she is alive and not experiencing any observable trauma. Juvenile facility staff are expected to observe and respond appropriately to conditions.

Safety checks shall occur at irregular time intervals – no more than 15 minutes in length – so that youths cannot predict time safety checks. At least four safety checks must be made per hour.

All safety checks shall be documented. Each safety check shall be recorded on the Safety Check Sheet. Notations by juvenile supervision staff on the Safety Check Sheet are to be handwritten in ink and shall contain the date, the legible name of the staff member conducting the check, the actual time the check was completed and any significant observable conditions.

The completion time of a safety check shall be the time entered on the Safety Check Sheet to indicate a safety check was performed. A specific time shall be entered, for example, 3:12 p.m. A period of time, such as 3:12 p.m. – 3:17 p.m., is not acceptable to indicate a safety check was performed.

Notations on the Institutional Safety Check Sheet shall only be made to indicate a safety check was completed. Any notation, in advance of real time, such as filling out times, signatures, or comments prior to completing a safety check, is strictly

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prohibited. Any notation that represents a safety check was performed, when in fact it was not, is at a minimum, a violation of this policy. Each row of the Safety Check Sheet shall be used to record the required information for a single safety check.

Notations for the "Comments" field on the Safety Check Sheet shall be used to indicate observable conditions. Additionally, staff shall indicate in the "Comments" section of the Safety Check Sheet when all Youths are removed and returned to the unit/dormitory for any reason, for example field recreation, religious services, special programs, etc.

Safety checks must be conducted during sleeping hours, as well as during the day. When Youths are under the constant direct visual supervision of staff during programming, head counts substitute for safety checks; however, room checks must continue during group programming for those Youths remaining in their rooms or dorms.

Any room that is not occupied by a youth shall be closed and locked in order to avoid the room being used for covert activities by youths.

Supervisor Responsibilities

Supervisors must regularly audit safety check logs to assure compliance.

Supervisors shall ensure new Institutional Safety Check Sheets are posted frequently enough to prevent juvenile supervision staff from recording safety checks outside of the table provided on the form.

At least once per shift, a supervisor shall make an unannounced inspection of the Institutional Safety Check Sheet in the buildings under her/his supervision and legibly sign her/his name, with date and time, on the line with the last safety check notation made by a juvenile supervision staff.

A supervisor shall ensure all Institutional Safety Check Sheets completed during her/his shift are compiled in a file in the facility.

A supervisor shall have each newly assigned juvenile supervision staff person sign and return the certification form included in this policy that certifies the staff understands the contents of Title 15, Section 1328, titled "SAFETY CHECKS". The supervisor shall place the original certification form in the staff's section (facility) personnel file.

(Meets standards set forth in Title 15, Section 1328)

1314 CARDIOPULMONARY RESUSCITATION (CPR) AND FIRST AID

All employees with direct custodial responsibility for camp youth shall be trained in

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CPR and first aid. They must annually complete mandatory CPR and first aid training, if a staff's annual training has lapsed he/she must notify their SDPO or STC coordinator to arrange for re-certification. In the event of an emergency, Probation staff are expected to immediately administer first aid or other lifesaving measures as necessary.

1315 SAFETY EQUIPMENT

Each camp shall develop procedures to ensure the following:

- Fire extinguishers, cut down tools, rescue breathing devices, handcuffs, flex cuffs, first aid kits, flashlights, leather restraints (if applicable), emergency alarms, OC canisters (if applicable), and biohazard kits are operable and properly secured.
- Fire extinguishers are available in their designated areas, and are currently dated.
- Protective masks for staff and youth use in the event of a fire or other respiratory-related emergency are available and in adequate supply.
- Cut down tool must be maintained in the identified box. All staff shall know the location of all boxes throughout the facility. Additionally, all staff shall be issued, and must carry, the red cut down tool box key whenever they are in the facility.
- Handcuffs (or other restraining devices, such as leather restraints, flex- cuffs, four-man chains and leg cuffs, as applicable to the unit) are immediately available and in good working order.
- Rescue breathing devices are immediately available and in good working order.
- Flashlights are immediately available and in good working order.
- First aid kits are immediately available and fully stocked. If the first aid kit is in need of restocking, the SDPO is to contact the nurse for assistance.
- Bio-hazard kits are immediately available and fully stocked. If the Bio- Hazard kit is in need of restocking, the camp services manager/general services manager is to be contacted.
- Emergency alarm(s) (panic buttons/knock-off telephones) system is/are in good working order. MSB personnel must test the alarm system on a regular basis. This test shall ensure the good working order of the unit's emergency alarm system (i.e., panic buttons and/or knock-off telephone). In instances where the device is not operating properly, the SDPO shall be contacted and an

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Emergency Work Order submitted immediately.

- The OC canisters of all unit staff are in their possession and properly secured to their person. Staff shall shake the canister monthly to maintain effectiveness. Staff are required to comply with all requests related to monitoring and weighing OC canisters.

1316 SEARCHES IN DETENTION FACILITIES

It is the policy of the Probation Department and RTSB that searches shall be conducted to ensure the safety and security of youth and staff, visitors, the public, as well as probation facilities. 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. Searches may be conducted as deemed necessary by administration on a routine or random basis.

It shall be the policy of the Detention Services Bureau and Residential Treatment Bureau that all youth shall be searched upon entry to the facility and prior to being transferred out of the facility.

INTAKE TO FACILITIES

- When youth are admitted to the facility, receiving staff shall immediately take control of the youth and any personal property that they may have with them.
- A metal detector search and pat-down search shall be performed immediately upon his or her arrival regardless of offense. A pat-down search consists of a search where deputized personnel perform a physical search of a youth while the youth is clothed. The search requires:
 - The movement of the same sex searcher's hands over the body;
 - Pressing the clothing in an attempt to detect any concealed weapons or contraband;
 - Pulling out pockets on pants, takes off shoes and socks and shakes them out, lift up pant leg to expose the back of the knees;
 - Running fingers through waistband of pant or skirt;
 - Youth running his/her fingers through hair; and
 - Visually inspecting youth's ears, nose and mouth.
- An officer of the same sex as the youth shall conduct the pat-down search.
- A strip search may be conducted when there is reasonable suspicion (must be based upon specific and articulate facts) that the youth is in possession of contraband or weapons.
- In accordance with Directive 1056, staff are allowed to perform strip searches (requires the youth to remove or arrange some or all of his/her clothing so as to perform a visual inspection of underclothing, breasts, buttocks or the minors

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genitalia) with the approval of supervisory staff and a completed Strip Search Authorization Form that clearly articulates the need for the strip search.

- A youth's charge and or prior history of possessing contraband are strong indicators of reasonable suspicion, however, the decision to authorize a strip search must be based on reasonable suspicion that the youth is concealing a weapon, drug or other contraband; that such contraband could not be detected by a pat-down search, and that a strip search will result in the discovery of the contraband.

YOUTH ON MOVEMENT OUTSIDE FACILITIES

- When a youth is preparing to go on any movement from a facility for outside medical appointments, court appearances, or transfers between probation facilities, a pat-down search shall be conducted on the youth prior to leaving the cottage or dorm.
- Staff shall perform a thorough search of the youth's personals where applicable prior to leaving the cottage or dorm.
- Staff shall search youth before transportation staff take over supervision to reduce the chance that contraband was missed.

YOUTH ON ENHANCED LEVELS OF SUPERVISION

- Youth on Level 3 Supervision are prone to self-injury and suicidal behavior. As such, these youth shall be searched (pat-down) at the beginning of both the AM and PM shifts and when the youth returns to the room following any activity. If the youth is awake on the 10/6 shift, a pat-down search shall be conducted. If the youth is sleeping at the change of shift, a visual search shall be conducted.
- DKC - A search of their rooms shall be conducted at the beginning of both the AM and PM shifts. If the youth is awake on the 10/6 shift, a search of their room shall be conducted. If the youth is sleeping at the change of shift, a visual search shall be conducted.
- When staff observe any youth with an object that can be used to hurt themselves or others, staff shall search that youth immediately to retrieve the object.

SEARCHING YOUTH COTTAGES AND DORMS

- DKC Staff shall search youth's room on a daily basis. Staff shall search the entire room or camp dorm area; bed area, sheets, blankets, desks, any personals that are in the room, door jams, windows, and light fixtures. They shall ensure that doors lock properly and that no obstructions are present.
- All areas that youth have access to should be searched on each shift, this

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includes but is not limited to:

- Utility Rooms
 - Laundry Rooms
 - Common areas
 - Restrooms
 - Closets/Cabinets
- Youth shall be searched (pat-down) any time they return to the unit or dorm from:
 - School
 - Recreation
 - Court
 - Medical Unit
 - After any type of visit

CLOTHING SEARCHES DURING SHOWERS

- Staff shall conduct a clothing search (a search of the youth's clothing which has been removed and put aside) on a daily basis while the youth is taking a shower.

FIELD AREAS

- Staff shall conduct frequent searches of the facility for any type of contraband or weapons.
- Staff shall do a cursory search of field areas before minors are allowed to recreate.
- After recreation is completed, staff shall do a cursory search of the area.
- A search of the field areas shall be included in the facility security check.

1317 BODY SEARCHES (PAT-DOWN, STRIP, AND BODY CAVITY SEARCHES)

To maintain a safe and secure setting for youths, staff, and civilians in the camp environment, deputized personnel shall search youths in camps, in compliance with the Department's search procedure. Strip searches and visual or physical body cavity searches shall comply with Penal Code Section 4030.

Definitions

All camp personnel shall be familiar with the terms and definitions listed in this section.

Reasonable suspicion: Reasonable suspicion is the knowledge sufficient to induce an ordinarily prudent and cautious person under the circumstances to

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suspect criminal activity is or has taken place. A “hunch” or a “guess,” without more, does not constitute reasonable suspicion. Concerning strip searches or visual body cavity searches, reasonable suspicion must be based upon specific and articulate facts that the specific youth is concealing a weapon or contraband, and a strip search and/or visual body cavity search will reveal it.

Facts: Facts are something that actually exists. The following are examples of factors for determining reasonable suspicion. Note there could be other factors, as well, that are not listed below:

- **Nature of incident/offense/charge:** Does the incident/offense involve violence, drugs, and/or weapons? If yes, what were the circumstances surrounding the offense? Why do these circumstances create reasonable suspicion?
- **Circumstances surrounding the offense, incident, and/or action**
- **Access/opportunity to obtain weapons or contraband**
- **Furtive movements indicating the secretion of weapons or contraband.**
- **Prior history:** Criminal history, violent behavior, self-mutilation, mental health, suicidal efforts/ideation, possession, use or sale of contraband.

Pat-Down Search: A pat-down search is a search where deputized personnel perform a physical search of a detainee while the detainee is fully clothed. The search requires the movement of the searcher’s hands over the body, pressing the clothing in an attempt to detect any concealed weapons or contraband.

Clothing Search: A clothing search is a search of the camp youth’s clothing, including a search of jackets, shirts, pants/cuffs, pockets, etc., while the detainee is fully clothed.

Metal Detector Search: A metal detector search involves the youth passing through a metal detector, and/or the officer waiving a metal detector wand over and around a youth while the youth is fully clothed.

Strip Search: A strip search is a search that requires a person to remove or arrange some or all of his/her clothing so as to permit a visual inspection of the underclothing, breasts, buttocks, or genitalia of such person. This requires documented, specific reasonable suspicion and prior written authorization of a supervising officer on duty.

Body Cavity: A body cavity is the stomach or rectal cavity of a person, and the vagina of a female.

Visual Body Cavity Search: A visual body cavity search is a more intrusive strip

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search that includes a visual inspection of a body cavity. This requires documented, specific reasonable suspicion AND prior written authorization of a supervising officer on duty.

Physical Body Cavity Search: A physical body cavity search involves the physical intrusion into a body cavity or orifice for the purpose of discovering an object concealed in a body cavity. This requires a search warrant issued by a magistrate (judge, not a commissioner or referee) specifically authorizing the physical body cavity search. Only medical personnel shall conduct the search.

Contraband: Contraband is any item or substance possessed by the youth that is declared illegal by law or not specifically approved for the youth's possession. Examples of contraband include weapons, escape devices, drugs and/or drug paraphernalia, cell phones, marking pens, or authorized items possessed in excessive quantities or altered to be used in a manner not intended

Weapon: A weapon is an instrument used, designed, or altered to be used to injure or kill someone.

Medical Personnel: Medical personnel include physicians, nurse practitioners, registered nurses, licensed vocational nurses, or emergency medical technicians.

Participant in a Search: A participant in a search is a person whose official duties relative to the search procedure require him/her to be present at the time a search is conducted.

Youth: A youth is a person who is subject to detention in a juvenile facility.

Detainee: A youth held in custody or confinement.

Detention Hearing: A formal hearing by a judge or subordinate judicial officer to determine whether a youth shall be detained in a juvenile facility.

Pat-Down Searches

All youth must be searched upon entry to camp and prior to being transferred out of the facility. Staff may also conduct pat down searches at any time while the youth is in camp.

When conducted on a youth who is entering the facility, the receiving DPO shall immediately take control of the youth and any personal property in his/her possession. The receiving DPO (or DPO of the same gender as the youth) shall conduct a metal detector and pat-down search, regardless of the offense.

A pat-down search consists of a physical search while the youth is clothed. The search requires:

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- Movement of the same sex searcher's hands over the youth's body;
- Pressing the clothing in an attempt to detect any concealed weapons or contraband;
- Pulling out pockets on pants; instructing the youth to remove shoes and socks (and staff shaking them out); lifting up the pant leg to expose the back of the knees;
- Running fingers through the waistband of pants;
- Instructing the youth to run his/her fingers through hair; and
- Visually inspecting the youth's ears, nose, and mouth.

The DPO conducting the pat-down search must be of the same gender as the youth. 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 fully justified and documented in writing. During the search, a Supervisor must be present.

(Meets standards set forth in Title 15, Section 1360 (g))

Transgender youth (a youth whose gender identity is different from their physical gender identity) must be afforded the opportunity to be searched by staff of the gender in which they feel comfortable with. Under no circumstances should a search ever be used as an opportunity to determine a youth's physical gender.

(Meets standards set forth in Title 15, Section 1360)

In order to successfully conduct a pat-down search, DPOs must use their senses, including:

- Sight: Look for weapons/contraband
- Touch: Feel for weapons/contraband
- Hearing: Listen for indications of nervousness or lying
- Smell: Odors of intoxicants (alcohol/drugs)

A strip search may be conducted when there is reasonable suspicion (must be based upon specific and articulate facts) that the youth is in possession of contraband or weapons.

Strip Searches

Strip searches and/or visual body cavity searches may be conducted on newly arrived camp youth only under limited circumstances. This entails requiring the youth to remove or arrange some or all of his/her clothing so as to allow the DPO to perform a visual inspection of underclothing, breasts, buttocks, or the youth's genitals. The DPO must first obtain approval from the SDPO or Camp Director, and s/he must complete a Strip Search Authorization form that clearly articulates the need for the strip search.

The admitting DPO must have reasonable suspicion, based on specific facts that can be clearly articulated, to suspect that the youth is secreting weapons and/or contraband in a manner that requires a visual body cavity search to reveal and, that the visual body cavity search will reveal it.

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The term reasonable suspicion is defined above, but deserves further clarification here. A youth's charge and/or prior history of possessing contraband are strong indicators or reasonable suspicion. However, the decision to authorize a strip search must be based on reasonable suspicion that the youth is currently concealing a weapon, drug, or other contraband; that such contraband could not be detected by a pat-down search, and that the strip search will result in the discovery of the contraband.

If the supervisor on duty has approved the strip search and/or visual body cavity search, the DPO is to follow the following guidelines:

- Strip search and/or visual body cavity searches shall never be conducted in a group setting.
- All such searches shall take place in a private area. The private area must eliminate the possibility of visual access by person(s) not involved in the search.
- All such searches shall be conducted without touching the youth's body.
- The officer conducting the search shall be of the same sex as the person being searched. No person of the opposite sex shall be allowed to view the search. (An exception is medical personnel.)
- If a visual body cavity search has been approved, instruct the youth to remove each article of clothing, one piece at a time, and hand it to you.
- Carefully examine each article of clothing for contraband, weapons, etc. and place it into the appropriate laundry receptacle.
- Immediately remove the clothing from the area and begin the search.
- During the strip search and/or visual body cavity search process, look for and note on the Strip Search Authorization form any irregularities, such as fresh injection marks, tracks (scarring from previous injections), bruises/scarring, etc., that may indicate physical abuse, medical conditions, etc.
- Physical body cavity searches are never to be performed by Probation staff.

Once a strip search and/or visual body cavity search has been authorized by a Supervisor, the search shall be conducted as follows:

- Direct the youth to stand and face you.
- Begin the visual strip search at the head and work down to the feet, sequentially, as follows:
- Hair and scalp: All hair must hang loose. The youth must take all hair

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arrangements (dreadlocks, ponytails, braids, etc.) Apart for inspection.

- Direct the youth to run his/her fingers through the hair. Inspect hair, scalp, and hairline at the back of the youth's neck.
- Wigs, hair extensions, and hairpieces may be subject to removal at the discretion of the supervisor on duty.
- If a youth requires a hairpiece due to a medical condition, it must be cleared by medical staff and the Probation supervisor on duty.
- Ears: Visually inspect behind ears, under lobes, and into the ear canal.
- Nose: Direct the youth to tilt his/her head back and visually inspect the nasal passages.
- Mouth: Visually inspect the mouth and lip area. Direct the youth to open his/her mouth wide, tongue up, down, right, and left. Have the youth roll the upper lip up and lower lip down.
- Upper torso – Anterior: As the youth continues to stand and face you, direct him/her to extend arms to the side, with fingers spread apart. Have him/her rotate hands front to back.
- Direct obese youths to raise rolls of excess skin for visual inspection.
- Direct the youth to extend arms to youth you with fingers spread.
- Inspect between fingers and under fingernails. Inspect arms and hands for injection sites.
- Fingernails must be a safe length, not to exceed ¼". Residents will be directed to clip long nails. False fingernails must be removed and stored in the youth's property.
- Lower Torso – Anterior: Direct the youth to stand with legs apart (approximately 24") and inspect the front lower torso.
- Inspect front of legs and feet.
- Instruct the youth to spread each toe and inspect between each toe.
- Upper Torso – Posterior: Instruct the youth to turn so that his/her back is facing you.
- Inspect the entire back area, beginning at the base of the neck.

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- Direct obese youths to raise layers of excess skin for visual inspection.
- Lower Torso – Posterior: With the youth still facing away from you, visually inspect the back of each leg, and instruct the youth to lift each foot so that the bottom of the foot is exposed. Inspect the bottom of feet and toes.

IMPORTANT: If, at any time during the strip search and/or visual body cavity search procedure, you have reasonable suspicion to believe that the youth you are searching may still be secreting contraband, and you believe that this contraband could be discovered through a more thorough search, then you may include the following:

1. Males will be instructed to lift their penis and subsequently their scrotum. If a male is uncircumcised, instruct him to pull foreskin back.
2. Females will be instructed to raise their breasts.
3. Visually inspect the youth's buttocks area, looking for any string or thread leading into the anus.
4. Instruct the youth to assume a squatting position and cough deeply. This should expel most items of contraband secreted in the rectal area.
5. The strip search and/or visual body cavity search is now concluded, and you may direct the youth to change into camp-issued clothing.
6. Continue with the camp-specific admittance process.

Note: In the event any contraband is discovered during the course of a strip search and/or visual body cavity search, it shall be processed in accordance with procedures for handling evidenced (i.e., Chain of Custody). Any contraband discovered shall also be noted on the Strip Search Authorization Form, and the DPO conducting the search shall also complete a Physical Intervention Report (PIR).

Physical Body Cavity Searches

A physical body cavity search may be authorized only with the written approval of a supervising officer on duty and under the direction of a valid search warrant issued by a magistrate (judge, not commissioner or referee) specifically authorizing the physical body cavity search. A physical body cavity search shall be conducted only by medical personnel. Prior to conducting a physical body cavity search, the reasons for the search shall be entered on the SSAF and the search warrant shall be attached to the SSAF. The original SSAF with the search warrant attached shall be placed in the youth's behavioral chart. A copy of both documents shall be placed in the camp's Strip Warrant file.

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Use of Force to Remove Clothing

In the event a youth refuses to comply with the strip search/visual body cavity search policy set forth above, force shall not be used unless each of the following conditions are met:

- The non-compliant youth poses an imminent and serious threat to him or herself, camp personnel, or camp security that cannot be ameliorated by placing the detainee in a holding room for a cooling off period.
- A supervising officer on duty shall have talked with the youth and thereafter made a determination whether force must be used to ensure the safety of the youth, camp personnel, or camp security. The supervisor shall ensure that only the minimum amount of force necessary to complete the search is used.
- All Probation personnel involved in the use of force shall submit timely and appropriate documentation concerning the incident by way of a Physical Incident Report (PIR).

When a camp youth refuses to comply with strip search/visual body cavity search policy and an imminent, significant threat to himself or herself, to camp personnel, or to camp security does not exist, the detainee shall be placed in a holding room and provided with counseling.

Note: This sub-section applies when a youth refuses to comply with the strip search/visual body cavity search policy. This policy does not supersede or limit the use of force for other circumstances.

1318 CRIME SCENE EVIDENCE PRESERVATION

Every on-site incident involving criminal behavior committed by a camp resident must be fully investigated, and all evidence must be preserved and protected. The camp Director shall ensure that staff adhere to this policy, and that all evidence and property coming into the possession of Probation Department personnel are accounted for and processed in accordance with the procedures set forth in this section. Any misappropriation, unauthorized destruction, or confiscation for personal use shall be grounds for disciplinary action.

Following an incident where a serious assault or other criminal activity has occurred, the Director or designee shall ensure staff follow these guidelines in order to secure the crime scene for possible criminal filing. The Director shall immediately report the incident to the Bureau Chief.

Crime Scene Designation

A crime scene shall be designated when a crime has occurred. Serious crime scenes include, but are not limited to, the following:

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- Escapes
- Assaults
- Sexual assaults
- Possession of a controlled substance
- Possession of a weapon

The purpose of establishing a crime scene is to ensure that critical evidence is not disturbed or contaminated. Staff shall adhere to the procedures outlined below when a serious crime has occurred.

Responsibilities of First Person on Scene

The first person on the scene is any Probation personnel who witnessed or responded to the location of the alleged crime. The first person on the scene shall:

- Survey the scene and address any urgent threat to his or her own safety, the safety of youth, and other employees or public in the surrounding area.
- Summon a supervisor as soon as possible.
- Immediately notify the emergency medical response team if there are any noticeable injuries. Advise victims of alleged sexual assault not to shower, change clothes, or use the restroom until medically examined.
- Avoid touching or handling anything unless absolutely necessary in order to protect the crime scene and to prevent the contamination of evidence.
- Set up a border securing the area containing possible evidence and ensure that everyone remain outside the established crime scene perimeter when it is safe.
- Remove the youth from the area, securing them in their assigned room or at a safe location with other staff.
- Assist the designated person in charge in preparing the required written document of all pertinent information, which shall include the location, time, people involved, serious injuries, and weapons and/or narcotics involved.

Responsibilities of First Supervisor on Scene

The first supervisor or designee on the scene shall assume control of the crime scene and immediately notify the Director that a serious crime may have occurred. The Director shall then report the incident to appropriate Bureau staff and notify any local law enforcement, if necessary.

Further, the supervisor or designee shall take the following actions:

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- Survey the scene and initiate a preliminary investigation to determine if a crime has occurred.
- If it appears that a youth has committed a youth incident of vandalism, then Probation can investigate it and file as a new charge of probation violation.
- The Director will complete the investigation if a law enforcement agency is not called.
- Pending appropriate processing of the evidence, the supervisor shall cordon off the crime scene using designated yellow tape. The supervisor shall avoid touching or handling the evidence unless absolutely necessary.
- Identify and maintain an accurate list of witnesses, including Probation staff who responded to the scene. At a minimum, the list should contain the following information:
 - Full name
 - Identification number(s) (employee number, CA DL/ID number, etc.)
 - Residence/business address
 - Contact phone number
 - Time arrived and time left
- If outside law enforcement is conducting an investigation, the supervisor will wait until it is concluded before conducting his or her own investigation. The supervisor shall remain available to assist in limiting traffic around the crime scene area, while at the same time avoid interfering with the law enforcement investigation.
- Interview victims and witnesses as soon as possible.
- Complete a Suspected Child Abuse Report (SCAR) as soon as possible, if there are allegations of child abuse. Immediately refer the matter to the Director of the Special Investigations Unit for handling at (562) 760-0715.
- Record all observations and initial findings on a Preliminary Incident Notification (PIN) report. Ensure all staff involved complete a Special Incident Report (SIR) and a Physical Intervention Report (PIR) as needed.
- For youth a copy of the Probation Department incident report via fax transmittal to the Probation Office of Security Services and Emergency Preparedness (at Downey headquarters) at (562) 658-4745. The latter shall for youth copies of the report to the Probation Risk Management Unit.
- Record all relevant findings (who, what, where, and how) on the Master

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Evidence Ledger.

Evidence Handling

Evidence is useless if improperly handled. Staff shall carefully handle all articles that might have evidentiary value. Careful gathering of potential evidence, marking evidence correctly, maintaining the chain of continuity, and preventing contamination is critical to any criminal investigation. Staff shall adhere to the following procedures:

- Evidence collection. Staff shall wear gloves when handling physical evidence, such as weapons, money, clothing, or controlled substances and drug paraphernalia. Staff shall secure such physical evidence in clean cardboard boxes or envelopes. Law enforcement and physicians shall collect sexual assault evidence.
- Labeling evidence. All evidence containers shall be labeled with the names of all staff who handled the evidence, and in chronological order of possession. Include the date, time, and location where the evidence was found, along with the name and PDJ number of the youth(s) specifically linked to the evidence. Preprinted label forms are available in the Crime Scene Evidence Kit located with the evidence custodian.
- Documenting evidence collected. Staff shall document all evidence items on the Evidence Ledger, providing a description of the seized item, when and where discovered, and the name of the person who collected the evidence. The ledger shall include a chronological listing of those involved in handling the evidence that tracks correctly with the information written on the evidence label.
- Biological evidence. Staff shall not handle biological evidence, such as blood. Staff shall ensure that it remains undisturbed until law enforcement officials arrive and take control of the crime scene.
- Photographing. Photograph the entire crime scene, all possible evidence items, and any visible injuries sustained. Using permanent ink, label the photographs with the date of incident, youth's name, DOB, and PDJ number.
- Storing evidence. Evidence shall be stored in a secure location as designated at each facility.

Responsibilities of the Evidence Custodian

The Director shall designate an evidence custodian and a relief custodian. The evidence custodian shall be someone at the level of a supervisor. The evidence custodian has the following responsibilities:

- Ensuring the master ledger and evidence labels are accurate and contain complete description.
- Placing all incoming evidence in the secure storage area, unless surrendered to law enforcement. If surrendered to law enforcement, the evidence custodian shall ensure that a property receipt has been obtained and is affixed on the evidence

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- ledger on the appropriate date of incident page.
- Segregating all evidence held more than three months, or as determined by the Director, and transporting this evidence to the local L.A. County Sheriff's Office.
- Assuring the preservation of the chain of custody by logging out the evidence package in the master evidence ledger under the appropriate column when disposing evidence held more than three months. All evidence must be transported in its original package.
- Maintaining orderly storage areas and updating both the master evidence ledger and evidence labels accordingly.

Labeling Evidence

Detailed procedures for labeling evidence are as follows:

- Evidence shall be labeled immediately using the pre-formatted, adhesive- backed evidence labels found in the Department's crime scene evidence kit.
- Legibly print the information, using a ballpoint pen with permanent ink. Do not use pencils or felt-tip pens.
- Label and fasten property/evidence in such a manner so that the evidence label will not be separated from the container, bag, or envelop that is holding the seized item.
- DO NOT place labels where they may cause damage when removed.
- Money, phones and other items of similar size shall be placed in reinforced manila property envelopes, with completed evidence labels securely affixed to the envelope.

The Director is responsible for ensuring staff receive proper on-site training regarding evidence-handling procedures. Training shall include a thorough review of this policy, the evidence ledger, and proper evidence labeling. Crime scene scenarios allow for discussion that may assist staff in understanding the process for preserving crime scene evidence.

1319 EMERGENCY DRILLS

Emergency preparedness is a critical safety issue for each camp. The SDPO for each shift is expected to schedule, conduct, and document the completion of an emergency drill on a quarterly basis. Please cross reference this section with Section 1713 of this manual .

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1320 DAILY REPORTS

Each day, the on-duty supervisor shall ensure the timely completion and provision of all required Bureau documents. At present, these documents include:

- SDPO packet
 - All special incidence reports
 - All daily schedules (for all buildings, if applicable)
 - 15-minute safety check sheets
 - Facility security check sheet
 - Request for mental health consultation forms
 - Grievances
 - The Daily School/Recreation/Programing Log
 - Access to care requests
 - Suspected child abuse referrals
 - Unit meeting notes, if any
 - Daily variance
 - Group sign-in sheets
 - PRT/MDT documentation
 - PINs and follow-up PINS
 - Strip search consent forms
 - Daily movement log
 - Daily communication log
 - Administrative hold documentation
 - Enhanced supervision documentation
- Meal counts for breakfast and lunch
- School attendance reports
- Signed orientation forms
- Bed charts

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Subject: RESIDENTIAL TREATMENT SERVICES BUREAU MANUAL The Healing Opportunities and Positive Engagement (HOPE) CENTER	Section Number: RTSB-1400
	Effective Date: July 21, 2020
	Approved By: Jennifer Kaufman, Bureau Chief

1400 THE HEALING OPPORTUNITIES and POSITIVE ENGAGEMENT (HOPE) CENTER

This policy governs utilization of the Healing Opportunities and Positive Engagement (HOPE) Centers (formerly called Special Housing Units (SHUs) and Assessment Units) in Residential Treatment Services Bureau (RTSB) facilities in which youth are separated from the general facility population for stabilization or administrative purposes.

On May 3, 2016, the Los Angeles County Board of Supervisors passed a Motion to end the practice of placing juveniles in restrictive housing, in accordance with recommendations issued by the United States Department of Justice. The implementation of this Motion allows for a youth to be separated from others only in very rare situations after all other interventions have been exhausted. Such separation may only be undertaken for a brief “cool down” period as a temporary response to behavior that poses a serious and immediate risk or threat of physical harm to any person, and is to be done only in consultation with a mental health professional. Restrictive housing is defined as the placement of a youth in specialized unit (HOPE Center) in an individual room with a locked door for purposes of stabilizing escalated behavior and preserving safety.

It is the goal of the Probation Department to maintain youth within the general camp population. The use of techniques to achieve behavioral support and management, including prevention activities like relationship building, motivation and engagement with youth; early intervention de-escalation strategies and techniques; brief removal from the group without placement in a special unit; temporary placement in “Cool Down Spaces” and alternative supervision strategies (Specialized Supervision Plans (SSPs), smaller living units, rooms with open doors, etc.) are to be undertaken as part of the overall behavioral stabilization strategy. These interventions must be utilized, and all lower level efforts exhausted prior to placing the youth in a closed room.

The placement of a youth in a HOPE Center room with a locked door is an option to be utilized only in very rare instances when a youth’s behavior poses an immediate risk of harm to any person. Youth must be placed in the least restrictive setting necessary to maintain safety and may only be placed in a room for the least amount of time necessary to achieve behavioral stabilization. Any youth placed in a room in a HOPE Center must be assigned to a room with a camera, unless there are no camera rooms available.

The HOPE Center is a location where youth who have had difficulty controlling their reactions to stress and challenges are provided with the opportunity to learn new strategies and practice ways to

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de-escalate their own behavior. Youth work in partnership with mental health and probation staff to find new ways to respond to difficult emotions and stressful situations. The HOPE Center may also be used to house youth who are on mental health supervision levels or those who are administratively separated. All youth that are referred to a HOPE Center and placed in a room shall be assessed by a clinician from the Department of Mental Health (DMH). It is recommended that all youth referred to a HOPE Center for cool-down purposes and not placed in a room also be assessed by a clinician from DMH.

Separation and/or isolation of youth for purposes of punishment are not effective and are prohibited. A youth may not be placed in a HOPE Center in retaliation for any youth conduct or as a means of harassment or coercion. No youth may be separated from the general population or placed in a HOPE Center 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.

For purposes of clarity, the terms Special Housing Unit, SHU, and Assessment Unit will no longer be used in RTSB and the term HOPE Center will be used exclusively in all RTSB facilities.

Throughout this document, the term "HOPE Center" shall be understood to reference all units formerly known as Special Housing Units and Assessment Unit(s) in RTSB. The term "facility" shall be understood to reference both Camp facilities and the Dorothy Kirby Center (DKC). The term "HOPE Center facility" shall be understood to reference a facility that has a HOPE Center present on its grounds.

The term "Duty Supervisor" refers to the lead Supervisor on duty at each camp facility. It is the responsibility of the HOPE Center Supervisor, or the Duty Supervisor if there is no designated HOPE Center Supervisor on duty, to assess the status of each youth in the HOPE Center as described below, in conjunction with the Department of Mental Health. In the case of youth in a HOPE Center from an outside camp (without a HOPE Center on grounds), the HOPE Center Supervisor, or Duty Supervisor if no HOPE Center Supervisor is on duty, of the HOPE Center Facility shall assess those youth, except as noted below when assessment by the Duty Supervisor of the youth's home camp is required.

This policy delineates procedures governing the use of the HOPE Center and further clarifies the responsibilities of the Duty Supervisor, HOPE Center Supervisor, facility Directors and Regional Directors to monitor and control the utilization of the HOPE Center. The overarching expectation in this policy is that the HOPE Center is utilized only when less restrictive options to maintain a safe environment for everyone have been exhausted. RTSB is committed to genuine engagement with youth to inspire them to change their lives in a safe environment that embraces dignity, respect,

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integrity and leadership.

Prevention, Early Intervention and Removal from the Group

The most important tool staff have in working with youth is a strong relationship based on trust and respect. Recognizing that everyone is capable of change and understanding that everyone seeks a life worth living is a crucial starting point when working with youth in camp. Treating youth as worthwhile and important helps to create an environment of trust and serves as a preventative step to reduce aggression and violence. As youth learn new skills in camp and work to practice new behaviors, staff shall remain alert for changes in the youth's demeanor and aware of circumstances in the youth's life that may result in increased stress. Often the cycle of escalation can be interrupted at this point through support, problem-solving and early intervention, prior to a situation becoming dangerous. Youth who do not respond to these efforts in the group setting may be briefly removed from the program and go to a dayroom or other area to talk with and receive emotional support from staff, walk around or engage in other activities to distract from or process a situation, as appropriate. Intervention at this point may or may not require a Mental Health Referral.

Definitions

Removal – brief removal of a youth from the group, this may be to a dayroom, cool down area or a nearby office for counseling

Separation – placement of a youth in a HOPE Center

Isolation – placement of a youth in a single room with a closed door in a HOPE Center

HOPE Center Assignment for Stabilization Purposes

Assignment of a youth to the HOPE Center for stabilization purposes provides a temporary supervision alternative designed to minimize dangerous behaviors that compromise the safety and security of the youth and staff in the facility. HOPE Centers contain spaces where youth may “cool down” as well as single rooms to be used as a last resort to preserve safety for everyone. Youth placed in HOPE Centers are considered to be separated even if they never go in a room as they are separated from the larger group of their peers. Youth placed in single rooms are considered isolated. Separation and isolation shall continue only until such time as the youth's behavior has stabilized and the return of the youth to the general population will not jeopardize the safety and security of the facility.

Prior to placement in a room, all youth arriving at a HOPE Center shall be placed in a dayroom or other area for a stabilization and time-out period, unless doing so poses an immediate safety concern, to determine if the youth is able to calm down and return to the general population quickly without the

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need for placement in an individual room.

All youth that are referred to a HOPE Center and placed in a room shall be assessed by a clinician from the Department of Mental Health (DMH). It is recommended that all youth referred to a HOPE Center for cool-down purposes and not placed in a room also be assessed by a clinician from DMH. Staff shall document all interactions and steps taken to afford the youth all other less restrictive de-escalation and stabilization interventions, including all interventions that occurred prior to the youth's arrival at the HOPE Center and those undertaken by HOPE Center staff, prior to the youth's placement in a room. See RTSB De-Escalation and HOPE Center Protocols for strategies and activities to assist the youth to de-escalate.

Youth may not be assigned to the HOPE Center for a pre-determined length of time for stabilization purposes. As soon as a youth is calm and his/her behavior stabilized, the youth shall be assessed by HOPE Center staff and staff from the Department of Mental Health, in consultation with the HOPE Center Supervisor, or Duty Supervisor if there is no designated HOPE Center Supervisor on duty, for readiness to return to the general population at the youth's home facility. Youth assigned to the HOPE Center for stabilization purposes shall have the opportunity to earn a limited amount of Merit Ladder points each day, including school and bonus points. All youth that have been placed in a room shall complete a Behavior Chain Analysis as part of the readiness for release process (see RTSB De-Escalation and HOPE Center Protocols). The Behavior Chain Analysis (Attachment D) shall be reviewed by staff from the Department of Mental Health. It is recommended that youth in the HOPE Center for cool-down purposes only (not placed in a room) also complete a Behavior Chain Analysis.

The HOPE Center Supervisor, or the Duty Supervisor if there is no designated HOPE Center Supervisor on duty, shall visit each youth in the HOPE Center and engage with the youth outside the room in the dayroom or other common area once every two (2) hours during waking hours (6 AM to 10 PM, or upon notification from HOPE Center staff that the youth appears ready to return to the general population) and shall review the HOPE Center Log Book and consult with HOPE Center staff regarding the youth's readiness for return to the general population. The HOPE Center Supervisor, or the Duty Supervisor if there is no designated HOPE Center Supervisor on duty, shall be responsible for noting the youth's behaviors on the 'Readiness for Release' (RFR) form (RTSB HOPE Center Readiness for Release Review Form – Attachment B) as appropriate and detail any reasons for continued separation. Reasons for continued separation or isolation must be very specific as to the behaviors that warrant the youth's continued separation/isolation. It is expected that all youth will be ready to return to their living group by the time of their first readiness review, and in all cases youth must be returned within four (4) hours. Every possible effort must be made to engage with the youth and achieve de-escalation during this timeframe. If these efforts fail and the youth is not ready to

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return within four (4) hours, the Duty Supervisor from the youth's home camp must visit the youth in the HOPE Center, assess the youth, and document the justification to transition the youth to a SSP (Cross reference this section with the SSP Section 1202 of this manual). The Duty Supervisor from the youth's camp has up to two (2) hours to visit the youth in person following notification of the anticipated SSP designation. Once the RFR form indicates that the youth is ready to return to the general population, the HOPE Center Supervisor, or the Duty Supervisor if there is no designated HOPE Center Supervisor on duty, shall immediately authorize the release of the youth from the HOPE Center back to the general population. The HOPE Center Supervisor, or the Duty Supervisor if there is no designated HOPE Center Supervisor on duty, shall note the time of his/her visit and the assessment results in the HOPE Center Log Book and on the RFR form.

As part of the Readiness for Release assessment process when a youth has been placed in HOPE Center for stabilization purposes, the HOPE Center Supervisor shall call the Duty Supervisor in the youth's home camp to review the youth's status at each RFR review. The Duty Supervisor from the youth's home camp shall then make an attempt to contact the youth's parent, guardian or other caregiver to discuss the events that resulted in the need for the youth's HOPE Center stabilization and review strategies to assist the youth to de-escalate and manage emotions in the future. Engagement with caregivers to assist with de-escalation may result in the youth being able to return to the general population more quickly because the parents or other caregivers are able to help calm and motivate the youth. The parent, guardian or caregiver shall be provided with updated information about the youth's behavior and status and the location and phone number of the HOPE Center. The results of this conversation shall be documented on the RFR form and in the Probation Case Management System (PCMS) under the youth's case notes. If the Duty Supervisor is unable to contact the youth's parent/guardian during the initial RFR assessment, and the youth remains in HOPE Center, the Duty Supervisor shall continue to attempt to contact the parent/guardian at all subsequent assessments, until such time as the youth is released from HOPE Center or the parent/guardian is reached and the conversation is documented on the RFR and in PCMS. All attempts to contact the parent/guardian shall be documented on the RFR form and in the Probation Case Management System (PCMS) under the youth's case notes.

In situations where the youth is being considered for release to his/her home facility, the HOPE Center Duty Supervisor (or designee) shall consult with the Duty Supervisor at the youth's home facility and advise that the youth is ready for release. Upon being notified that the youth is ready for return to the home facility, the Duty Supervisor at the youth's home facility shall immediately initiate the actions necessary to dispatch staff to the HOPE Center facility and expedite the return of the youth to the home facility. The youth shall be returned to the home facility as soon as practical, but not more than one (1) hour after notification.

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HOPE Center Assignment for Administrative Purposes

Assignment of a youth to the HOPE Center for administrative purposes shall be limited to those instances where separation is necessary to facilitate an investigation, provide for the ongoing safety of a youth (enhanced and specialized supervision, etc.) or comply with an order of the court. All youth assigned to the HOPE Center for administrative purposes must have a *Specialized Supervision Plan (SSP)* prepared on their behalf describing all services to be provided to the youth while in the HOPE Center, in accordance with the steps described below. Additionally, all youth must have an As-Needed MDT held within two (2) business days of their assignment to a HOPE Center for administrative purposes. Separation shall continue until such time as the administrative issue is resolved and the youth can be safely reintegrated into the facility's general population. Youth assigned to the HOPE Center for administrative purposes shall have the opportunity to earn the full complement of Merit Ladder points each day, including school and bonus points, which they would be eligible to earn if they were assigned to the regular population in the dormitory or cottage.

All youth assigned to a HOPE Center for administrative purposes, that are not related to placement on an enhanced level of supervision, shall have a *Specialized Supervision Plan (SSP) (Attachment C)* completed on their behalf in accordance with Directive 1196 (*Residential Treatment Services Bureau Assessment and Classification Policy*). The SSP shall: 1) clearly note the administrative reason for the HOPE Center assignment, unless safety and/or security needs or a court order limits the release of this information; 2) note the anticipated length of the HOPE Center assignment; and 3) describe the services and programming required for the youth. The SSP must demonstrate the need for the higher level of supervision and must be reviewed and approved the next business day by the Regional Director. SSPs for all youth assigned to a HOPE Center for administrative purposes not related to a Major Administrative Action Review shall be reviewed within two (2) business days following the creation of the SSP during an As-Needed Multi-Disciplinary Team (MDT) meeting conducted with the youth and the youth's parent/guardian. Following the As-Needed MDT, the SSP must be reviewed each week that the youth remains in the HOPE Center at a Re-Classification Meeting. The youth must be present at all Re-Classification Meetings pertaining to assignment to a HOPE Center. As long as the youth remains assigned to the HOPE Center for administrative purposes, As-Needed MDTs must continue to be held every 30 days, along with weekly Re-Classification meetings between MDTs, with the youth present. All MDT and Re-Classification documentation for youth in the HOPE Center are to be reviewed by the Regional Director. Any deviations from this process must be approved in writing by a Regional Director or higher ranking manager.

All youth assigned to a HOPE Center for administrative purposes that have been placed on an enhanced level of supervision, shall have a current *Mental Health Recording* form in their *Behavior*

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File that designates the current enhanced supervision level for the youth and the date of the next reassessment of the youth.

The HOPE Center Supervisor, or the Duty Supervisor if there is no designated HOPE Center Supervisor on duty, shall visit the HOPE Center and engage any SSP youth outside the room in the dayroom or other common area once every eight (8) hours, during waking hours (6 AM to 10 PM), and shall verify the need for continued assignment to the HOPE Center of all youth assigned to the HOPE Center for administrative purposes. The HOPE Center Supervisor, or the Duty Supervisor if there is no designated HOPE Center Supervisor on duty, shall, as appropriate, authorize the release of identified youth from administrative assignment in the HOPE Center to the general population at their home facility when the administrative issue has been resolved. The HOPE Center Supervisor, or the Duty Supervisor if there is no designated HOPE Center Supervisor on duty, shall note the time of his/her visit and the assessment results in the HOPE Center Log Book and in PCMS. In situations where the youth is being considered for release to his/her home facility, the HOPE Center Supervisor, or the Duty Supervisor if there is no designated HOPE Center Supervisor on duty, of the HOPE Center facility shall consult with the Duty Supervisor at the youth's home facility and confirm that the administrative issue has been resolved preparatory to authorizing the youth's release from the HOPE Center. The Duty Supervisor at the youth's home facility shall facilitate the return of the youth to the home facility immediately upon being notified.

HOPE Center Supervisor

Some facilities have a designated HOPE Center Supervisor. When the HOPE Center Supervisor is on duty, the HOPE Center Supervisor shall be responsible for conducting the day-to-day operations of the HOPE Center, which shall include admissions, extensions, releases, database entries, assessments, safety and security. In the absence of the HOPE Center Supervisor, the Duty Supervisor of the HOPE Center facility shall be responsible for the daily HOPE Center Operations.

HOPE Center Director

Each Facility Director shall be responsible for providing the Daily HOPE Center Report via email to the Bureau Chief, Regional Director and RTSB Consultant.

HOPE Center Utilization Monitoring by Facility Directors

Each facility Director shall monitor their respective facility's utilization of the HOPE Center for both stabilization and administrative HOPE Center assignments and shall, in consultation with the Duty Supervisor at youth's home facility, ensure that the length of stay in the HOPE Center for each youth is consistent with this policy.

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For all HOPE Center referrals for stabilization purposes, the Director shall review all available video footage of the incident in question to determine if separation was an appropriate response to the youth's behavior.

Twice weekly, facility Directors that have youth administratively assigned to the HOPE Center shall personally visit the youth in the HOPE Center and conduct an assessment of each youth's status that has been on administrative assignment for the purpose of determining whether the continued administrative assignment of the youth to the HOPE Center is warranted.

In order to monitor administrative assignments in the HOPE Center, the facility Director shall:

- Visit the youth(s) in the HOPE Center to assess their physical and emotional well-being
- Assess the need for continued administrative assignment in the HOPE Center
- Refer any youth(s) for further assessment by DMH as appropriate
- Conduct an assessment of each youth's status and document the findings in the PCMS Case Notes
- Provide a same-day email to the Regional Director advising as to the status of youth(s)
- Note whether the youth has been released, or will remain on administrative assignment and the reasoning behind the action(s) taken in the email

The Regional Director shall monitor this review process and shall:

- Ensure the administrative review process is conducted twice weekly by the Director
- Review SSPs for all youth on administrative assignment
- Visit the HOPE Center three (3) times monthly (with no more than ten calendar days between visits)
- Visit with any youth that have been on administrative assignment for at least seven (7) days
- Assess the physical and emotional well-being of the youth
- Conduct an assessment of each youth's status and document the findings in PCMS Case Notes
- Provide a same-day email to the RTSB Bureau Chief advising as to the status of youth(s)
- Note whether each youth has been released, or will remain on administrative assignment and the reasoning behind the action taken in the email

In the event that disagreement regarding the admission and/or release of a youth from the HOPE Center occurs between the respective Duty Supervisors from the facilities, the facility Directors shall collaborate to resolve the issue. If the two (2) facility Directors are unable to reach accord, the Regional Director for the HOPE Center facility shall resolve the issue.

HOPE CENTER Referral and Approval Process

Staff shall fully document the circumstances leading up to the stabilization assignment of a youth to

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the HOPE Center on a *Special Incident Report (SIR)* or *Physical Intervention Report (PIR)*. The report shall clearly document the behaviors that precipitated the HOPE Center assignment. The justification for assignment to the HOPE Center must be very clearly explained in all situations and must very clearly document the de-escalation interventions that were attempted and the youth's responses to those interventions.

If the assignment of the youth to the HOPE Center is administrative in nature, a *Special Incident Report* must be completed that documents the circumstances that necessitated assignment to the HOPE Center. In addition to the SIR, either a *Mental Health Recording* form or a *Specialized Supervision Plan (SSP)* shall be initiated on behalf of the youth as outlined in Directive 1188 (*Enhanced and Specialized Supervision Requirements for Minors in Juvenile Facilities*).

The home facility's Duty Supervisor shall review the report and document his/her approval of the HOPE Center assignment via signature on the *SIR* or *PIR*. A telephonic communication shall be made by the sending facility to the HOPE Center facility prior to sending the youth to HOPE Center.

The *SIR* or *PIR* must be delivered to the HOPE Center within two (2) hours of the youth's arrival in those cases where the HOPE Center is located on the grounds of the youth's home camp. In exigent circumstances, delivery of this report may be delayed up to four (4) hours with Duty Supervisor approval.

Facilities that do not have a HOPE Center and are assigning a youth to the HOPE Center at an outside designated HOPE Center facility shall comply with the following guidelines:

- The *SIR* or *PIR* that has been approved by the Duty Supervisor at the youth's home facility must accompany the youth to the facility with the HOPE Center.

NOTE: If the youth is already on a *Specialized Supervision Plan (SSP)* at their home facility, the *SSP* must accompany the youth to the HOPE Center facility. If the youth is on an enhanced level of supervision, the *Mental Health Recording* form must accompany the youth to the HOPE Center facility.

- Upon arrival at the facility with the HOPE Center, the transporting staff shall provide the Duty Supervisor at the receiving HOPE Center facility with the *SIR* or *PIR* (and *SSP* or *Mental Health Recording* form as appropriate) for review.
- The Duty Supervisor at the receiving HOPE Center facility shall review the *SIR* or *PIR* documents and physically assess the youth upon arrival at the facility. Upon approval, the Duty Supervisor shall authorize the admission of the youth in the HOPE Center and the release of the transporting staff back to their home facility after the youth is fully admitted to the HOPE Center. If the Duty Supervisor does not authorize the admission of the youth to the HOPE Center, a telephonic

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communication shall be made with the Duty Supervisor at the sending facility and the reason for non-admittance discussed and resolved. If the Duty Supervisors are unable to resolve the issue, the matter is to be escalated to the facility Directors.

- Upon admission to the HOPE Center, the staff that transported the youth to the HOPE Center facility shall remain with the youth at the HOPE Center until the admitting paperwork and the *HOPE Center [SHU] Classification and Assessment* processes are completed as required in Directive 1196 – *Residential Treatment Services Bureau Assessment and Classification Policy*.
- Occasionally, exigent circumstances relating to safety and security of the facility may necessitate the immediate removal of a youth (or youths) from their home facility to the HOPE Center facility. In these situations, document delivery may be delayed. Upon the exigent situation being resolved, the sending facility should ensure compliance with the above guidelines. In exigent circumstances, delivery of this report may be delayed up to four (4) hours with Duty Supervisor approval.
- *Specialized Supervision Plans (SSPs)* (Attachment C) are required for all youth placed in the HOPE Center for administrative separation purposes. *SSPs* are not required for youth placed in the HOPE Center for enhanced supervision purposes. *SSPs* are to be completed and forwarded to the HOPE Center within the first four (4) hours of the youth's arrival at the HOPE Center for administrative separation purposes.
- *Specialized Supervision Plans (SSPs)* for youth placed in the HOPE Center for administrative separation purposes must be reviewed within two (2) business days following the placement of the youth in the HOPE Center and the creation of the *SSP* during an As-Needed MDT conducted with the youth and the youth's parent/guardian. MDTs must continue to be held on a monthly basis while the youth remains assigned to the HOPE Center for administrative purposes, along with weekly Re-Classification meetings with the youth present, and reviewed each week by the Regional Director.
- HOPE Center Facility staff shall document in the *HOPE Center Log Book* any situations where document delivery is delayed and the reasons for the delay.

HOPE Center Log Documentation

When a youth is initially assigned to the HOPE Center, the following information shall be recorded in the HOPE Center Log Database:

- Youth's Name, Date of Birth, PDJ number and home facility
- Date and time admitted and room number assigned
- Reason for HOPE Center assignment

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- Date and time *SIR*, *PIR* and *SSP* (or *Mental Health Recording* form) provided to HOPE Center staff
- Name of HOPE Center staff completing admissions documents and database entries
- Name and rank of staff requesting HOPE Center assignment
- Name of Duty Supervisor from the sending facility approving HOPE Center assignment
- Name of Duty Supervisor from HOPE Center facility assessing youth and approving admission
- Time PCMS in/out location information updated in PCMS
- Time Initial Intake Screening Questionnaire completed in Probation Electronic Medical Records System (PEMRS)
- Time HOPE Center Classification Verification Form completed
- Note whether Request for Mental Health Consultation form was completed
- Date and Time released from the HOPE Center
- Reason separation ended and youth released from HOPE Center

If a youth is extended in HOPE Center past four (4) hours for stabilization purposes, the following information must be recorded on the *HOPE Center Log Database*.

- Date and Time of Home Camp Supervisor's Readiness for Release Assessment
- Name of Home Camp Supervisor approving the extension beyond four (4) hours and subsequent SSP designation.
- Reason for continued separation or isolation
- Goals and objectives to be met in order to reintegrate the youth in the general population must be entered into PCMS Case Notes. These goals must be short-term and behaviorally specific as to how the youth can demonstrate readiness to return. A notation must be made in the comments section of the *HOPE Center Log Database* verifying that the goals and objectives have been entered in PCMS Case Notes
- Name of HOPE Center staff updating the HOPE Center Log Database
- Extension of youth's separation or isolation beyond four (4) hours requires that a Major Administrative Action Review Hearing be conducted by the facility Director. In the absence of the facility Director, the Duty Supervisor may conduct the hearing. If the Director was not present for the Hearing, the Director must meet with the youth the next business day. All Major Administrative Action Reviews must be reviewed by the Regional Director
- All youth that are extended beyond four (4) hours must have an *SSP* that clearly describes programming and supervision requirements while the youth remains in the HOPE Center

HOPE Center Programming Expectations

Youth assigned to the HOPE Center for stabilization or administrative purposes, including those youths on *Specialized Supervision Plans* (Attachment B), shall, safety/security and behavior permitting, be afforded the opportunity to participate in the regular HOPE Center programming which

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may include, but is not limited to the following:

- HOPE Center Orientation
- HOPE Center Classification Assessment
- Educational Services (including after-school educational services) - all youth shall receive education instruction, which shall include any required special education and related services. If any youth does not receive education instruction, the Regional Director and the HOPE Center Director shall be notified via the Daily School Reconciliation Report or SIR
- Medical and Mental Health Services
- Religious Services
- Substance Abuse Services
- Specialized Programming Activities such as skills groups
- Recreation
- Large Muscle Exercise for a minimum of one hour each day
- Receive and Send Mail
- Contact with Parent and/or Attorney
- Family Visits
- Access to Grievance, Request for Probation Services, Medical Services and Request for Mental Health Services Forms

Effecting Positive Change - Ongoing Readiness for Release Assessments

Staff assigned to the HOPE Center shall model appropriate pro-social behaviors and shall continually observe the behaviors and demeanor of youth and assess their readiness for return to the general population while encouraging the youth to exhibit pro-social behaviors as they work to stabilize themselves.

Positive behavioral change in the youth is generally realized when the youth is willing and able to process the reasons for the escalated behavior and displays behaviors that are clearly aligned with desiring to succeed under supervision in the open dormitory or cottage setting. Upon the youth demonstrating readiness for return to the general population, HOPE Center staff shall immediately notify the Duty Supervisor to help facilitate the youth's release from HOPE Center.

Staff assigned to the HOPE Center shall fully document the youth's behavior in the PCMS Case Notes every two (2) hours during waking hours and once during the 10 PM to 6 AM shift for all youth assigned to the HOPE Center for stabilization purposes. The documentation shall include a clear description of the activities the youth was involved in during the shift and the behaviors (positive, negative or neutral) demonstrated by the youth during that shift. Included in this documentation shall be an assessment from the day shift staff regarding the youth's readiness for release back to the general population. If the youth does not appear ready for return to the general population, the PCMS

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Case Notes entries should very clearly explain why the youth is not ready to return. The Duty Supervisor shall document the youth's readiness for return to the general population on the Readiness for Release form every two (2) hours (RTSB HOPE Center Readiness for Release Review Form – Attachment B).

For all youth assigned to the HOPE Center for administrative purposes, staff assigned to the HOPE Center shall fully document the youth's behavior in the PCMS Case Notes once every eight (8) hours, during the 6 AM to 2 PM, 2 PM to 10 PM and 10 PM to 6 AM shifts.

Staff that were not directly involved in the original incident that resulted in the youth's separation or isolation shall engage with the youth at least once every hour to assist in de-escalation and readiness of the youth to return to the general population. Youth shall complete a Behavior Chain Analysis to be reviewed by the Department of Mental Health as part of the readiness for release process to assist the youth in developing insight into his/her behavior and to facilitate processing of the incident by the youth.

When a youth appears to be ready for release back to the general population, the HOPE Center staff, in addition to contacting the HOPE Center Supervisor, or the Duty Supervisor if there is no designated HOPE Center Supervisor on duty, shall document this fact in the HOPE Center Log Book. The HOPE Center Supervisor, or the Duty Supervisor if there is no designated HOPE Center Supervisor on duty, shall review the HOPE Center Log Book during their visits to the HOPE Center every two (2) hours.

Step-Down Process and Return to Regular Program

As part of the readiness to release process, a youth may be stepped down from a room with a closed door to having an open door, and then placed in a dayroom or other open area in order to provide a gradual return and allow the youth opportunity to demonstrate readiness to regulate his/her behaviors. Following the decision for a youth to return to the general population, staff from the HOPE Center shall conduct a conference with the staff serving as the Dorm Team Leader or designee for the youth's living unit to facilitate the youth's return. Any individualized support plans and behavioral goals and objectives for the youth shall be discussed in the conference and documented in PCMS Case Notes. Youth that remained in the HOPE Center longer than four (4) hours must have an SSP developed by HOPE Center staff and placed in PCMS Case Notes that indicate what the youth needs to demonstrate in order to return to the general population. The youth's progress in achieving these goals must be updated in PCMS Case Notes upon the youth's release from the HOPE Center.

Major Administrative Action Review – HOPE Center Extension

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Youth shall not remain assigned to the HOPE Center and for stabilization purposes for longer than four (4) hours without the initiation of a formal *Major Administrative Action Review (Attachment A, Prob 1603, Rev 1/4/17)* process encompassing the following procedures:

- A *Major Administrative Action Review* form – shall be filled out by the sending facility’s Duty Supervisor. The original copy of this document shall go to the Director conducting the review, and a copy provided to the youth. A notation must be made in the HOPE Center Log and PCMS including the date, time and name of the person filing out the form and providing notification to the youth.
- The Director from the youth’s home facility (if not a party to the actual incident), shall conduct the review within two (2) hours of the youth’s receipt of the notification. If the home facility Director is ineligible or unavailable to conduct the review, the Duty Supervisor or HOPE Center Supervisor shall conduct the review. If no Director is available, the Director shall meet with the youth and review the results the next business day.
- Development of an individualized plan that includes the goals and objectives to be met in order to supervise the youth, ensure full programming is provided and reintegrate the youth in the general population as soon as possible. These goals and objectives must be short-term and behaviorally specific, documented on an SSP and entered into PCMS Case Notes.
- Timelines for completion of the *Major Administrative Action Review* process do not include sleeping hours (10 PM – 6 AM).

At the time of the review, the youth shall be afforded the opportunity to be heard, present evidence and testify.

- The youth shall be assisted in the review process by a staff member, who is not party to the incident, and can explain policy and/or provide clarification as to procedures.
- Provision shall be made for administrative assessment of the completed hearing by the Regional Director.

In the course of the review, the Director shall determine the extent of the youth’s involvement in the violation and the behavioral factors necessitating the review. The Director shall advise the youth of the findings (orally and in writing) and complete the *Major Administrative Action Review* form. The original copy shall be placed in the youth’s *Behavior File* and a copy provided to the youth. Copies are to be distributed to the Director of the youth’s facility, the Director of the HOPE Center facility, the Regional Director and the HOPE Center unit.

The Regional Director shall conduct an administrative assessment of each *Major Administrative*

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Action Review. The Regional Director shall determine if the action was fair and appropriate, and shall notify the youth in writing if any change is appropriate. Any changes shall also be noted in the *Major Administrative Action Review* form (Prob. 1603) in the youth's *Behavior File*.

(Meets standards set forth in Title 15, Section 1354)

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Attachment A

<h2 style="text-align: center;">MAJOR ADMINISTRATIVE ACTION REVIEW</h2> <p style="text-align: center;"><i>(SSP must be completed and attached to this form)</i></p>											
Youth's Name:				PDJ:		Date of Incident:					
Hall / Unit:				Time of Incident:		Time Arrived in HOPE:					
Name of Unit Supervisor or Officer of the Day authorizing Administrative Action:											
										Are charges being filed? <input type="checkbox"/> NO <input type="checkbox"/> YES	
										If YES, Admonition and Waiver of Rights were read and explained by:	
Name of Youth Representative: (not party to the incident)											
Youth's Statement:											
Youth refuses to make a statement <input type="checkbox"/>				Witnessed by: _____ Signature: _____							
				Print Name: _____							
Date and Time of HEARING: _____											
FINDINGS FROM HEARING OFFICER: <i>(Document reasons for Youth's continued housing in the HOPE Center)</i>											
<i>(Hearing Officer is the DIRECTOR or SUPERINTENDENT. If Director/Superintendent are not present in person, the Unit Supervisor or Officer of the Day conducts the Hearing. The DIRECTOR MUST meet with youth and review the Hearing the next business day.)</i>											
Name and Signature of Hearing Officer (not party to the incident):											
Print						Signature					
Name and Signature of Staff providing notification of hearing											
Print						Signature					
If Director is not present in person, document the Director's meeting with Youth, following the hearing:											
Director Signature:						Date:					
Youth Signature:						Date:					
Review of Hearing Superintendent -											
Name:						Signature:					
APPROVED <input type="checkbox"/>						DENIED <input type="checkbox"/>					
Findings:											

*Youth must be provided with a completed copy of this form

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Attachment B

**RESIDENTIAL TREATMENT SERVICES BUREAU
HOPE CENTER READINESS FOR RELEASE FORM**

Youth Name: _____	Facility: _____
Youth PDJ #: _____	HOPE Admittance Date: _____
Youth Home Camp: _____	HOPE Admittance Time: _____

Reason for HOPE Center admittance:

1st Review: (Within 2 hours of admission) Is the youth ready for release from HOPE? Y / N

If no, please provide a detailed summary of the youth's continued behavior that poses an immediate risk of harm to others:

Name of Parent/Guardian Contacted: _____	Date/Time: _____
--	------------------

SDPO Name: _____	Date: _____
------------------	-------------

SDPO Signature: _____	Time: _____
-----------------------	-------------

2nd Review: (Within 4 hours of admission) Is the youth ready for release from HOPE? Y / N

Specialized Supervision Plan (SSP) Completed? Y / N

Major Administrative Action completed? Y / N

Director Approving:

Name of Parent/Guardian Contacted: _____	Date/Time: _____
--	------------------

SDPO Name: _____	Date: _____
------------------	-------------

SDPO Signature: _____	Time: _____
-----------------------	-------------

Director Reviewing: _____	Director's Signature: _____
---------------------------	-----------------------------

***In compliance with WIC 208.3**

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Attachment C

PROBATION DEPARTMENT SPECIALIZATION SUPERVISION PLAN (SSP)

Date SSP Initiated: _____ Date SSP to End (max 30 days): _____ Facility: _____

Minor's Name: _____ PDJ: _____ DOB: _____

FACILITY DIRECTOR AUTHORIZING THE SSP: _____
DIRECTOR (print name) CONTACT NUMBER

1 REASON FOR SSP:

<input type="checkbox"/> Court Order	<input type="checkbox"/> Self-Harm History	<input type="checkbox"/> Severe Developmental Disability
<input type="checkbox"/> Administrative Hold	<input type="checkbox"/> Potential Victim	<input type="checkbox"/> Medical Issues
<input type="checkbox"/> Protective Custody	<input type="checkbox"/> Potential Predator	<input type="checkbox"/> Under Age 13
<input type="checkbox"/> Other: _____		

2 PROVIDE WRITTEN JUSTIFICATION FOR SSP HERE: _____

3 HOUSING TYPE: ☐ May be housed in a room ☐ Must be housed in a Dayroom ☐ May be housed in Dorm

4 HOUSING LOCATION: ☐ Regular Unit/Dorm/Cottage ☐ HOPE Center ☐ CARE UNIT ☐ ESU ☐ IIU ☐ MOU
☐ High Security Unit at BJNJH ☐ Other Location: _____

5 LEVEL OF SUPERVISION TO BE PROVIDED: ☐ Level 1 (regular) ☐ Level 2 (XX2) ☐ Level 3 (XX3)

6 TYPE OF SUPERVISION TO BE PROVIDED: ☐ 1 Staff to 1 Minor ☐ 2 Staff to 1 Minor ☐ Small Group
Comments: _____

7 MOVEMENTS WITHIN FACILITY (check all that apply): ☐ May move with Unit ☐ Must be moved alone
☐ Must be shackled ☐ Must be handcuffed ☐ Other: _____

8 RECREATION: ☐ Regular Unit Recreation Permitted ☐ Must recreate alone
☐ Other: _____

9 SCHOOL ATTENDANCE: ☐ Attend regular School with NO restrictions ☐ Must attend School in Unit
☐ May attend regular School, but must be accompanied/supervised by staff ☐ Must attend Specialized School Program in Unit
☐ Other: _____

10 VISITS: ☐ May have regular visits as per policy ☐ Visits RESTRICTED as noted below:
Notes: _____

11 PHONE: ☐ May have regular phone access as per policy ☐ Phone access RESTRICTED as noted below:
Notes: _____

12 PERSONAL ITEMS: ☐ May have personal items as per policy ☐ Personals RESTRICTED as noted below:
Notes: _____

13 OTHER COMMENTS/SPECIAL INSTRUCTIONS: _____

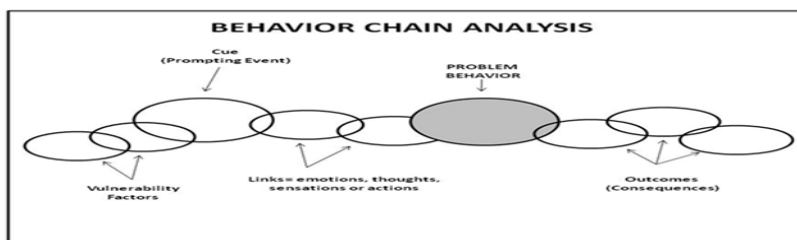
14 Approving Director's Signature: _____ **Date:** _____

15 At the end of 30 days, the facility Director may extend this plan for an additional 30 days by annotating the section below. The plan may only be extended once for four weeks. After the 8th week, a new SSP must be prepared.

SSP extended from	to	new SSP end date	Director's Signature
-------------------	----	------------------	----------------------

C: Supt, Director, Unit/Camp Mental Health Logbook, Movement Coord., Mental Health Director, IBMP/MDT Coord., Behavior Chart

Implemented 12-15-10



Assigned DPO: _____ **DMH Therapist:** _____

BCA Start time: _____ **am/pm** **BCA End time:** _____ **am/pm**

Describe the situation that stressed you out or upset you today. (Be specific- include where you were, what time was it, who else was around, what happened?)

[illegible]

Describe in detail how you responded. (What did you say and do?)

[illegible]

What *set* you off? (prompting event, cue or trigger)

In this stressful situation, what ***feelings*** got triggered? Circle the feelings that describe your emotions.

angry	empty	left out	sad
annoyed	excited	lonely	scared
anxious	fed up	mad	stupid
ashamed	frightened	miserable	tense
bored	glad	nervous	tired
calm	guilty	overwhelmed	worried
cheated	happy	pained	
confused	helpless	pleased	List any
concerned	hurt	proud	other
disappointed	ignored	rejected	feelings:
disrespected	intimidated	relieved	_____
disturbed	isolated	remorseful	_____
edgy	jealous	restless	_____

The ***strongest feeling*** you had was _____

What ***thoughts*** did you have when this happened?

What ***body sensations*** or signs of ***physical stress*** did you experience?
(Circle all that apply)

muscle tension	hyper or restless	body got hot
headache	upset stomach	body got cold
difficulty breathing	couldn't sleep	dry mouth
pounding heart	numbness	calming
tingling	physical pain	relaxed
tiredness	sweating	dizziness

other sensations: _____

What ***bad things*** happened in the end?

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How did your behavior *affect other people* in camp? (staff and peers)

How did you *feel* about yourself after the behavior?

Has anything been *bothering you* or *stressing you* out recently that may have led up to this behavior? Describe:

STEP BACK. If you were in this situation again, what could you do *differently*?

If you had chosen to *act differently*, describe how the new outcome would look.

What can I do to *repair or make up for* any harm/damage done by my behavior?

Reviewed and signed by staff: _____

Staff Comments: _____

LOS ANGELES COUNTY PROBATION DEPARTMENT

Subject: RESIDENTIAL TREATMENT SERVICES BUREAU MANUAL CRITICAL INCIDENT REVIEW (CIR) PROCESS	Section Number: RTSB-1500
	Effective Date: July 21, 2020
	Approved By: Jennifer Kaufman, Bureau Chief

1501 INTRODUCTION

This policy replaces Notice #1534 "Critical Incident Reviews" and outlines Probation Department policy for incidents that are identified as serious, critical in nature, and require a review by the Critical Incident Review Committee (CIRC).

Critical Incident Review (CIR) is a retrospective review and analysis of an incident to determine the effectiveness of existing policies and procedures before and after an event, to address the root causes of an event, and to prevent the incident from reoccurring.

A Critical Incident is defined as: A significant incident involving actual or potential liability, serious injury, significant loss, or major conflict occurring within the Probation Department's arena of responsibility that merits high-level managerial review.

1502 PURPOSE

- Provide direction for the rapid and timely review of significant or serious events which have the potential to adversely impact the Department.
- Provide a forum for managers to debrief after a Critical Incident and identify systemic issues, facility weaknesses, tactical shortcomings, and/or the need for training and corrective action.
- Provide a feedback and evaluation tool by which Department managers across all operations may learn and improve from previous experiences and avoid similar reoccurrences.
- Collect information and present an accurate, unbiased representation of the events to answer questions, address general concerns, and/or correct misinformation relating to the event.
- Provide a continuous system of Departmental improvement, including reviewing and updating policy as necessary.

A CIR is neither a disciplinary investigation nor an audit of any individual or operation(s). Rather, a CIR will examine:

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- Whether there was existing policy relevant to the Critical Incident.
- The extent to which human error, misapplication of policy or procedures, or gaps in or lack of policy contributed to the Critical Incident.
- Whether training or re-training is appropriate.
- Whether facility condition or environment contributed to the Critical Incident.
- Whether a recommendation for Internal Affairs to further investigate is appropriate.

The following events will automatically trigger a CIR:

- AWOL or escape from a Probation facility;
- Any major disturbance (10 or more persons involved);
- Any suicide or suicide attempt;
- Death of a youth while in custody; or
- Any incident ordered reviewed by the Chief Probation Officer.

The following is a non-exhaustive list of incidents that may trigger a CIR:

- Any situation endangering probationers, staff, or property;
- Any physical intervention or altercation that results in staff or probationers' hospital admission;
- Any incident or situation that may (i) generate media interest, (ii) result in litigation, or (iii) result in possible criminal charges being filed against peace officers;
- Death, for anything other than natural causes, of an adult or youth under Probation supervision; or
- Any other incidents deemed significant by the Department; including incidents or situations in which it is likely that the Chief Probation Officer may be contacted.

The CIR process is designed to expedite a review by managers of the Department's response to a Critical Incident. It is also designed to identify successful and unsuccessful strategies employed during the incident. Lessons learned, and best practices will be shared with line supervisors and staff to implement throughout the Department. Additionally, CIR findings will provide executives with facts to guide expectations and corrective action going forward.

The CIR process is administered under the oversight of the CIRC, which is facilitated by the Systems Accountability Bureau (SAB).

I. PRELIMINARY INCIDENT NOTIFICATION PROCESS:

1. In accordance with Preliminary Incident Notification (PIN) procedures, as soon as safely

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possible following a serious or Critical Incident, the designated operation/facility supervisor (e.g. Supervising Deputy Probation Officer) shall notify the Facility Director, Regional Director or Superintendent (hereafter "Senior Manager") who shall immediately notify the Bureau Chief and Bureau Consultant. The Bureau Chief will then be responsible for all further notification to executive management.

- a. The Senior Manager or designee shall ensure that the PIN Report (hereafter PIN) is completed within four (4) hours of the Critical Incident and shall send the completed PIN to key personnel, including the impacted Bureau Chief, Bureau Chiefs secretary, and Bureau Consultant or Special Assistant.
2. The Bureau Consultant or designee is responsible for reviewing the PIN and shall email the completed report to key personnel including the Deputy Director, other executive management, and SAB Bureau Chief (via email: pin.cir@probation.lacounty.gov).
3. The Deputy Director or designee, based on Critical Incident Protocol and this Directive, shall:
 - a. determine whether the event is a Critical Incident requiring a Board memo and shall assign an appropriate Bureau member to prepare the Board memo (in accordance with Directive 1264);
 - b. determine whether the Critical Incident also meets the criteria to be reviewed by the CIRC; and
 - c. Notify the affected Bureau members and SAB of the incident designation (a and b above) by responding to the email from item 2 above

In support of the above expressed Probation Department policy and to ensure for facility safety and security, the following shall at all times be subject to search and seizure:

- All persons entering a juvenile facility;
- Clothing items worn or carried;
- Personal property brought to the facility;
- Containers;
- Purses/bags;

NOTE: An event that does not automatically trigger a CIR and is not initially designated as needing CIRC review can be reclassified by the CIRC Chairperson and/ or executives.

4. The CIR Unit under SAB will provide the CIRC presentation date and CIR report number (ordinarily by responding to the email from item 2 above).

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II. COMPLETION OF A CIR REPORT:

1. A CIR report shall be completed by the impacted Senior Manager or designee no later than ten (10) business days following the Critical Incident. The report shall follow the CIR report format and include the CIR tracking number.

NOTE: Where an incident is not initially designated for CIRC review, but is subsequently reclassified for review, a CIR report shall be completed within ten (10) business days from the date of reclassification

2. Prior to the CIRC meeting, the Senior Manager or designee shall review the CIR report with the impacted Bureau to ensure thoroughness of the report and analyze the event/issues for possible corrective actions. Should the corrective action also have an impact across other operations, the Bureau Chief or designee shall share the corrective action needed, even if temporary, with relative bureaus/operations to prevent additional incidents until a thorough review can take place during the CIRC.
3. The Bureau Consultant or designee shall send the final CIR Report and accompanying presentation to the SAS CIR Unit (via email: pin.cir@probation.lacounty.gov) for placement on the CIRC agenda. The final CIR report and accompanying presentation are due one week before the CIRC presentation date.

III. CIR PRESENTATION: A CIRC meeting will occur two times per month (or as needed). The impacted Facility Director, Senior Manager, and Bureau Chief shall be responsible for the CIR presentation and are required to attend the CIRC meeting.

The Bureau Chief or designee shall present the CIR presentation to the CIRC. The CIR presentation must be clear and concise and include key facts relevant to the incident, including but not limited to a timeline of the incident, factors leading up to the event, identifiable successes and shortfalls in the immediate response, policy implications, actions taken during or after the incident, corrective actions implemented, and recommended pending corrective actions.

1503 CRITICAL INCIDENT REVIEW COMMITTEE (CIRC)

The CIRC is a forum for key stakeholders to debrief after a Critical Incident to identify systemic issues, facility weaknesses, tactical shortcomings, or the need for training and corrective action. The CIRC will examine the incident, issues, and gaps based on the CIR report and presentation. The CIRC may also make additional recommendations, corrective actions and follow-up items to help

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improve operations.

- Following the CIRC meeting, the impacted Bureaus shall prepare a Corrective Action Plan (CAP) for CIRC-recommended corrective actions. All efforts shall be made to implement CAPs as expeditiously as possible.
- The SAB Bureau Chief will serve as the CIRC Chair. The CIRC shall consist of the following administrators:
 - Deputy Directors,
 - Administrative Deputy,
 - At least one (1) Bureau Chief and Bureau Consultant outside the impacted Bureau,
 - Staff Training Bureau Chief
 - County Counsel, and
 - Other managers and guests as deemed necessary and invited.
- The CIRC Chair or designee will be responsible for administering the CIRC meetings, including:
 - Moderating and/or mediating a resolution for any CIRC disagreements;
 - Scheduling and maintaining the meeting calendar, agenda and minutes;
 - Documenting recommendations, corrective actions, and follow-up items;
 - Coordinating and assigning corrective actions to the appropriate Bureau to develop a CAP, and
 - Administering the CIR Unit and CAP Executive Steering Committee.
 - The CIR Unit shall assist in administering the CIRC meetings and CAP Executive Steering Committee, including:
 - Cataloging all PIN and CIR reports,
 - Cataloging and tracking all CAPs, and
 - Providing status reports.

(Meets standards set forth in Title 15, Section 1329(g))

LOS ANGELES COUNTY PROBATION DEPARTMENT

Subject: RESIDENTIAL TREATMENT SERVICES BUREAU MANUAL PRISON RAPE ELIMINATION ACT (PREA)	Section Number: RTSB-1600
	Effective Date: July 21, 2020
	Approved By: Jennifer Kaufman, Bureau Chief

The purpose of this section is to set forth Probation Departmental policy regarding the Federal Prison Rape Elimination Act (PREA - 2003) and outline the Department's approach to prevent, detect; respond and audit an incident of sexual abuse or sexual harassment, which includes sexual assault of youth housed in our Juvenile facilities (Juvenile Halls and Camps).

Further policies related to this section can be reviewed in **Directive 1412 Juvenile – Prison Rape Elimination Act (PREA) for Juvenile Institutions Bureaus (Detention Services and Residential Treatment Services Bureaus)**

The Department is committed to maintaining an environment free from sexual abuse/assault and sexual harassment of youth in our facilities. There is zero tolerance for anyone engaged in any form of sexual abuse/assault or sexual harassment of youth. Sexual abuse/assault or sexual harassment of youth is prohibited by Federal and State law.

Legal Basis: Federal Prison Rape Elimination Act (PREA) of 2003

PREA Definitions: See section II of this policy

Effective immediately:

PROCEDURES:

I. PREVENTION

● Training and Education:

1. Staff training: All staff who have contact with youth housed in Juvenile Hall/Camp shall be trained on their responsibility under PREA standards:
 - New staff shall complete PREA training within their first year of employment
 - Each staff shall complete a booster training on PREA every two (2) years from the date of initial training. Annually, PREA shall be reviewed during a Unit meeting as part of the Bureau's booster training. Staff shall sign an

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acknowledgement (PREA Acknowledgement Form - Prob. 1645, Rev. 1-18) that they understood the training and were allowed to ask questions

- The Department's Staff Training Office (STO) shall monitor the PREA training and provide the PREA Coordinator and Compliance Officers (Juvenile Hall DOJ Supervisor/Camp Assistant Director) with a PREA training compliance report semi-annually

Contract employee/vendor, volunteer and visitor training: All contract employees/vendors, volunteers and visitors who have contact with youth shall be given

2. The pamphlet, "A Guide to the Prevention of and Reporting of Sexual Abuse and Sexual Harassment of Probation Clients," which contains information on their responsibilities regarding the prevention, detection, and reporting of sexual abuse/assault and sexual harassment. The Compliance Officer (Director / Assistant Director) shall maintain documentation (PREA Acknowledgement Form for

Agency Non Volunteer/visitor - Prob. 1647, Rev. 1-18) as long as services are provided or for four (4) years upon separation of services. The documentation shall confirm the contract employees/vendors, volunteers and visitors understood the training they received.

3 Youth Education:

- During the intake process, the Intake Detention Services Officer (DSO) shall explain the Department's zero tolerance policy regarding sexual abuse/assault and sexual harassment and will have the youth sign the Youth PREA Advisement Form (Prob. 1648, Rev. 1-18). The youth shall be advised how to report incidents or suspicions of sexual abuse/assault or sexual harassment
- During intake, the housing unit staff shall discuss and review the Youth Orientation Checklist with the youth. This includes their right to be free from sexual abuse/assault and sexual harassment, the procedure for reporting such incidents and the right to be free from retaliation for reporting such incidents. The unit supervisor shall ensure staff have placed a copy of the Youth Orientation Checklist sign off sheet in his/her behavior chart. The Compliance Officer (Director / Assistant Director) shall ensure youth education materials are available in formats accessible to all youth, including those who are limited English proficient, deaf/hearing impaired, visually impaired, or otherwise disabled, as well as to youth who have limited reading skills
- The Compliance Officer (Director / Assistant Director) shall ensure the information is continuously and readily available or visible to youth through

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posters or other written formats

- The PREA Coordinator shall provide the material referenced above to the Compliance Officers (Director / Assistant Director)

4. Medical and Mental Health Care:

- All medical and mental health staff shall be trained in:
 - How to detect and assess signs of sexual abuse/assault and sexual harassment
 - How to respond effectively and professionally to juvenile victims of sexual abuse/assault and sexual harassment
 - How and who to report allegations or suspicions of sexual abuse and sexual harassment
- The Compliance Officer (Director / Assistant Director) shall maintain documentation (PREA Acknowledgement Form for Medical/Mental Health - Prob. 1646, Rev. 1-18 that medical and mental health staff have received PREA training

II. Supervision and Monitoring:

1. Facility managers, through the Duty Supervisor, shall maintain adequate staffing to ensure the safety and security of the youth. Where applicable, video monitoring shall be used to assist in monitoring and in protecting youth against sexual or sexual harassment. In calculating adequate staffing levels, facility managers and duty officers shall take into consideration the following:
 - a. Generally accepted detention and correctional practices
 - b. Any judicial findings of inadequacy
 - c. Any findings of inadequacy from Federal investigative agencies
 - d. Any findings of inadequacy from internal or external oversight bodies
 - e. All components of the facility's physical plant (including "blind-spots" or areas where staff or youth may be isolated)
 - f. Composition of the juvenile facility population
 - g. Number and placement of supervisory staff

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- h. Facility programs occurring on a particular shift
- i. Any applicable State or local laws, regulations, or standards
- j. Prevalence of substantiated and unsubstantiated incidents of sexual abuse
- k. Any other relevant factors, including mandated Title 15 standards

2. Duty Supervisor shall comply with the staffing plan except during exigent circumstances. The Duty Supervisor shall document when the staffing ratio falls below Title 15 standards and shall notify the Superintendent/Regional Manager. This information shall be forwarded to the applicable Bureau Chief (DSB/ RTSB) and the PREA Coordinator
3. Whenever necessary, but no less frequently than annually, facility managers and the PREA Coordinator shall review and assess whether adjustments are needed to:
 - Established staffing plan
 - Prevailing staffing patterns
 - Facility's deployment of video monitoring systems and other monitoring technologies
 - Resources the facility has available to commit to ensure adherence to the staffing plan.
4. Duty Supervisor shall make unannounced rounds throughout the shift and document the times rounds were made in the duty log/shift notes. Staff shall not alert other staff members that the duty officer's unannounced rounds are occurring unless such an announcement is related to the legitimate operational functions of the facility

III. Limits to cross-gender viewing and searches:

1. Staff of the opposite gender shall announce their presence when entering a housing unit
2. All youth shall be able to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to safety checks
3. Duty Supervisor shall make the determination whether a transgender youth may be searched by a staff of the opposite sex. In deciding whether to approve the search of a transgender or intersex youth, the Duty Supervisor shall consider on a case by case basis, whether a search by staff of the Duty Supervisor's choosing, would present management or

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security problems

4. Staff shall not search or examine a transgender or intersex youth to determine the youth's genital status. If the youth's genital status is unknown, it may be determined through conversations with the youth, by reviewing medical records, or if necessary, by discovery as part of a broader medical examination conducted in private by a medical practitioner

** All searches shall be conducted in compliance with Directive 1056, issued 09/01/05: Strip Search and Visual Body Cavity Search Procedures **

- IV.** Accommodating youth with special needs: The Compliance Officer (Director / Assistant Director) shall take appropriate steps to ensure youth with disabilities (for example, youth who are deaf or hearing impaired, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities) have an equal opportunity to participate in or benefit from efforts to prevent, detect, and respond to sexual abuse/assault and sexual harassment. Such steps shall include effective communication with youth who are deaf or hearing impaired, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. In addition, the PREA Coordinator shall ensure written materials are provided in formats or through methods that ensure effective communication with youth with disabilities, including youth who have intellectual disabilities, limited reading skills, or who are blind or have low vision. Youth interpreters, youth readers, or other types of youth assistants shall not be relied on except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise a youth's safety, the performance of staff's duties or the investigation of a youth's allegation
- V.** Upgrades to facilities and technologies: When designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the facility managers and/or project manager shall consider the effect of the design, acquisition, expansion, or modification on the Department's ability to protect youth from sexual abuse/assault or harassment. When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the facility managers and/or project manager shall consider how such technology may enhance the department's ability to protect youth from sexual abuse/assault or sexual harassment
- VI.** Third-Party Reporting: Each facility, at its entrance, lobby, or area in which the public has access, shall list the phone numbers of the Juvenile Hall/Camp with instructions on how to report sexual abuse/assault and sexual harassment

DETECTION

A. Screening for Risk of Sexual Victimization and Abusiveness:

1. During the Juvenile Hall intake process, all youth shall be screened using the Probation Electronic Medical Records System (PEMRS) Initial Intake Screening

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form, subsection: PREA Assessment. Should a youth be identified as Vulnerable to Victimization (W), Sexually Aggressive Behavior (SAB), or Violent Aggressive Behavior (VAB), then the youth shall be referred to the IBMP (Individualized Behavior Management Plan) coordinator and assessed every 90 days thereafter (*in compliance with Directive 1143, issued 9117107, Individualized Behavior Management Plan*). Staff and supervisors shall take precautionary measures when there are W, SAB and VAB youth housed in the same unit

2. When obtaining information during the intake process and the youth indicates he/she has experienced prior sexual victimization or perpetrated sexual abuse/assault, whether in an institutional setting or in the community, intake staff shall submit a mental health referral and notify the medical unit staff and follow the process outlined in Directive 1187, issued 1/29/10
3. Intake staff shall advise the Duty Supervisor that a mental health referral was submitted. The Duty Supervisor shall make an entry in the Duty Supervisor log and contact mental health to follow up on the referral. Medical staff shall follow up with the youth during the youth's health assessment
4. Within 24 hours, mental health shall sign and date the mental health referral at the conclusion of their follow up
5. A mental health evaluation of all known youth-on-youth abuse who have reported abuse history shall be conducted within 24 hours of the reported abuse history and, when deemed appropriate by mental health practitioners, treatment shall be offered

B. Classification:

1. Youth may be separated from others by being placed on administrative separation status if separation is needed for the safety of the youth. Separated youth shall be assessed by medical or mental health practitioners on a daily basis
2. Documentation for youth who are placed on administrative separation status shall include the facility's concern for the youth's safety and the reason why no alternative means of separation can be provided
3. Youth placed on administrative separation status shall be reviewed every 30 days to determine whether there is a continuing need for separation from the general population
4. Lesbian, gay, bisexual, transgender, or intersex youth shall not be placed in a particular housing, bed, or other assignment solely on the basis of such identification or status. The facility managers or designee shall make the final determination whether a transgender youth may be housed with males or with females

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5. In deciding whether to approve a transgender or intersex youth to a unit for male or female youth, the facility managers or designee shall consider, on a case by case basis, whether a placement would ensure the youth's health and safety, and whether the placement would present management or security problems
6. The continued placement and programming assignment for each transgender or intersex youth shall be reviewed by the unit supervisor as needed or at least weekly for safety/security issues
7. A transgender or intersex youth's own view with respect to his or her safety shall be considered
8. Transgender and intersex youth shall be given an opportunity to shower separately from other youth

Classification of youth housed in juvenile hall and camp, shall remain consistent with the specialized supervision plan outlined in Directive 1188, issued 12115110 Enhanced and Specialized Supervision.

RESPONSE:

B. Reporting Sexual abuse/assault or Sexual Harassment:

1. Youth: youth, who are the victim or have knowledge, suspicion, or information regarding sexual abuse/assault or harassment, may report through the following means:
 - Grievance procedure
 - Directly to staff, contractors, volunteers or visitors
 - Mental Health referral
 - Medical referral
 - Contacting the ombudsman
2. Contract employees/vendors, volunteers, or visitors:
 - a. Report immediately to the Duty Supervisor and, if appropriate, document any knowledge, suspicion, or information regarding
 - An incident of sexual abuse/assault and sexual harassment that occurred in the Facility or in another facility
 - Retaliation against youth or staff who reported such incidents;
 - Any staff neglect or violation of responsibilities which may have

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contributed to an incident or retaliation

- Any information that a youth may be at substantial risk of sexual abuse/assault
- b. If the reporting party is a mandated reporter and the incident falls under the Sexual abuse/assault definition, complete a Suspected Child Abuse Report (SCAR).

3. Supervising Deputy Probation Officers (SDPOs)/Deputy Probation Officer

(DPO) Is and Us/Supervising Detention Services Officers (SDSOs)/Senior Deputy Probation Officer (Sr. DSOs)/Detention Services Officers (DSOs)/Group Supervisor, Nights (GSNs):

- a. Report immediately to the Duty Supervisor and document any knowledge, suspicion, or information regarding
 - An incident of sexual abuse/assault and sexual harassment that occurred in the facility or in another facility
 - Retaliation against youth or staff who reported such incidents;
 - Any staff neglect or violation of responsibilities which may have contributed to an incident or retaliation
 - Any information a youth may be at substantial risk of sexual abuse/assault
- b. Sexual abuse/assault:
 - Separate the victim from the abuser
 - Assess the victim. If a life-threatening condition exists, call 911 emergency
 - Preserve and protect the crime scene until appropriate steps can be taken to collect any evidence. Physical evidence can be obtained up to 120 hours after an incident of abuse has occurred. If an incident is reported within that time frame, ensure the victim does not take any actions that could destroy physical evidence. This includes showering or washing, brushing teeth, changing clothes, urinating, defecating, drinking, or eating
 - Complete a Suspected Child Abuse Report (SCAR) and submit it to the Duty Supervisor prior to the conclusion of the shift
 - Document the information in a Special Incident Report (SIR) and submit it

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to the Duty Supervisor prior to the conclusion of the shift

c. Sexual harassment:

- Intervene and stop the harassment;
- Separate the youth from the harasser; and
- Document the information in a SIR and submit to the Duty Supervisor.

4. Duty Supervisor responsibilities:

a. Sexual abuse/assault:

- Immediately respond to the scene and review the assessment of the victim;
- Ensure the victim is separated from the alleged perpetrator. Isolate the alleged perpetrator or place the alleged perpetrator in a dry cell to help preserve evidence. Do not interview the alleged perpetrator
- Determine if the elements of a sexual abuse/assault incident are present. If so, contact the Facility managers and provide a detailed assessment of the situation
- Contact the local law enforcement agency of jurisdiction to initiate a criminal investigation
- Prepare a Preliminary Incident Notification (PIN) and forward to the applicable Bureau Chief(DSB/ RTSB)

Request medical and mental health staff to respond. Ensure the victim receives on-site medical and mental health care, as needed, prior to transporting the victim to the hospital

- Contact Area Rape Crisis Center at 951-686-7273 and request for a victim's advocate to respond to the Juvenile Hall or Camp
- Collect SIR's from all staff Involved prior to the end of their shifts
- Ensure mandated reporters complete a Suspected Child Abuse Report (SCAR)
- Ensure the victim's attorney of record is notified of the allegation

b. Sexual harassment:

- Ensure staff separate the victim from the harasser
- Prepare a PIN and forward to the applicable Bureau Chief (DSB/ RTSB)

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5. Facility manager's responsibilities:

a. Sexual abuse/assault:

- Notify the applicable Bureau Chief (DSB/RTSB)
- Refer incident to the Special Investigation Unit (SIU)
- Ensure the victim's parents or legal guardians are notified within 24 hours of incident. If the victim's guardianship is with the Department of Children and Family Services (DCFS), ensure the caseworker is notified

b. Sexual Harassment:

- Notify the applicable Bureau Chief (DSB/RTSB)
- Refer incident to SIU

6. Special Investigation Unit (SIU) responsibilities:

- a. Respond to allegations of sexual abuse/assault or sexual harassment by staff by assigning appropriately trained investigators to conduct an administrative investigation
- b. Ensure Department investigators have received the following training:
 - How to conduct investigations of sexual abuse/assault in confinement facilities
 - Interviewing techniques for sexual abuse/assault victims
 - Proper use of Miranda and Garrity warning
 - Sexual abuse/assault evidence collection in confinement settings
- c. Maintain documentation that the required training has been completed
- d. Maintain communication with the local law enforcement agency conducting the criminal investigation to assist with the administrative investigation
- e. An investigation shall not be terminated even if the source of the investigation recants, resigns or is released from custody
- f. Youth who report sexual abuse/assault shall not be required to submit to a polygraph or other truth verification devices as a condition to proceed with an investigation

7. Compliance Officer's (Director / Assistant Director) responsibilities:

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- a. Sexual abuse/assault incident review: Within 30 days of a sexual abuse investigation, the Compliance Officer (Director / Assistant Director) shall convene an incident review panel comprised of the PREA Coordinator, the Compliance Officer (Director / Assistant Director), a line supervisor, and medical or mental health staff. The purpose of the panel is to determine:
 - If a change in policy or practice is needed to better prevent, detect, or respond to sexual abuse/assault
 - If the incident was motivated by race, ethnicity, gender, identity, lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status, gang affiliation, or was motivated or otherwise caused by a group's dynamics at the facility
 - If staffing patterns or physical barriers contributed to the abuse
 - If the use of technology could have supplemented supervision
- b. Compliance Officer (Director / Assistant Director) shall submit the panel's findings to the applicable Bureau Chief (DSB/RTSB). The facility shall implement recommended changes or document reasons for not implementing changes
- c. The Compliance Officer (Director / Assistant Director) shall monitor for retaliation against a youth or staff who reported sexual abuse/assault or harassment or who cooperated with a sexual abuse/assault or sexual harassment investigation. If there is a continued need to monitor past 90 days, the PREA Coordinator and the applicable Bureau Chief (DSB/RTSB) shall be notified
- d. The Compliance Officer (Director / Assistant Director) shall employ necessary protection measures, such as housing unit changes or transfers, removal of alleged staff or a youth's abusers from contact with victims and emotional support services for a youth or staff who fear retaliation for reporting sexual abuse/assault or harassment or for cooperating with an investigation.
- e. For at least 90 days following a report of sexual abuse/assault, the Compliance Officer (Director / Assistant Director) shall:
 - Monitor the conduct or treatment of a youth or staff who reported the sexual abuse/assault and of youth who were reported to have suffered sexual abuse/assault to determine if there are changes which may suggest possible retaliation by youth or staff
 - Act promptly to protect against retaliation

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- Monitor a youth's disciplinary reports, housing or program changes, or negative performance reviews or reassignments of staff

Continue such monitoring beyond 90 days if the initial monitoring indicates a

- continuing need; and
- In cases of an extension, notify the PREA Coordinator and applicable Bureau Chief (DSB/RTSB)

- f. The monitoring requirement shall be terminated if it is determined the allegation was unfounded
- g. Ensure youth have access to outside victim advocates for emotional support services by posting toll free hot line numbers to Rape Crisis Centers

8. Medical and Mental Health Care responsibilities regarding sexual abuse/assault:

- a. Each facility shall offer medical and mental health evaluations and appropriate treatment to all youth who have been victimized in a Los Angeles County Probation facility
- b. The evaluation and treatment shall include follow-up services, treatment plans, and when necessary, referrals for continued care upon their transfer to or placement in other facilities and or upon their release from care
- c. Medical and mental health services shall be consistent with the level of community care
- d. A youth who is a victim of vaginal penetration while in the Department's facilities shall be offered pregnancy tests. If the youth tests positive for being pregnant, the youth shall receive timely and comprehensive information about, and timely access to, all lawful pregnancy-related medical services
- e. Youth who are victims of sexual abuse/assault while in the Department's facilities shall be offered tests for sexually transmitted diseases
- f. Treatment services shall be provided to the youth without financial cost and regardless of whether the youth names the abuser or cooperates with any investigation arising from the incident

C. Discipline:

1. Youth:

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- a. The disciplinary process shall consider whether a youth's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, *if* any, should be imposed
- b. A report of sexual abuse/assault made in good faith based upon a reasonable belief the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even *if* an investigation does not establish evidence sufficient to substantiate the allegation
- c. Sexual activity between youth in juvenile facilities is prohibited and is subject to disciplinary actions for such activity. The department may not, however, deem such activity to constitute sexual abuse/assault if it determines the activity is not coerced

2. Staff:

- a. Staff shall be subject to disciplinary sanctions up to termination for violating this policy
- b. Termination shall be the presumptive disciplinary sanction for staff who engage in sexual abuse/assault

3. Corrective Actions for Contract employees/vendors, volunteers and visitors:

Any contract employee/vendor, volunteer or visitor who engages in sexual abuse/assault shall be prohibited from contact with youth in the department's facilities. They shall be reported to relevant licensing bodies Juvenile Institutions Bureaus

- a. Corrective action shall be taken for those who engage in sexual harassment of a youth in a Department facility. The Facility managers will determine whether contact with the youth is prohibited
- b. In case of contract employees and vendors, the department shall report such incident to the contractor/service provider and demand corrective action. A failure to comply to the Department's satisfaction could result in a termination of the contract agreement

4. Advisement of disposition of a sexual abuse/assault investigation:

- a. At the completion of the investigation, the youth who are still detained shall be notified whether their allegation of sexual abuse/assault was substantiated, unsubstantiated, or unfounded.
- b. Unless the allegation was unfounded, the victim shall be notified in writing of the following:

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- If the staff member will be posted in the youth's unit
 - If the staff member remains employed at the facility
 - If the staff member or youth alleged as the perpetrator has been indicted and convicted on the allegations
- c. Notification shall be documented, signed by the youth and placed in the his/her Behavior Chart.

DATA COLLECTION:

A. Data Collection:

1. The Compliance Officer (Director / Assistant Director) shall complete the Survey of Sexual Violence Incident Form (Juvenile) for each allegation of sexual abuse/assault and sexual harassment involving staff, except for those unfounded. The completed survey shall be forward to the PREA Coordinator. The form is located at: <https://harvester.census.gov/ssv/#>
2. No later than June 30th each year, the PREA Coordinator shall provide the data from the previous calendar year to the Department of Justice.

B. Data Review for Corrective Action:

1. Annually, the PREA Coordinator and Compliance Officers (Director / Assistant Director) shall review collected data in order to assess and improve the effectiveness of sexual abuse/assault prevention, detection, and response policies, practices, and training, including:
 - Identifying problems
 - Taking corrective action on an ongoing basis
 - Preparing an annual report of its findings and corrective actions
2. The report shall include a comparison of the current year's data and corrective actions from the prior years. It shall provide an assessment of the Department's progress in addressing sexual abuse/assault. The Chief Probation Officer (CPO) shall approve the report. The PREA Coordinator shall redact personal identifiers and specific material from the reports should publication present a clear and specific threat to the safety and security of the facility

C. Data Storage, Publication, and Destruction:

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1. The PREA Coordinator shall secure and retain all data collected regarding sexual abuse/assault and sexual harassment for a minimum of 10 years unless Federal, State or

local laws require otherwise

2. The PREA Coordinator shall ensure all aggregated sexual abuse/assault data from the department's facilities are posted annually on the department's website

Section II

Definitions

Sexual abuse/assault (Section 115.6)

- Sexual abuse/assault of a youth by another youth includes any of the following acts if the victim: 1) does not consent; 2) is coerced into such an act by overt or implied threats of violence or; 3} is unable to consent or refuse:
 - Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
 - Contact between the mouth and the penis, vulva, or anus;
 - Penetration of the anal or genital opening of another person, however slight, by a hand, finger, object, or other instrument; and
 - Any other intentional touching, either directly or through the clothing, of the genitalia, anus, groin, breast, inner thigh, or the buttocks of another person, excluding contact incidental to a physical altercation.
- Sexual abuse/assault of a youth by a staff member, contract employee/vendor, volunteer, or visitor includes any of the following acts:
 - Contact between the penis and the vulva or the penis and the anus, including penetration, however slight;
 - Contact between the mouth and the penis, vulva, or anus;
 - Contact between the mouth and any body part with the intent to abuse, arouse, or gratify sexual desire;
 - Penetration of the anal or genital opening, however slight, by a hand, finger, object, or other instrument, unrelated to official duties or with the intent to abuse, arouse, or gratify sexual desire;
 - Any other intentional contact, either directly or through the clothing, of or with the genitalia, anus, groin, breast, inner thigh, or the buttocks, that is unrelated to official duties or with the intent to abuse, arouse, or gratify sexual desire;
 - Any attempt, threat, or request to engage in the activities described above;
 - Any display of genitalia, buttocks, or breast in the presence of youth; and
 - Voyeurism.

Sexual Harassment

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- Repeated and unwelcome sexual advances, requests for sexual favors, or verbal comments, gestures, or actions of a derogatory or offensive sexual nature by one youth directed toward another.
- Repeated verbal comments or gestures of a sexual nature to a youth by a staff member, contract employee/vendor, volunteer, or visitor, including demeaning references to gender, sexually suggestive or derogatory comments about body or clothing, or obscene language or gestures.

General Definitions (Section 115.5)

Compliance Officer (Section 115.311): each facility shall designate a Compliance Officer to coordinate the facility's efforts to comply with PREA standards.

Contract employee/vendor: a person who provides service on a recurring basis pursuant to a contractual agreement with the department.

Exigent circumstances: temporary and unforeseen circumstances that require immediate action.

Gender non-conforming: a person whose appearance or manner does not conform to traditional societal gender expectations.

Intersex: a person whose sexual reproductive anatomy or chromosomal pattern does not fit typical definitions of male or female. Intersex medical conditions are sometimes referred to as disorders of sex development.

Mandated child abuse reporter: Pursuant to Penal Code Section 11166, any person who, in his or her professional capacity or within the scope of his or her employment, has knowledge of or observes child abuse or neglect.

PREA Program Coordinator (Section 115.311): a management level staff with sufficient time and authority to develop, implement, and oversee the department's efforts to comply with PREA standards.

Secure juvenile facility: a facility in which movement and activities of youth may be restricted or subject to control through the use of physical barriers or staff supervision. A facility that allows youth access to the community to achieve treatment or correctional objectives, such as educational or employment programs typically will not be considered to be a secure juvenile facility.

Security staff: staff primarily responsible for the supervision and control of youth in housing units, recreational or program areas of the facility.

Substantiated allegations: an allegation that was investigated and determined to have occurred.

Transgender: a person whose gender identity (i.e., internal sense of feeling male or female) is different from their physical gender identification.

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Unfounded allegations: an allegation that was investigated and determined not to have occurred.

Unsubstantiated allegations: an allegation that was investigated and determined that insufficient evidence existed as to whether or not the event occurred.

Visitors : a person who is granted access to see or spend time with a youth in an official/professional capacity, such as an attorney, clergy, social worker, CASA worker, law enforcement official or therapist.

Voyeurism: an invasion of privacy of a youth for reasons unrelated to official duties, such as peering at a youth who is using a toilet in his or her cell; requiring a youth to expose his or her buttocks, genitals, or breasts; or taking images of all or part of a youth's naked body or of a youth performing bodily functions.

Volunteer : an individual who donates time and effort to enhance the activities and the programs of the department.

(Meets standards set forth in Title 15, Section 1329(g))

(Please cross reference with Sections 1700 and 2121 for information that is also applicable to this Section

LOS ANGELES COUNTY PROBATION DEPARTMENT

Subject: RESIDENTIAL TREATMENT SERVICES BUREAU MANUAL SAFE CRISIS MANAGEMENT AND PHYSICAL INTERVENTION POLICY	Section Number: RTSB-1700
	Effective Date: July 21, 2020
	Approved By: Jennifer Kaufman, Bureau Chief

**1701 PHYSICAL INTERVENTION POLICY FOR JUVENILE FACILITIES AND THE
TRANSPORTION SECTION**

(DIRECTIVE 1427)

A. LEGAL MANDATE

This Policy is consistent with the expectations set by California’s Board of State and Community Corrections (BSCC) Title 15 Minimum Standards for Juvenile Facilities, Section 1357; and is aligned with the United States Supreme Court's decision *Graham vs. Connor*, 490 U.S. 386 (1989) which mandates that when force is used, trained Officers shall utilize an Objectively Reasonable Standard to ensure that the level(s) of intervention utilized are both reasonable and appropriate to facilitate the restoration of order.

In Graham v. Connor, the U.S. Supreme Court held that, (1) an officer’s use of force must be objectively reasonable, (2) the “reasonableness” of a particular use of force by the Officer must be judged from the perspective of a reasonable Officer in the same or similar circumstance, and the calculus must embody an allowance for the fact that Officers are often forced to make split-second decisions about the amount of force necessary in a particular situation , and (3) the decision to use a particular use of force must be made without regard for the officer’s underlying intent or motivation.

B. OVERVIEW

The Los Angeles County Probation Department (The Department) is committed to facilitating safe, secure and healthy environments for both its clients and staff. Ensuring the safety of the youth while in the Department's care is a priority. As such, juvenile residential facilities are places where youth are provided with trauma-responsive rehabilitative services to learn pro-social behaviors and develop life skills that support their positive behavioral change. This type of environment is best accomplished through well-trained professional staff and rapport building with youth.

This Directive is developed in cooperation with Juvenile Court Health Services (JCHS) and articulates the Department’s policy for the handling of crisis situations which may result in the utilization of physical intervention and establishes the roles and responsibilities for all sworn and non-sworn staff to be followed prior to, during and after the utilization of physical intervention,

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the application of Oleoresin Capsicum (OC) spray where authorized, and the application of mechanical or soft restraints.

C. VALUES

In every situation (preceding, during and following a physical intervention, including OC spray), all youth shall continually be treated with dignity and respect. Consistent with this dignity-based approach, youth must be held accountable for their actions while under the care of the Department to foster an environment of ongoing youth rehabilitation and safety. Officers shall consider the safety of all individuals including youth, staff and/or the public when determining whether the use of physical or chemical intervention is appropriate given the current situation and environment. Physical and chemical interventions shall only be utilized as a last resort, and only at a level that is objectively reasonable. The use of physical intervention as a means of punishment, retaliation, discipline or treatment is strictly prohibited and any officer who is found to have done so is not acting within the scope of employment and shall face disciplinary action.

1702 TRAINING

All sworn Probation Officers assigned to juvenile custodial or transportation duties that are authorized to utilize physical intervention techniques in the performance of their duties, shall receive Department approved trainings (initial training and annual refresher training) on de-escalation, physical intervention and chemical intervention techniques, especially perishable skills, prior to being authorized to utilize force. This includes training for Officers on situations in which physical or chemical intervention justifiably is required; permitted methods and appropriate techniques of physical intervention; acceptable chemical agents and the methods of application (not applicable to RTSB facilities); and guidance in deciding what level(s) of physical intervention to utilize when needed. This also includes training for Officers related to medical and behavioral health conditions that would contraindicate certain types of force as well as signs or symptoms that should result in immediate referral to medical or mental health staff, and Instruction on the Constitutional Limitations of Use of Force. Managers and supervisors assigned to juvenile facilities and Transportation shall each ensure that all sworn Officer within their reporting hierarchy remain current in their training.

(Meets standards set forth in Title 15, Section 1357 (c))

DEFINITION AND EXPLANATION OF TERMS

To assist in understanding the important components of this policy, the following terms are defined below. Staff shall familiarize themselves with these terms and utilize them as an aid in their understanding.

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Alternative Restraint Devices – Restraint device that is utilized in lieu of approved hard or soft restraints. The use of alternative restraint devices not specifically authorized by this policy, such as a body wrap, is prohibited.

Body Attachments – Court order, pursuant to section 1209 of the Code of Civil Procedure, which allows 601/300 WIC youth from Dependency Court to be detained in juvenile hall.

Child Safety Assessment – A safety assessment of youth(s) following a physical/chemical intervention, conducted by a supervisor within one hour of the incident's occurrence, which shall consist of an interview and an assessment of any injuries sustained, in order to ascertain whether or not child abuse may have occurred. If the supervisor suspect's child abuse has occurred, the supervisor will report that in accordance with Department policies and procedures.

Choke Holds – Restraint hold utilized to temporarily cut off the blood supply to the brain and render the subject being restrained unconscious. These holds, commonly referred to as "arm-bar" or "carotid holds," are not authorized by the Probation Department and shall not be utilized.

Chemical Restraint/Intervention – The application of OC spray as authorized under Penal Code 12403 to control behavior and subdue actual violent behavior.

Crisis Curve – Continuum of behavioral and psychological occurrences which describe escalating behaviors demonstrated by individuals in crisis.

Crisis intervention Techniques – De-escalation techniques designed and employed to intervene in a youth's negative behavior with non-threatening, non-verbal, para-verbal or verbal interventions, which reinforce expected behaviors and allow a youth to self-correct and begin to demonstrate acceptable behaviors.

Daisy-Chain – Several pair of handcuffs connected to a strong chain at approximately three-foot intervals; utilized to transport groups of youth from one location to another within the facility or outside of the facility during a transport.

Differential Reinforcement – Behavioral management techniques, which involve acknowledging appropriate behavior while ignoring inconsequential behavior, and employing positive correction techniques to further reinforce and enhance a structured, relationship-based environment.

Directed Use of Physical Intervention: Planned force is used to carryout one's duties under the immediate direction of a supervisor.

Disengagement – Level 1 physical intervention technique wherein a staff member steps between two youth that are engaged in a physical altercation, separating the combatants

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with a gentle open-handed guiding movement that does not involve confinement of an appendage.

Duty Supervisor – The OD (SDSO) in the juvenile hall and the Supervising Transportation Deputy in the Transportation Section shall be jointly referenced in this document as the Duty Supervisor where applicable. The Duty Supervisor is responsible for the safety and security of the facility or operation. The Duty Supervisor shall be responsible for assigning staff to all units and specialized supervision posts within a facility.

Excessive Force: The use of physical intervention that is greater than the required amount that an objective, trained and competent youth supervision Officer, faced with similar facts and circumstances would need to resolve an incident involving a youth.

Extended Arm Assist – Level 2 physical intervention technique in which a staff places a youth in an Extended Arm Assist by securing the arm and shoulder (or shirt/sweatshirt) of the youth for the purpose of inducing a minor that is acting-out to cease their involvement in negative behavior and/or to assist them in moving to a safer area.

Flex-cuffs – Hard plastic mechanical restraint devices intended for use in emergent situations within the facility to restrain youth who are in immediate danger of injuring themselves or others, or who pose a serious threat to property when handcuffs are not immediately available.

Force – The utilization of physical intervention techniques to control physical resistance, physical aggression, serious self-harming behaviors; and/or to prevent an escape or serious property damage. Only the minimum amount of force needed to control any situation should be used.

Hard Restraints – Hard restraints include handcuffs, leg irons, shackles, waist chains, daisy-chains and flex-cuffs.

Hog-Tying – Procedure whereby mechanically restrained hands and mechanically restrained feet are drawn together and secured behind the back. This type of restraint technique is prohibited by the Probation Department and shall not be employed.

Immediate Use of Physical Intervention: Force used to respond without delay to a situation or circumstance that constitutes an imminent threat to facility security or the safety of persons

Least Restrictive Alternative – Policy requirement that staff resolve all crisis situations employing the least restrictive type of intervention necessary and available.

Lethal Force – Level of force which, when utilized, results in the death of an individual. Such force is not authorized by the Probation Department and shall not be employed.

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Levels of Intervention – Physical intervention techniques (levels) authorized by the Probation Department, which are incrementally employed by staff when necessary as part of a continuum of force in order to enable staff to physically intervene in a crisis management situation.

Line Staff: The Line Staff consists of Group Supervisor Nights (GSN), Detention Services Officers (DSO), Deputy Probation Officers (DPO), and Transportation Deputies (TD).

Mechanical Restraints – Mechanical devices (handcuffs, flex-cuffs or leather restraints) used to immobilize an individual's extremities.

Medical Assessment – Medical staff examine and treat youth involved in physical intervention incidents, including the application of soft restraints, and note the results of their examination in a PIR.

Non-Verbal Intervention – Intervention techniques that do not involve dialogue with any individuals; these techniques often involve making eye contact or using a hand motion.

Objectively Reasonable Standard – The amount and type of force that an objective, similarly trained, experienced and competent youth supervision Officer, faced with similar facts and circumstances, would consider necessary and reasonable to ensure the safety and security of youth, staff, others, and the facility as defined in BSCC Title 15, Section 1302 Definitions – Reasonable and Necessary Force.

Oleoresin Capsicum (OC) Spray – Chemical Restraint (non-lethal) method of intervention authorized and used within the Probation Department which represents the highest level in the Department's force continuum policy (Level 6).

Para-Verbal Intervention – Intervention technique that involves making partial verbal sounds, such as the clearing of the throat, or other similar sounds, designed to garner attention.

Physical Intervention – Use of direct physical contact or chemical spray applied to youth in order to restrict movement or to disengage from harmful behavior; for the purposes of this policy, physical intervention does not include the gentle touching of the arm, elbow, shoulder or back for the purpose of directing youth from one location to another.

PIR – Three letter acronym for the SCM Physical Intervention Report form, used to document incidents involving the use of physical or chemical interventions.

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Positional Asphyxia – A situation in which an individual that is obese, a known asthmatic, or has cardiac, respiratory or substance abuse problems may be at increased risk for asphyxiation or death when placed in a prone position following the application of a physical intervention.

Positive Surface Behavior Management Techniques – Processes which involve utilizing techniques such as humor, re-grouping, re-structuring and/or problem solving to assist in the development of positive staff/youth relationships.

Post Incident Review – Comprehensive policy and procedural compliance review conducted by supervisory staff following the conclusion of a physical or chemical intervention incident.

Prone Bridge Assist – Refer to Supine Torso Assist.

Prone Torso Assist – Refer to Supine Torso Assist.

Physical Intervention Report – Report forms commonly referred to as a PIR and SUP-PIR utilized by staff to document incidents involving the use of physical or chemical interventions.

Safe Crisis Management Training – Training which provides staff with the ability to identify and safely manage various acting-out forms of behavior. Only staff that have been trained and certified by the Probation Department may utilize these crisis management techniques.

Shackles – Consists of handcuffs, which are attached to leg cuffs by a chain of 17 to 24 inches in length that are used to limiting the movement of the youth's upper and lower extremities.

Shift Leader – The Senior Detention Services Officer, Deputy Probation Officer II or Deputy Probation Officer I responsible for the program and operations of a unit(s) in Detention Services Bureau (DSB) or Residential Treatment Services Bureau (RTSB).

Slamming – Use of physical force by staff, which causes a youth to impact with a solid object such as a floor, the ground, a wall or a door.

Soft Restraints – Padded leather restraining devices and helmet, used primarily to control youth experiencing medical or psychological problems, such as youth who are under the influence of drugs, demonstrating suicidal behavior, or those endangering themselves or others.

Standing Cradle Assist – Level 3 physical intervention technique in which a staff reaches under the youth's arms, grasps and secures the wrists towards the youth's hips and cradles the youth. Movement is restricted until the youth calms down or an increased level of intervention is deemed necessary.

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Standing Upper Torso Assist – Level 3 physical intervention technique in which the staff reaches around the outside of the minor's arms from the rear, and then the staff pulls their hands tightly towards their own chest, thereby restricting the youth's arm movement until the youth calms down, or an increased level of intervention is deemed necessary.

Seated/Kneeling Cradle Assist – Level 4 physical intervention technique in which a youth that has been placed into a Standing Cradle Assist by a staff member is then assisted to a seated position on the floor that ends up in a kneeling position, while maintaining the Cradle Assist. This further restricts movement until the youth calms down or an increased level of intervention is deemed necessary.

Seated/Kneeling Upper Torso Assist – Level 4 physical intervention technique in which a youth who has already been placed into an Upper Torso Assist is assisted to a seated position on the floor by a staff member, who continues to maintain the Upper Torso Assist hold on the youth. This further restricts movement until the youth calms down or an increased level of intervention is deemed necessary.

Supine Torso Assist (Prone Bridge Assist or Prone Torso Assist) – Level 5 physical intervention technique in which a youth who has already been placed into a Seated/Kneeling Upper Cradle or Upper Torso Assist position is further transitioned into a more restrictive Supine Torso, Prone Bridge or Prone Torso Assist position.

Unnecessary Force: Physical intervention that an objective, trained and competent youth supervision Officer, faced with similar facts and circumstances would not consider objectively reasonable or necessary.

Verbal Intervention – Verbal dialogue to gain the attention of an individual in order to deter an individual from his or her efforts to violate rules and regulations.

1703 **SAFE CRISIS MANAGEMENT - PHYSICAL INTERVENTION REPORT FORMS** (This section remains in effect from Directive 1194)

All incidents that involve either physical or chemical intervention shall be reported utilizing the Safe Crisis Management (SCM)- Physical Incident Report (PIR) form on PCMS, or the Supplemental Physical Report (SUP-PIR) as appropriate. These reporting forms provide staff with a step-by-step method for documenting incidents involving the use of physical and/or chemical interventions. Staff shall prepare these documents utilizing the appropriate Probation Caseload Management System screens as outlined in Directive 1226 - PCMS Phase 2 Implementation of Physical Intervention Report (PIR), Supplemental Physical Implementation Report (SUP-PIR), Special Incident Report (SIR), Supplemental Special Incident Report (SUP-SIR) and Behavior Management Program (BMP). All SCM reports must be entered into the

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PCMS system

1704 SECTION C – SAFE CRISIS MANAGEMENT AND PHYSICAL INTERVENTION POLICY AND PROCEDURES

I. OBJECTIVELY REASONABLE DETERMINATIONS

When determining the necessity for and appropriate level of physical intervention, including OC Spray, "objectively reasonable" means the amount and type of force that an objective, similarly trained, experienced and competent youth supervision Officer, faced with similar facts and circumstances, would consider necessary and reasonable to ensure the safety and security of youth, staff, others, and the facility. Officers shall evaluate each potential physical intervention situation considering the known circumstances, including, but not limited to:

- Whether the youth presents an immediate threat to the safety of him/herself or others; and/or,
- Whether the youth is actively physically resisting. Obstinacy is not a form of resistance that generally requires use of force if it does not present a threat to self or others.
- Likelihood, capability of a youth to carry out threats made;
- Size and physical strength of youth vs. Officer;
- Number of youth involved and the number of Officers available or present;
- The nature and severity of the situation, and potential for serious injury.

(Meets standards set forth in Title 15, Section 1357 (a)(1))

II. INAPPROPRIATE/PROHIBITED USES OF FORCE AND CONDUCT

Inappropriate force is that force which is unnecessary or excessive given the totality of the circumstances presented to Officers involved in using force. Inappropriate or excessive use of force is prohibited. The following examples are **PROHIBITED USES OF FORCE AND CONDUCT**:

- "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 torqueing of the head and neck;
- Strikes or kicks to the head, torso or other body parts during non-lethal situations
- Deliberately or recklessly striking an individual's head, limbs, torso or other body parts against a hard, fixed object (e.g., roadway, driveway, floor, wall, etc.) during non-lethal situations;
- "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 abuse, or

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- physical intervention used as coercion, punishment, or retaliation;
- Any other force used maliciously, sadistically, and/or for the purpose of causing harm (Hudson v. McMillian, 502 U.S. 1 (1992));
- Failure to immediately decontaminate a youth exposed to OC spray;
- 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 or when youth are no longer physically aggressive;
- Unprofessional Officer actions leading to the use of force such as taunting, verbally insulting, or challenging a youth;
- The use of force on a youth for reasons that do not justify the need for immediate physical intervention and approval from a Supervisor was not obtained;

All Officers have an affirmative duty to timely, accurately and comprehensively report incidents of abuse, inappropriate force, or prohibited conduct in accordance with State law consistent with Child Abuse Reporting Policy for Juvenile Detention Facilities. All Officers also have an affirmative duty to immediately take action to stop incidents of abuse and/or Department policy violations. Officers who violate this Policy and its related procedures shall be subject to the performance management process and may result in discharge, and/or criminal prosecution and/or civil sanctions.

(Meets standards set forth in Title 15, Section 1357 (a)(3) and (a)(4))

III. Expectations Regarding Use of Physical Interventions

NON-ENGAGEMENT POLICY

Non-engagement, omission or failure to act is defined as “deliberate indifference” to a crisis, wherein an Officer intentionally fails to physically intervene and aid another Officer, youth or civilian; or fails to stop incidents of excessive, unnecessary force or abuse and/or Departmental Policy violations. The law imposes a duty on Peace Officers to take adequate action to protect youth, staff and civilians. Deliberate indifference or failure to act is prohibited.

ANTI-RETALIATION POLICY

The Department has zero tolerance for retaliation against anyone who reports alleged policy violations, including alleged unnecessary or excessive force. Officers, youth, partner agency personnel, visitors, or other staff assigned to the facility shall not be retaliated against (including shunning) for reporting and/or intervening in any alleged policy violation, including incidents of alleged abuse or out-of-policy use of force.

Youth shall not be subject to retaliation for any reason. When youth conduct does not meet an objectively reasonable standard for Officers to physically intervene, the conduct shall be addressed through the youth’s disciplinary process, courts or other methods consistent with the Department’s core values, policies, and procedures.

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IV. Ongoing Situational Assessment

PROMOTING SAFETY AND ACCOUNTABILITY

To promote safety, upon admission into juvenile facilities that utilize OC spray, youth shall be provided an *OC Warning Form* to read and sign. The *OC Warning Form* shall advise the youth that OC spray is used at the facility and that if Officers instruct them to get down, take a knee, or use the words "OC warning/spray", they are to immediately drop to one knee and then move to a prone position on the ground with their hands behind their back. Failure to do so may result in a physical or chemical intervention if others are at risk.

Ongoing defiant behavior (i.e., deliberate threatening display of opposition to instructions, rules and/or regulations as established by the Department), substantive gang agitation and/or other acts that are likely to lead to harm or major unit disruption, may be cause for supervisors to direct an intervention. Other situations such as fights, assault, or serious self-harm may be cause for an immediate physical intervention. Whether facing likely or immediate threatening or assaultive circumstances, Officers may use only the force reasonable and necessary to resolve the crisis and that which is in-line with Department approved and State certified use of force training. In a Departmental effort to ensure youth rights are maintained and respected, and in-line with Physical Intervention Review Policy, Supervisors and Managers shall formally review all incidents to ensure the objectively reasonable standard is upheld. Supervisors and Managers shall facilitate the filing of criminal charges with the applicable juvenile or adult court against youth alleged to have intentionally assaulted others (including Officers), as appropriate.

PREVENTION STRATEGIES

Prevention strategies are designed to promote positive behavior and minimize crises. The primary tools for Officers in preventing crises are building positive, supportive, professional relationships with youth and utilizing proactive supervision techniques. When supervising youth, Officers should seek to establish caring rapport and maintain situational awareness of changes in an individual's mood or the tone of the unit. Recognizing these changes will give Officers the ability to effect proactive engagement, summon additional Officers and/or mental health professionals, or utilize other approved techniques.

Officers engaging daily in prevention and strength-based intervention strategies can contribute to the reduction of youth anxiety. Some of these proactive crisis avoidance strategies include:

- Providing programming that is properly structured;
- Setting and regularly reinforcing clear expectations;
- Using positive behavior management techniques such as (appropriate) humor, regrouping, restructuring and problem solving, supporting positive development;
- Providing differential reinforcement, which involves acknowledging appropriate behavior while ignoring inconsequential behavior;
- Utilizing positive correction techniques (appropriate approval and disapproval);
- Seeking support from clinical or program personnel to assist; and
- Engaging appropriate/positive family and kinship support, while maintaining an awareness and sensitivity to family history/dynamics, to help address youth concerns and behavioral issues.

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Officers shall strive to prevent escalating crises through effective communications, warnings, asking other Officers to assist, and other non-physical methods to minimize the need to utilize physical or chemical intervention, insofar as practical. When deciding how to address crises, Officers shall consider what influences: narcotic use; history of trauma; and/or mental illness may have on youth behavior; and how youth may be affected by the utilization of physical or chemical intervention. Officers shall make every effort to avoid applying physical intervention, including deploying OC spray, onto youth whose known medical or mental health conditions involve the following:

- Psychotropic drugs or stimulant medications;
- Asthma or respiratory problems;
- Documented history of heart disease;
- Documented history of seizures;
- Pregnancy or post-partum recovery;
- Developmentally disabled;
- Medically obese;
- Under the influence of stimulant narcotics (cocaine, methamphetamine, PCP, etc.).

DE-ESCALATION STRATEGIES

De-escalation strategies are non-physical options, which include the use and application of efforts and techniques, including conflict resolution, to discourage, decrease or prevent threatening, disruptive or violent behavior. These strategies are most effective when Officers establish appropriate relationships with youth, consistently and fairly implement universal prevention strategies and acknowledge and reinforce positive behavior. Officers trained to utilize intervention strategies while considering gender dynamics and the impact of trauma on adolescent brain development, are likely to experience greater success at preventing and de-escalating crises.

When faced with escalating situations Officers may utilize the following strategies:

Request for Compliance with Instructions: Requests of the youth for compliance with instructions in a fair, firm and respectful manner. It may be best for one Officer (preferably one who has built positive rapport with the youth) to take the lead in speaking with the youth one-on-one.

Discussion/Counseling: Attempt to counsel or engage the youth through dialogue to de-escalate the situation. Speak directly to the youth (away from the group or audience), in a firm but calm and non-threatening manner, using youths' name. Continue dialoguing, clearly instructing the youth to cease the activity and comply.

Mental Health Assistance: As part of the RESOURCE team, Mental Health staff shall serve a more direct role in engaging youth in crisis to assist with de-escalation. Mental Health staff shall be summoned immediately or as soon as "reasonably possible," to support the

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youth in regaining self-control and help encourage compliance with instructions through Mental Health's professional/practiced crises de-escalation expertise, including their unique knowledge of youths' casework and treatment.

Officer Presence: One or more Officers converge on the incident or potential incident, approaching in a non-threatening manner. One Officer assists by providing continuous instructions/orders to the youth in a calm but firm voice to cease the negative activity. Additional Officers shall assist in isolating the situation, providing back-up for the Officer engaging the youth, and/or securing the rest of the group. Officers should be cognizant that the youth may be experiencing a mental health crisis and may react to being surrounded. If safe to do so, give the youth space.

Switching Officers (Tapping-Out): If the youth is extremely angry or upset with a particular Officer, an un-involved Officer shall attempt to take over counseling the youth, continuing the de-escalation process. Officers must be aware of their own emotions and take great care not to personalize any comments or actions from the youth.

Secluding the Situation/Youth: If the youth does not comply with verbal instructions and additional Officers have been called to the area, the youth shall be secluded from the rest of the group. Seclusion occurs in several forms. The preferred form of seclusion is where the youth voluntarily moves to their room and is supervised during a cool down period. Officers shall provide continued direct visual observation in conjunction with dialogue, counseling, and mental health assistance. Officers shall communicate, and document said communications with youth on a *Safety Check Sheet* and in PCMS.

It is not always possible to convince a youth to return to or enter their room. When this occurs, secluding the youth in a vacant dayroom, hallway, or other area that can be safeguarded is permissible. It is acceptable to reduce or halt program activities for the time necessary to handle the situation. The program shall resume after the incident has been resolved and the location is safe and secure.

Request Supervisory Assistance: Request that a supervisor report to the location where the youth is experiencing the crisis.

Behavior Chart Consultation: When experiencing continued non-compliance, circumstances permitting, request that a staff member consult the youth's Behavior Chart or the Probation Case Management System (PCMS) to assist in determining an appropriate course of action. It is important to take note of any medical, mental health or developmental disability problems in the youth's history.

Other Officers/Volunteers: Probation Officers may request and/or utilize other staff including teachers, religious volunteers or others as available, provided they have an

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established rapport with the youth and can be safely involved in the de-escalation efforts.

Temporary halt to Program Activities: If a youth's actions constitute a potential safety risk to staff or other youth in the unit, Officers may reduce or halt program activities for the time necessary to handle the situation with the approval of the supervisor. The program shall resume after the incident has been resolved and the location is rendered safe and secure.

Split-Group Programming: If a youth or a youth group presents a potential safety risk to the unit (e.g. gang tension), Officers may temporarily separate youth into different groups with supervisor approval when conducting unit-wide activities to minimize conflict until the behaviors of concern are resolved.

Shift Leader Management of Situation: The shift leader will retain control of the situation and station Officers strategically in non-threatening positions pending arrival of the supervisor.

Notification of Duty Supervisor: The Duty Supervisor must be contacted prior to any use of physical intervention, unless it is an emergent/immediate situation.

Duty Supervisor Responsibility: If the Duty Supervisor is unavailable, the Back-Up Duty Supervisor or other supervisor shall respond to the location. In the absence of a supervisor, the facility Manager (if available) shall be requested to assist. In the unlikely event that a supervisor or Manager cannot respond to the location, the Sr. DSO or DPO II shall manage the situation.

Upon the supervisor's arrival to the location, the supervisor or designee shall:

- Consult with unit Officers;
- Attempt to separate non-involved youth;
- Counsel the youth in an attempt to gain compliance;
- Direct the youth to comply while explaining the significance of non-compliance;
- Determine whether physical intervention is needed to facilitate compliance;
- Act in accordance with the *Directed Use of Physical Intervention* guidelines provided below, if force is deemed necessary.

(Meets standards set forth in Title 15, Section (a)(2))

V. General Crisis Intervention Techniques

PHYSICAL INTERVENTION DETERMINATIONS AND STRATEGIES

As previously defined, Officers may utilize force that is reasonable, predicated upon the factors as presented by each specific incident. In some instances, the use of **immediate** intervention may be required. The level of physical intervention that can be used in these circumstances is governed by the "Objectively Reasonable Standard."

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The following, are examples of situations which may occur quickly and require Officers to respond immediately, utilizing more restrictive alternatives to prevent injury to youth and/or Officers:

- Major disturbances;
- Fighting and/or assaults (Officer, visitors or other youth);
- Escape attempt or escape; or
- Youth engaging in out of control or harmful behaviors which may have serious and/or life-threatening repercussions on the youth or others.

If Officers reasonably determine that de-escalation techniques are ineffective or cannot be utilized due to imminent danger in these circumstances, immediate use of physical/ chemical intervention techniques may be employed.

Officers and managers shall be cognizant that history of trauma may intensify natural defensive/protective responses during physical interventions. A youth's inadvertent or unintentional contact with Officers during a physical intervention resulting from a struggle to evade Officer's hold and/or the youth's natural defensive/protective response is considered resisting the Officer. This is different from an assault on an Officer which is a youth's intentional contact with an Officer for the purpose of causing harm or posing a threat.

Pregnant and Post-Partum Recovering Youth

Officers shall ensure that every effort is made to avoid applying any type of physical, chemical, or mechanical restraint on youth who are pregnant, laboring or delivering, or recovering post-partum (in line with the Juvenile Justice Reform Act of 2018 and in accordance with Penal Code Section 6030(f) and Welfare and Institutions Code Section 222). Use of force in these situations poses serious health and safety concerns due to the increased likelihood of falls and an inability to break falls. Additionally, these pregnancy and post- partum recovery periods are associated with heightened emotions and mental health symptomology. The use of force can intensify emotional vulnerability as the youth may experience re-traumatization. If a situation occurs, as previous described, which requires restrictive alternatives to prevent injury to youth and/or others, the Officer shall take special precautions to avoid any pressure on the youth's abdominal region or impact upon any area of the body.

(Meets standards set forth in Title 15, Section 1357 (a)(8))

Directed Physical Interventions

(Directed, Planned & Supervised for Non-Emergent Situations)

In cases where there is not an immediate physical threat, such as prolonged passive resistance

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or involuntary removals, there shall be a tactical plan predicated upon preventing the use of force whenever possible. The directed physical interventions require organizing and staffing to control confrontations in a calm and professional manner. The Duty Supervisor, Assistant Duty Manager or Duty Manager, supervises attempts to diffuse the situation and authorizes the physical intervention; remaining at the location until the incident is resolved. As with all uses of force, the objectively reasonable standard shall drive the level and type of physical intervention used to resolve the incident.

All Directed Physical Interventions shall be preceded by a cool down period to allow the youth an opportunity to comply with Officer instructions. The cool down period shall include de-escalation efforts. If deemed necessary, the Officer may request assistance from Mental health staff, teachers, medical staff or other facility partners (circumstances and safety permitting). Youth in crisis shall not be viewed as a singularly Probation issue; a team approach may be necessary. All Directed Use of Force incidents shall be video-taped and fully documented by all Officers, including the supervisor managing the Directed Use of Force.

The Authorizing Supervisor/Manager shall make every effort to ensure Officers are briefed regarding the youth's mental health issues and/or developmental disabilities prior to the execution of any physical intervention techniques.

In situations where youth engage in serious and/or life threatening self-harming behavior and fail to follow Officer instructions to cease, the Officer shall immediately call for back-up assistance and physically intervene.

The decision to proceed with the Directed Physical Intervention shall be fully documented by all involved (including the supervisor or manager who guided the Officer), along with the details of the underlying reasons to proceed and the outcome. Justification for the use of force in these circumstances must demonstrate the utilization of de-escalation techniques as required in this document.

The following are examples, however, not inclusive, of what may be considered directed physical intervention scenarios:

- Youth refusal to follow directions which are likely to result in a disturbance;
- Refusing to exit area*;
- Non-responsive to instruction;
- Irrate/hostile behavior/stance and/or verbally threatening Probation Officers, support staff, volunteers, other youth with physical harm;
- Mutual verbal altercation between youth in which there is no immediate threat of physical altercation;
- Refusing to be searched for contraband or refusal to surrender contraband;

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- Engaging in self-harming behavior that is not immediately life-threatening;
- Walking out of the area of immediate supervision in a secure facility but remaining in full view of Officers and not actively attempting to escape.

Spitting, attempting to throw body fluids or other bodily substances on Officers (also referred to as gassing) or throwing food or objects at a Probation Officer, support staff, volunteers or other youth without additional physical aggression is not grounds for use physical intervention. However, in conjunction with other behaviors listed above the use of directed physical intervention would be justifiable.

** In circumstances where the risk or physical threat to an Officer, youth, and property is minimal; however, the use of force may be necessary to remove a youth who is refusing to exit a confined area, prior authorization shall be obtained from the Supervisor, Superintendent, Assistant Superintendent or facility Manager. A confined area is defined as any room, holding area, shower or area that can be isolated or controlled. Absent escalating and extenuating circumstances which would reclassify the incident type, force shall not be used as an immediate tool for the youth's removal and may be deemed as prohibited conduct. When managerial authorization cannot be obtained, such as during an after- hours emergency, the attempts to contact management shall be documented (including timelines), along with the clearly articulated reasons for the involuntary removal.*

Directed Physical Intervention(s) – Transportation Section

When a serious incident occurs while transporting youth (i.e. to and from court, custodial facilities, medical/dental appointments, etc.) the Transportation Deputy shall immediately radio dispatch and inform the Transportation Supervisor of the serious incident.

The call should include the location where the incident is taking place, the nature of the incident and what assistance, if any, is needed. The Transportation Deputy shall inform the Transportation Supervisor if physical intervention is (or was) necessary to bring the serious incident under control.

Due to the nature of the Transportation Deputy's assignment, a Transportation Supervisor may not be available to immediately assist with the serious incident. Transportation Deputies are to ensure that all youth are transported safely and securely and to apply the objectively reasonable standard whenever physical intervention is deemed necessary.

Application of Physical Intervention(s)

If verbal commands and de-escalation techniques fail to achieve the desired cessation of

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negative behavior, physical intervention shall be employed utilizing the least restrictive techniques necessary to control the situation/subdue youth(s) and restore order.

Verbal de-escalation techniques shall be continued throughout the physical intervention to redirect behavior, diffuse difficult situations, and generate voluntary compliance. Clear instructions shall be provided by speaking in a firm but calm manner, using the youth's name to redirect, persuade, and gain the youth's cooperation (e.g. "take a seat on your bed and place your hands on your legs with your palms facing down...").

Such techniques may include both physical strengths and/or holds, which refers to the amount of physical force reasonably applied to a youth by an Officer based on the resistance of the youth. Officers must be mindful of Officer/youth size differentials when utilizing physical strengths and holds. Officers must calmly and clearly articulate directions and expectations while applying physical strengths and holds towards redirecting the resistance of the youth. As a safety precaution, when engaging in a restraint, Officers shall not apply their full body weight onto the youth.

Officers must remain aware of positional asphyxia. Positional asphyxia limits the expansion of the lungs by compressing the torso, hence interfering with breathing. Positional asphyxia can occur when the chest or abdomen is compressed backwards toward the spine. Officers must be cognizant of their own size and strength during restraints.

Whenever a youth complains that they cannot breathe, shows signs of difficulty in breathing, or vomits, the Officer must immediately remove pressure from the back, chest, and abdomen while maintaining control of the youth's limbs. Officers must observe the youth to determine whether youth is breathing. Throughout the use of physical intervention, Officers shall ensure the youth is responsive and can speak.

Health emergencies always override the use of physical strengths and holds. Officers must continuously reassess the youth for potential pain or discomfort as they seek to gain compliance. If a youth appears to have lost consciousness or shows signs of any other health emergency, Officers must immediately stop the physical intervention and check the youth for breathing and signs of circulation. Officers must immediately initiate CPR and emergency medical response procedures (code blue) if either breathing or signs of circulation are absent. If the Officer is unsure if either breathing or signs of circulation are absent, they must immediately initiate CPR and emergency medical response procedures.

VI. Authorized Levels of Physical Intervention (This section remains in effect from Directive 1194)

The Probation Department, through the Safe Crisis Management training curriculum, has

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developed an intervention process that is constructed on a continuum, which progresses from lower to higher levels of restriction or intervention. Staff shall use only that level of intervention appropriate for the situation encountered and shall not escalate beyond that point, absent exigent circumstances supporting such action. These levels, from least to most restrictive, are:

Level-1 (A1) - Disengagement: A staff member steps between two youths who are engaged in a physical altercation and separates the combatants with a gentle open-handed guiding movement that does not involve confinement of an appendage or the execution of an Extended Arm Assist.

Level-2 (A2) - Extended Arm Assist: A staff places the youth into an Extended Arm Assist by securing the arm and shoulder (or shirt/sweatshirt) of the youth for the purpose of inducing an acting-out youth to cease their involvement with negative behavior or and/or to assist them in moving to a safer area.

Level-3 (B3) - Standing Assists:

Two types of standing assists are approved as outlined below:

- 1) Cradle Assist — Staff reaches under the youth's arms, grasps the wrists and secures the wrists toward the youth's hips and "cradles" the youth, thus restricting movement.
- 2) Upper Torso Assist — The staff reaches around the outside of the youth's arms from the rear and then, the staff pulls their (staffs) hands, holding tightly to the staffs own chest, thus restricting the youth's arm movement.

Either of the above interventions may be used until the youth calms-down, or a higher level of intervention is deemed to be necessary.

Note: Any level 1, 2, or 3 interventions resulting in the youth falling to the ground or floor, striking a wall or other solid fixed object (desk, bed, pole, etc.), is considered to be a "Level-4" intervention at minimum. When involved in these types of disengagement and lower-level assists, staff shall be conscious of the need to use only minimal force and to maintain the youth in a standing position until the intervention is fully concluded.

Level-4 (B/4) - Assist to the Floor:

Two types of floor assists are approved as outlined below:

- 1) Seated/Kneeling Cradle Assist — A youth who has already been placed into a Cradle Assist is assisted to a seated position on the floor by a staff, who then ends up in a kneeling position and continues to maintain the Cradle Assist, restricting movement.
- 2) Seated/Kneeling Upper Torso Assist — A youth who has already been placed into an Upper Torso Assist is assisted to a seated position on the floor by a staff that continues to maintain the "Upper Torso Assist" hold on the youth, restricting movement. This level of intervention may be used until the youth calms-down, or a higher level of intervention is deemed necessary.

Level-5 (C5) - Supine Torso or Prone Torso Floor Assists:

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Three types of prone or supine floor assists are approved as outlined below:

1. Floor Assist to Supine Torso Assist with One Staff: Youth who has already been placed into a Seated/Kneeling Cradle Assist or Seated Upper Torso Assist is further assisted to a more restrictive Supine Torso Assist. This occurs when the staff reaches behind the youth, supporting the youth's head, and with their free hand reaches across the youth's body and places the youth onto their back.
2. Floor Assist to Supine Torso Assist with Two Staff: Youth who has already been placed into a Seated/Kneeling Cradle Assist or Seated Upper Torso Assist is further assisted to a more restrictive Supine Torso Assist. This occurs when the two staff rotate from a seated upper torso and face the youth from the opposite direction. Each staff, using their arm that is closest to the youth reaches under the youth's armpit area and move the youth back onto their back. This procedure is concluded by each staff sitting snugly on the floor next to the youth and wrapping each of the youth's arms around their waist, or by placing the youth's hands above his or her head onto the floor in a "supine extension." The two-staff assist is the preferred method for executing a supine torso assist.
3. Floor Assist to Prone Bridge Assist: youth that is smaller in stature than the staff member executing the assist and that has already been placed into a Seated/Kneeling Cradle Assist or Seated Upper Torso Assist is further assisted to a more restrictive Prone Bridge Assist by the staff. The staff rotates the youth to a face-down position. The staff then kneels next to the youth using the staff's knees to help secure one of the youth's arms against the youth's side. Then the staff reaches across the youth's back and places both of the staff's hands on the floor immediately next to the youth's free arm and secures it to the youth's side. If a second staff is present, this staff can hold a bridge over the youth's calves to control any kicking.
4. Floor Assist to Prone Torso Assist: A youth who has already been placed into a Seated/Kneeling Upper Cradle Assist or Seated Upper Torso Assist is further assisted to the most restrictive position, the Prone Torso Assist by two staff. The two staff rotate the youth to a face-down position. The transition to face-down is methodical so as to protect the youth's face, neck and head from injury. Both staff kneel next to the youth on opposite sides. Both staff use their outside hands to hold the youth's elbow and slide the youth up to a sitting position on the floor while holding tightly to the youth's armpits. The youth's arms are then placed around the staff's waist concluding the assist.

The Prone Bridge Assist and Prone Torso Assist are not recommended for youths that are clinically obese, or that have known asthmatic, respiratory, substance abuse, cardiac problems or are taking psychotropic medications. Data collected nationally suggests that prone positions are more frequently associated with tragedies such as positional asphyxia. Youths with these conditions that are placed into a prone position are to be immediately placed into a Supine Torso Assist position, or placed into a seated position (mechanically restrained as necessary) until control is established.

NOTE: In all Level 5 positions, it is possible to add more staff to the intervention to increase safety. Supine or Prone Torso positions should never be used with any of the intervening staffs body placed on the youth's head, neck or torso. Youths that are obese, that have breathing disorders, are pregnant or taking psychotropic medications should not be placed in a prone position.

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Level-6 (C/6) – Chemical Intervention: The use of OC spray is considered the final level of authorized intervention in the force continuum. As appropriate, all other crisis intervention de-escalation techniques, including physical intervention, shall be employed prior to the application of OC spray. Officers shall only use the minimum amount of OC spray necessary to gain control of a situation and/or subdue the youth(s). The anticipated appropriate use of OC spray results in the application of individual one-second bursts; when properly deployed, each of which should equal no more than one-tenth to two-tenths of an ounce of OC propellant. All de-escalation/intervention efforts made prior to and during the application of OC spray are to be clearly documented within the narrative of the deploying staff PIR(s).

Note: Following an incident involving the use of OC spray, the Duty Supervisor shall take all deployed Officer canisters, note the serial number and assigned Officer of each canister, and take post-deployment canister weights. After this information is captured, the supervisor shall ensure that the weight of each Officer's canister is subsequently noted on the PIR SCM Review reports.

Residential Treatment Services Bureau (RTSB) facilities (camps) no longer utilize Level 6 Chemical Intervention as of August 2019.

(Meets standards set forth in Title 15, Section 1357 (a)(2))

VII. STRATEGIES FOLLOWING A PHYSICAL INTERVENTION

An uninvolved Officer shall escort the youth away from the incident location to the medical unit, HOPE Center, supervisor for assessment or another safe/secure location. If unavoidable and an involved Officer must escort a youth, the Officer shall document in their Physical Intervention Report (PIR) the reason/justification for escorting the youth. Under no circumstances shall a youth who has alleged unnecessary or excessive force by an Officer during the intervention be escorted by said Officer following the incident.

ROOM CONFINEMENT FOLLOWING USE OF PHYSICAL INTERVENTION

When room confinement is necessary following the use of force as all less restrictive options have been attempted and exhausted, but the youth continues to pose a threat to the safety or security of Officers or youth, Officers shall mirror protocols for level 2 enhanced supervision status (regardless of placement in the specialized or regular unit). Additionally, if a youth is to be transported to a room in a different area or building (e.g. HOPE Center), they shall not be transported to that location by Officers directly involved in that youth's physical intervention. If Officers who are involved in the use of force escort the youth, it must be clearly explained in the PIR why uninvolved Officers were not able to assist. Under no circumstances shall a youth who has alleged unnecessary or excessive force by Officers during the intervention be escorted by said Officer following the incident.

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A *Safety Check Sheet* shall be affixed to the youth's door to provide checks that are not to exceed ten (10) minutes between observations. Officers shall be required, at each check, to communicate and document said communications with youth on Safety Check Sheet. (Refer to HOPE Center "Stabilization" protocols for each respective Bureau's standards.)

The utilization of room confinement shall not be used for the following reasons in accordance with Title 15 *Minimum Standards for Juvenile Facilities, Section 1354.5 Room Confinement*:

- 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 Officer;
- Used for the purposes of punishment, coercion, convenience, or retaliation by an Officer;
- Used to the extent that it compromises the mental and physical health of the youth

MEDICAL ASSESSMENT OF YOUTH

Any youth involved in a physical intervention incident in RTSB facilities shall be referred to medical staff for assessment immediately, whether or not injury is visible, but not later than 30-minutes following containment of the occurrence. Uninvolved Officers shall escort the youth to the medical unit. If Officers who are involved in the use of force escort the youth, it must be clearly explained in the PIR why uninvolved Officers were not able to assist. It is expected that medical staff shall assess the youth(s) immediately upon presentation. Medical staff shall document the findings of their examination in the Probation Electronic Medical Record System (PEMRS), citing their observations and any treatment proffered, along with the date and time of the youth(s) examination.

In situations where there is no nurse on duty, and upon containment of the incident, the youth shall be immediately referred to the Duty Supervisor for assessment of any injuries, but no later than 30-minutes following containment of the occurrence. The Duty Supervisor shall ascertain from the youth whether the youth has sustained any injury. If the youth does not appear to have sustained a serious injury, the Duty Supervisor shall log the incident into the Duty Supervisor's Log Book and ensure that the youth is referred to the nurse as soon as practicable, upon the nurse's return to the facility. If the supervisor suspects or knows of injury that cannot be treated at the location, the youth shall be transported from the facility for a higher level of care.

The Duty Supervisor shall, at the time of assessment, ascertain whether the youth appears to have sustained an injury to the head, neck or spine. If a head, neck or spinal injury appears to have occurred, the Duty Supervisor shall treat this type of injury as a potentially serious injury and shall follow the "serious injury" treatment guidelines as noted below.

A "serious injury" is one that requires that the youth be sent out to a local hospital for treatment of the injury, which typically would involve treatment such as sutures, the setting or realigning of fractured or displaced bones, assessment for internal injuries, or

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hospitalization. In the absence of medical staff on site, a supervisory Officer that assesses the youth and if it is determined that the youth appears to have sustained a serious injury that appears to be potentially life-threatening or life altering, 911 shall be called for immediate paramedic assistance. In other instances, where there is serious injury that does not appear to be life threatening, the supervisor shall contact on-duty medical staff at the nearest juvenile hall for direction as to whether to send the youth to a local hospital, or to send the youth to the nearest juvenile hall for assessment and treatment.

A "less serious injury" is generally one that requires assessment and treatment by medical staff at the facility and allows the youth to return to his or her regularly assigned unit or the Hope Center or be housed in the Medical Observation Unit for observation purposes only. Determination of seriousness of injuries shall be made by medical staff.

Probation Referral of Youth to Medical Staff for Assessment – At the conclusion of a physical or chemical intervention incident, Probation staff shall document in section N (narrative section) the exact time that youth were presented for a medical examination to be performed in the PIR. A youth is considered to have been made available for assessment upon his or her arrival at the medical unit/nurse's office at any facility, other area designated for the performance of medical examinations or, upon the nurse's arrival to the incident location.

(Meets standards set forth in Title 15, Section 1357 (a)(7))

MENTAL HEALTH INVOLVEMENT AND ASSESSMENT OF YOUTH

As indicated in de-escalation strategies and use of force strategies sections of this directive the Department of Mental Health (DMH) is partnered with the Probation Department specifically to identify and address potential manifestations of mental or behavioral disorders in the detained youth. DMH presence is necessary while youth are presenting decompensating behavior influenced by factors such as court decisions, visitors, or phone calls that could lead to crises and/or following removal to a secure location after a crisis. Mental health shall be consulted immediately or as "reasonably possible" to provide greater opportunity for DMH to assess the youth's mental state at the time and to prevent further behavioral decompensation, in addition to helping avoid situations where use of force strategies may be necessary.

When DMH staff are unavailable, a referral shall be submitted to DMH for assessment as outlined under heading Mental Health Support for Youth Experiencing a Mental Health Crisis. Per departmental policies (including DSB and RTSB Policy Manuals regarding *Enhanced and Specialized Supervision*) a Specialized Supervision Plan (SSP) may be necessary.

Mental Health Consultation Request: All youth who are involved in a use of force incident shall be referred for mental health assessment. Officers shall document the referral to DMH on the PIR and attach a copy of the submitted Request for Mental Health

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Consultation form to the PIR. During the post-incident review period, supervisory Officers conducting the Physical Intervention Incident Review shall verify that the youth was referred to DMH.

(Meets standards set forth in Title 15, Section 1357 (a)(7))

MANDATORY REPORTING REQUIREMENTS

Physical Intervention Report / Supplemental Physical Intervention Report: All staff members who are involved in, witness to, or are given an assignment wherein a crisis is resolved through the use of physical or chemical intervention shall, at the conclusion of the incident, immediately notify the Duty Supervisor and complete either a Physical Intervention Report (PIR) or Supplemental Physical Intervention Report (SUP-PIR) via PCMS. The completion and submission of these reports shall adhere to the requirements outlined in the Instructions for Completing the PIR / SUP-PIR located at:

Probnets> Forms> DSB Forms> Physical Intervention Report (PIR) or Supplemental Physical Intervention Report (SUP-PIR).

All PIRs and SUP-PIRs shall be completed in their entirety and submitted to, reviewed and provided a signed approval, by both the shift leader and the Duty Supervisor, immediately after the incident, but no later than the end of the shift following the conclusion of the incident. During emergent situations, when resources cannot be diverted from supervision responsibilities to complete PIRs/SUP-PIRs without compromising the health and safety of the youth, the end of shift deadline may be extended by the Duty Supervisor provided justification is documented.

Officers must accurately and thoroughly provide detailed facts of their own personal observations of the incident; including what they visually witnessed, heard, and/or smelled. A helpful guideline is providing who, what, when, where, why, and how. It is recognized that post incident, there is a possibility that Officers may make non-material omissions or errors on their written reports. If the reviewing supervisor recognizes these types of mistakes, either through an overall review of the incident or through video recordings, the report may be sent back to the employee for clarification via a supplemental report.

(Meets standard set forth in Title 15, Section 1357 (b)(5))

Prohibited Reporting Conduct

Information contained in an SIR, PIR and SUP-PIR constitute lawful and truthful statements made by Sworn Peace Officers to objectively portray the facts of the incident in the most honest and transparent manner possible. Officers who are not honest in their reporting shall be subjected to the performance management process which may result in discharge, and/or criminal prosecution and/or civil sanctions. (Refer to *Employee Honesty Policy*).

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Examples of prohibited conduct in reporting include:

- **Purposeful material omissions:** Officers intentionally leaving out details in an effort to disguise or diminish the actions of themselves or others.
- **Code of Silence:** Also known as blue wall of silence, the blue code of silence and blue shield of silence, are terms used to denote the informal rule that purportedly exists among law enforcement/corrections personnel, not to report on a colleague's errors, misconducts, or crimes, including excessive use of force. Such a practice is strictly prohibited, and any personnel determined to have participated in said practice shall be subject to disciplinary action according to departmental guidelines, which may include up to termination of employment.
- **Collusion:** Officers shall not collaborate (ensuring accounts of the incident contain same/similar details) with each other during the preparation of details in reports.
- **Coaching:** Officers instructing co-workers to report details and facts in their reports that they did not actually experience or writing reports on behalf of another Officer.
- **Child Safety Assessments:** Upon being notified that a Physical Intervention incident has occurred, the Duty Supervisor shall immediately conduct a Child Safety Assessment (CSA) involved in the incident. The designated Duty Supervisor shall respond to the location/building where the incident occurred. The CSA shall be completed within one hour of being notified. Questionnaires shall additionally be obtained from each youth involved in the incident and affidavits obtained from each youth witnessing the incident as outlined in the *Physical Intervention Incident Review Policy*.

NOTIFICATIONS

The superintendent or facility Manager (or designee) shall be immediately notified if a youth is seriously injured, or an allegation of excessive or unnecessary force is made during the application of force. The superintendent shall make appropriate notifications to the chain of command.

Assaults Against Officers

The Supervisor assigned to the incident shall immediately contact the on-duty facility manager, the victim's Supervisor, the facility Superintendent and the Bureau Chief in any instances where it is alleged that an Officer has been physically assaulted or has been gassed by a youth. As appropriate, the Department will facilitate the filing of criminal charges against the youth with the applicable juvenile or adult court.

When assessing the appropriateness of filing criminal charges, supervisors and managers are reminded to be cognizant of whether the youth's actions were resistant to an Officer, or assaultive in nature and intended to threaten or cause harm to an Officer as stated in the *Physical Intervention Determinations and Strategies*, section 1012 of this Policy.

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It is the on-site supervisor's responsibility to ensure that the affected Officer is provided with an Industrial Accident packet or that the packet is completed on behalf of the employee per protocol. It is also the on-site supervisor's responsibility to ensure that employees involved in or affected by a serious or traumatic experience are afforded services which include: Employee Support Services (refer to Directive 1387), Peer Support Coalition (refer to Directive 1748), and Employee Assistance Program

(<http://employee.hr.lacounty.gov/employee-assistance-program/>).

Parent/Guardian/Caregiver Notifications: When a youth is involved in a Use of Force or chemical intervention at least three (3) telephonic contacts to the parent/guardian/caregiver need to be attempted within a 24-hour period of the incident. This information shall be clearly documented in the Physical Intervention Report, including the number of attempts made, dates, times, names of parent/guardian/caregiver contacted, and any other information regarding the subsequent conversation, as appropriate.

(Meets standards set forth in Title 15, Section 1357 (a)(7) and (b)(4)

DEBRIEFINGS

In accordance with Title 15 *Minimum Standards for Juvenile Facilities, Use of Force*, section 1357(a)(5), debriefing shall occur following incidents "for the purposes of training as well as mitigating the effects of trauma that may have been experienced by the Officer and/or the youth involved." Debriefing is not intended to be a substitute for normal review, the Physical Intervention Incident Review process or investigative process; however, plays an important role in allowing the Officer and youth, as part of the recovery/healing process, to reflect on what happened as a learning opportunity. Debriefs shall not occur prior to all Officers completing required documentation. Video of the incident may be reviewed during the debriefing if available and if the incident does not involve excessive or unnecessary force. Debriefings are not a legal process to disseminate discipline, but an opportunity for unit/camp Officers to discuss and analyze incidents in an educational and informative setting. Debriefing can be a valuable tool in determining what factors may have caused the event(s), helping to evaluate the effectiveness of interventions utilized, and proactively mitigating future events. Debriefing after a physical intervention is also an effective way to learn about the well-being of the youth and the Officers who were involved.

The debriefing process allows for Officers to ask questions and voice concerns to supervisors and shift leaders regarding the actions taken during a use of force incident. This is an opportunity for supervisors to provide training and impart situational expertise in relation to the policies and procedures established by the Department. Debriefings shall be utilized as a continuous quality improvement technique to maximize the Department's efforts in ensuring the safety and security of the youth, staff, and community.

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Additionally, Officers cannot be compelled to waive their rights to representation should an incident be subject to further investigation due to allegations of excessive and/or unnecessary application of force (This does not include the requirement to complete written reports; PIR, SUP-PIR etc.). Officers involved in critical incidents, including uses of force, shall be referred to the Employee Support Services (ESS) unit in accordance with Policy.

(Meets standards set forth in Title 15, Section 1357 (a)(5))

1705 RESTRAINTS

This section of the Directive is written in cooperation with Juvenile Court Health Services (JCHS) and Department of Mental Health (DMH).

Restraint devices refer to any device that immobilizes an individual's extremities and/or prevent the youth from being ambulatory. These devices shall not be applied as a form of punishment or discipline, retaliation 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.

Female youth who are pregnant shall not be placed in mechanical or soft restraints, including the youth's ankles, at any time for transportation purposes and in accordance with Penal code Section 6030(f) and Welfare and Institutions Code Section 222. The Duty Supervisor shall ensure that sufficient Officers are assigned to provide needed supervision to protect the youth, hospital personnel, and the public during this process.

Authorized restraint devices for use by the Department consist of hard mechanical restraints (i.e., handcuffs, leg irons, waist-chains, plastic flex- cuffs) and soft mechanical restraints (i.e. padded leather wrist and ankle restraints and safety helmets). The Department policy requires that there are at least two Officers present when mechanical restraints are applied, except in emergency situations. Protective measures shall be taken for all youth placed in mechanical or soft restraints to move/house them alone or in a specified area for restrained youth which makes provision to protect the youth from abuse.

Upon the containment of the use of force incident and following the application of mechanical/soft restraints, Officers shall move the youth to a safe location in preparation for release. Officers shall always apply continual de-escalation methods (as described in the De-Escalation Strategies section of this policy) and reassess whether it is safe to remove the restraints as soon as possible. If the youth fails to comply and the severity of the immediate threat justifies continued mechanical/soft restraint use (objectively reasonable standard applied), the Officer shall provide ongoing assessment and documentation of their efforts in the Physical Intervention Report (PIR).

Departmental-approved or issued mechanical restraints are authorized for use in a manner consistent with the manufacturer's application instructions. Mechanical restraints may be

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used to keep youth safe in crisis situations where the youth's behavior cannot be controlled through less restrictive means.

Mechanical restraints shall not be used to secure a youth to a "fixed" immovable object or the inside of a transporting vehicle. Gurneys and/or beds in hospitals that are mobile and can be rolled out of the medical facility in an emergency are not considered to be "fixed" immovable objects. It is therefore permissible to secure a youth to a mobile medical gurney to facilitate medical treatment. However, should it be deemed necessary to remove and adjust the restraints of a youth in order to facilitate treatment at a medical facility, the Officer must in all instances contact the Duty Supervisor to obtain authorization to remove or adjust the restraints. Officers shall have a plan of how and when restraints will be removed.

Physical restraints may be used and applied only for those youth who present an immediate danger to themselves or others, to prevent escape, who exhibit behavior which results in the destruction of property, or reveals the intent to cause self-inflicted physical harm. Physical restraints shall be applied utilizing only the minimum amount of force necessary in order to control the resisting youth(s) and keep them safe while the restraints are applied. Restraints shall only be utilized for the period of time necessary to enable the youth to regain control to the point in which they no longer present a threat to themselves or others thus, should be utilized only when it appears less restrictive alternative would be ineffective in controlling the youth's behavior.

Note: 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 RTSB – 1709, Use of Mechanical Restraints for Movement and Transport Within the Facility.

Use of Physical Restraints

Handcuffs: Departmentally issued handcuffs shall be worn by all youth supervision Officers while on duty and shall be maintained, cleaned and inspected in accordance with Uniform Policy. Handcuffs may be used during escort of youth, or when sound judgment indicates that there is no less restrictive method of restraining youth who are in immediate danger of injuring themselves, others, and/or pose a serious threat involving the destruction of property.

Handcuffs shall be applied to one hand at a time, with the second (free) cuff being held in the Officer's hand until it is applied and secured to the youth's other wrist. This is to prevent the youth from pulling free and using the dangling cuff as a weapon. Handcuffs shall be double-locked, with the keyhole facing upward, in order to prevent them from becoming too tight on the youth's wrist, resulting in injury. Handcuffs shall be removed when the youth is in a secure setting and otherwise able to exercise self-control.

When handcuffs are applied to youth to control aggressive behavior, they shall be applied for no more than one hour with staff assessing for continued retention every 15 minutes. Medical staff shall assess the youth every 15 minutes to ensure proper employment of mechanical restraints. Mechanical restraints shall be removed as soon as possible but no more than one hour of placement.

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Except for the specific purpose of escorting youth, following the use of handcuffs and after removal, the youth shall be presented to medical staff for medical assessment immediately but under no circumstances later than 30 minutes without justification. Medical staff shall examine the youth(s) and assess whether the youth sustained injury as a result of the application of restraints and shall record their findings. A Request for Mental Health Consultation form shall be submitted immediately or as "reasonably possible" when restraints are applied for a purpose other than to escort. The use of handcuffs shall be recorded on a PIR prepared by all participating Officers, indicating why the restraints were applied, as well as the times in which the restraints were applied and later removed. Further, Officers shall also notate on their respective PIRs who authorized the restraints to be utilized, along with any indication of injury observed, and the time in which the youth(s) was/were presented to medical Officers for assessment.

Flex-cuffs: Flex-cuffs are "hard restraint" devices that are intended to be utilized only in emergent situations within the facility to restrain youth who are in imminent danger of injuring themselves or others, or who present a serious threat to damage property, or during major disturbances and when handcuffs are not immediately available. Officers may carry flex-cuffs on their person on a county issued utility belt when so authorized.

When utilizing flex-cuffs, a youth's hands shall generally be cuffed behind the back. Flex-cuffs do not have a safety-locking mechanism and as such, care shall be taken to ensure that the flex-cuffs are not applied too tightly on the youth, as it may inhibit circulation. Flex-cuffs are only to be used for short periods of time and shall be removed when the youth is in a secure setting and otherwise able to exercise self-control or alternative restraints, such as handcuffs or soft restraints, can be safely applied. When flex-cuffs are removed, the youth shall be presented to medical staff for an assessment to be performed. Medical staff shall examine the youth(s) and assess whether any injury was sustained as a result of the application of restraints. Care in the removal of flex-cuffs must be exercised so as not to injury the youth.

Following the use of flex-cuffs and after removal, the youth shall be presented to medical staff for medical assessment immediately but under no circumstances later than 30 minutes without justification. Medical staff shall examine the youth (s) and assess whether the youth sustained injury as a result of the application of restraints and shall record their findings.

A Request for Mental Health Consultation form shall be submitted immediately or as "reasonably possible" when flex-cuff restraints are applied for a purpose other than to transport.

The use of flex-cuffs shall be recorded on the PIRs prepared by all participating Officers and shall indicate why the restraints were applied, the time applied, who authorized their application, the time removed, and a notation by the Officer involved as to any indication of injury, along with the time in which the youth(s) was/were presented for medical assessment(s).

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Soft Restraints

Soft restraints (padded leather restraining devices and helmets) are primarily used for those youth who present an immediate danger to themselves or others, who exhibit behavior that results in destruction of property or reveals the intent to cause self-inflicted physical harm. Soft restraints should be utilized when only it appears less restrictive alternatives would be ineffective in controlling the youth's behavior.

Youth shall be placed in soft restraints only with the approval of the facility manager or designee as defined in BSCC Title 15, Section 1358 *Use of Physical Restraints*. The facility manager may delegate authority to place a youth in restraints to a physician. Only Peace Officers trained and certified in the application of soft restraints shall apply them. The shift leader in the unit, camp, or DKC facility where soft restraints are utilized, shall be responsible for completing a PIR and shall ensure that all soft restraint application requirements including supervision and documentation protocols are followed.

When authorized for use, soft restraints may be applied for a maximum of two (2) hours if not used in conjunction with mechanical ("hard") restraints. If mechanical (hard) restraints are initially applied, they may only be utilized for a maximum of 15-minutes, after which the youth shall be transitioned into soft restraints, which can then only remain in-use for a maximum of 1 hour 45 minutes. Prior to reaching the maximum time, if it appears the youth may remain in crisis, the Officer shall plan an alternate strategy, preparing the youth for release in a safe and secure location. The plan must be developed in partnership with Mental Health and the facility Director or designee to seek additional support for the youth, including outside mental health evaluation. All efforts shall be made to develop the plan as early as possible.

Youth placed in soft restraints shall be isolated from other youth in the facility in so far as possible. Upon being placed into soft restraints, the youth(s) shall immediately be placed on Level-3 Enhanced Supervision status and shall remain on that status until at least the soft restraints are removed or another condition requires the youth to remain on the Level 3-Enhanced Supervision. While on Level-3 supervision status, the youth shall be supervised by one Officer, whose *only responsibility* is to supervise the youth in soft restraints. Every 15 minutes, the supervisor that authorized the placement of the youth into soft restraints shall check on the youth's condition and the need for continued restraint, until the restraints are removed.

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 youth's behavior and any Officer interventions shall be documented on the *Enhanced Supervision Observation* form at least every 15 minutes, with actual time of the documentation recorded

Continued restraint use beyond two (2) hours shall not be authorized unless the youth is pending psychiatric hospitalization and continued soft restraint is necessary to prevent serious injury or to preserve life. Reasons for continued retention in restraints shall be reviewed and documented on the *Enhanced Supervision Observation* form at a minimum of every fifteen minutes per Enhanced Supervision policy. If upon release from the

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mechanical/soft restraints, the youth resumes the behaviors of concern and it is deemed objectively reasonable to re-engage the youth, justification for the reapplication of mechanical/soft restraints shall be clearly documented in the Physical Intervention Report (PIR).

A *Request for Mental Health Consultation* form shall be completed and submitted immediately or as “reasonably possible” to DMH whenever soft restraint devices are applied, so that a clinician may assess the youth. A copy of the *Request for Mental Health Consultation* form shall be attached to the PIR that is submitted for the incident.

It is permissible to place the youth in a "prone" position for applying soft restraints; however, once placed into soft restraints, youth are not to remain in a prone position. As soon as the restraints are applied, the youth shall be placed on their side or in an upright sitting position, as deemed appropriate for the situation.

Staff must ensure the following as defined in BSCC Title 15, Section 1358(a-h) *Use of Physical Restraints*:

- Document the circumstances leading to an application of restraints recorded on the PIR
- Provide hydration and sanitation needs;
- Obtain information regarding known medical conditions that would contraindicate certain restraint devices and/or techniques;
 - Based on the youth's known medical conditions, the supervisor will make a determination if the application or continued use of restraint devices shall be allowed. The Supervisor shall assess for the appropriateness of the continued use of restraint devices or techniques. In the absence of a Supervisor, the on-site Officer shall make the determination.
- Exercising of extremities;
- Access cardiopulmonary resuscitation equipment if needed;
 - Refer to RTSB Manual 1314 – *Cardiopulmonary Resuscitation (CPR) and First Aid*
- Officer monitors for signs or symptoms which should result in immediate summons of medical/mental health staff.
 - The Supervisor or any on-site Officer shall continually monitor for signs or symptoms of youth displaying distress while in restraints. If in distress, medical/mental health staff shall be immediately summoned. If necessary, emergency medical services shall be called.

When a youth is placed in soft restraints, the shift leader is responsible for ensuring that the *Soft Restraint Log* is properly completed. This log documents each of the activities that occurred prior to the application of soft restraints, those activities that occurred while the restraints were in use on the youth and immediately following their removal. The Officer assigned to supervise the youth shall initiate an *Enhanced Supervision Observation Form* and shall document the youths' behaviors and the Officer's observations every fifteen (15) minutes on the form. This Officer shall also document any visits by supervisors, mental health or medical staff on the form during the requisite time periods. This form shall be maintained throughout the youths'

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placement in soft restraints with each fifteen (15) minute timeframe clearly articulated with attendant time frames noted.

The form shall be maintained by and in immediate proximity to the Officer providing supervision of the youth(s). The backside of the *Enhanced Supervision Observation Form* may be utilized by the Officer to provide additional summary information related to the youth's behaviors if needed. The *Enhanced Supervision Observation Form* shall be maintained in addition to any other required documentation such as logbooks, *Behavioral File*, *PCMS* or *Record of Supervision*. The completed *Soft Restraint Log* and *Enhanced Supervision Observation form* shall be reviewed, approved and signed by the shift leader at the conclusion of the youth's removal from soft restraints. The original copies of the *Soft Restraint Log* and the *Enhanced Supervision Observation form* are to be attached to the shift leader's PIR. Copies are to be placed in the youth's *Behavior File*. The Manager shall maintain copies of all *Soft Restraint Logs* and *Enhanced Supervision Observation forms* (stapled together) in a file, for a period of twenty-four months from the time of the occurrence. This file shall be subject to audit review.

Medical Assessment for Youth in Soft Restraints: Upon the initial application of soft restraints, medical staff shall immediately, but no later than two hours from the time of placement, be summoned to assess the youth's circulation and ensure that the application of restraints is proper and safe. If adjustments in the restraints are made at any time after medical staff has checked the youth, medical staff must be summoned once again to ensure that the application of restraints is proper and safe. Upon removal of restraints, medical must again be summoned to examine the youth. Medical staff shall record their findings in the youth's medical record and in the medical assessment for inclusion in the Shift Leader's PIR. The youth must be medically cleared for continued retention at least every three (3) hours thereafter.

Mental Health Support for Youth Experiencing a Mental Health Crisis: When a youth experiences a serious mental health crisis, which requires placement in soft restraints during DMH duty hours, the on-duty mental health therapist shall be summoned 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. These services may include, but not be limited to: a) providing strategies for Probation Officers to follow in addressing the youth; b) recommendations for alternative interventions, including medication; and/or c) referral to a higher level of care either within or outside of the facility.

Should an incident occur after-hours which is not resolved within 45-minutes, and no mental health clinician is on duty in the facility, the assistance of a mental health clinician or psychiatrist shall be obtained. The Duty Supervisor shall follow the set protocols for each facility to directly contact the DMH "On-Call" Psychiatrist, or contact the Supervising Nurse/ designee, who shall contact the DMH on-call psychiatrist. The Psychiatrist shall provide telephonic consultation to medical staff and/or Probation Officers; encompassing recommendations as how to best handle the situation as presented. If the Duty Supervisor is unable to contact the on-call psychiatrist, the Duty Supervisor shall contact the Mental Health Program Head for the facility. Should the

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Mental Health Program Head not be available, the Supervising Nurse shall consult with the on-call physician to determine if a youth needs to be transported to the local emergency room for a psychiatric evaluation.

1706 SAFE CRISIS MANAGEMENT – PHYSICAL INTERVENTION REPORTS (PIR and SUP-PIR) (This section remains in effect from Directive 1194)

All Officers who are involved in, witness to and/or on-duty in camp, unit cottage, or other location during a shift wherein a crisis situation occurs and is resolved through the use of physical intervention, shall complete a PIR or SUP-PIR (as appropriate) immediately following such an incident, but no later than the end of the 8-hour shift (6:00 AM to 2:00 PM; 2:00 PM to 10:00 PM; or 10 PM to 6:00 AM) in which the incident occurs or, as otherwise directed by the Duty Supervisor. Staff shall be sensitive to the fact that there exists a degree of urgency in completing the PIR as soon as possible.

Within fifteen minutes of containing an incident the Shift Leader (or other staff as designated by the Shift Leader), shall contact the Duty Supervisor and advise the Duty Supervisor that an SCM Incident occurred. Each incident shall receive an incident number, which shall be noted on all PIR and SUP-PIR documents as generated by the Probation Caseload Management System. This incident number shall be affixed on any other supplemental document (i.e. Mental Health Consultation Forms, etc) generated by staff as a result of this incident. Each facility shall also receive a facility-generated SCM Incident Number, which shall be provided by the Duty Supervisor, upon the incident being reported to the Duty Supervisor.

The written report in section "N" of the PIR must be a clear and comprehensive account of the entire incident, including the precipitating factors that led to the use of physical or chemical interventions, as well as the de-escalation efforts utilized to bring the incident to a safe conclusion. The PIR shall contain, but not be limited to the following elements at minimum:

- Notation regarding the date, time, specific location and facility where the incident(s) occurred;
- Notation as to the type of incident (i.e., controlled, uncontrolled or Mechanical Restraint);
- Notation of the type and level of force utilized;
- Names and identifying information of the staff involved in, or witnessing, the incident(s);
- Notation regarding the number of youths present in the general area where the incident occurred;
- Notation regarding the number of staff present in the general areas where the incident occurred;
- Names and identifying information of the youth(s) involved in the incident(s);
- Notation of any injuries sustained by the youth(s) as a result of the incident(s);
- Notation of any injuries sustained by any staff as a result of the incident(s);
- Notation of the time the youth(s) was presented to the nurse by Probation staff;
- Notation of the medical staff (nurse) regarding treatment rendered to the youth;
- Clear description of what precipitated the use of physical intervention;

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- Clear description of all de-escalation techniques employed;
- Clear description as to why the incident occurred;
- Notation of the request for and the presence of a Supervisor, as appropriate;
- Clear justification (explanation) as to why that particular level of force was utilized, especially at levels 4, 5, and 6, instead of utilizing a lower level of force;
- Clear description as to how the intervention(s) was/were performed and by whom;
- Clear notation of where staff were positioned just prior to and during the incident;
- Notation regarding the time handcuffs/mechanical restraints were applied and removed and by whom;

Medical Assessment of Youth - Any youth involved in a physical intervention incident shall be referred to medical staff for assessment within 30-minutes following containment of the occurrence. It is expected that medical staff shall assess the youth(s) immediately upon presentation. Medical staff shall document the findings of their examination onto page 4, Section "P" of the PIR, citing their observations and any treatment proffered, along with the date and time of the youth(s) examination. Probation staff shall present page 4 of the PIR when delivering the youth for examination, after which staff shall ensure that the nurse's comments are entered onto the PIR generated by PCMS. Staff shall then follow the guidelines of Directive 1226 which outlines the process for entering the nurse's comments into the PIR in PCMS and the processing of the document containing the nurse's handwritten comments.

In situations where there is no nurse on duty, upon containment of the incident, the youth shall be referred to the Duty Supervisor for assessment of any injuries within 30-minutes following containment of the occurrence. The Duty Supervisor shall ascertain from the youth whether the youth has sustained any injury. If the youth does not appear to have sustained a serious injury, the Duty Supervisor shall log the incident into the Duty Supervisor's Log Book, and ensure that the youth is referred to the nurse as soon as practicable, upon the nurse's return to the camp facility.

Upon the youth being presented, Medical staff shall document the findings of their examination onto page 4, Section "P" of the PIR, citing their observations and any treatment proffered, along with the date and time of the youth(s) examination. Probation staff shall present this page when delivering the youth for examination, after which staff shall follow the guidelines of Directive 1226, which outlines the process for entering the nurse's comments into the PIR in PCMS and the processing of the document containing the nurse's handwritten comments.

The Duty Supervisor shall, at the time of assessment, ascertain whether or not the youth appears to have sustained an injury to the head, neck or spine. If a head, neck or spinal injury appears to have occurred, the Duty Supervisor shall treat this type of injury as a potentially serious injury and shall follow the "serious injury" treatment guidelines below:

- A "less serious injury" is generally one that requires assessment and treatment by medical staff at the facility and allows the youth to return to his regularly assigned unit or the HOPE Center, or be housed in the Medical Observation Unit for observation purposes only.
- A "serious injury" is one that requires that the youth be sent out to a local hospital for treatment of the injury, which typically would involve treatment such as sutures, the

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setting or realigning of fractured or displaced bones, assessment for internal injuries, or hospitalization. In the absence of medical staff on site, Supervisory staff that assess youths and determine that the youth appears to have sustained a serious injury that appears to be potentially life-threatening shall call 911 for immediate paramedic assistance. In other instances, where there is serious injury, or an injury to the head, neck or spine that does not appear to be life threatening, the Supervisor shall contact on-duty medical staff at the nearest juvenile hall for direction as regards whether to send the youth to a local hospital, or to send the youth to the nearest juvenile hall for assessment and treatment.

- Cross reference this section with Section 2121 (PIN & FPIN Procedures)

Probation Referral of Youth to Medical Staff for Assessment - At the conclusion of a physical intervention incident, Probation staff shall document in section "N" (narrative section) the exact time in which youth(s) were presented for a medical examination to be performed in the PIR. A youth is considered to have been made available for assessment upon their arrival at the medical unit/nurse's office at any facility, other area designated for the performance of medical examinations or, upon the nurse's arrival to the incident location.

Request for Mental Health Consultation - A Request for Mental Health Consultation must be completed for any youth(s) involved in a situation in which Physical Intervention is utilized. The preparation of this form shall be noted in section "H" of the PIR. In addition, staff shall be cognizant of youths involved in crisis situations that did not require physical interventions, who may still be in need of appropriate crisis interventions. These youths shall also be referred for mental health assessment(s).

Shift Leader Review of PIR

Once the nurse has completed their assessment, the completed PIRs/SUP-PIRs shall be forwarded to the Shift Leader for signature review, verifying content and completeness. The Shift Leader shall forward the completed PIRs/SUP-PIRs to the Duty Supervisor for final review and approval. The Shift Leader shall coordinate these processes no later than the end of the 8-hour shift (6:00 AM to 2:00 PM, 2:00 PM to 10:00 PM or 10 PM to 6:00 AM) in which the incident occurred, or, as otherwise directed by the Duty Supervisor. Shift Leaders shall be sensitive to the fact that there exists a degree of urgency in completing the PIR as soon as possible.

Duty Supervisor Review and Approval of PIR SUP-PIR

Upon completion, the PIRs, Supplemental PIRs, Mental Health Consultation forms, and any other pertinent documents shall be forwarded to the Duty Supervisor for review. The proper completion of all requisite documentation, as referred to above, shall be assessed and reviewed by the Duty Supervisor (or back-up Duty Supervisor in juvenile hall) as soon as possible following the incident, but no later than the end of the 8-hour shift (6:00 AM to 2:00 PM, 2:00 PM to 10:00 PM or 10 PM to 6:00 AM) in which the incident occurred. Duty Supervisors shall be sensitive to the fact that there exists a degree of urgency in completing the PIR Packet as soon as possible. After ensuring that all documents are present and have been properly prepared,

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the Duty Supervisor shall sign the report and ensure copies are distributed internally within the facility as required by staff.

When reviewing, and completing the PIR packet, the Duty Supervisor shall ensure that the following items/issues are properly addressed and documented before signing the report:

- The unique incident number shall be affixed to each page of each PIR or Supplemental PIR in the upper right-hand corner of the document.
- The incident number and attendant information is logged into the facility's SCM Log retained in the Duty Supervisor's office.
- Youth(s) involved were presented to the facility nurse (if available) within 30-minutes of incident containment, or as soon as practical if no nurse is on-site at the time of the occurrence, for a medical examination to be performed. If the youth was not seen by the nurse within 30 minutes, the PIR should clearly address the reason for the delay;
- Mental Health Consultation(s) were prepared for any youth(s) involved;
- Child Safety Assessment forms were properly completed for each youth involved; forms were properly completed for all youths involved in a camp incident;
- All staff participating in the intervention or witness to same, or on duty in the unit/camp when the incident occurred, prepared and submitted complete, accurate PIR(s)/SUP-PIRs for the incident;
- Ensure that copies of the PIR(s) are distributed as per Bureau requirements

The PIRS and SUP-PIRs and their attendant and required documents shall be forwarded for use in the facility's SCM Review process as outlined below:

Upon reviewing and approving the PIR Packet, the Duty Supervisor shall conduct and document a Child Safety Assessment (CSA) and obtain completed questionnaires from each youth involved in the incident as outlined in the Supervisory SCM Review Process, and attach the completed CSAs, affidavits and any other documents generated during CSA process to the original PIRs. The completed PIR Packet, with the CSA documents included, shall be forwarded to the facility's SCM Supervisor for review and preparation of the formal Supervisory SCM Review. Supervisory staff shall be cognizant of the need to keep these documents safe and secure pending review by the camp SCM Review Supervisor. Accordingly, facility Supervisors shall secure these documents in a single location as designated by the facility Director or Superintendent. Copies of the PIR packets are to be provided to: Facility Director, Superintendent, youth's file and SCM Supervisor.

Post Incident Review Process

Each Safe Crisis Incident that occurs during which physical intervention is employed shall be formally reviewed by the facility's SCM Supervising Coordinator as soon as practical after its occurrence. The SCM Supervising Coordinator shall fully review the PIR packet generated by the Duty Supervisor and shall interview the involved youth(s), other youths present (possible witnesses) and civilian witnesses, support staff, school faculty and/or administrative staff present who may have witnessed the events, as applicable. The SCM Supervising Coordinator shall, after reviewing the PIRs, CSAs, affidavits and interviewing percipient witnesses, shall determine the appropriateness of the involved intervention (physical or mechanical restraint). Incidents involving an intervention that does not appear to have been necessary or that was

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inappropriately performed (unnecessary or excessive force), or otherwise fails to fall within established Probation Department policies and procedures, shall be referred to the facility Director, facility Superintendent, or the Probation Department's Special Investigations Unit for further administrative review and/or formal investigation.

(Meets standards set forth in Title 15, Section 1357 (a)(6))

1707 METAL HANDCUFF SANITIZING PROCEDURE

The Board of State and Community Corrections (BSCC) Title 15 requires that specific procedures be established when the use of metal handcuffs has been authorized and are required to be sanitized upon removal. Therefore, it is the policy of the Residential Treatment Services Bureau (RTSB) that metal handcuffs that have been used shall be sanitized and cleaned.

Procedure

Any authorized staff that places and/or removes metal handcuffs from a youth, must adhere to the following sanitizing and cleansing protocol:

1. Wear disposable gloves
2. Clean or spray the handcuffs using Lemon Quat or any other disinfectant that is effective against Methicillin-resistant Staphylococcus aureus (MRSA).
3. Allow to remain wet for 10 minutes prior to wiping dry
4. Allow the handcuffs to air dry before using or storing

It is the responsibility of the shift supervisor or designee to ensure that steps 1 thru 4 are followed. The sanitizing and cleansing process should be recorded in appropriate log book.

Metal Handcuffs exposed to bodily fluids:

When metal handcuffs are contaminated with bodily fluids, the following procedures must be adhered to:

1. Use disposable gloves and scrub each implement with a clean brush in a solution of soap and water to remove all organic matter
2. Rinse implements thoroughly in clean water
3. Pat the implements dry with a clean paper towel or cloth.
4. Clean or spray the handcuffs using Lemon Quat or any other disinfectant that is effective against Methicillin-resistant Staphylococcus aureus (MRSA).
5. Allow to remain wet for 10 minutes prior to wiping dry
6. Allow the handcuffs to air dry before using or storing
7. The wipes and gloves used for sanitizing the handcuffs shall be disposed in bio-hazard containers.

(Meets standards set forth in Title 15, Section 1510)

1708 USE OF MECHANICAL RESTRAINTS DURING TRANSPORT (DIRECTIVE 1433)

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The purpose of this directive is to address the use of mechanical restraints while transporting detained youth between secured juvenile facilities and during court proceedings, as mandated by Welfare and Institutions Code 210.6. It shall be the policy of the Los Angeles County Probation Department (The Department) to use the least restrictive form of restraints necessary when transporting youth outside of juvenile facilities. Additionally, it shall be the policy of The Department, that youth shall not be subjected to mechanical restraints during court proceedings, unless requested and authorized by the court.

The Department shall define mechanical restraints as any department-approved devices which immobilize a youth's extremities and/or prevent the youth from being ambulatory, which include devices such as, but are not limited to; handcuffs, Daisy chains, Leg irons, cloth or leather restraints, or other similar items.

I. MECHANICAL RESTRAINTS DURING TRANSPORT

The use of mechanical restraints on a juvenile during transportation outside of a local secure juvenile facility or camp, shall require the completion of the *Mechanical Restraint Worksheet for Transportation* (Prob. 1676) (Attachment A). This requisite documentation shall be completed by the Juvenile Hall or Camp Movement staff and authorized by a Supervisor. The final decision to use or not use restraints shall be in consultation with the sending facility and the Transportation Section. Ultimately, mechanical restraints shall be used only when the absence of restraints jeopardizes youth, staff or the public.

Note: Female youth who are known to be pregnant or in recovery from delivery may not be restrained, unless deemed necessary for the safety and security of the youth, the staff, or the public.

When transporting youth from one secured location to another, staff must adhere to the following protocol(s):

- a. Once the *Mechanical Restraint Worksheet for Transportation* is completed, the score shall determine, if necessary, what least restrictive types of mechanical restraints, if any would be appropriate for that youth during the specific transportation event.
- b. The *Transfer Transmittal* form (Prob. 1675) (Attachment B) shall be provided by the sending camp or hall to the receiving TD.
- c. The *Transfer Transmittal* form shall be completed and signed by both the sending facility and receiving TD.

II. THE USE OF MECHANICAL RESTRAINTS DURING COURT PROCEEDINGS

Unless an official request is provided by the court, the use of mechanical restraints during a Delinquency or Dependency court proceeding is prohibited. Mechanical restraints may only be used during a juvenile court proceeding if the court determines that the individual juvenile's behavior in custody or in court establishes a need to use mechanical restraints to prevent physical harm to the youth or another person or due to a substantial risk of flight.

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If the court determines that the use of mechanical restraints is necessary during court proceedings, the receiving court shall be required to document the reasons for the need of mechanical restraints in the court record. If mechanical restraints are required by the court, the least restrictive form of restraint(s) shall be utilized as warranted by the individual's circumstance.

Note: The above does not apply to mechanical restraints used by medical care providers in the course of medical care or transportation.

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Attachment A-1



RAY LEYVA

Interim Chief Probation Officer

COUNTY OF LOS ANGELES PROBATION DEPARTMENT

MECHANICAL RESTRAINT WORKSHEET FOR TRANSPORTATION



Date: _____

Youth's Name: _____ D.O.B. _____ PDJ#: _____

Current Facility: _____ Destination: _____ Transport Reason: _____

Known Medical and/or Mental Health Conditions: _____

Minor is pregnant or recovering from delivery: ☐

Pursuant to Penal Code section 3407, an inmate known to be pregnant or in recovery after delivery shall not be restrained by the use of leg irons, waist chains or handcuffs behind the body. Also, a pregnant youth in labor, during delivery, or in recovery after delivery shall not be restrained by the wrists, ankles, or both, unless deemed necessary for the safety and security of the youth, staff, public or facility.

RISK FACTOR	Point Value	Applicable Points
MECHANICAL RESTRAINTS ARE NECESSARY TO PREVENT PHYSICAL HARM TO THE JUVENILE OR ANOTHER PERSON		
W&I 707(b) offense, PC 1192.7, or PC 186.22 enhancement post-adjudication	2 points	
W&I 707(b) and PC 1192.7 offense(s) pending	5 points	
add 3 points for sexual assault, murder, attempted murder, or kidnapping	3 points	
Documented incident of self-harm or attempted self-harm within past 6 months	3 points	
Documented violence toward staff or others in custody	6 points	
Found with contraband weapons in the past 12 months	5 points	
Documented refusal of transport in last 3 months	1 point	
Dangerous/violent misconduct within the last 3 months (including fighting)	3 points	
Youth has caused incident during previous transport	4 points	
MECHANICAL RESTRAINTS ARE NECESSARY DUE TO A SUBSTANTIAL RISK OF FLIGHT		
Attempted escape or escape from Juvenile Hall or any other secure facility within the last year	6 points	
Risk Score		0

Risk Score	Recommendation
0-3	No Restraints
4-5	Handcuffs
6 or over	Transportation Restraint

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Attachment A-2

RISK SCORE OVERRIDE		
OVERRIDE TO MORE SECURE RESTRAINTS	<input type="checkbox"/> Handcuffs	<input type="checkbox"/> Transportation Restraint
OVERRIDE TO LESS SECURE RESTRAINTS	<input type="checkbox"/> Handcuffs	<input type="checkbox"/> No Restraints
OVERRIDE REASONS		
OVERRIDE TO MORE SECURE RESTRAINTS	OVERRIDE TO LESS SECURE RESTRAINTS	
<input type="checkbox"/> Youth exhibiting violent or threatening behavior (including self-harm) immediately prior to or at time of transport	<input type="checkbox"/> Youth has behaved well during previous transports	
<input type="checkbox"/> Threats or verbal indication of self-harm	<input type="checkbox"/> Youth has a record of good behavior	
<input type="checkbox"/> Threat or verbal indication of escape immediately prior or at time of transport	<input type="checkbox"/> Youth is pregnant	
<input type="checkbox"/> Youth has caused incident during previous transport	<input type="checkbox"/> Other	
<input type="checkbox"/> Multiple youth being transported during transport		
<input type="checkbox"/> Other		
OVERRIDE EXPLANATION <i>For overrides to more secure restraints, please explain why you consider youth to be a present danger of physical harm to self or others, or why you consider youth to present a substantial risk of flight. For overrides to less secure restraints, please explain why you do not consider the youth to be a present danger or flight risk.</i>		

ADDITIONAL COMMENTS

DUTY SUPERVISOR OR DESIGNEE APPROVAL

Circle one: **APPROVE / DENY**

Duty Supervisor or Designee (Print Name)

Date

Duty Supervisor or Designee (Signature)

SUPERINTENDENT/DIRECTOR OR DESIGNEE APPROVAL

Circle one: **APPROVE / DENY**

Superintendent/Director or Designee (Signature)

Date

FINAL DETERMINATION

<input type="checkbox"/> No Restraints	<input type="checkbox"/> Handcuffs	<input type="checkbox"/> Transportation Restraint
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Receiving Transportation Deputy Name (Print Name)

**LOS ANGELES COUNTY PROBATION DEPARTMENT
JUVENILE
TRANSFER TRANSMITTAL**

Transfer To: _____ **Transferring Facility:** _____ **Signature:** _____
Date: _____ **Receiving Facility:** _____ **Signature:** _____
Total Minor(s) Transferred: _____ **Total Minor(s) Received:** _____

Male ☐ Female ☐

Last Name, First Name	PDJ #	PDN #	DOB	UNIT	STATUS	K	BR	MR
COMMENTS:								
Justification for use of Mechanical Restraints								
Last Name, First Name	PDJ #	PDN #	DOB	UNIT	STATUS	K	BR	MR
COMMENTS:								
Justification for use of Mechanical Restraints								
Last Name, First Name	PDJ #	PDN #	DOB	UNIT	STATUS	K	BR	MR
COMMENTS:								
Justification for use of Mechanical Restraints								
Last Name, First Name	PDJ #	PDN #	DOB	UNIT	STATUS	K	BR	MR
COMMENTS:								
Justification for use of Mechanical Restraints								
Last Name, First Name	PDJ #	PDN #	DOB	UNIT	STATUS	K	BR	MR
COMMENTS:								
Justification for use of Mechanical Restraints								
Substantial Flight Risk						Prevent Harm to Self/Others		

Time of Departure: _____ **Transportation Deputy Signature:** _____ **Time of Arrival:** _____
Movement Coordinator Signature: _____

Legend: K= Karetex, BR= Behavior Referral, MR= Medical Record, Status= Special Handling

LOS ANGELES COUNTY PROBATION DEPARTMENT	RTSB-1700
SAFE CRISIS MANAGEMENT AND PHYSICAL INTERVENTION POLICY	

1709 THE USE OF MECHANICAL RESTRAINTS FOR MOVEMENT AND TRANSPORT WITHIN THE FACILITY

The Probation Department, in cooperation with DMH and JCHS, authorizes sworn staff to utilize Mechanical Restraints, in an effort to keep youths safe in certain crisis situations within the facility where the youth's behavior cannot be controlled through less restrictive means, as well as for transportation purposes. Mechanical Restraints refers to any device that immobilizes an individual's extremities. Only Departmentally approved handcuffs (Smith and Wesson or Peerless brands) may be used for this purpose. Flex-cuffs are "hard restraint" devices that are intended to be utilized only in emergent situations within the facility to restrain youths who are in imminent danger of injuring themselves, others, the facility or who present a serious threat to damage property when handcuffs are not immediately available. Staff may carry flex-cuffs on their person on a county issued utility belt when so authorized by the Duty Supervisor.

Handcuffs shall be used during transportation of youth, or when sound judgment indicates that there is no less restrictive method of restraining youths who are in immediate danger of injuring themselves, youth, others, the facility, and/or pose a serious threat involving the destruction of property. It is the policy of the Probation Department that consideration of the safety and security of the facility, with a clearly defined expectation that restraint devices shall not be applied for the purpose of discipline, retaliation or punishment.

An individual assessment of the need to apply restraints for movement or transportation must be completed and if a determination is made that mechanical restraints are necessary, the least restrictive form of restraint shall be used consistent with the legitimate security needs of the youth; in conjunction with any known medical or mental health conditions and trauma informed approaches, under the following circumstances:

- A safety risk to youth, staff, others, or the facility;
- A substantial risk of flight.

With prior approval from the Duty Supervisor, youth may be handcuffed for the purposes of transport to the HOPE Center and/or Medical Unit. At the conclusion of transport, staff shall document the incident via SIR, PIR, or SUP-PIR.

Note: A youth known to be pregnant or falls under W&I 601, shall not be placed in Mechanical Restraints unless deemed necessary for the safety and security of the youth and staff in accordance with Penal Code Section 6030(f) and Welfare and Institutions Code Section 222. If necessary, the restraints shall be applied in the front.

(Cross-reference this Section with Section 2121 (PIN & FPIN Procedures)

(Meets standards set forth in Title 15, Section 1358.5)

LOS ANGELES COUNTY PROBATION DEPARTMENT

Subject: RESIDENTIAL TREATMENT SERVICES BUREAU MANUAL TRANSPORTATION OF YOUTH	Section Number: RTSB-1800
	Effective Date: July 21, 2020
	Approved By: Jennifer Kaufman, Bureau Chief

1801 INTRODUCTION

From time to time, camp youth must be transported to and from camp in order to attend court or receive medical care in juvenile hall. The transportation of youth to and from the camp facility must be handled in such a manner as to ensure the safety and security of youth and staff, as well as to reduce the risk of youth escaping from Probation custody. To this end, staff are expected to adhere to the procedures outlined in this section.

1802 PRIVATE APPOINTMENTS

Youth shall not be transported for private appointments, unless one of the following exceptions exists:

- Transported for emergency care
- Scheduled by JCHS for County hospital or County clinic care
- Referred by DMH for emergency care or admission to a locked psychiatric facility
- Ordered by the court

The Probation Department does not offer furlough to any of the youth detained within the RTSB. However, the Department will provide transportation for exigent circumstances, such as funerals or hospital visits when ordered by the court.

(Meets standards set forth in Title 15, Section 1351)

1803 NOTICE TO YOUTH

Staff shall never inform youth in advance of the date and location of their appointment. If there is a reason to believe a youth is aware of an appointment, it may be cancelled and rescheduled.

1804 VISITORS AND TELEPHONE CALLS

Staff shall neither allow youth to use the telephone nor have visitors when youth have prior knowledge of an appointment. If a youth having prior knowledge of an appointment is found using the phone, the appointment may be re-scheduled. Staff

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shall dial youth's outgoing calls from County telephones, and staff shall not leave youth

unaccompanied while the youth is talking on the phone. Youth should not have an expectation of privacy while they are on the telephone, except when speaking with their attorney or clergy.

1805 ORANGE UNIFORMS -- YOUTH EXITING THE FACILITY

All youth leaving camp shall be routed through a designated receiving unit or controlled area away from the general population. Staff in the designated area shall ensure that all youth to be transported are changed into the orange transportation uniform before they leave the facility.

Staff shall be mindful of the daily movement schedules, which are not flexible, and shall allow sufficient time for the clothing change. Therefore, staff shall ensure that youth arrive at the designated area at least 30 minutes before their scheduled departure time. Depending upon the needs of the facility, staff escorting the youth to the designated area may need to remain with the youth in order to assist with the clothing exchange.

Staff shall ensure that County-issued pants worn in camp are placed in the soiled laundry area, and staff shall then provide each youth with a clean orange uniform. youth shall keep their sweatshirt, t-shirt, underwear, socks, and shoes while being transported out of the facility. Once the clothing exchange has been completed, the staff member escorting the youth to the designated area may return to his or her assignment.

Staff shall inspect the youth' shoes before the youth exit the facility.

1806 ORANGE UNIFORMS – YOUTH RETURNING TO THE FACILITY

Transportation deputies returning youth to the camp facility from outside appointments shall escort youth to the designated receiving area and shall remain until the youth are thoroughly searched and clothing exchange is completed.

Camp staff shall ensure that the youth place their orange transportation uniform, sweatshirt, underwear, t-shirt, and socks in the soiled laundry area, and provide each youth with a clean set of camp clothing. Staff shall inspect the youth' shoes before returning the youth to the general population. Staff conducting the clothing exchange shall search all of the orange uniforms for contraband before they are sent to the laundry.

1807 INVENTORY OF ORANGE UNIFORMS

The Director or designee shall work collaboratively with the CSM/GSM to ensure that the camp facility has an ample supply of orange uniforms.

The supply of orange uniforms shall be maintained at an established supply level

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commensurate with the average number of youth who attend outside appointments on a daily basis, plus a 10% overage. In the event that the average daily number of youth attending outside appointments drastically changes, the designated staff shall notify the SDPO immediately so additional orange uniforms can be obtained.

The authorized use of the orange uniform is limited to transportation outside the camp facility. youth shall not wear the orange uniform at any other time.

1808 SEARCHES

When a youth is preparing to leave the facility, staff shall conduct a pat-down search prior to the youth's departure. youth shall not be permitted to take personal property to juvenile hall. Staff shall collect, bag, and label the youth's personal property, ensuring that they are safely stored until the youth returns to camp. In order to minimize the risk of overlooking contraband, camp staff shall complete the searches before transportation deputies take over supervision.

When the youth returns to camp, designated camp staff shall conduct a pat-down search. Staff shall also search the youth's personal property, when applicable.

1809 TRANSPORTING OF PERSONAL PROPERTY BETWEEN JUVENILE HALLS AND CAMPS POLICY (DIRECTIVE 1257)

INTRODUCTION

This section addresses the process of allowing the transporting a youth's personal property between juvenile halls and camps. Staff shall ensure this policy is adhered to when dealing with transporting a youth's personal property from one facility to another camp facility.

APPROVED ITEMS

It shall be the policy of RTSB to allow the transporting of the following items between facilities:

- Five (5) appropriate family pictures;
- A combination of three (3) soft cover reading/composition materials (paperback books, composition books and appropriate magazines)
- One (1) soft covered Religious text;
- Five (5) letters;
- Five (5) pieces of paper with personal phone numbers;
- Inside Out Writers materials which includes the youth's portfolio of writing assignments;

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- Camp graduation packet which includes instructions of the reporting area office, listing of service providers in the community, immunization records, Medi-Cal letter and education transcripts; and
- Medical devices, such as eyeglasses, or dental appliances.

THE SENDING FACILITY

The sending facility and camp staff shall ensure that only the approved items listed in this policy are being transported in a 10x15 sealed and labeled manila envelope or sealed paper bag with the Transmittal – Transport of youth's Property (Attachment A). When using a recycled Transmittal and envelopes crossed out.

TRANSPORTING DEPUTY

The receiving camp staff shall ensure the youth's name is clearly printed on their belongings.

The transporting deputy shall ensure that the personal property envelopes are given to the receiving camp facility staff. The receiving facility shall ensure property is sent to the youth's assigned living unit/dormitory as soon as possible.

RECEIVING FACILITY

The receiving camp staff shall ensure excess personals are placed in a paper bag and placed in the property room with the other personals belonging to the youth. A property slip is to be completed and attached to the paper bag.

This policy does not apply to youth going to court or medical appointments unless they are being moved to another facility.

TRANSMITTAL – TRANSPORT OF YOUTH'S PROPERTY:

It shall be the policy of RTSB to allow the transporting of the following items between facilities:

- Five (5) appropriate family pictures;
- A combination of three (3) soft cover reading/composition materials (paperback books, composition books and appropriate magazines)
- One (1) soft covered Religious text;
- Five (5) letters;
- Five (5) pieces of paper with personal phone numbers;
- Inside-Out Writers materials which includes the youth's portfolio of writing assignments;
- Camp graduation packet which includes instructions of the reporting area office, listing of service providers in the community, immunization records, Medi-Cal letter and education transcripts; and
- Medical devices, such as eyeglasses, or dental appliances.

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Sending Facility: Please approve items for the youth in the 10x15 manila envelope or sealed paper bag; complete this transmittal with the youth's information and tape the transmittal on the envelope.

1810 DOCUMENTATION

Designated staff shall document in the appropriate logbook and in PCMS the names of the youth leaving camp, together with their PDJ number, date of departure, and destination. Camp staff shall also prepare a transfer submittal and juvenile hall entrance forms, providing them to the transportation deputies, along with the youth's behavior chart and medical file.

When youth return to camp, receiving staff shall review the youth's behavior chart for behavioral issues or other concerns occurring while out of camp. Significant concerns shall be reported to the on-duty supervisor immediately. Staff shall document in the appropriate log book the youth's name, PDJ number, and time of return. Staff shall check the file and the youth's behavior chart in the appropriate camp-designated location, and return the medical file to the camp nurse.

The youth's caseworker shall document information regarding the youth's departure and return in PCMS.

1811 TRANSPORTATION OF YOUTH BY CAMP STAFF

Periodically, camp staff may transport youth for a variety of reasons, including merit-based outings, community events, medical or mental health removals, disciplinary removals, and so forth.

With the exception of disciplinary, medical, or mental health removals, youth must meet minimum Bureau standards before staff can transport them from the facility. These standards are tied to the camp's BMP and include the following, unless otherwise authorized through regulations pertaining to specialized programs (such as sports, forestry, etc.):

- Stage 3 or higher
- No history of escape or attempted escape from camp, juvenile hall, or other locked facility
- Minimum grade point average of 2.0
- No behavioral reports/write-ups in the past 10 days
- Caseworker approval

In all of the aforementioned circumstances, a minimum of two staff are required for transportation purposes. At least one of the staff members must be of the same gender as the youth(s) being transported. For disciplinary, medical, and mental health removals, two staff may not transport more than five youth. At the direction of the Director and/or the AD, additional staff may be assigned.

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Youth removed for disciplinary, medical, and/or mental health reasons shall be transported in a secure manner that will include, at a minimum, the use of handcuffs and leg irons (shackles). Absent medical reasons to do otherwise, youth shall be handcuffed behind the back.

When transporting youth for special events or merit-based activities, a minimum of two staff must accompany every 10 youth. At least one of the staff members must be of the same gender as the youth(s) being transported.

Staff shall search vehicles used for transporting youth prior to loading the youth into the vehicle and upon return to camp. Staff shall also ensure that all trash has been removed from the transport vehicle upon return to camp.

It is staff's responsibility to maintain direct supervision of the youth. At no time are youth allowed to be out of staff's line of site.

Staff shall maintain supervision of the youth throughout the duration of the off- site activity, beginning from first point of contact (such as picking up the youth from the dorm or other designated area) until completion of the activity and subsequent return of the youth to the general population. Staff shall provide a written list of youth to office personnel or the designated staff member responsible for the camp population counts. The list shall include the names of each youth, as well as the total count.

At no time shall youth be in contact with members of the community without authorization from supervising staff.

Staff shall obtain all needed supplies (including food and water) from the facility prior to departure. Staff shall not stop unnecessarily at any location within the community.

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Subject: RESIDENTIAL TREATMENT SERVICES BUREAU MANUAL EMERGENCY AND DISASTER PROCEDURES	Section Number: RTSB-1900
	Effective Date: July 21, 2020
	Approved By: Jennifer Kaufman, Bureau Chief

1901 INTRODUCTION

In order to ensure the safety and security of camp youth and personnel during emergency and disaster situations, the procedures and guidelines outlined in this section have been established.

1902 EMERGENCY DRILLS

Emergency preparedness is a critical safety issue for each camp. The Director or Assistant Director (AD) for each shift is expected to schedule, conduct, and document the completion of an emergency drill on a quarterly basis. The SDPO shall document the drill in a memo to the camp Director, noting any deficiencies and/or problems. The camp Director shall retain this documentation in his or her office.

1903 STAFF ROLES AND RESPONSIBILITIES

The Camp Director or AD, or designee appointed in the Director's or AD's absence, is the Chief Safety and Security Officer of the facility and shall be in charge during emergency situations. The Director, AD or designee shall ensure that all sworn and non-sworn staff working in camp are aware of the Evacuation and Emergency Procedures contained in the RTSB Building Emergency Plan.

In case of a major emergency in which additional staff are needed, the Camp Director is authorized to contact off-duty staff and require them to report for duty. Additionally, during an emergency, staff may be held over at the discretion of the AD or Director. No staff shall be permitted to end their shift and leave the facility during an emergency situation, unless the AD or Director gives permission to do so.

Under no condition shall non-designated employees take it upon themselves to contact a law enforcement agency for assistance without first following the chain of command, starting with the AD, Director or designee.

All sworn staff are required to review the policies regarding emergency procedures on an annual basis.

RTSB Management Responsibilities:

The Camp Director, AD or designee shall ensure:

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- All staff annually review the Building Emergency Plans during their Performance Evaluation and staff have signed the RTSB Acknowledgement of Review and Understanding Form (Attachment A) documenting their review; copy to be retained in Section File.
- All partner agency staff shall be required to review Building Emergency Plans and sign the RTSB Acknowledgement and Understanding Form (Attachment A); copy to be retained in a binder in the Camp Director's office.
- All non-sworn staff including contract workers and clerical staff, shall be required to review Building Emergency Plans and sign the RTSB Acknowledgement and Understanding Form (Attachment A) upon their initial visit. A copy will be retained in a binder in the Camp Director's office.
- Volunteers shall be required to review Building Emergency Plans through the facility orientation process and sign the RTSB Acknowledgement of Review and Understanding Form (Attachment A); copy to be retained in a binder in the Camp Director's office.

(Meets standards set forth in Title 15, Section 1327)

1904 REPORTING EMERGENCIES

Staff are responsible for immediately reporting an emergency situation to the SDPO either via phone, radio, or using an emergency push button.

In reporting emergencies, staff must convey the essential facts in a concise and logical manner. Below is an example:

- As soon as the SDPO responds, state, "This is an emergency," or "Code blue."
- Give the location of the trouble, such as, "The emergency is in the dorm."
- State the nature of the emergency in a few words, such as, "A youth is having difficulty breathing."

In extreme circumstances where it is impossible to stay on the telephone to explain the situation, leave the phone off the hook or communicate by any other means available, including radio.

1905 MEDICAL EMERGENCIES (CODE BLUE)

When staff encounter a medical emergency, each second of elapsed time required to obtain professional assistance becomes critical in the saving of a life. In addition to camp youth, camp staff interact daily with a variety of people in the facility, any one of whom may require emergency lifesaving care.

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If a person appears to be in immediate danger of death or need of medical attention, camp staff shall immediately shout, "Code blue," as loudly as possible to alert other staff. The following actions will then be set in motion:

- Staff hearing the warning shall also shout the warning to alert other staff.
- Staff nearest to a telephone or radio shall immediately contact the SDPO and state the nature and location of the emergency.
- Staff initiating the emergency warning shall immediately administer any first aid required.
- Staff nearest the place of storage of resuscitation equipment and CPR devices shall take them to the site of the incident and assist in administering first aid.
- The SDPO shall ensure that paramedic assistance has been summoned through telephoning 911. Additionally, the SDPO shall arrange for immediate dispatching of an available on-duty nurse.
- If a medical emergency arises while the youth or staff member is in a transportation vehicle, emergency services shall be coordinated by calling 911.

Medical emergencies include, but are not limited to, the following situations:

- Unconsciousness strip search
- Suicide attempt
- Drowning
- Heart attack
- Respiratory arrest or extreme respiratory distress
- Electrical shock
- Seizures

1906 BLOOD-BORNE PATHOGENS

The Department has established safeguards and procedures to protect both staff and youth who come in contact with blood-borne pathogens (including HIV and Hepatitis B) as well as other communicable diseases. These procedures are meant not only to protect youth and staff from exposure, but also to delineate the actions to take when exposure has occurred.

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Decontamination Kit

To protect both youth and staff from possible infection, the Management Services Bureau shall ensure that each building has a decontamination kit for use in cleaning up any blood or other body fluids.

The decontamination kit shall be stored in a specified location in the building. It shall contain the following:

- Purell instant hand sanitizer
- Cavicide surface disinfectant spray
- Towels
- Safety glasses with side shields
- High-risk gloves
- Waterproof hard plastic carrying case

Immediate Action upon Exposure

Staff shall adhere to the following cleanup procedures whenever there is an incident in which blood or other body fluids are exposed:

- Using soap and water, immediately clean all skin surfaces coming in contact with the blood/bodily fluids.
- Flush eyes repeatedly with water if they are affected.
- If the mouth is affected, rinse it copiously with plain water, any available mouthwash, or hydrogen peroxide.
- Remove all contaminated clothing, including personal clothing worn by staff. Place it in a red plastic bag and label it, "Infectious Waste." Place the red plastic bag in the "Infectious Waste" containers for disposal.
- To prevent exposure when cleaning up blood/bodily fluids, staff shall wear protective gloves (rubber/latex) and use hydrogen peroxide. Clean up materials contaminated with blood/bodily fluids shall be disposed of in the same fashion as contaminated clothing.
- Following the cleanup, staff shall disinfect themselves with hydrogen peroxide and wash their hands thoroughly with soap and water.
- Staff shall immediately report all incidents involving the possibility of blood/bodily fluid contamination to the SDPO.
- Staff shall complete an SIR that includes the following information:
 - Names of the persons involved
 - Names of all witnesses
 - Request by staff for the chief medical officer (CMO) to test the youth

Staff shall complete an Industrial Accident Report, as well as a Stated Departmental

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Health Services Form (DHS) 8459. The SIR, Industrial Accident Report, and DHS 8459 shall be submitted to the SDPO as soon as possible. (The DHS 8459 may be obtained from the nurse).

Additionally, copies of the DHS 8459 and the SIR shall be submitted to the CMO no later than two days after the incident. An exception can be made if staff requested a petition and if it was rejected by the DA's office or dismissed by the court. The CMO officer shall be contacted to determine if the request will be accepted.

Employee Testing and Counseling

It is highly recommended that any employee who may have been exposed to blood/body fluids be tested and seek medical advice for Hepatitis B and HIV as soon as possible after the incident. In the case of HIV, the test will establish a baseline for further testing which should be completed in the sixth week, and the third, sixth and twelfth month following the incident.

In the event that an employee experiences an occupational exposure and requests to be tested, both pre- and post-test counseling are available through the Los Angeles County Department of Health Services and/or the individual's private physician. It is highly recommended that the employee seek such counseling as soon as possible.

Laws Governing Testing of Youth

Laws specifically prohibit involuntary HIV testing. In the event that staff wishes a youth to be tested and the youth refuses, it may be necessary to petition the Court for an order to test the youth.

Authority for petitioning the Court for involuntary testing resides in Health and Safety Code 199.7, which states that if there is interference with a Peace Officer acting in the line of duty by the accused and body fluids are exchanged, the Peace Officer has the right to petition the Court for an order to have the accused individuals blood tested for the AIDS virus and other communicable diseases.

Authority for requesting an HIV test through the CMO resides in 7510 PC.

In either event, no one may disclose the results of an HIV antibody test except physicians, authorized in writing by the person tested, and those specifically authorized by law to transmit such results.

Anyone who deliberately discloses the identity or health status of the person who was tested for HIV antibodies or other communicable diseases, beyond the disclosures required by specific laws, is guilty of a misdemeanor, punishable by imprisonment in County Jail for up to six months, a fine of up to \$10,000 or both.

Voluntary Testing

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In the event of suspected exposure, staff shall complete the Report of Possible Communicable Disease Exposure form, and the youth shall be asked to sign the Consent for the HIV Antibody Test form. Youth age 12 and over can sign the consent form. Parents or guardians need to sign for all youth under the age of 12.

Involuntary Testing Through the Juvenile Court

If a youth refuses the consent to testing, staff can petition the Juvenile Court, requesting that the youth be tested for HIV antibodies. Requests to the court are submitted via the Application for Juvenile Court Petition, 653 WIC. Staff will complete the Juvenile Investigation Report (JIR) section. The narrative portion must include the following:

- A description of the incident that resulted in the obstruction of a Peace Officer in the performance of his or her duties;
- A description of the contact made with the youth that could have resulted in an exchange of bodily fluids, such as biting, scratching, or being spat upon;
- Identification of the bodily fluid that may have been exchanged, such as blood, saliva, semen, or other bodily fluids.

The supervisor shall review the JIR and witness list, and submit an original and three copies of the JIR packet to the Deputy District Attorney (DDA) serving the facility. A copy of the JIR packet shall be for youth to the camp Director and maintained in a confidential file. The supervisor shall track the petition and inform the employee if a decision is made not to file the petition or to deny the request for testing.

Involuntary Testing by Chief Medical Officer

Should the DDA refuse to file the petition request for testing, or should the Court reject the request, staff may request that the CMO conduct a test. The incident is reported to the CMO via a completed DHS 8459, a request for testing and a copy of the SIR within two days of the incident.

Pursuant to 7514 PC, the youth shall receive pre- and post-testing counseling regarding HIV at a location determined by the CMO. The CMO shall review the request and make a determination within five calendar days of the receipt of the reports as to whether or not to initiate testing pursuant to 7511 PC.

Youth Request to Have Another Youth Tested

A youth in camp may request HIV testing of another youth if it is felt that body fluids were exchanged. A youth 15 years or older may file the request through a staff member, or a staff member of his or her own volition may file a request on behalf of the youth if he or she believes that the criteria of 7512(A) PC have been met.

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When a request is filed on behalf of the youth, the SDPO shall notify the parents or guardian of the youth to be tested and request permission for the test to be completed if the youth is under the age of 12. If the parent or guardian cannot be located, the camp Director will approve or disapprove the request for the test and submit it to the CMO. If the youth's parents or guardians refuse permission, the camp Director may request the Court to rule on whether the test shall be given. The Juvenile Court shall make a ruling within five days of receipt of the request.

Appeal Process

Either the person requesting the test, the youth to be tested, or that youth's parents or guardians may appeal the decision of the CMO. The appeal must be filed within three working days of receipt of the decision or the decision becomes final.

The appeal panel consists of three members. The hearing is closed to all except the CMO, the employee, the youth, and his or her parents or guardian. A unanimous vote of the panel is necessary to require the subject of the hearing to be tested. The panel shall render a written decision within 10 days of receipt of filing. The decision of the panel may, in turn, be appealed to the Superior Court pursuant to 7516.5 PC.

Dissemination of Test Results

The CMO shall inform the camp Director of the test results. The Director or designee shall, in turn, inform the person tested, the person requesting the test, and the parent or guardian of the youth tested of the results.

The CMO or designee shall generate a list of youth within the facility who test positive for HIV antibodies or other communicable diseases. However, the nature of the youth's disease will not appear on the Communicable Disease List. The list shall be given to the camp Director and shall be maintained in a confidential file.

It shall be the responsibility of the camp Director or designee to inform those persons who have a right to know of the names of the youth appearing on the Communicable Disease List; and to identify, upon request, the specific disease if the person making the request has come into contact with any of the youth's bodily fluids.

Note: According to the Penal Code, "right to know" describes all employees of the facility, TD's, medical and contract personnel, and volunteers providing services at the facility.

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When staff observe a youth attempting to escape or escaping from camp, he or she shall immediately notify the SDPO. If this staff member does not have primary responsibility for supervising a group, he or she shall try to apprehend the youth(s).

The SDPO shall order the escape plan to be implemented immediately.

The SDPO shall order a thorough search of the grounds, if it has not been established that the youth(s) has actually escaped.

If it has been established that an escape has occurred, the SDPO shall take the following actions:

- Identify each escapee by name, AKAs, offenses, gender, age, race, height, weight, clothing, identifying marks, parent's home address and telephone.
- Use the booking photos available on Crime Web to print out a picture and identifying information for the escapee(s). Copies of the photos shall be distributed to those involved in the search.
- Determine the number of escapees, the approximate time of escape, and the direction in which the escapees were headed, if possible.
- Call local law enforcement and provide the information detailed above. Additionally, contact law enforcement in the area of each escapee's residence, as well as the law enforcement agency making the arrest on which detention is based.
- Contact the Director of the Probation Department's Special Enforcement Operation and provide pertinent information requested to assist in the apprehension of the youth.
- Contact each youth's parent or guardian by telephone. If the parent does not answer, continue efforts to make contact with them if necessary.
- Immediately remove any personals (particularly letters and phone numbers) from the youth's locker or bed area. Bag and label the personal items.
- Notify the camp Director.
- Complete the Preliminary Incident Notification (PIN) within four hours.

The camp Director shall notify the Senior Director as appropriate and submit a detailed written report prepared by the SDPO.

The camp Director or designee shall ensure that the following additional steps are taken:

- Record the escape in the camp logbook and document the incident in PCMS.
- Immediately notify the court and request the issuance of a bench warrant. Arrange for the bench warrant minute order to be faxed to the camp.
- Contact the court bailiff and verify that the bench warrant has been

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entered into the automated system within 24 hours of issuance. If it is not in the system, contact the court for assistance.

1908 OUTSIDE INTRUDERS (CODE YELLOW)

To prevent unauthorized persons or intruders from entering the grounds through the front entrance, the SDPO is to ensure the front entrance is locked at all times.

Staff shall either immediately escort any unauthorized person to the SDPO or request the SDPO report to the scene.

The SDPO shall determine the identity of the person and why he or she is on the grounds.

If the unauthorized person is creating a disturbance, the highest ranking staff member on duty may call local law enforcement for support and assistance.

If it is suspected or determined that the intruder is armed and dangerous, staff shall keep a safe distance and the SDPO shall immediately call local law enforcement for assistance.

1909 MAJOR DISTURBANCES (CODE RED) (DIRECTIVE 1259)

A major disturbance is an event in which at least 10 youths engage in behavior that jeopardizes the safety and security of the staff, youth, and camp facility. Staff shall adhere to the following procedures in the event of a major disturbance.

Preventing Major Disturbances

Staff members will exercise caution, vigilance, foresight, and good judgment to avoid and mitigate an emergency situation whenever possible. Staff members will counsel youth as necessary to assist them with personal problems and individual needs, and will refer youth for medical and mental health treatment as required to prevent crisis situations.

General Guidelines for Handling Major Disturbances

When responding to emergencies within the facility, staff members will make certain their assigned areas are secured and properly supervised before leaving the area to assist.

The facility director or supervisor/designee will be notified as soon as safely possible of all emergency situations involving youth or staff.

The supervisor or designee is the incident commander for any emergency incident

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occurring under his or her watch. The incident commander will coordinate all resources and personnel in order to ensure the safety and security of youth, staff, and the community. The incident commander may confer with superiors for guidance and shall not relinquish command until relieved as the incident commander. Relief of command shall be made verbally by a superior only and necessitates that there is acknowledgement by both parties of the command exchange. The on-site presence of a superior does not relieve an incident commander (supervisor or designee) of his/her charge duties as the incident commander.

The chain of command will be followed when providing notification for emergency camp disturbances. The supervisor / designee is responsible for providing single point of contact notification. When an emergency occurs and notification is required, the supervisor / designee is responsible for providing immediate notification to the Camp Director, Regional Director, RTSB Consultant, or Bureau Chief. Should immediate notification of the aforementioned fail, notification will be attempted to another Regional Director (North, Central, West, East) until contact is made. Once a single point of contact is made, the administrator receiving the notification assumes responsibility for disseminating the information as required.

Single point of contact notification requires that a person-to-person conversation occur and there is a clear exchange of information. A message left on voicemail or a message left with a person other than an administrator in the chain of command shall require that the supervisor / designee continue to attempt making the single point of contact notification required.

Staff members will follow policy and procedures while exercising caution, vigilance, foresight, and good judgment to prevent emergency situations and to mitigate major disturbances whenever possible.

Responding to Major Disturbances

If youth in the facility engage in a fight or in behavior that could be described as a major disturbance (a disturbance created by more than one youth), or perform any similar actions, and the youth do not respond to verbal commands to stop the behavior/disturbance, and/or a request for assistance is sounded by any staff member, school personnel or program provider, the following procedures will apply:

- The first staff member to observe or be notified of the incident shall announce on the radio (P.A. system, telephone, bullhorn, etc.) the location and type of emergency. The staff assigned as the office person (Control

Center staff at CMYC camps) will become the communication center to ensure all staff are aware of the situation and again announce the location of the alarm over the radios (P.A. system, telephone, bullhorn, etc.) if required. The office person (Control Center staff at CMYC camps) will

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ensure that the supervisor or designee has been notified of the emergency.

- All staff members designated as first responders and not engaged in immediate supervision of youth or other critical activities will proceed as quickly as possible to the location of the incident. Staff members who are engaged in supervision or other critical activities will not leave their posts until it is safe to do so and the youth being supervised have been secured.
- Following the chain of command protocol, the Facility Director, Regional Director, RTSB Consultant, Bureau Chief, or Regional Director for another region is to be notified through completion of a person-to-person telephone conversation.
- Staff members in unaffected areas of the camp (such as THE HOPE Center, classroom, gym, dining hall, etc.) will immediately begin securing the area. If multiple staff are present, coordination must be made with the lead staff member to determine if staff members assigned may proceed immediately to the emergency. Once the area of non-emergency is secure, additional staff members may respond if needed. A different response protocol may be ordered by the supervisor/designee based on strategy.
- Staff will secure any youth in a safe area by ensuring there is adequate supervision before responding to the emergency. The number of staff who remain in an area is to be determined by the situation and the number of youth present. The primary objective is to demonstrate staff presence at the emergency area to ensure safety and security.
- All visitors, program providers, and school personnel will be directed to leave the affected area.
- As much as possible, staff assigned to the affected area will direct the activity until relieved by the supervisor/designee or a person of higher authority. All responding staff members will assist in controlling the incident as ordered by the supervisor/designee. Staff members will actively work to bring the situation under control using the Safe Crisis Management guidelines. Staff members will separate the perpetrators if possible from the youth not involved, and house them in separate housing areas (such as HOPE Center, gym, classroom, dining hall, identified area, etc.). Staff members will attempt to counsel the youth to calm their behavior.
- The supervisor/designee will continue to assess/evaluate the situation and deploy available staff where needed. Staff will continue to use SCM techniques when and wherever possible to ensure the safety and security of staff, youth and the facility. Under the leadership of the supervisor/designee or lead person, staff will work in a safe, coordinated and tactical manner to

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impede and ultimately restrain and/or gain control of those youth who refuse to cease and desist their defiant and volatile behavior.

- If the situation cannot be brought under control by facility staff members, the supervisor/designee will call for emergency assistance from the Sheriff's Department. Once on scene, the supervisor/designee is to meet law enforcement at the facility entrance and explain the nature of the assistance needed. The supervisor/designee will coordinate further actions with the incident command leader from the Sheriff's Department.
- When it is determined that outside law enforcement assistance is required, following the chain of command protocol, the Facility Director, Regional Director, RTSB Consultant, Bureau Chief or Regional Director from another region is to be notified via a person-to-person telephone conversation.
- Probation staff shall continue working on the mitigation of the disturbance until the Sheriff's Department is permitted to enter and take control. Staff members will actively work to bring the situation under control using the Safe Crisis Management guidelines.
- When Sheriff arrives on site, staff shall notify the youth involved in the disturbance/melee that the Sheriff is on site and is preparing to enter the

designee is to remain in constant contact with the Sheriff's incident commander.
- Probation staff shall continue working on mitigation of the disturbance.
- Alert the youth that the Sheriff is entering the grounds and to cease and desist immediately. If youth do in fact cease and desist, the Sheriff personnel should not enter.
- If Sheriff is allowed entry to assist in quelling the disturbance, the supervisor or designee shall monitor all Sheriff activity and work collaboratively to determine when the emergency is under control. Once the supervisor or designee decides that the disturbance/melee is quelled, the Sheriff shall be dismissed. (Probation staff shall ensure that youth requiring immediate medical attention are aided, youth cuffs are appropriately applied, etc.)
- Once the incident is under control, Probation staff members assigned to the facility will continue to assist all youth requiring assistance and will remain on post in order to resume normal operations and ensure safety and security. Probation staff members responding from other facilities will remain in the affected area to provide ancillary assistance as directed by

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the supervisor or designee. The supervisor or designee shall coordinate all activity to ensure all special needs have been handled (such as cleaning up after the disturbance, counseling disturbed youth, providing first aid, ensuring OC decontamination, etc.).

- If it is determined that the situation is under control before all staff members have arrived in the affected area, the supervisor or designee will advise the remaining staff members to either return to their posts or stand- by.
- Staff members will secure the area if a criminal investigation is anticipated (Assault, destruction of property, attempted escape, etc.).
- Each staff member who observed the incident or rendered assistance will complete a PIR/SIR regarding the details of the incident, paying particular attention to the identities of the perpetrators and their involvement in the incident.

A major disturbance is defined as an incident where ten (10) or more youths are fighting at the same time. In the event of a major disturbance, staff shall immediately notify the SDPO and indicate the location and the number of youth involved in the incident.

Staff shall make every effort to move youth not involved in the disturbance a safe distance from the incident. (For example, move them out to the blacktop or secure them in a dayroom or, if outside, have those youths not involved drop to the ground on one (1) knee. In camp, staff will secure youths in a safe area such as the [HOPE Center], gym, classroom, indicated area, etc. and ensure there is adequate supervision before responding to emergency.)

Those youths who are most active in the disturbance should be separated and isolated by the safest available means.

The SDPO shall make person-to-person contact with the camp Director. If the Director is unavailable, the SDPO shall contact the Regional Director. If the Regional Director is unavailable, the SDPO shall contact the Residential Treatment Services Bureau Chief or the Chief Probation Officer, in that order. If still unable to reach anyone, the SDPO shall attempt to contact another Bureau Chief. All staff shall be well versed with the facility's fire procedures and equipment. Fire drills shall be conducted within the camp at least quarterly, and shall be

1910 FIRE PREVENTION AND SUPPRESSION

All staff shall be well versed with the facility's fire procedures and equipment.
Fire drills shall be:

- Conducted within the camp at least quarterly on each shift.
- Shall be coordinated by the camp Director, who will assign staff that will

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conduct the drill

- Drills shall be held at unexpected times and under varying conditions to simulate the unusual conditions that occur in case of fire.
- Stakeholder (DMH, JCHS, LACOE, MSB, VISTO, and Contractors) participation
- Youth participation in drills shall only be conducted with approval of the camp Director or person assigned to conduct the drill and should not compromise the safety and security of the facility. For example, drills that occur during sleeping hours should not include youth participation where they are required to evacuate to the field/recreation area
- Consult with Local Fire Department
- The use/actuate of portable fire extinguishers and other manual fire suppression equipment.
- Debrief (to include all campus stakeholders)
- Debrief documentation:
 - 1. Identity of the person conducting the drill.
 - 2. Date and time of the drill.
 - 3. Notification method used.
 - 4. Employees on duty and participating.
 - 5. Number of occupants evacuated.
 - 6. Special conditions simulated.
 - 7. Problems encountered.
 - 8. Weather conditions when occupants were evacuated.
 - 9. Time required to accomplish complete evacuation.

The debrief final report and drills shall be retained in the camp Director's office. A semi-annual fire drill shall be held for all support staff (DMH, JCHS, LACOE, MSB, VISTO, and Contractors).

All buildings shall be equipped with fire hoses, fire extinguishers, and/or automatic fire sprinkler systems. All staff shall know the location of the fire equipment and how to operate it.

Monthly Fire Equipment Inspection

The senior Management Services Bureau (MSB) staff assigned to the facility shall be responsible for examining fire equipment on a monthly basis to determine readiness for use by checking the following:

Fire Extinguishers

- Plastic seal is in place
- Needle on the gauge is in the green zone
- Hose (if applicable) is in good condition
- Annual maintenance check date (on the extinguisher tag) has not expired

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Fire Hoses (Standpipes)

- Hose is in good condition
- Nozzle is in place
- Hose is properly hung on the rack
- Glass or plastic window (if applicable) is intact.

The MSB designee shall sign and date the back side of the extinguisher tag after each inspection and note the date of examination of the Fire Equipment Operability form. The MSB designee shall retain this Fire Equipment Operability form for two years.

The MSB designee shall ensure that the fire alarm boxes connect to a master fire alarm system that alerts appropriate camp staff when activated and provide the coded location of the activated alarm box.

(Meets standards set forth in Title 15, Section 1325 (a)).

Fire Suppression Procedures

In case of fire, staff shall take the following actions:

- Activate the alarm system immediately.
- Make telephone or radio contact with the SDPO.
- If a building that houses youth catches fire, immediately evacuate all youth from the building, evacuating first those who are in that portion of the building threatened by smoke or flames.
- Exercise sound judgment, keeping in mind that the safety and welfare of the youth and staff are of primary concern.

The SDPO shall determine the severity of the fire and take the following action:

- Telephone the fire department, providing the exact location of the fire and the exterior access gate.
- Ensure that all youth and staff have been evacuated from all endangered buildings.
- Dispatch staff to the gate with the appropriate key to allow fire department access and to direct emergency personnel. The SDPO shall also ensure that the staff assigned to the gate post shall have a flashlight after dark.

The SDPO shall provide a detailed written report to the camp Director.

Fire Suppression Pre-Plan

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In conjunction with the camp services manager, each camp Director shall ensure that a Fire Suppression Pre-Plan for the facility is completed and kept on file for annual review. This plan shall be developed in conjunction with the local fire department and shall include, at a minimum, the following elements:

- A facility plot plan, in which entrances are clearly marked for fire equipment use.
- A process for annual inspection of fire equipment located at the facility.
- Periodic drills to familiarize staff and youth of evacuation procedures.
- Yearly fire inspection conducted by the local jurisdiction and review of the Fire Suppression Pre-Plan.

1911 POWER FAILURE

In the event of a power failure, the emergency power system shall be activated if available at the facility.

youth are to remain in their rooms, dormitories, or dayrooms until power is restored. If youth are elsewhere at the time of a power failure, they shall remain in the area, and staff shall immediately conduct a head count.

All living areas are to maintain a supply of lanterns/flashlights.

1912 BOMB THREATS

If someone contacts camp staff by phone and makes a bomb threat, staff shall take the following actions:

- Attempt to keep the caller on the line.
- Write down the caller's exact words.
- Note the tone of voice.
- Listen for background noises.

Staff shall ask the following questions, and write down the caller's responses:

- When will the bomb go off?
- What does the bomb look like?
- Where is the bomb?
- What part of the building (or grounds) is it in?
- Why was it put there?
- What is your name?

The staff member receiving the call shall notify the AD, who shall notify law enforcement and the camp Director. The Probation Department's Office of Security Management shall also be notified as soon as possible.

The SDPO shall ensure that a thorough search is made of all areas where the

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public has access. If a package or foreign parcel is found, it must not be touched or moved.

Upon arrival, local law enforcement shall search the facility as deemed necessary. The SDPO shall decide whether to evacuate any part of the camp at any point in this process.

1913 EARTHQUAKE

In the event of an earthquake, staff shall take the following steps:

- If youth are outside at the time of an earthquake, they are to be moved to a clear area away from walls, utility poles, and downed utility wires in order to avoid falling debris or electrical shock.
- If indoors, staff shall instruct youth to shelter-in-place.
- Maintain a calm atmosphere during and after the earthquake. Staff shall render immediate assistance to the injured.
- When it is safe, the SDPO shall assign a staff member to conduct a thorough facility check, looking for holes, water leaks, fires, loose objects, and property damage (including breaches to the perimeter fence/wall).
- When the earth quake is over, conduct a head count and await further instructions before moving group. The buildings and grounds must be checked for safety.
- Complete the "Earthquake Building Damage-Initial Assessment form.
- Email the completed form within one hour of incident occurrence to:
EmergencyManagement@probation.lacounty.gov
- The forms are located on Probnets under the Facility Level Emergency Response Forms tab.
- Avoid using the telephone, except for emergency purposes.

1914 HOSTAGES

In the event that hostages are taken, the primary object is the safety of all youth and staff. The next objective is the safety of the hostages:

Time is on the side of the negotiating staff. The passage of time increases the likelihood that hostages will be released without injury. Therefore, staff should attempt to keep open lines of communication with hostage takers for as long as possible. Staff must use sound judgment based on the particular elements of the

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situation. Additionally, staff shall follow the following procedures.

- Isolate all youth involved as much as possible with the goal of containing the incident.
- Notify the SDPO and camp Director as soon as possible.
- Probation staff shall maintain control of the situation until the camp Director or designee determines that assistance from outside law enforcement is necessary in order to ensure the safety of the hostages, staff, and youth.
- Obtain as much information as possible about the hostage taker(s). Identify anyone who may be able to favorably influence the hostage taker(s).
- Upon instructions from the camp Director, the SDPO shall identify a negotiator. In the event that outside law enforcement responds, its negotiator will lead the negotiation process.
- The SDPO shall deploy staff as necessary.
- The Residential Treatment Services Bureau Chief and Chief Probation Officer shall be notified as soon as possible. Lines of communication shall be kept open with top administration.
- No information shall be given to the press unless first cleared with the Chief Probation Officer or designee.

Note: If necessary, the SDPO shall assign staff to stay beyond their assigned shift or call additional staff in early. There should be enough people on site to do everything necessary to resolve the emergency. The Probation Department's Office of Security Management shall be notified as soon as possible.

1915 ACTIVE SHOOTER

Active Shooter is an individual actively engaged in killing or attempting to kill people in a confined and populated area; in most cases, active shooters use firearms(s) and there is no pattern or method to their selection of victims. Active shooter situations are unpredictable and evolve quickly. Typically, the immediate deployment of law enforcement is required to stop the shooting and mitigate harm to victims. Because active shooter situations are often over within 10 to 15 minutes, before law enforcement arrives on the scene, individuals must be prepared both mentally and physically to deal with an active shooter situation.

How to respond when an active shooter is in your vicinity:

Quickly determine the most reasonable way to protect the lives of the youth under your supervision, as well as your own life. Remember that youth are likely to follow the lead of staff and the facility manager during an active shooter situation.

- Evacuate

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- Have an escape route and plan in mind
- When appropriate, evacuate as quickly as possible
- Leave your belongings behind
- Help others escape, if possible
- Prevent individuals from entering an area where the active shooter may be by using furniture barricade doors and/or windows
- Keep your hands visible
- Follow the instructions of any police officers
- When safe, immediately attend to wounded youth and staff
- Call 911 when you are safe
- Hide out
 - If evacuation is not possible, find a place to hide where the active shooter is less likely to find you. Your hiding place should:
 - Be out of the active shooter's view
 - Provide protection if shots are fired in your direction (i.e., an office with a closed and locked door)
 - Not trap you or restrict your options for movement
 - To prevent an active shooter from entering your hiding place:
 - Lock the door
 - Blockade the door with heavy furniture
 - If the active shooter is nearby:
 - Lock the door(s)
 - Silence your cell phone
 - Turn off any source of noise (i.e., radios, televisions)
 - Hide behind large items (i.e., cabinets, desks)
 - Remain quiet
 - If evacuation and hiding out are not possible:
 - Remain calm
 - Dial 911, if possible, to alert police to the active shooter's location
 - If you cannot speak, leave the line open and allow the dispatcher to listen

(Meets standards set forth in Title 15, Section 1327[b]).

1916 TERRORIST ATTACK

Terrorism may involve devastating acts using weapons of mass destruction. These weapons range from chemical agents, biological hazards, a radiological or nuclear device, and other explosives. The primary objective of a terrorist is to create widespread fear.

If there is a terrorist Attack:

- Stay calm.

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- Be vigilant. Look out for secondary hazards such as falling debris or additional attacks.
- Follow the instructions of emergency service personnel.

If you receive a Bomb Threat:

- Ask the caller the following questions:
 - When is the bomb going to explode?
 - Where is the bomb right now?
 - What kind of bomb is it?
 - What does the bomb look like?
 - Why did you place the bomb?
 - Where are you calling from?
- Record the exact time and length of the call.
- Write down the exact words of the caller.
- Listen carefully to the caller's voice and background noise.
- After you hang up, **call 9-1-1 immediately from a hard-wired telephone – do not use cell phones to report a bomb threat.**

1917 EMERGENCY EVACUATION

In the event of a major emergency, such as a fire or bomb threat, it may be necessary to evacuate one or all of the buildings in the camp. It is essential that those in charge of the movement remain calm and ensure that all occupants have been removed from the affected areas.

Staff shall alert the youth and instruct them to leave through a designated exit. Staff shall assemble youth in a pre-determined evacuation area and conduct a count to ensure that everyone has been evacuated.

Staff shall check all rooms and buildings for occupants while the main group of youth is being evacuated. The DPO II shall verify a head count and immediately report any missing youth to the SDPO.

Each camp shall designate primary assembly areas, and camp Directors shall ensure that practice drills are conducted. In the event that the normal escape route is blocked or unsafe in an actual emergency, staff are to use the safest alternate route and assemble at a point consistent with safety concerns.

Facility Evacuation

Preparing for Evacuations:

The facility director or designee is responsible for the following proactive prep:

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- Ensure all deputized and non-deputized staff are provided with a copy of the facility's Building Emergency Plan (BEP)
- Ensure all deputized and non-deputized staff are trained on the Facility's Building Emergency Plan (BEP)
- Ensure all county vehicles assigned to the facility are in good working order and fueled at all times.
- Ensure that the facility has an adequate number of mechanical restraint (handcuffs or flexicuffs)
- Encourage all staff to develop a "Family Plan" in the event of a mandatory evacuation, facility relocation and holdovers.

Drills:

Staff shall participate in a staged drill twice a year on each shift. The requirements of each drill are:

- Youth participation (where appropriate).
- All stakeholders and staff (DMH, JCHS, LACOE, MSB, VISTO, Contractors) participation.
- Local Fire Department
- Local Law Enforcement (if applicable)
- Incident Review Debrief Meeting
- Debrief documentation:
 - Agenda
 - Sign-in
 - Minutes

In the event of a "**Mandatory Evacuation**" requiring the evacuation of the entire camp, such as an earthquake, out of control fire, or toxic spill, the following individual(s) and/or entities can issue a mandatory facility evacuation order:

- State or Local Fire Agency
- The Camp Director or designee
- Probation's Departmental Operations Center (DOC)
- The County Emergency Operations Center (CEOC)

The order should result in the dispatch of all transportation vehicles maintained at the camp. On-duty staff will begin an immediate evacuation of the facility, rather than awaiting response from transportation, the MTA, or backup transportation services. The immediate notification must be relayed to all deputized and non-deputized personnel. The youths' behavior charts and medical files must accompany the youth to the receiving facility.

The youth will be evacuated to other camps or juvenile halls, with evacuation sites communicated to the Regional Director and Downey Headquarters. An accurate

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accounting of all youth and proper parental notifications shall take place. The Probation Department's Office of Security Management shall be notified as soon as possible.

Upon arrival at the receiving facility the youth should be provided with:

- Restroom and water calls
- Food
- Telephone call to parent/guardian
- DMH and Medical services

Staff should also be given the same opportunity as indicated above. The facility director or designee is responsible for the PIN, FPINs and all applicable SIRs.

“Voluntary Evacuations” may be initiated by local law enforcement and Fire Departments, and in rare cases federal agencies. When Voluntary Evacuation orders are issued, the facility director or the designee should begin preparing for a potential mandatory evacuation order to be issued. The facility director or designee must notify the Senior Director and/or Bureau Chief and wait for further instructions.

Due to the potential for rapidly changing conditions to develop into a serious threat, the facility director or designee are advised to prepare for the issuance of an evacuation order. All staff and youth should prepare personal belongings for evacuation and “Family Plan.” Advance measures should be taken to prevent harm to individuals with mobility issues or other types of access and functional needs.

This section meets standards set forth in Title 15, Section 1325(d) (f), and Minimum Standards for Juvenile Facilities.

1918 MAJOR EMERGENCY INCLUDING CIVIL DISTURBANCES

In the event of a major emergency and/or civil disturbance, the Department's Emergency Operation Center (EOC) is activated; it is staged at Probation Administrative Headquarters. If relocation of the EOC becomes necessary, Los Padrinos Juvenile Hall serves as the back-up site.

EOC provides centralized direction and coordination of Department resources during a major emergency. Decisions to close offices and/or re-deploy staff to meet legal responsibilities for care and control of youth in physical custody are made at this level. The Department's Emergency Communication Center (ECC), a component of the EOC, is designed to provide the Chief Probation Officer, Disaster Services Deputy/Coordinator, and Bureau Chiefs with continuous information and response capability. Individuals have been pre-designated as coordinators representing each

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Bureau at the Department's Emergency Communication Center, which is manned 24-hour, when activated

(Meets standards set forth in Title 15, Section 1327)

1919 DEATHS AT CAMP FACILITIES

The Probation Department, in cooperation with Juvenile Court Health Services (JCHS) and Department of Mental Health (DMH), will take appropriate action to fulfill mandated reporting requirements to include a medical and operational review of every in-custody death that occurs at a Residential Treatment Services Bureau facility.

Death of a youth

Once the death of a youth has been established by medical staff or paramedics, the parents, legal guardians, or person standing in loco parentis shall be notified in person by the Regional Director or Camp Director whenever possible. Telephonic or written notification is permissible only in situations where the parents, legal guardians or person standing in loco parentis are not in the local area. Immediate notification will also be made to the Juvenile Court and attorney of record by telephone followed by a detailed Information for Court Officer Report. The Regional Director or Camp Director is responsible for the following:

- Securing and preserving the body and the area until police arrive
- Ensuring that the police, Residential Treatment Services Bureau Chief, Chief Deputy of Operations, Chief Probation Officer and DPO of record are notified so that notification can be provided to the Court and Board of Supervisors;
- Ensuring that all staff, witnessing or involved in circumstances surrounding the death or discovery of the body, remain on duty until the police indicate they may be released;
- Coordinating with the Chaplain and the Department of Mental Health so that next of kin notification occurs; and
- Convening a Death Review Team to investigate and submit a written report of its findings, within ten (10) calendar days of the death, to the Bureau of State and Community Corrections.

Death of a Probation Employee or Non-Employee

These procedures are applicable once a death of an employee or non-employee has been established by medical personnel or paramedics. When the death is confirmed, the Regional Director or Camp Director shall take the following actions:

- Immediately notify the police so that they can prepare the mandated death

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report. The police will notify the Coroner to claim the body when appropriate.

- Preserve the body and the site of death until police arrive.
- Coordinate with the police, chaplain and the Department of Mental Health to notify the next of kin.
- For Probation Department employees whose death occurs while on duty, the Regional Director or Camp Director shall notify the next of kin.
- If the decedent is a Probation employee, refer the next of kin to the Human Resources Management Office at Probation Headquarters for information concerning benefits.
- The police shall notify the next of kin for non-Probation employees whose death occurs at the facility.
- Secure the personal property and vehicle of the decedent after consultation with the police until the secured items can be properly turned over to the next of kin or appropriate authority.
- If the decedent worked for another agency, coordinate with police relative to the notification of that agency.

Death Review Team

A death review team shall be assembled. This team, which is overseen by the Regional Director, consists of the Health Administrator, the Mental Health Administrator, the Juvenile Court, attending physician, the Camp Director, the SDPO on duty, and other parties appointed as necessary.

When a youth dies, this team shall be responsible for submitting a report to the Attorney General in accordance with Government Code Section 12525. A copy of this report shall be sent, within ten days of the death, to the Bureau of State and Community Corrections. Copies of this report are for youth to the Residential Treatment Services Bureau Chief, Chief Probation Officer and a copy retained at the facility.

In instances where the death involves an employee or non-employee, the team will convene, investigate and submit a report to the Residential Treatment Services Bureau Chief and Chief Probation Officer within 10 days. A copy is retained at the facility.

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 pursuant to the provisions of Title 15, Section 1341.

Contents of Reports prepared by the Death Review Team

The report of death for a youth will contain the following information:

- Name

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- Date of birth
- Sex
- Race
- Date and time of admission to camp
- Reason for admission
- Physical description and condition on admission
- Copy of autopsy report, if any, or facts relating to death, including but not necessarily limited to, the following:
 - Date and time of death
 - Cause of death
 - Any incidents related to death
 - Name of physician in attendance
 - Name of camp
 - Name and title of employee making report

If possible, a copy of the police report and all other available data about the decedent should be obtained so that an investigation report can be prepared by the Death Review Team.

The report of death for an employee or non-employee will contain the following information:

- Name
- Date of birth
- Sex
- Race
- Date and time of death
- Cause of death
- Any incident or circumstances related to death
- Name of attending physician
- Time and date next of kin notified and by whom
- Name of persons preparing report
- Name of police agency preparing the report
- The report shall include both the autopsy report and the police report.

(Meets standards set forth in Title 15, Section 1341(1)(a)-(d))

1920 SERIOUS ILLNESS OR INJURY OF A YOUTH WHILE DETAINED

It is the policy of the Probation Department and RTSB Facility Administrator, in cooperation with JCHS, that immediate notifications of all serious illnesses or injury are reported to the following parties forthwith:

- Juvenile Court
- Parent
- Guardian

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- Peron standing in loco parentis
- Youth's attorney
- DCFS Caseworker (if applicable)

(Please cross reference with manual Section 2121 for information that is also applicable to this Section)

(Meets standards set forth in Title 15, Section 1341(2))

1921 TESTING OF EMERGENCY EQUIPMENT

Periodic testing of emergency equipment is the responsibility of the Internal Services Department who conducts monthly and as needed inspections upon request of RTSB and the Management Services Bureau (MSB). In addition, work orders are submitted by the facility Director or his or her designee to MSB to inspect any related security devices as required by the manufacture or as needed.

(Meets standards set forth in Title 15, Section 1327)

1922 WEAPONS AND AMMUNITION

Weapons and ammunition are not allowed into any of the RTSB facilities. Law Enforcement who are visiting any of the RTSB facilities are asked to safely store their weapons and ammunition in their vehicles.

(Meets standards set forth in Title 15, Section 1327)

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Attachment A

**COUNTY OF LOS ANGELES PROBATION DEPARTMENT
RESIDENTIAL TREATMENT SERVICES BUREAU**

ACKNOWLEDGEMENT OF REVIEW AND UNDERSTANDING FORM

On _____, I reviewed the Building Emergency Plan that includes the Residential Treatment Services Bureau Evacuation and Emergency Procedures.

I have read and understood the information included in the Building Emergency Plan.

Employee Name/Title (Print)

Employee Signature

Date

*All Sworn officers must annually review the Building Emergency Plans during their Performance Evaluations and sign the RTSB Acknowledgement of Review and Understanding Form documenting their review.

**Partner Agencies and Volunteers must review and sign the RTSB Acknowledgement of Review and Understanding Form annually, one year from the initial sign-off date of their initial orientation.

C: Section File, Sworn Officers

Binder in Camp Director's Office, Partner Agencies/Volunteers

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LOS ANGELES COUNTY PROBATION DEPARTMENT

Subject: RESIDENTIAL TREATMENT SERVICES BUREAU MANUAL INSPECTIONS AND EVALUATIONS OF BUILDINGS AND GROUNDS	Section Number: RTSB-2000
	Effective Date: July 21, 2020
	Approved By: Jennifer Kaufman, Bureau Chief

2001 INTRODUCTION

Camp Directors shall comply with obtaining annual documented inspections and evaluations as required by Section 1313, Title 15, Minimum Standards for Juvenile Facilities.

2002 TYPES OF INSPECTIONS AND EVALUATIONS

Required inspections and evaluations are as follows:

- County building inspection, relative to building safety
- Fire inspection from local jurisdiction, including a fire clearance as required by Health and Safety Code Section 13146.1 (a) and (b)
- Health inspection in accordance with Health and Safety Code Section 101045.
- County academic certification regarding the adequacy of education services and facilities as required in California Code of Regulations, Title 15, Section 1370.
- Juvenile court inspection as required by Section 209 of the Welfare and Institutions Code.
- The Probation Commission as required by Section 229 of the Welfare and Institutions Code, or the Probation Commission as required by Section 240 of the Welfare and Institutions Code.

2003 DOCUMENTATION OF INSPECTIONS AND EVALUATIONS

The camp Director shall retain a copy of the inspections and evaluations at their facility, making them available to the Bureau of State and Community Corrections upon request.

LOS ANGELES COUNTY PROBATION DEPARTMENT

Subject: RESIDENTIAL TREATMENT SERVICES BUREAU MANUAL EMPLOYEE POLICIES AND PROCEDURES	Section Number: RTSB-2100
	Effective Date: July 21, 2020
	Approved By: Jennifer Kaufman, Bureau Chief

2101 INTRODUCTION

This section contains Bureau-specific policies and procedures. It also highlights various Departmental policies and procedures that impact the day to day routine of RTSB staff. This section is by no means all-inclusive of policies and procedures pertaining to all Probation employees. Staff members are urged to review both Directives and other Departmental manuals (such as the Probation Department Policy Manual, the Administrative Services Bureau Manual, and the Information Systems Bureau Manual) to keep abreast of the most current policies and procedures in place.

2102 SIGN-IN PROCEDURE (DIRECTIVE 1201)

All staff are required to sign in and out of camp using the staff logbook each time they enter or leave the facility. On-duty staff shall not leave the facility without the supervisor's permission. Staff shall legibly enter the following information in the logbook:

- Printed name
- Signature
- Time in/out
- Destination

Staff shall not sign in or out in advance, and they shall use the next available line (skipping no lines between entries).

It is the policy of RTSB, which encompasses the camp facilities, the Dorothy Kirby Center (DKC), Camps Headquarters and the Camps Assessment Unit, that all on-duty peace officer staff entering and exiting their assigned facility, or visiting another facility for business-related purposes, shall utilize only the main entrance as designated by the facility Director or Senior Director, and shall sign-in and sign-out in the *Peace Officer Sign-In Log* each time they arrive at or depart from the facility. If the *Peace Officer Sign-In Log* is not immediately available, the facility Supervisor or Acting Director (AD) shall be immediately contacted for assistance, as peace officer staff are not authorized to utilize any other signature log.

Peace officer staff shall not utilize any other point of entry into or out of the facility except in exigent circumstances as directed by the facility Supervisor or SDPO. If an alternate entrance is utilized, as soon as practical, staff shall report to the main entrance of the facility and sign in.

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The procedures outlined below are to be followed when signing in and out of the *Peace Officer Sign-In Log*:

- A separate *Peace Officer Sign-In Log* sheet shall be generated by the facility for each day of the month:
 - Entries in the log shall be sequential
 - No lines in the log shall be skipped; and
 - Staff shall sign in and sign out on separate lines;
- Staff signing in shall utilize the first available blank line on the sheet and shall provide the following information in a clearly legible format:
 - Printed Name as noted on the Probation Department Identification (ID) Card;
 - Actual time of arrival; and
 - Signature
- Staff signing out shall utilize the first available blank line on the sheet and shall provide the following information in a clearly legible format (no lines shall be skipped):
 - Printed Name as noted on the Probation Department ID Card;
 - Actual time of departure; and
 - Signature

Peace Officer staff at all RTSB facilities shall not leave the facility during their assigned shift, including sleep time for staff working a 56-hour shifts, without the authorization of the facility Supervisor or SDPO. Staff shall sign in the *Peace Officer Sign-in Log* when departing the facility for any reason, whether personal or to conduct County business at another location, and shall sign back in upon their return.

CYMC peace officer staff that leaves the secure portion of the CYMC main facility to access the Staff Annex is not required to sign out. However, CYMC staff may not go beyond the secure fenced perimeter of the CMYC parking lot area without first signing out in the *Peace Officer Sign-Out Log*.

All peace officer staff assigned to RTSB facilities shall be cognizant of the expectation that they shall remain at their assigned facilities, which may include specifically assigned supervision posts, while on duty (including sleep time for staff on 56-hour shifts). Staff that leaves the facility and/or a specifically assigned post position without authorization will be subject to corrective action.

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2103 KEY PROCEDURES

Issuance of Keys

The CSM/GSM or designee shall issue each staff member a set of keys. Staff shall be responsible for exercising proper control over the keys needed to perform required duties.

Staff Responsibilities

Keys must be appropriately attached with a lanyard or chain, using material that is strong enough to prevent theft or accidental loss. Keys are to be used only by the employee to whom they were issued. Staff shall never lend or give their keys to youth, visitors, or other employees.

2104 PROFESSIONAL DEVELOPMENT AND TRAINING (DIRECTIVE 1254)

The RTSB requires attendance at both initial and annual training for all line and supervisory staff. Training may be provided under the auspices of the Staff Training Office or conducted in-house by the facility. In either case, training is considered a work assignment, and staff shall be required to meet the standards of behavior outlined below.

Personnel with primary responsibility for other duties such as administration, supervision of personnel, academic or trade instruction, clerical, forestry, kitchen or maintenance shall not be classified as youth supervision staff positions.

New Employees/Youth Supervision Staff Orientation and Training

All new deputized employees shall receive 40 hours of state-mandated entry-level training (pursuant to 832 PC) before they shall be allowed to supervise youth. Included in the training is an orientation as to their duties and responsibilities. Specific classes may include, but are not limited to, such topics as use of force, de-escalation techniques, and use of restraints, group supervision techniques, and counseling. Prior to assuming any responsibilities each youth supervision staff member shall be properly orientated to their duties including but limited to the following:

- Youth supervision duties;
- Scope of decisions they shall make;
- The identity of their supervisor;
- The identity of persons who are responsible to them;
- Persons to contact for decisions that are beyond their responsibility; and
- Ethical responsibilities.

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(Meets standards set forth in Title 15, Section 1322)

Standards and Training for Corrections (STC) Core Training

It is the requirement of the Bureau of State and Community Corrections (BSCC) and the policy of the Department that all newly hired or promoted peace officer staff must successfully complete the standard BSCC Core Training for the position. It is mandatory that this training be completed within 12 months of the employee's appointment. Prior to assuming any responsibility for supervision of youth, each youth supervision staff member shall receive a minimum of 40 hours of facility-specific orientation, including but not limited to the following:

- Individual and group supervision techniques;
- Regulations and policies related to discipline and rights of youth pursuant to law and the provision set forth under Title 15, Section 1322;
- Basic health, sanitation and safety measures;
- Suicide prevention and response to suicide attempts
- Policies regarding the use of force, de-escalation, mechanical and physical restraints;
- Review of policies and procedures referencing trauma and trauma-informed approaches;
- Procedures to follow in the event of emergencies;
- Routine security measures, including facility perimeter and grounds;
- Crisis intervention and mental health referrals to mental health services;
- Documentation; and
- Fire/Life safety training

The attendance of scheduled CORE classes takes precedence over all previously scheduled or last-minute requests for time off. Absences, either full days or partial days, will be deemed as a failure to complete the training requirement. Managers Shall ensure that staff are released to attend.

Prior to assuming sole supervision of youth, each youth supervision staff member shall successfully complete Juvenile CORE pursuant to Penal Code Section 6035. In addition, each juvenile supervision staff member, before exercising peace officer powers, youth supervision staff shall successfully complete training pursuant to Section 830 et seq. of the Penal Code. Because completion of Core training is required to retain the position, newly hired staff who fail to complete the scheduled Core classes shall be subject to termination. Newly promoted staff shall be subject to reduction and administrative reassignment.

(Meets standards set forth in Title 15, Section 1322)

Fire and Life Safety

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Whenever there is a youth in a juvenile facility, there shall be at least one person on duty at all times who meets the training standards established by the BSCC for general fire and life safety which relate specifically to the facility. There must be at least one staff member on every shift that is trained in fire and life safety. Fire and Life Training should include, but not be limited to:

- Use of self-contained breathing apparatus if this equipment is required by the local fire authority, or if this equipment is available to staff
- Learning the location of fire doors, barriers, evacuation procedures
- Use of fire hoses and fire extinguishers so that staff can effectively use them during an emergency
- The training listed in this section should be part of the 40-hour orientation training referenced in Section 2104 of this Manual.

(Meets standards set forth in Title 15, Section 1323)

Annual Training

BSCC requires that all deputy probation officers and group supervisor staff are required to satisfactorily complete a minimum of 24 hours of training annually. SDPOs are required to satisfactorily complete 40 hours of training each year. At the discretion of management, additional training hours may be required.

Staff working a 56-hour schedule who are assigned to five continuous eight- hours of training, shall be provided with a minimum two-week written notice by the camp Director or designee indicating that their shift will convert to a standard 5/40 shift for the duration of the training week(s).

Scheduled Training

When training is scheduled in advance, attendance is required and considered mandatory. Therefore, RTSB staff not be allowed to report to their normal work assignment in lieu of reporting for training. If this occurs, staff shall be sent home and shall use their own time to cover the time off work.

Training Guidelines and Expectations

The Department strives to offer a training curriculum that provides requisite training covering the knowledge and skills for the majority of job assignments. Training is an important ongoing learning experience provided to staff to ensure they have the necessary skills to efficiently, effectively and consistently deliver services. The breadth of services provided by the Department, the emergence of new techniques, new regulations, and evolving community and stakeholder expectations, results in the need for both new and/or refresher training.

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Training is most effective for all participants and the instructor when each attendee adheres to reasonable expectations of professionalism. Participation in a training course is a work assignment and the attendees are expected to adhere to the following:

- **Attendance:** Staff who are scheduled to attend training are required to do so. The camp Director or designee shall address staff failures to attend training on a case-by-case basis. Trainees shall only attend classes for which they have been previously enrolled. Walk-ins will not be allowed into the class.
- **Arrival and Departure:** RTSB staff shall arrive on time and stay for the duration of the training session. Trainees who arrive 15 minutes or more after the start of the class shall not be allowed into the class and shall immediately return to camp if on duty. RTSB staff that provides documentation pertaining to the reason they were late to a training class may be approved by the Camp Director or designee to work the remainder of their assigned shift. Appropriate documentation may consist of a medical certification, traffic report printout from the internet, etc. Trainees who leave before the end of a session (morning or afternoon) shall forfeit credit for the entire session. Trainees are expected to remain for the duration of the class until dismissed by the instructor.
- **Absences:** Unexcused absences will result in disciplinary action. If unable to report as scheduled, trainees shall call the on-duty supervisor at their work location at least one hour before the start of the course. If the supervisor is unavailable, they shall contact their Director or their Regional Director. Excused absences will be approved per Department standard.
- **Cancellations:** Cancellations shall be approved by the on-duty Supervisor at the trainee's work location, their Director, or their Regional Director before the start of the class. The camp SDPO, Director, or Regional Director must notify STO via email regarding the cancellation no later than 15 minutes after the scheduled start of the class.
- **Replacement staff:** If one trainee reports to training in lieu of another, this action shall be approved by the camp SDPO, Director, or Regional Director before the start of the class by signing the Training Replacement Form that is available on ProbNet. The replacement staff must provide a copy of the signed form to the instructor within 15 minutes of the scheduled start of the class.
- **Sign-in Roster:** For an eight-hour class, trainees must sign the roster at the beginning and end of the class. For two-hour and four-hour classes, trainees must sign only once at the end of the class.
- **Breaks and Lunch:** Breaks are 10 minutes unless otherwise noted. Trainees who return 15 minutes or more late from a break or lunch shall not be allowed into the class and shall forfeit credit for the entire session (morning or afternoon).

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- Dress Code: Trainees shall report for training in uniform or in business casual attire unless instructed otherwise. Blue jeans, excessively revealing attire, sweats, shorts, t-shirts, shirts with sports or other inappropriate logos, and baseball caps are unacceptable.
- Professional Behavior: Trainees shall exhibit professional behavior at the training site and in class, and shall be attentive at all times. Trainees shall not read materials (i.e., magazines, newspapers) that are not part of the training curriculum. They shall not use any electronic devices during class that are not approved by the instructor. Cell phones and pagers should be placed on vibrate during the entire class. Trainees are expected to observe all rules of the training site. Any unprofessional behavior shall result in dismissal from class and forfeiture of all credit.
- Course evaluation forms: Trainees shall complete the course evaluation form at the end of the class.
- Training materials: At a minimum, trainees shall bring a pen or pencil and paper to all classes unless otherwise directed by the instructor or the Staff Training Office.

The Department expects that any Director or camp SDPO attending training shall assist the instructor in enforcing the prescribed guidelines. It may be necessary for the Director or SDPO to prepare an SIR or memo documenting inappropriate classroom behavior for possible disciplinary follow-up.

Training and Orientation Guidelines for Camp Support Staff

Non-sworn support and volunteer staff that work at the camps will receive orientation from the Camp Director or designee which shall include a tour of the facility, a review of the emergency procedures manual, and information regarding institutional practices which will include all relevant county policies and procedures.

Volunteers in Service to Others (VISTO) volunteers are screened and cleared through the VISTO program and upon arrival to their assigned location are orientated by the facility VISTO coordinator.

(Meets standards set forth in Title 15, Section 1320(c), 1324 (d)(e))

2105 ABUSIVE LANGUAGE

Employees are expected to work cooperatively and harmoniously in the camp setting. Staff must set an example of courtesy and consideration in their contacts with both youth and fellow staff members. Care must be taken to avoid directing personalized criticism, which may embarrass or antagonize youth and staff alike.

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Staff shall not make negative statements about other staff members in front of the youth. Physical confrontations, vulgar language, profanity, and ridicule constitute violation of RTSB policy.

In dealing with youth, staff must understand that control is an indispensable factor in maintaining acceptable behavior and in fostering habits of good conduct. When it is necessary to correct youth or to lower their daily grades for misconduct, it should be done without personal involvement on the part of the staff. Staff will not ridicule, use profanity, or make threats. Praise and encouragement, on the other hand, may promote desired behavior.

2106 TELEPHONE ETIQUETTE

Because the Department is a customer service-based organization, employees are expected to follow the basic guidelines of telephone etiquette, which are detailed in this section.

Answering the Telephone: Identify the department, camp name, and your name. When answering for someone else, also identify the staff name assigned to that phone number.

Placing Calls on Hold: Ask the caller if he/she is able to hold. Return to the held call every 40 to 50 seconds, thank the caller for holding, and ask if he/she is able to continue holding. If the caller cannot continue holding, offer to take a message or ask if he/she wishes to be transferred to voicemail (if available).

Transferring Calls: Inform the caller that he or she is being transferred and identify the telephone number to which he or she will be transferred. Notify the next staff (where the call will be transferred) that you are transferring a call.

Telephone Messages: Clearly and accurately record the following information:

- Name of caller
- Name of department or company
- Date and time of call
- Telephone number (with area code and extension)
- Comments (if any)

Obtain the Caller's Permission: Ask the caller for permission before using the speaker feature or including the caller in a conference call.

Show Common Courtesy: Use words such as: Please; I'm sorry; thank you; and you're welcome.

Additional Considerations: Be mindful to avoid engaging in the following behavior:

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- Setting the receiver down on a hard surface.
- Covering the receiver to speak to someone else (the caller might overhear your conversation)
- Answering the phone while engaged in a conversation with someone else.
- Eating while answering or speaking on the phone.
- Using the following phrases:
 - I don't know where she is
 - He hasn't come in yet
 - She is still at lunch
 - Okay, yeah, uh huh
 - We don't do that

Alternatively, the following behaviors are a more positive alternative:

- Setting the receiver down on a soft surface to avoid noise, or using the telephone's hold feature, if available.
- Refraining from conversation with others while on the phone.
- Using the following phrases:
 - She is away from her desk. May I take a message?
 - He is unavailable at the moment, may I take a message?
 - Yes
 - I'm sorry, that is not handled here. However.....

2107 CITIZEN'S COMPLAINTS

It is the policy of the Residential Treatment Services Bureau to respond to all complaints from citizens in a positive and professional manner. While it is not possible to resolve all complaints or to satisfy all of these complaints, staff shall be courteous and helpful in determining the nature of the complaint and in explaining the procedures necessary to resolve the problem. Particular effort shall be made to remain calm and courteous as it is likely that the complainants.

Procedures

Complaints may be made in person, by telephone or in writing. The first two types are more likely to be received by line staff initially, while the third would probably be addressed to the supervisor on shift or a management level staff. In any case, the person receiving the complaint shall determine the nature of the problem and, if possible, resolve it immediately.

Should the problem be complex or beyond the authority of the receiving staff, the complainant shall be asked to submit it in writing. This shall enable line staff to forward the matter to the appropriate supervisor or Director without any distortion

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of the facts. The complaint should be referred to the appropriate manager and/or office and should be addressed within 30 days.

If the complainant refuses to submit the complaint in writing, the receiving staff shall attempt to summarize the problem in his/her own words. In either case, the complainant's name, telephone number, and address shall be requested in order for the supervisor to call for more information and to be able to make a response.

(Meets standards set forth in Title 15, Section 1361.)

2108 GROOMING AND UNIFORM POLICY

Sworn staff working in camp shall wear the approved and official Class "B" uniform designated and provided by the Department. The Chief Probation Officer has final authority on matters pertaining to official uniforms, safety equipment, alternative equipment, and identification items.

The purpose of sworn staff wearing uniforms is to project a professional operating image of Probation Department's peace officers as defined in the Probation Department mission statement; to allow for easier identification by youth and staff; to enhance staff unity; and to project a symbolism of authority.

Only approved, sworn staff may wear the official Probation Department uniform.

Classifications Required to Wear Uniforms

Employees holding the sworn classifications designated below and assigned to camps are required to wear the Class "B" uniform while on duty as described below:

- Supervising Deputy Probation Officer
- Deputy Probation Officer II
- Deputy Probation Officer I
- Group Supervisor Nights

Employees Exempted from the Wearing of Uniforms

Employees holding the sworn classifications designated below and assigned to camp shall not be required to wear Class "B" uniform while on duty. Employees in these classifications may wear a Class "B" uniform as necessary and approved by the Bureau Chief or designee:

- Senior Probation Director
- Probation Director
- Assistant Director
- Sworn employees on specialized assignments outside of facilities*

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*Employees assigned to specialized assignments/duties or who require a special accommodation wherein the wearing of a uniform is impractical, and where the Bureau Chief has granted prior approval, shall not be required to wear the uniform during their assignment or during the special period of accommodation. Alternatively, these employees shall wear appropriate business attire that is commensurate with their assignment as outlined by Probation Department policy or as designated by their immediate Director.

Class “B” Uniform

The Class “B” Uniform is the standard sworn personnel uniform for camp, and it shall be worn at all times while on duty. The basic uniform shall consist of the following Department-approved and issued items:

- Boots
- Belt
- Headgear (hat) with cloth badge emblem
- Polo-type shirt with cloth badge emblem and embroidered employee name
- Uniform cargo pants – non-bloused
- Field jacket with cloth badge emblem and embroidered employee name
- Key holder clasp
- Lanyard for securing institutional keys
- Oleoresin Capsicum spray container (for CMYC staff only)
- Oleoresin Capsicum spray canister holder (for CMYC staff only)

Staff may purchase optional Department-approved from the Department- approved vendor at negotiated prices and worn with the uniform. The Department-approved vendor shall maintain a current list containing the make and model of all Department-approved optional items at its place of business. These items include, but are not limited to:

- Foul weather gear (rain jacket)
- Foul weather gloves – black
- Metal handcuffs
- Handcuff case
- Radio clip

General Instructions Regarding the Class “B” Uniform

Employees may not wear any item on/with their uniform at any time that is not Department-approved. Uniformed staff shall not wear full or partial uniforms, safety equipment, or Department identification items while off duty that would identify them as uniformed members of the Probation Department.

Uniformed staff may wear uniforms while traveling to and from their work location. The Director, prior to the off-duty activity, shall authorize any exceptions. Exceptions include funerals and transporting youth to another county or state.

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Issued items shall be authorized for use while on duty and must be returned to the Department upon termination.

Return of Uniform

Staff who leave the Probation Department or County service are required only to turn into their supervisor their polo shirts, hat, rank pins, and jacket as part of the exit process. Staff may keep their pants, belt, and boots. The turned-in uniforms shall be sent to Human Resources. Employees who promote to a non-uniform assignment need not turn in their uniform if they are anticipating working Section 170 overtime in the halls and camps.

Maintenance of Uniform and Equipment

Approved uniforms and safety equipment shall be maintained at all times in a clean, serviceable condition, ready for immediate use. Items shall be replaced when they are worn, damaged, present an unacceptable appearance, or do not meet current specifications. Uniforms and equipment are to be maintained in a secure manner at all times.

Inspection of Uniform and Safety Equipment

Uniformed staff shall be subject to inspection of all uniform and safety equipment any time during their shift to ensure that:

- Only approved items are worn and/or carried
- Items are worn in the approved manner
- Items are clean, properly maintained, and serviceable
- All required items are in their possession
- Items fit properly

Supervisors shall conduct daily inspections to ensure that articles of the uniform and safety equipment are prescribed for the assignment.

Employees who report for duty without an appropriate uniform may be instructed to leave the facility grounds to retrieve the proper uniform. Employees shall not receive compensation during any absence from duty to retrieve a proper uniform. In addition, staff may be subject to disciplinary action for any uniform violation.

Wearing of Uniforms

Required staff shall wear Class "B" uniforms at all times while on duty and/or while inside of the facility. Staff shall keep uniforms as clean and neat as possible. Leather accessories shall be kept polished and clean. Staff on duty shall present a professional appearance when representing the Department.

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The following outlines the particular manner in which each approved part of the uniform shall be worn:

- Uniform polo shirt – short sleeved: Shall be worn with the sleeves straight and only the top button unbuttoned. The shirt shall be neatly tucked inside of the trousers at all times. The sleeves of the shirt shall be allowed to settle naturally. Sleeves shall not be rolled up or otherwise rearranged. Uniform shirts shall be routinely laundered and pressed prior to reporting for duty. No pins or other insignia may be attached to or worn on the uniform shirt.
- Uniform polo shirt – long sleeved: Shall be worn with the sleeves straight at all times and only the top button unbuttoned. The shirt shall be neatly tucked inside of the trousers at all times. The sleeves of the shirt shall be allowed to settle naturally. Sleeves shall not be rolled up or otherwise rearranged. Uniform shirts shall be routinely laundered and pressed prior to reporting for duty. Long-sleeved shirts may only be worn by staff that has prior authorization from their Director. No pins or other insignia may be attached to or worn on the uniform shirt.
- Uniform trouser: Shall be ironed and worn with the pants appropriately buttoned and the zipper secured. The trouser legs shall be allowed to settle naturally. Uniform trousers shall not be worn in the bloused position; nor may they be tucked inside of boots. Nothing may be carried in the pockets of the uniform pants that produce an obvious bulge or protrusion. Uniform trousers shall be routinely laundered and pressed prior to reporting for duty.
- Uniform headgear: Shall be worn with the Probation Department badge insignia for youth at all times. The baseball-cap style headgear provided by the department may not be worn back by youth or adjusted to the side. No pins or other insignia may be attached to or worn on the uniform headgear.
- Uniform belt: Shall be worn with trousers at all times. The non-buckled end of the belt shall be threaded through each belt-loop from left to right on the trousers. The belt shall be secured so that the outside vertical edge of the secured belt buckle is symmetrically aligned with the outside vertical edge of the zipper-fold and the trouser-clasp area. This aligning of belt and trouser edges is often referred to as a "gig-line." It is expected that each employee's gig-line shall be properly aligned at all times. Items that may be attached to the belt are as follow: Key holder clasp and lanyard, handcuff case, OC canister pouch, and radio clip. Cellular telephones or other electronic devices may not be attached to the belt.
- Uniform boots: Shall be worn with the uniform at all times. Boots shall be well maintained and shined prior to reporting for duty. Boots shall be laced cross-wise (x-style) and remain zipped at all times.

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- **Black calf-height socks:** Shall be provided by the staff and worn with the uniform at all times. These socks shall be of sufficient length that when seated, the uniform trouser rises upward in the calf area so that skin is not visible. These socks shall be free of holes or other defects and shall be routinely laundered. The wearing of ankle-length-type socks is prohibited.
- **Undergarments:** T-shirts may be worn, providing it is clean, white and has a round crew neck collar. Turtlenecks are prohibited.
- **Field Jacket:** An approved field jacket may be worn with the badge insignia and employee's name for youth facing and visible at all times. The approved rain gear may be worn in place of the field jacket. No pins or other insignia may be attached to or worn on the uniform field jacket.
- **Key holder clasp:** An approved key holder may be attached to the belt anywhere between the belt buckle and the second belt loop on either the left or right side of the body in accordance with the staff's preference. The key holder shall not be attached to the belt at any point past the second belt loop at any time; nor should it be in a position where it will interfere with access to the OC canister pouch. Approved lanyards that are black in color, and utilized to secure keys to the person shall be attached to this key holder.
- **Lanyard:** An approved black lanyard shall be utilized to secure keys to the staff's person. The lanyard shall be attached to institutional keys on one end and the other end secured to the approved key holder clasp.
- **Facility identification card:** A Facility Identification Card shall not be worn with the Department-approved uniform.
- **Optional black gloves:** Approved foul-weather gloves that are black in color may be worn with the uniform during foul weather periods. When not being worn, gloves shall not be attached to the uniform in any visible manner.
- **Optional foul weather rain gear:** Approved foul-weather rain gear (jackets) may be worn by staff during periods of inclement weather, such as rain or snow. Rain gear shall be worn with the black-side of the rain gear facing out. The reversible side of the rain gear may only be worn in emergent situations when the reflective surface will aid promoting staff safety. Rain gear may not be worn unless rain or snow is present or immediately imminent.
- **Optional radio clip:** An approved radio clip may be attached to the belt anywhere between the belt buckle and the second belt loop on either the left or right side of the body in accordance with the staff's preference. The radio clip shall not be attached to the belt at any point past the second belt loop at

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any time.

- Optional handcuff case: One approved handcuff case may be attached to the belt area located in the small of the back. The handcuff case shall be well maintained and shined as necessary to maintain its professional appearance.
- Optional metal handcuffs: One approved pair of metal handcuffs may be secured in the handcuff case on the belt. Handcuffs may not be worn on the staff's person in any other location.

Wearing of Jewelry

When wearing the uniform, all visible jewelry shall be limited to one ring and one watch. Visible necklaces, ornamental bracelets and/or anklets shall not be worn while in uniform. Body piercing including but not limited to nose rings, tongue rings, eyebrow rings, or any other form of ornamentation visible or affixed in a position which may be seen by a member of the public are expressly prohibited.

Uniformed female staff with pierced ears may wear a single stud earring (no larger than 3/8 inch diameter) in each ear lobe. No other visible jewelry piercing is permitted on staff of either gender. The Medic Alert necklace and/or bracelet are exceptions to these regulations.

Wearing of Sunglasses

Sunglasses shall not be worn inside of facility buildings, such as church, dorms, kitchen areas, living units, medical service areas, school, etc.

Uniform Issuance

Employees required to wear a Class "B" uniform shall have the initial basic prescribed uniform provided to them by the Department via a voucher at no cost to the employee. The initial uniform distribution shall consist of the following:

- Five short-sleeved polo-type shirts with approved embroidery (or specially authorized long-sleeved shirts)
- Five pairs of trousers
- One each: field jacket, belt, boots, and headgear (baseball cap)

Current employees shall initially be fitted for a uniform by the vendor at the work location or, if necessary, at the vendor location. The camp Director shall facilitate the issuance of a voucher, determine if the employee shall be fitted at the work or vendor location, and set up appropriate appointments for the employee to be fitted.

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Appointments are to be made at the work site to the extent possible in the best interest of the facility operations, and to provide the least inconvenience to employees. New-hire employees shall receive a uniform voucher from the RTSB assistant and shall be fitted at the vendor location.

The pre-approved appointment for issuance of a uniform is a work assignment. As such, employees are expected to conduct themselves appropriately, and arrive on time for their appointment with reasonable consideration for potential delays such as traffic, weather, shift-change times, and parking. For employees being fitted at one of the vendor's retail stores, it is anticipated employees will travel the best available route directly to the store, arrive on time, and promptly proceed back to the work site or home as designated by their manager or facility uniform coordinator.

Because the initial uniform issuance appointment is a work assignment, employees may claim on their timecard the actual reasonable time necessary for the fitting time and roundtrip travel. Employees who experience or anticipate extended time for this process should notify their facility uniform coordinator or manager in advance. Delays resulting from unforeseen issues or beyond the employee's control should be reported to the employee's facility uniform coordinator or manager as soon as reasonably practical. Vendor store appointments should be arranged at the most convenient location to expedite the fitting process, with consideration for traffic patterns and proximity to the work site or the employee's home. Any fitting appointment that extends beyond three hours, including travel, requires immediate notice of the extended time before the three hours has been surpassed.

The uniform may not be provided to the employee at the time of the initial fitting, generally due to the need to alter or embroider garments. In those instances where the initial uniform is not provided, the vendor will arrange with the facility uniform coordinator the pick-up or shipment of garments (individually packaged and labeled for the specific employee) to the Department for distribution. The employee is not to make a second trip to the vendor store on County time unless specifically pre-authorized by his or her manager or facility uniform coordinator.

Employees may purchase additional uniforms manufactured to Department-approved specifications from the vendor at their own expense. Additional items purchased by the employee with the Probation insignia require a voucher. Female employees who require maternity-type uniform accommodations shall be provided an additional issuance of maternity-specific uniforms to be worn while on duty until such time as the accommodation is not needed.

The employee can purchase optional department-approved items that may be worn with the uniform from the department-approved vendor at reduced rates. The Department-approved vendor shall maintain a current list containing the make and model of all approved optional items at their place of business. A copy of this list shall also be maintained on the Probation Department's ProbNet website.

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Uniform Voucher Process

Sequentially numbered, five-part blank Uniform Vouchers (attachment A) shall be maintained at the work location. Vouchers shall be issued to employees to acquire basic uniform equipment from the vendor.

Initial Uniform Issuance Voucher

- Employees requiring an initial uniform issuance or a subsequent issuance shall contact their camp Director.
- The Director shall authorize the facility uniform coordinator to prepare a 5-part multicolored RTSB Uniform and Equipment Issuance Voucher, noting which items are approved for issuance. Hereinafter, the RTSB Uniform and Equipment Issuance Voucher shall be referenced as the voucher.
- The Director shall sign the voucher (approval).
- The issuing facility uniform coordinator shall retain the final copy (Green copy-page 5) of the voucher in a file.
- The issuing facility uniform coordinator shall sequentially log the issuance of vouchers in the Facility Uniform Voucher Reconciliation Log, noting the following information:
 - Voucher number
 - Employee to whom issued (last name, first name)
 - Employee number
 - Employee title
 - Assignment
 - Date voucher issued

Note: Voided vouchers shall also be logged into the Facility Uniform Voucher Reconciliation Log for accountability purposes.

- The employee shall take the remaining four copies of the voucher to the vendor.
- The vendor shall determine the sizes needed and issue the approved available uniform items.
- Upon issuance of the approved available uniform items, the vendor shall document the issuance of the uniform items and sign the four remaining copies of the voucher.

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- The employee shall also initial and counter-sign the voucher, confirming receipt of the various uniform items.
- The vendor shall retain all four copies of the voucher until the complete order is filled.
- Once the order is complete, the vendor shall retain the first two white copies of the voucher (pages 1 and 2) for business reconciliation and provide the employee with the yellow and pink copies (pages 3 and 4) of the voucher.
- The employee shall retain the yellow copy (page 3) of the voucher as their personal receipt.
- The employee shall, provide the pink copy (page 4) of the voucher to the facility Uniform Coordinator for processing.
- The issuing facility uniform coordinator shall log the return of the pink copy of the voucher (page 4) in the Facility Uniform Voucher Reconciliation Log, noting the date items received on the same line as the initially issued, like-numbered voucher.
- The facility uniform coordinator at the camp shall attach the pink and green copies of the voucher to each other and shall maintain them in a monthly file. Voided vouchers shall also be maintained in the monthly file.
- By the 5th of each month, the facility uniform coordinator shall for youth the Facility Uniform Voucher Reconciliation Log, along with the pink and greens vouchers, to the respective RTSB Bureau uniform coordinator.
- The Bureau uniform coordinator shall for youth the Facility Uniform Voucher Reconciliation Log to the Management Services Bureau Office for budget-tracking and vendor remuneration purposes.
- The Bureau uniform coordinator shall maintain a copy of the log and voucher forms for accountability purposes.

Replacement of Uniforms

When a staff member's Department property is lost or stolen, the following procedures shall be followed:

- If the property that was lost or stolen consisted of any of the below noted items, a police report must be filed by the staff in the jurisdiction where the

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loss occurred:

- Uniform items on which a badge or emblem is attached
 - Probation identification card
 - Metal probation badge
 - Oleoresin capsicum spray container
 - Handcuffs
- The staff shall complete a Special Incident Report (SIR) regarding the loss. The staff shall also complete a Uniform and Equipment Replacement Request (UERR) form.
- The staff shall present the completed SIR, the completed UERR, and any applicable police report to his or her assigned supervisor for Review and consideration.
- The supervisor shall review the documents and note his or her comments on the UERR and sign the UERR indicating which items the Department, after review and approval by the Director, shall consider replacing or shall be paid for by the employee. The supervisor shall for youth these documents to the Director for review and consideration.
- The Director shall review the matter and determine the staff member's degree of responsibility for loss. If the Director determines that the staff member was responsible or negligent, or that the loss was preventable, the Director shall recommend that the employee pay replacement cost. In addition, the Director may recommend that appropriate remedial or disciplinary action be taken in accordance with existing Department guidelines. If the Director determines that the staff member was not at fault or only partially responsible for the loss, the Director shall determine which items the Department shall replace at no cost to the employee. The Director shall then complete and sign the UERR, noting the type and quantity of items that the Department shall replace at no cost to the employee, and the type and quantity of items which shall be paid for by the employee.
- The Director shall instruct the facility uniform coordinator to prepare a Uniform and Equipment Issuance Voucher, noting the type and quantity of items that the Department shall replace at no cost to the employee, and the type and quantity of items which the employee must pay for at his or her own expense.
- The facility uniform coordinator shall provide the employee with the first four copies of the voucher and retain the green copy (page 5 — last page) of the voucher.
- The employee, after receiving the voucher, shall follow the steps outlined

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above in the section titled Initial Uniform Issuance Voucher to acquire the approved items.

- After providing the employee with the voucher, the facility uniform coordinator shall attach the UERR and any applicable Special Incident Reports and/or police reports to the green copy (page 5) of the voucher and follow steps five (5) through eighteen (18) as outlined above in the Initial Uniform Issuance Voucher section.

Damage to Department Uniforms/Equipment While on Duty

The Department will replace uniforms and equipment damaged while in the course of the employee's duties. Staff whose Department property is damaged while on duty shall:

- Complete a Special Incident Report regarding the damage to the uniform part(s)
- Follow the procedures outlined above in Replacement of Uniforms.

Note: A police report is not required when equipment is damaged while on duty.

Purchasing Items at Gall's Stores

Staff may purchase additional Department-approved uniforms or equipment at their own expense from any Gall's store location without a voucher. Staff shall be required to show two (2) forms of pictured ID (Driver's License and Probation Employee ID) for any transaction to occur. Vouchers are required to obtain the initial uniform, or any Department- purchased replacement due to work related damage.

Long-Sleeved Shirts: Staff may purchase long sleeve shirts approved by the Department directly from any Gall's store location at their own expense. The Department shall continue to be responsible for purchasing long sleeve shirts for those staff who have visible arm tattoos. The Director shall approve Department - purchased long-sleeved shirts by signing a voucher.

Shorts: RTSB staff working in a camp may wear Department-approved khaki colored shorts purchased at their own expense from Gall's. Shorts may be worn only from May 1 through September 30 of each calendar year.

Rank Pins

Staff shall be issued two pins identifying their current rank within the Department. One pin shall be worn as part of the approved uniform. It shall be placed lengthwise, centered, at the base of the left lapel. Staff shall be issued new pins

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upon change of rank.

2109 USE OF CELLULAR TELEPHONES AND ELECTRONIC DEVICES IN THE WORKPLACE

Safety, security and professionalism are important components of our delivery of services. The presence of personal electronic devices can distract us from our core service delivery, reflect negatively on the professional workplace environment, and genuinely compromise safety within our operational units.

The use of personal cellular phones shall be limited during work hours to emergency situations only. Personal cellular phones shall remain on vibrate or silent mode while on duty. Camp staff may not use hands-free cellular phone devices (headsets, Bluetooth-like devices, etc.) in the workplace at any time. Any other use of County-authorized cellular telephones and/or hands-free devices in the workplace, if necessary for department business purposes, shall be used with professional courtesy so as to avoid disturbing nearby coworkers.

All non-work related non-emergency personal cellular phone communication shall be conducted during approved break periods only, and in areas not accessible by camp youth (such as staff bedrooms or outside the main entrance to the facility). The use of County-issued cellular phones is covered under existing guidelines.

Camp youth shall not be allowed to possess or use personal cellular phones for any reason.

Personal electronic devices shall be prohibited from being brought into Probation facilities except as defined within this section. These devices include, but are not limited to:

- DVD players, iPods, MP3 players, radios, and any other video, television, and/or audio equipment
- Laptops or portable word processors
- Game Boys or other handheld games

It is recognized that circumstances exist when devices may be needed in the workplace for legitimate County business, or for special events. For example, an electronic device may be brought into camp with supervisor or Director approval. Each situation where an exception to this section is needed should be individually handled on a case-by-case basis with the pre-approval of the workplace supervisor or Director.

Should the need arise, camp Directors are authorized to prohibit staff and/or visitors from bringing personal electronic devices, including cellular telephones, into the facility to facilitate ongoing safety and security.

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2110 NON-DISCRIMINATION POLICY

DSB & RTSB NON-DISCRIMINATION POLICY PERTAINING TO YOUTH AND PEACE OFFICER BEHAVIOR (DIRECTIVE 1221)

It is the policy of the Department 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.

All youth within the facility shall have fair and equal access to all available services, placement, care, treatment, and benefits. At no time shall youth be placed in restrictive housing or classifications based solely on the above mentioned categories.

(Meets standards set forth in Title 15, Section 1324(D)(h) (k)

Discrimination is defined as the act of showing prejudice or intolerance to youth an individual(s) based on the basis of actual or perceived race, ethnic group, ancestry, national origin, color, religion, sex, sexual orientation, gender identity, mental or physical disability, including HIV status.

All employees are personally liable under the California Fair Employment and Housing Act (FEHA) for unlawful harassment. Specifically Government Code Section 12940(h)(3) states:

"An employee of an entity subject to this subdivision is personally liable for any harassment prohibited by this section that is perpetrated by the employee, regardless of whether the employer or covered entity knows or should have known of the conduct and fails to take immediate and appropriate corrective action."

All youths housed in our facilities shall have fair and equal access to all available services, placement, care, treatment, and benefits. In carrying out various functions and duties of RTSB, all staff are required to adhere to the County's non-discrimination policies pertaining to all individual(s) including youths in our custody.

The Department's non-discrimination policy mirrors County policies and State and Federal non-discrimination laws. The primary laws prohibiting discrimination in employment and provision of services are delineated in the statutes of Title VII of the

Civil Rights Act of 1964, as amended, and the Fair Employment and Housing Act (FEHA).

Incidents of discrimination shall be thoroughly investigated by the appropriate bureau and discipline and/or corrective action initiated where warranted. In addition, staff who fail to comply with these policies and laws may be subject to criminal prosecution

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and/or departmental disciplinary action, which may include dismissal from County service.

In carrying out the functions and duties of the Department, all employees are required to adhere to the County's non-discrimination policies.

2111 SEXUAL HARASSMENT

Sexual harassment is a form of unlawful sex discrimination that is a violation of Title VII of the Civil Rights Act of 1964 as amended. It is the policy of the County of Los Angeles and the Probation Department that sexual harassment is prohibited and will not be tolerated. All complaints will be investigated and will result in disciplinary action when warranted.

Types of Sexual Harassment Include:

- Written- Sexually suggestive or obscene letters, notes, invitations, cartoons, posters or electronic mail
- Verbal - Sexually explicit comments, slurs, jokes, remarks, epithets, whistles, catcalls, threats, insults, pressure for dates or propositions
- Physical - Touching, assault, attempted rape, impeding movement or blocking movement
- Visual - Displaying sexually suggestive objects, pictures, cartoons or posters; leering or making sexual gestures

State and federal laws mandate that employees have a right to work in an environment that is free from all forms of discrimination, including sexual harassment. Federal guidelines state that unwelcome sexual advances, requests for sexual favors and other verbal or physical conduct of a sexual nature are considered sexual harassment

When:

- Submission to such conduct is either explicitly or implicitly made as a term or condition of an individual's employment.
- Submission to or rejection of such conduct by an individual is used as a basis for employment decisions affecting that individual.
- Regardless of intent, such conduct has the purpose or effect of unreasonably interfering with an individual's work performance or creating an intimidating, hostile or offensive working environment.

Managerial and Supervisory Responsibility

Managers and Supervisors are legally responsible for reporting complaints of sexual harassment to the Probation Department's Office of Affirmative Action.

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Failure to report a complaint is grounds for disciplinary action. According to law, managers and supervisors can be held personally liable in resultant civil action. It is the policy of the Probation Department that all allegations of sexual harassment must be reported.

2112 USE OR POSSESSION OF ALCOHOL AND/OR ILLEGAL DRUGS

DIRECTIVE 1199 --- POSSESSION OF ALCOHOL, DRUGS AND WEAPONS IN JUVENILE FACILITIES

Employees are prohibited from being in possession or under the influence of any intoxicant or controlled substance on county property or while on duty.

INTRODUCTION

It shall be the policy of the Probation Department to forbid any person from knowingly sending, bringing into, or assisting in bringing into any Los Angeles County facility (camp or the Dorothy Kirby Center) any controlled substances, drugs/non-controlled substances, alcohol, prescription medication not prescribed for their specific use, firearms or other weaponry, objects modified for use as weapons, or explosives of any kind.

Failure on the part of any Probation Department employee to observe these restrictions shall represent a violation of Probation Department policy, as well as statutory law pursuant to PC4573 (Controlled substances; bringing into prison, camp, jail, etc.), PC 4573.5 (Alcoholic beverages or drugs other than controlled substances; bringing into prison, camp, jail, etc.) or PC4574 (Firearms, deadly weapons or explosives; bringing into prison, camp, jail, etc.).

EXPECTATION

If any county employee is found to have violated this policy, they shall be subjected to Departmental disciplinary action, up to and including discharge, as well as possible criminal prosecution. All other individuals visiting a juvenile facility, found or believed to be in violation of these statutes shall be subject to arrest and criminal prosecution.

Juvenile facilities staff shall have the right and responsibility to deny access to any person(s) suspected of attempting to violate this policy, or otherwise is believed to represent a potential threat to the facility's safety and security, and/or that of any occupants' therein.

SEARCH POLICY

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In support of the above expressed Probation Department policy and to ensure for facility safety and security, the following shall at all times be subject to search and seizure:

- All persons entering a juvenile facility;
- Clothing items worn or carried;
- Personal property brought to the facility;
- Containers;
- Purses/bags;

As well as all areas within any county juvenile facility, including but not limited to:

- Facility lockers/storage areas;
- Break-rooms;
- Facility furniture;
- Sleeping areas;
- Staff and guest vehicles entering onto county property.

As indicated, this search policy shall apply equally to all county employees, facility staff, contractors and guest to any juvenile facility and, with respect to Probation Officers, shall be subject to the provisions of the Public Safety Officers Procedural Bill of Rights, Government Code Section 3300 et seq.

2113 OBSERVANCE OF WORK HOURS

Within limits imposed by County government and applicable Memoranda of Understanding, and in accordance with the needs of the Department and past practice, the camp Director sets the work schedule at his or her work location and may authorize deviations from the established work schedule. Employees must adhere to their assigned work schedule.

Employees are expected to arrive at and depart from the workplace as scheduled. Employees are responsible for keeping their supervisor informed if arriving or leaving other than as scheduled. Generally, the supervisor should be informed of schedule deviations in advance, and in writing when practical.

With the exception of peace officer assignments supervising detained youth in halls and camps, employees are entitled to two 15-minute break periods in an eight-hour shift. The availability of breaks for hall and camp peace officers is based on operational need, and the need to allow staff reasonable opportunities to use the restroom. Like meal periods, break periods may not be arranged at the end of the day in order to shorten the workday. Two break periods may not be combined to create one longer break, and the meal period may not be combined with break periods to create a longer meal period.

2114 CHILD ABUSE REPORTING POLICY FOR JUVENILE DETENTION FACILITIES

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AND THE DOROTHY KIRBY CENTER

(DIRECTIVE 1187)

It is the policy of the Los Angeles County Probation Department that all allegations of suspected child abuse shall be reported immediately, or as soon as practically possible, to a local law enforcement agency serving that facility in accordance with Penal Code Section 1165.9 (Reports of Suspected Child Abuse or Neglect).

Each facility shall post the name and telephone number of the local law enforcement facility serving that facility and the staff office and the supervisor's office.

Incidents involving excessive or unnecessary force that do not appear to involve suspected child abuse shall not be referred to the local law enforcement agency serving this facility, but shall be referred to the Probation Department's Child Abuse Special Investigation Unit (CASIU).

Facility administrators or supervisory staff that becomes aware of any allegations related to reasonable suspicion of an incident of child abuse or excessive and/or unnecessary use of force shall ensure that each of these incidents are immediately reported to the Child Abuse Special Investigation Unit. The CASIU director shall ensure that these allegations are responded to and investigated in a timely and thorough manner.

All peace officers have an obligation to keep youths in custodial facilities reasonably safe and shall ensure that youths that may be victims of child abuse or neglected are kept safe pending any law enforcement agency and/or CASIU interview.

The Probation Department shall provide child abuse training to custodial staff assigned to juvenile facilities during juvenile counselor CORE training and shall provide remedial training as necessary.

STATE OF CALIFORNIA CHILD ABUSE AND REPORTING ACT (CANRA)

The California Child Abuse and Neglect Reporting Act (CANRA) outlined in Penal Code Sections 11164-11174.4, requires certain childcare and law enforcement professionals, known as mandated reporters, to report known or suspected instances

of child abuse or neglect to law enforcement, whether the incident occurred while in detention or prior to detention. Mandated reporters include:

- **Peace officers;**
- **Teachers, school counselors and administrators;**
- **Medical staff;**
- **Mental Health staff;**
- **All other professionals as defined in Penal Code Section 1165.7.**

REPORTING REQUIREMENTS:

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A mandated reporter must make a report whenever, in his/her professional capacity, or within the scope of his/her employment, he/she has knowledge of, or observes a child whom the mandated reporter knows or reasonably suspects has been the victim of child abuse or neglect.

REASONABLE SUSPICION:

Reasonable suspicion occurs when it is objectively reasonable for a person, based upon facts that could cause a reasonable person in a like position, drawing upon his/her training and experience, to suspect child abuse or neglect has occurred.

TYPES OF REPORTABLE ABUSE AND NEGLECT:

Mandated reporters must report the following types of child abuse and neglect at a minimum. The list provided below is considered a basic guide. A complete listing of type of reportable abuse and neglect are contained in the California Penal Code.

1. Sexual abuse/assault

1. Sexual assault – includes rapes, statutory rape, incest, sodomy, lewd or lascivious acts upon a child, oral copulation, sexual penetration and child molestation;
2. Sexual exploitation – includes matters depicting Youths engaged in obscene acts, assisting, including persuading or coercing a child to engage in prostitution or any type of video, film or other media which involves images of a sexual nature.

2. Neglect

- a. Severe – includes neglect, failure of a caregiver to protect a child from severe malnutrition or a medically diagnosed failure to thrive. It also includes situations where the caregiver willfully causes or permits the body or health of a child to be in danger;
- b. General – includes neglect, negligent failure of the caregiver to provide adequate food, shelter, clothing, medical care and supervision even though physical injury has not occurred.

3. Physical Abuse

- a. Willful harm - includes harming or injuring a child or endangering the personal health of a child;
- b. Unlawful corporal punishment – includes situations where a caregiver willfully inflicts upon a child any cruel or inhumane punishment or any injury resulting from a traumatic condition;
- c. Non-accidental injuries – includes all other types of physical injuries inflicted upon a child by another person other than by accidental means.

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4. Emotional Maltreatment (Psychological Abuse)

- a. Willful infliction or unjustified mental suffering on a child;
- b. Permitting a child to suffer unjustified mental health suffering;
- c. Belittling or berating a child;
- d. Making unreasonable demands on a child, or invoking unreasonable expectations;
- e. Objectifying the child through comments related to the child or family;
- f. Rejecting the child in a private or public forum and causing the child to feel unwanted, unneeded or at risk.

REPORTING SUSPECTED CHILD ABUSE TO LOCAL ENFORCEMENT AGENCIES

All Peace Officers assigned to the camps and the Dorothy Kirby Center are mandated reporters and have a legal obligation to report instances of suspected child abuse to local law enforcement agencies serving the facility.

Any mandated reporter who has knowledge of or observes a child in his/her professional capacity or within the scope of his/her employment whom he/she knows or reasonably suspects has been the victim of child abuse or neglect shall report suspected incidents of abuse or neglect to local law enforcement serving the facility **immediately, or as soon as practically possible**, by telephone and shall prepare and send a written report thereof within 36 hours of receiving the information concerning the incident (PC Section 11166).

Incidents of suspected child abuse shall be reported to local law enforcement agencies telephonically initially and then in writing utilizing a Suspected Child Abuse Report. The Suspected Child Abuse Report form is commonly referred to as a "SCAR." Written reporting is affected by faxing or scanning and emailing a copy of the SCAR to local law enforcement agencies serving the facility.

Staff on Probation, the Department of Mental Health, Juvenile Courthouse Services or the Los Angeles County Office of Education that files a SCAR on behalf of detained youth in camp or the Dorothy Kirby Center shall **immediately** report their telephonic contact with law enforcement through the facility's Duty Supervisor, and shall provide the Duty Supervisor with a copy of the SCAR prepared on behalf of the youth. The Duty Supervisor shall conduct a follow-up assessment of the situation to ensure that the SCAR was filed in a timely manner and shall ensure that the incident is reported to the CASIU.

It should be clearly understood that the Peace Officer staff are mandated reporters and as such are required to file their own SCAR report with local law enforcement as soon as they reasonably suspect that child abuse has occurred. Staff reporting their concerns to the supervisor or administrative staff does not meet the reporting requirement.

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Supervisor and administrative staff at the facility shall not impede or delay the reporting of suspected child abuse to local law enforcement for any reason.

REPORTING SUSPECTED CHILD ABUSE TO THE CHILD ABUSE SPECIAL INVESTIGATION UNIT (CASIU)

All incidents that occur within probation facilities and result in the preparation of a SCAR shall also be immediately reported to the Child Abuse Special Investigation Unit (CASIU). The requirements for notifying the CASIU of instances of suspected child abuse is via email utilizing the SIU email address in the Probation Department's global email address book. The formal email address for CASIU is: siu@probation.lacounty.gov. Staff requiring guidance regarding the reporting of incidents to the CASIU shall contact the CASIU Supervisor or Director at (626)356-5307 for a consultation, or they may email the SIU unit and the on-duty investigator will receive the query and will ensure a response to the staff.

The email notification should include the following information:

- Date and time;
- Location of facility (facility and unit) and facility main phone number;
- Name of youth(s) involved;
- Name of involved staff;
- Nature of allegation;
- Duty supervisor contact number;
- Facility contact phone number;
- A scanned copy of relevant documentation and reports (SCARS, preliminary incident notification, etc., should be included in the email whenever possible).

In addition to the incidents of suspected child abuse, other incidents involving allegation of excessive and/or unnecessary force, or other incidents that require investigation of potential staff misconduct where a youth is involved, shall also be reported to CASIU. The preparation of the SCAR is not required on each and every incident report to CASIU, as there are incidents that occur (such as excessive or unnecessary force) that may not rise to the level of suspect child abuse.

WHEN TO REPORT INCIDENTS TO THE CASIU

Incidents involving allegations of abuse, excessive and/or unnecessary force shall be reported to the CASIU immediately upon the supervisor or administrator becoming aware of the incident's occurrence. Supervisor and administrative staff shall ensure the youth safety and secure all relevant documents relating to the incident pending any law enforcement and/or CASIU interviews.

Once a youth makes an allegation that meets the criteria for reporting suspected child abuse, he/she should not be subjected to further interview or asked to write either

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initial or subsequent affidavits regarding the incident. CASIU staff will interview the youth to obtain any information related to the incident.

If the allegation surfaces in the grievance filed by the youth and meets the criteria for reporting suspected child abuse, the youth shall not be subjected to further interview or asked to write either initial or subsequent affidavits regarding the incident. A CASIU staff will interview the youth to obtain any additional information related to the incident. The facility administrator shall close the grievance and notify the youth that the matter is pending investigation.

If the allegation surfaces during any Safe Crisis Management (SCM) Supervisory Review subsequent to a physical intervention incident, the interviewing with respect to youth and any other youths or staff related to the SCM incident shall be suspended. The supervisor may continue conducting the administrative portion of the review that does not involve interviewing staff or youths. The supervisor conducting the SCM review shall not prepare the written SCM supervisory summary related to the incident and shall just note on the summary page that the incident review was suspended pending the investigation by the CASIU.

CASIU RESPONSE TO THE INCIDENT

Upon receiving the email notification, a CASIU investigator will contact the Duty Supervisor at the facility and make arrangements to respond to the facility. All efforts shall be made by the facility initiator and supervisor to accommodate responding CASIU investigators by providing all relevant documents related to the incident as well as a confidential setting in which the youth and/or staff may be interviewed. CASIU investigators are authorized to access and interview all pertinent youths, staff and other parties who may have information related to the investigation.

Staff that are “subjected” of or “witness” to particular incidents of alleged child abuse, excessive force or unnecessary force shall cooperate fully with CASIU investigators in accordance with Probation Directive 1211 (Employment Cooperation Related to Administrative Hearings and Departmental Investigations). Staff shall not discuss the incident with other staff or youths. Each staff has responsibility to be truthful in their written and verbal statements, and shall fully disclose all information to the investigator. Employees who intentionally provide false information during an investigation will be subjected to disciplinary actions up to and including discharge.

During the course of the investigation, any probation staff assigned to the facility that is a named subject of a Suspected Child Abuse Report shall be reassigned to a post at the facility that does not involve contact with the youth pending an investigation/review of the incident by the CASIU. At the direction of the facility Senior Director or director, the staff may be reassigned to another work location or reassigned to their home during the investigation process.

Staff or partner agencies, such as the Department of Mental Health, Juvenile Courthouse Services or the Los Angeles County Office of Education that is named

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subject of the Suspected Child Abuse Report may be denied access to the facility by the facility Senior Director or director during the investigative process. The need to reassign staff and/or limit access to the facility during each investigation process will be dependent on the level and type of the allegation made. The facility Senior Director or director shall, prior to limiting access, make timely conduct with the partner agency's administrator to collaborate regarding the need to limit facility access to any partner agency staff during the investigatory process.

2115 REPORTING ABSENCES AND TARDINESS

Employees are responsible for promptly notifying their immediate supervisor or designee in instances of unscheduled absence or tardiness. Notifications must be made in a timely manner to ensure adequate work coverage.

For post positions, timely notification must be made as soon as possible, but no later than four hours prior to the start of the shift. Non-post positions require notification within one hour after scheduled reporting time.

If an employee is involved in an accident, medically incapacitated, or otherwise injured, notification shall be made as soon as feasible. Documentation of the accident, medical incapacity, or injury will serve to support an unavoidable delay in notification.

Upon request of the supervisor, an employee may be required to show proof of need to be absent in accordance with provisions outlined in the Salary Ordinance.

2116 EMPLOYEE TIMESHEETS

As a part of the countywide conversion effort to electronic Human Resources (eHR) and the Probation Department's commitment to the Chief Executive and Auditor-Controller's Offices, effective July 31, 2011, traditional Department paper timecards will no longer be utilized by Probation Department employees. All

Employees must use an eTimesheet via the Employee Self Service (ESS) Time Collection System to report time and attendance, avoiding Proxy data entry whenever possible to avoid under/overpayments and/or benefit time discrepancies. County Fiscal Policy requires each employee to ensure that time reported on his/her behalf, by a supervisor or an ESS Proxy is accurate.

Beginning August 2011, the Department's traditional paper timecard and Payroll Change Slip cannot be accepted or processed. The ESS eTimesheet data entry and the new ESS Correction Form will replace the use of the traditional paper timecard and the Payroll Change Slip. The ESS Correction Form must only be used on an exception basis and it is not an alternative to the electronic ESS eTimesheet. Additionally, all payroll documents are processed on an incoming, flow basis. Late submission of eTimesheet/ESS Correction Forms can result in late overtime payments, benefit time errors, and/or under/over employee salary payments.

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Please refer to ProbNet search guidelines to processing Employee eTimesheet

2117 CHANGES OF ADDRESS

Each newly assigned camp employee shall complete an Employee Information Update Sheet (EIUS) prior to completing the first shift. Should any information on this form change, the employee shall immediately notify his or her supervisor and complete a new EIUS form.

2118 HOME WHILE ILL/INJURED

When an employee is injured or suffers an illness on or off duty, rendering him or her unable to return to work, the employee will remain home during the period of time that he or she would normally be at work. The employee will provide his or her immediate supervisor with a direct contact telephone number where he or she can be reached.

If the injury or illness is expected to continue, or in fact continues for a period greater than five consecutive days, the employee shall be placed on a Monday through Friday schedule from 8 a.m. to 5 p.m. The supervisor shall instruct the employee in writing that he or she is required to remain at his or her residence during these hours. A waiver from home assignment for short periods of time for medical appointments, therapy, Civil Service exams, etc., may be obtained with prior approval of the employee's supervisor.

It is the supervisor's responsibility to make regular contact with the employee throughout the recovery process. Regular contact must be documented, and at a minimum include calling the employee weekly to determine the status of the employee's general welfare, return to work status, and morale. Occasional random home visits may also be performed. Significant changes to the employee's general welfare shall be reported to the Bureau Chief and a remedy for the concerns will be sought on the employee's behalf. It is the goal of the supervisor to expedite the return to work of the employee upon recovery or the development of a temporary accommodating assignment while the employee's recovery is ongoing. The Return to Work Coordinator may also contact the attending physician to inform the physician of the availability of temporary light- duty workplace accommodations that address the employee's work restrictions.

If it is found that the employee is not complying with this policy, the employee will be subject to disciplinary action, wage or benefit interruption, and possible termination from County service.

Employees absent in excess of one complete 56-hour shift due to illness or injury shall present, prior to return to work, a written release from the attending physician indicating the employee's ability to return to work. Approval to return to work is contingent upon review of the medical release by the Department's Return

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to Work Unit.

2119 CITIZEN'S COMPLAINTS

Section 832.5 of the California Penal Code requires that specific procedures be established and made public for investigating citizen complaints against Probation Department personnel. Therefore, it is the policy of the Residential Treatment Services Bureau to respond to all complaints from citizens in a positive and professional manner. While it is not possible to resolve all complaints or to satisfy all complainants, every citizen complaint will be taken seriously and handled accordingly.

Procedure

- The complainant is encouraged to submit his or her complaint in writing. The complainant may elect to state his or her complaint in-person or by telephone. Should this occur, staff shall be courteous and helpful in determining the nature of the complaint and in explaining the procedures necessary to resolve the problem. Particular effort shall be made to remain calm and courteous as it is likely that the complainants will be agitated, even angry, during the presentation of their complaint.
- In any case, the staff person receiving the complaint shall determine the nature of the problem and, if possible, resolve it immediately.
- Should the problem be complex or beyond the authority of the receiving staff, the complainant shall be asked to submit it in writing. This shall enable line staff to forward the matter to the appropriate Supervisor or Facility Director without any distortion of the facts.
- If the complainant refuses to submit the complaint in writing, the receiving staff shall attempt to summarize the problem in his/her own words. In either case, the complainant's name, telephone number, and address shall be requested in order for the Supervisor to call for more information and to be able to make a response.
- All allegations of suspected child abuse shall be reported immediately, or as soon as practically possible to the local law enforcement agency serving that facility in accordance with Probation Department Directive 1187 (Child Abuse).

Citizens' Complaint Accountability

- Upon receipt of the complaint, the facility Director or designee shall review the complaint and send written notification to the RTSB Bureau Chief or designee and the Department Ombudsman within 24 hours or by the next business day.
- The facility Director or designee will respond in writing and/or telephonically to the complainant within two (2) weeks acknowledging receipt and indicating the status of the complaint.
- The facility Director or designee should complete his or her inquiry within in two (2) weeks.

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- Upon completion of the inquiry, the facility Director or designee shall provide written and/or telephonic notification to the complainant of the results of the inquiry.
- The facility Director or designee shall for youth all related reports, including attachments, to the RTSB Bureau Chief or designee and Ombudsman.
- The facility Director or designee shall be responsible for maintaining a log of all complaints facility.

Compliant Forms

The citizen making the complaint shall be notified by the Department via letter within two weeks of the receipt of the complaint that the complaint has been received and is being reviewed/investigated. The citizen making the complaint will be informed via letter by the Department when the investigation is completed.

(Meets standards set forth in Title 15, Section 1361)

2120 NARCOTICS DETECTION CANINE PROCEDURES (Directive 1440)

INTRODUCTION

It is the policy of the Probation Department to have narcotics detection canine searches conducted by a vendor or the Special Enforcement Operations (SEO) Canine unit in all Probation detention facilities. "Passive Alert" narcotics detection canines will be utilized to search the Department's detention facilities, which include juvenile halls, camps and Dorothy Kirby Center (DKC), in an effort to ensure the safety and security of the youth, staff, and visitors in the facility. Narcotics detection canine searches shall be conducted on a random basis. The purpose of these searches is to deter and prevent transportation, possession or distribution of prescribed medications or illegal narcotics contraband within the Department's detention facilities and to ensure that the facilities are safe and secure.

MANAGEMENT SERVICES BUREAU

The Management Services Bureau (MSB) shall ensure that proper signage is posted and visible on the exterior of the facility, as well, as in the visitors' waiting areas. This signage shall notify assigned personnel and visitors that searches will be conducted by narcotic detection canines.

DIRECTOR, SUPERVISOR, OR CAMP ACTING SUPERVISOR

A Director, Supervisor, or Camp Acting Supervisor shall:

1. Greet the canine handler upon arrival at the facility;
2. Escort the canine handler/canine while searching the facility;
3. Remain with the canine handler/canine at all times;

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4. Monitor visitors waiting to enter the facility if the canine alerts on a visitor and ensure the Vapor Tracer or Itemizer is used on these visitors;
5. Ensure that the canine handler/canine has no physical contact with youth or staff;
6. Complete a "Proof of Services Invoice" which shows the date and hours the canine handler worked in the facility;
7. Obtain the canine handler's signature on the "Proof of Service Invoice";
8. Forward a copy of the "Proof of Service Invoice" to the Camp Director;
9. Follow the guidelines set forth in the Public Safety Officer's Procedural Bill of Rights Act – Government Code Section 3309, if the canine alerts on a Peace Officer or the personal belongings of a Peace Officer during the course of the search;
10. Submit a Special Incident Report (SIR) for any contraband found during the visit;
11. In the event the canine becomes aggressive towards youth, staff or visitors or significant contraband is found that meets the criteria of endangering the facility, youth or staff, such as weapons and/or illegal substances, the manager shall contact the Bureau Chief via a Preliminary Incident Notification (PIN). If uncertain if a PIN is required, contact the RTSB Consultant or Bureau Chief for further clarification;
12. Follow the guidelines outlined in Directive 1123 "Crime Scene Evidence Preservation" if an illegal substance is found during the search;
13. Notify the Project Manager (DSB Special Assistant, Melissa Soto) of any issues related to the canine handler or the canine; and
14. Contact the Project Manager if an unscheduled search is requested due to suspicion that narcotic substances may be in the detention facility.
15. Complete the K9 Search Form (Attachment A) at the conclusion of visit and immediately submit to appropriate parties as indicated on the form.

Prior notification of visits shall not be made available to staff or youth. Scheduling visits shall be arranged by the Project Manager in conjunction with the Bureau Chief.

UNIT/DORM STAFF

Staff assigned to the unit/dorm shall:

1. Avoid physical contact with the canine handler and the canine;
2. Ensure youth do not have physical contact with the canine handler or canine. Youth are to be taken to another location of the unit/dorm or staged outside while the canine is searching;
3. Ensure no one (youth or staff) interferes with the canine handler or canine while searches are being conducted; and
4. Contact a Director immediately, if the canine alerts on a Peace Officer or the personal belongings of a Peace Officer during the course of the search.

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CANINE HANDLER

The canine handler shall:

1. Report to the Director or Supervisor upon arrival at the detention facility;
2. Avoid physical contact with youth and/or staff;
3. Provide canine searches tailored to the needs of the juvenile halls, camps, and DKC, in an unobtrusive manner using "passive alert" canines;
4. Notify the escorting Director, Supervisor, or Camp Acting Supervisor of possible narcotic substances located by the canine; and
5. Be responsible for the proper collection and disposal of all canine waste.

NARCOTICS DETECTION CANINE SEARCH AREAS

- Administration Building
- Assessment Center
- Behavior Modification Store
- Breezeways
- Chapel – All areas inside, outside perimeter, restrooms, and sitting areas
- Clothing storage area
- Conference room areas
- Dayrooms
- Dining hall
- Earthquake supply areas
- Facility grounds
- Food storage areas and rooms, including freezers
- Gymnasiums – including rooms therein
- Hallways in all buildings
- Infirmary – Nurses' offices
- Janitorial closets and storage areas
- Kitchen and rooms therein
- Laundry room
- Library
- Linen closets
- Lockers and cubbyhole areas (youth only)
- Lounge areas
- Youth's living areas
- Miscellaneous storage areas
- Pantry areas
- Parking lots
- Perimeter and grounds near visiting area
- Personals
- Recreational areas
- Restrooms and portable toilets

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- School Building – all classrooms and restrooms in the school area
- Shower areas
- Supply closets
- Trash bins, trash cans, and wastebaskets
- Tool storage areas
- Utility rooms
- Vehicles used to transport youth
- Visitors in line waiting to enter the facility
- Visiting areas
- Warehouse

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Attachment A



**RESIDENTIAL TREATMENT SERVICES BUREAU
LOS ANGELES COUNTY PROBATION DEPARTMENT**



Facility: _____

K-9 Searches

Date: **Time:** Time In:
Time Out:

Escorting Supervisor or Director:

Name of Handler:

☐ Contract Canine ☐ SEO Canine Unit

Areas Visited by Canine		Any contraband found Yes or NO. If Yes, what was found?
1.		
2.		
3.		
4.		
5.		
6.		
7.		
8.		

COMMENTS:

Form to be completed after each K9 visit and sent to EDL-PROB RTSB ADMIN and Jeffrey Chang within 24 hours of the visit.

Rebuild Lives and Provide for Healthier and Safer Communities

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2121 PRELIMINARY AND FOLLOW UP INCIDENT NOTIFICATION (PIN & FPIN) PROCEDURES (Directive 1437)

The purpose of this Directive is to outline the process for reporting serious incidents that take place within Detention Services Bureau (DSB) and Residential Treatment Services Bureau (RTSB) facilities.

All serious incidents involving youth that take place in any juvenile institution and during transportation shall be documented and reported in the form of both a Preliminary Incident Notification (PIN) and Follow-up Preliminary Incident Notification (FPIN), forms Prob 1682 and Prob 1683, respectively. All serious incidents involving staff, that do not also involve youth, shall be reported on the Initial Notice of Special Incident, Prob 1685. All timelines, notifications and reporting requirements for serious incidents involving staff only are the same as the requirements delineated below for both the PIN and FPIN.

The Duty Supervisor shall report serious incidents telephonically and via email based on the notification and timeline requirements described below. Notification shall be made to the designated facility Director (Director/Assistant Director on Duty in DSB and RTSB), all other Directors and Assistant Directors assigned to the facility, Superintendent/Regional Director, Bureau Chief, Bureau Consultant, and Bureau Special Assistant. In the event the Bureau Chief is unable to be immediately notified, the Deputy Director shall be notified.

It is the responsibility of the Superintendent/Regional Director to review and approve all final versions of the PINs and FPINs to ensure the reporting forms are correctly completed and that any required FPINs are submitted.

SERIOUS INCIDENTS DEFINED

A serious incident shall be defined as one or more of the following:

SERIOUS INCIDENTS	PIN QUALIFYING DATE AND TIME
Any escape or attempted escape from a Probation facility, transportation vehicle or while a youth is attending any event or activity outside the facility;	Date and Time Escape became known
Any major disturbance at the facility (defined as having 10 or more youth involved);	Date and Time 10 youth or more involved is determined
Any suicide or suicide attempt;	Suicide: Date and Time of Incident Suicide Attempt: When DMH determines it is a Suicide Attempt
Death of a youth while in custody;	Date and Time of Incident became known
Any other situation endangering the facility, youth or staff;	Date and Time Incident became known

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Any medical incident or serious injury to youth or staff requiring transport to an off-site medical facility;	Date and Time transport to medical facility	
Any incident related to sexual abuse and/or harassment as defined in Directive 1412: Juvenile - Prison Rape Elimination Act (PREA) For Juvenile Institutions Bureaus (Issued 01/04/2018);	Date and Time Incident became known	
Any incident or situation which may generate media interest or come to the attention of the Board of Supervisors;	Date and Time Incident became known	
Any incident or situation in which it is likely that the Chief Probation Officer may be contacted; and	Date and Time Incident became known	
An incident or situation which may be perceived as serious or have the potential to escalate to a serious incident.	Date and Time Incident became known	

Note: *The above definitions of serious incidents are not by any means an exhaustive list. If there is any doubt as to whether an incident is serious and warrants the submission of a PIN, it shall be the Duty Supervisor's responsibility to submit a PIN. The Bureau Chief or designee will disseminate the information as required.*

A PIN Qualifying Date and Time is when the incident met the criteria of becoming a PIN.

IMMEDIATE NOTIFICATION REQUIREMENTS

The Duty Supervisor has the primary responsibility to ensure that the Director/Assistant Director on Duty, Superintendent/Regional Director and Bureau Chief or Deputy Director are immediately notified of any serious incident via telephone. Immediate notification, or as time permits, shall be no later than one (1) hour. The Duty Supervisor shall call each level in turn until a person-to-person notification is made based on the following PIN Telephone Tree:

1. Director/Assistant Director on Duty;
2. Superintendent/Regional Director;
3. Bureau Chief;
4. Deputy Director (only when necessary).

When reporting any incident, the essential facts must be stated in a concise and logical manner and provide a clear summary of what is being conveyed: *Who, What, Where, When, How and Why.*

If the intended PIN Telephone Tree recipient is not available, the Duty Supervisor must leave a voicemail message that clearly provides the essential facts of the incident before calling the next level of management until a person-to-person contact is made.

After the Duty Supervisor completes his or her verbal person-to-person telephone conversation, a follow-up email that memorializes the person-to-person conversation must be sent to the Bureau Chief, Superintendent/Regional Director, Director on Duty, all

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other Directors/Assistant Directors assigned to the facility, Bureau Consultant and Bureau Special Assistant.

Once person-to-person telephone contact is completed by the Duty Supervisor, the PIN Telephone Tree recipient shall continue the notification process by reporting to the next superior officer listed in the telephone tree.

PRELIMINARY AND FOLLOW-UP INCIDENT NOTIFICATION SUBMISSIONS

The completed PIN form must be submitted via email within eight (8) hours of the serious incident. The completed form shall be forwarded to the Deputy Director, Bureau Chief, Superintendent/Regional Director, all facility Director(s) and Assistant Director(s), Bureau Consultant, Bureau Special Assistant and any parties designated by the Bureau Chief.

The PIN summary must include the date, time, name and title of the manager that received the person-to-person notification immediately following the incident, along with the name and title of the Duty Supervisor that made the notification.

In the event of exigent circumstances, which results in a delay of the PIN completion, the reason for the delay shall be reported to the Deputy Director, Bureau Chief, Superintendent/Regional Director, Director/Assistant Director on duty, all facility Director(s) and Assistant Director(s), Bureau Consultant, and Bureau Special Assistant by telephone and email before the eight (8) hour deadline. In addition, the reason for the delayed submission shall be summarized in the PIN summary.

The FPIN form must be submitted via email no later than seven (7) calendar days after the date of the serious incident. The FPIN form shall have the completed PIN summary and follow-up information included in the FPIN Report Narrative. The FPIN is mandatory for all injuries to youth that require a PIN.

PIN/FPIN Email Procedures

The PIN/FPIN transmission must include the following information in the email notification:

- Type in a Subject (such as, PIN BJNJH YOYV/Medical/Mental Health/etc.);
- Attach the PIN or FPIN in Word form to the email;
- Copy and paste the PIN summary or FPIN Report Narrative in the message body of email.

Note: A PIN or FPIN shall never be sent directly from a copy machine or machine with scanning capabilities. In addition, a PIN or FPIN is never to be submitted as a PDF. Refer to Directive 1215 – Scanned Document Distribution (Issued 05/08/2009) for document scanning procedures.

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PRISON RAPE ELIMINATION ACT (PREA) COMPLIANCE UNIT NOTIFICATION

When youth(s) are involved in an incident(s) of sexual abuse and/or sexual harassment, as defined in RTSB Section 1600 – Prison Rape Elimination Act (PREA), the Duty Supervisor shall include contact with the facility PREA Compliance Manager or designee as an immediate notification. Initial steps taken as directed by RTSB Section 1600 shall be included in the PIN Summary and/or FPIN Report Narrative. Completed PIN(s)/FPIN(s) shall then be sent to the PREA Compliance Unit via email:

PROB-PREA.Compliance@probation.lacounty.gov.

SYSTEMS ACCOUNTABILITY BUREAU (SAB) CRITICAL INCIDENT REVIEW (CIR) PROCESS

The Bureau Consultant or designee shall email the completed PIN/FPIN report to key personnel including the Deputy Director, other executive management, and SAB Bureau Chief (via email: *pin.cir@probation.lacounty.gov*) as directed in RTSB Section 1500 - *Critical Incident Review Process*.

PARENT/GUARDIAN/CAREGIVER NOTIFICATION

When a youth is involved in a serious incident that requires the completion of a PIN, at least three (3) telephonic contacts to the parent/guardian/caregiver need to be attempted within a 24-hour period of the incident occurring. Initial telephonic contacts and results shall be reported on the PIN. Continuing attempts to contact the parent/guardian/caregiver shall be reported on the FPIN. If telephonic contact was unsuccessful, it must be reported on the FPIN.

COURT/ATTORNEY NOTIFICATIONS

The Court and the youth's Attorney shall be notified of all serious incidents involving youth that require the completion of a PIN. If the serious incident occurs in RTSB, notification shall be made via form Prob 804, Information to Court Officer. If the serious incident occurs in DSB, notification shall be made via the appropriate Detention Observation Report (DOR) provided to the Court.

If the Bureau Chief or designee determines that the incident is a Critical Incident under the requirements of RTSB Section 1500 - *Critical Incident Review Process*, the Bureau Consultant or designee shall notify Public Defender and Alternate Public Defender that an incident has occurred but shall not send a copy of the PIN. The email notification shall only include the youth's name, date location, and description of the incident and the mail should be sent to:

Critical.Incident.Notification.PubDef.APD@probation.lacounty.gov

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PRELIMINARY INCIDENT NOTIFICATION

JUVENILE INSTITUTIONS

Use for Incidents Involving Youth

FACILITY _____	DATE ENTERED FACILITY _____
TYPE OF INCIDENT _____	GANG AFFILIATION _____
DATE AND TIME OF INCIDENT _____	707(b) WIC YES <input type="checkbox"/> NO <input type="checkbox"/>
PIN QUALIFYING DATE AND TIME _____	HRO (DSB only) YES <input type="checkbox"/> NO <input type="checkbox"/>
YOUTH'S NAME(S) _____	PDJ# _____
_____	PDJ# _____
_____	PDJ# _____ SDPO/OD ON DUTY _____
PRESENT OFFENSE(S) _____	

IMMEDIATE NOTIFICATIONS

Notifications Completed (See current "Preliminary Incident Notification" Directive)	Date/Time	Method of Contact (Phone, email, voicemail)
<input type="checkbox"/> Bureau Chief/Designee (Phone Confirmation)		
<input type="checkbox"/> Ombudsman (Child Abuse Only)		
<input type="checkbox"/> Court		
<input type="checkbox"/> Detention Observation Report		
<input type="checkbox"/> Information to Court Officer - Prob 804		
<input type="checkbox"/> Notice of Potential Violation - Prob 1111		
<input type="checkbox"/> DPO of Record		
<input type="checkbox"/> Medical		
<input type="checkbox"/> Parent(s) Name (List All If Multiple Youth)		
<input type="checkbox"/>		
<input type="checkbox"/>		
<input type="checkbox"/> PREA Compliance Unit (Sexual Abuse and/or Harassment)		
<input type="checkbox"/> Local law Enforcement		
<input type="checkbox"/> Other (List)		
Suspected Child Abuse (SCAR) submitted		
<input type="checkbox"/> Yes <input type="checkbox"/> No If yes, provide date and report number: _____		
Bench Warrant Requested <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Pending <input type="checkbox"/> N/A Date: _____		

If unable to contact the parent(s) or to provide required follow up medical information, use the FOLLOW UP PRELIMINARY INCIDENT NOTIFICATION FORM.

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**FOLLOW UP PRELIMINARY INCIDENT NOTIFICATION
JUVENILE INSTITUTIONS**

Forward to Bureau Chief within 7-days after forwarding of Preliminary Incident Notification (PIN)

FACILITY:	Reference Preliminary Incident Notification Dated:
MINOR'S NAME:	PDJ #:

NOTIFICATIONS LOG

If immediate notifications unsuccessful, note when notifications made

Parent/Guardian: PERSON (S) TO BE NOTIFIED:					
<u>TELEPHONIC CONTACT – 3 ATTEMPTS REQUIRED:</u>					
If no contact:	Date	Time	Contact	Contact Person	Comments
First Attempt			<input type="checkbox"/> Yes <input type="checkbox"/> No		
Second Attempt			<input type="checkbox"/> Yes <input type="checkbox"/> No		
Third Attempt			<input type="checkbox"/> Yes <input type="checkbox"/> No		

REPORT NARRATIVE – If follow up info is requested

Include follow up summary of incident, medical interventions, legal action taken or anticipated, staff disciplinary action and document closure of incident

SUBMITTED BY:

DATE:

PHONE NUMBER:

REVIEWED AND APPROVED BY:

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INITIAL NOTICE OF SPECIAL INCIDENT
JUVENILE INSTITUTIONS
(USE FOR INCIDENTS INVOLVING STAFF ONLY)

Facility: _____ Type of Incident: _____

Date and Time of Incident: _____

Date and Time of Report: _____

Staff Name: _____ Employee #: _____

SDPO/OD on Duty: _____

SUMMARY OF INCIDENT

(WHO, WHAT, WHEN, WHERE, WHY, AND MEDICAL ATTENTION OR OTHER CIRCUMSTANCES)

NOTIFICATIONS COMPLETED

	Date/Time	Method of Contact (Phone, Email, Voicemail)
<input type="checkbox"/> Bureau Chief/Designee		
<input type="checkbox"/> Local Law Enforcement		
<input type="checkbox"/> Medical		
<input type="checkbox"/> Family/Emergency Contact (of Staff)		
<input type="checkbox"/> Other		

Date Subsequent Report Due: _____ Submitted By: _____

No Further Report Required: _____ Phone Number: _____

Reviewed and Approved By: _____

CRITICAL INCIDENT DESIGNATION TO BE COMPLETED BY HEADQUARTERS

Is this a Critical Incident ☐ Yes ☐ No Reason for Critical Incident Decision: _____

Name of person making designation: _____

Date of Review: _____

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(Please cross reference with Section 1500 for information that is also applicable to this Section)

(Meets standards set forth in Title 15, Section 1341(2).)

2122 DRIVERS OF FLEET VEHICLES

(DIRECTIVE 1360)

Purpose

The Probation Department strives to provide its employees and its communities and services with the safest environment possible. In an effort to achieve this, the Department has installed Global Positioning Satellite (GPS) system technology on

its fleet of vehicles. The primary purpose is to enhance officer safety while operating vehicles and conducting field activities. The GPS monitoring of fleets services will allow the Department to enhance officer safety by providing a real time and archival information on a vehicle's location, speed, direction, and other information related to the operation and movement of the departmental lead vehicles.

Drivers of Fleet Vehicles

The operation of a fleet vehicle in the Department is a privilege and a responsibility. An employee who drives a departmental vehicle is responsible for adhering to all applicable laws, codes, and County and Department policies. Departmental employees are reminded that they must operate the Department vehicles in accordance with all laws, codes, and policies. The violation of such may result in loss of driving privileges and/or corrective actions up to and including discharge.

The Department may at its discretion utilize system generated random and/or other specific reports to monitor the appropriate utilization and operation of its vehicles, data from the GPS system may be used in connection with investigation specific to the operation of departmental fleet vehicles as well as other investigations that it deems appropriate. The data obtained may be utilized as the basis for a disciplinary action. Tampering with or attempting to destroy the GPS device or reports may result in disciplinary actions.

2123 BADGE AND IDENTIFICATION CARD

(DIRECTIVE 1363)

INTRODUCTION

The purpose of this directive is to establish guidelines and policies pertaining to badge and identification procedures.

PERFORMANCE EXPECTATIONS

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Employees issued a badge and/or identification card must adhere to applicable county and department policies and related laws that include, but are limited to:

- Los Angeles County Code Ordinance, Chapter 5.64 - County Badge Ordinance.
- County of Los Angeles Employee Handbook Performance Implications.
- Probation Department Policy Manual, Section 500 - Employee Time and 1100 - County Property and Personal Property.
- Notice #1544 - Procedures for Resignation/Termination/Transfers.
- Penal Code Section 830.5.

SECTION – A: DEFINITIONS AND EXPLANATION OF TERMS

Badge (As per chapter 5.64 - County Badge Ordinance) - Includes (lapel insignia), Cap-piece, seal and identification cards where applicable.

Replica (Keepsake Badge) - Duty badge issued to the officer encased in acrylic plastic.

Honorably Retired - Peace Officer has accepted a service or disability retirement - (Refer to Penal Code Sections 832-16690 and 25450). Additionally, the employee may not be qualified if the retirement is in lieu of discharge and/or criminal prosecution. Such shall be reviewed by the Chief Probation Officer or designee on a case by case basis.

SECTION – B: DEPARTMENTAL BADGES

A badge may be issued to the employee assigned to an authorized and sworn peace officer position. The employee must be in good standing and meet requirements set by the State of California for a peace officer.

An employee shall not have in his/her possession a badge of the County of Los Angeles Probation Department which has not been issued to the employee by the Department. Nor shall an employee possess a Departmental badge if the employee is authorized to possess the badge has not been terminated.

SECTION – C: BADGE & IDENTIFICATION CARD ISSUANCE PROCESS & RESPONSIBILITY

A newly hired employee shall be notified by Human Resources to schedule an appointment with Risk Management Unit Badge and Identification Card Coordinator to receive a badge and/or identification card. The sworn peace officer shall complete the badge assurance form.

A recently promoted sworn employee shall be expected to report to the Risk Management Unit Badge and Identification Card coordinator to obtain badge

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and identification card reflecting his/her new title.

In the event that an employee's badge or identification card is lost or stolen, the employee shall report the Risk Management Unit Badge and Identification Card Coordinator to obtain a replacement badge and/or identification card.

An employee who is returning from a suspension of more than 15 days or an extended leave, as defined in Probation Policy Manual, Section 500, of more than sixty (60) days shall coordinate with the Risk Management Unit Badge and Identification Card Coordinator to reclaim his/her badge and/or identification card.

SECTION – D: SURRENDER OF BADGE AND IDENTIFICATION CARD

An employee that will be absent because of suspension for one (1) or more days shall surrender his/her badge and identification card only to his/her immediate director or designated director. The employee and the director or designated directed shall complete the badge and identification surrender form. A copy of the completed form shall be forwarded to Risk Management Unit Badge and Identification Card Coordinator. The Director or designated Director shall be responsible for the safe keeping of a badge and identification card surrendered by an employee for fifteen (15) days or less.

A badge and identification card surrender for sixteen (16) days or more shall be forwarded to the Badge and Identification Card Coordinator, along with the Badge and Identification Card surrender form within three (3) business days for the duration of the employee's leave. In all cases, the Director or designee shall forwarded a copy of the badge receipt to the Badge Coordinator.

An employee anticipating an extended leave of absence, as defined in Probation emotion stability Department Policy such as defined for more than sixty (60) days shall coordinate with his/her Director to make an appointment with the Badge and Identification

Card Coordinator prior to the extended leave of absence and surrender the badge only to the Badge and Identification Card Coordinator.

An employee that is on an unscheduled leave for longer than three (3) days shall be required to surrender his/her badge and identification card. The employee's Director or designee shall track attendance and inform the Badge and Identification Card Coordinator if an employee is on an unscheduled leave or longer than three (3) days.

A newly promoted sworn employee is required to obtain a badge reflecting

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his/her new title. The newly promoted employee's Director shall contact the Badge and Identification Card Coordinator to coordinate the assurance of a badge reflective of the new position. In cases where directors or the newly promoted employee does not contact the Badge and Identification Card Coordinator, the Coordinator will mail a notification to the Director requiring that the Director schedule an appointment for the employee to receive a replacement badge. The old badge shall be surrendered at the time the new badge is issued.

SECTION – E: DEPARTMENT BADGE AND IDENTIFICATION CARD INSPECTION & RESPONSIBILITIES

A departmental identification card shall be issued to each employee of the County of Los Angeles Probation Department by the Badge and Identification Card Coordinator. Identification card shall be subject to the same regulations that apply to the issuance, possession, display, loss and return of a badge (County Badge Ordinance Section 5.64.330).

DEPARTMENT IDENTIFICATION CARD

An employee is required to wear and properly display the departmental identification card while on duty or while in a county building. A sworn employee is to have the identification card in his/her possession when on duty or in uniform. An exception to the requirement may be temporarily authorized by the employee's Director.

SUPERVISOR RESPONSIBILITY REGARDING THE BADGE AND IDENTIFICATION CARD AND THE ANNUAL INSPECTION PROCESS

Supervisor shall ensure:

- The Badge and Identification Card are inspected during the annual performance evaluation review.
- The Employee's Performance Evaluation reflects that the badge and identification card have been inspected

During the inspection, the Supervisor shall ensure:

- The badge is free of damage.
- The appropriate title appears on the badge.
- The number on the badge corresponds to the identification card.
- To refer to the Employee Section File to verify the title and number on the badge.

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For the identification card the supervisor shall ensure:

- The identification card is free from damage.
- The appropriate title appears on the identification card.
- The identification card is not more than five (5) years old.
- Refer to the Employee Section File to verify the title and number on the identification card.

EMPLOYEE RESPONSIBILITY FOR BADGE AND IDENTIFICATION CARD

An employee to whom the Probation Department and/or Identification Card is issued shall:

- Maintain the badge and identification card in good condition.
- Have on their person the badge (peace officer status) and identification card while on duty.
- Present, return or surrender badge and identification card on demand to the Chief Probation Officer or designee and/or Management and Supervisory personnel.
- A badge or identification card shall be considered lost or stolen if the employee cannot produce that within seventy-two (72) hours.

LOST, STOLEN OR DAMAGED BADGE AND IDENTIFICATION CARDS

An employee whose badge and/or identification card has been lost or stolen shall file a police report with the appropriate law enforcement agency within twenty-four (24) hours. The police report must include the employee's name and employee's number, badge number and a description of the badge. A copy of the police report must be submitted to the Badge and Identification Card Coordinator as soon as it is available from the law enforcement agency.

Within one (1) business day of discovery that his/her badge and/or identification card have been lost or stolen, the employee must also:

- Complete an Office of Security Management Security Incident Report (OSM SIR), which must be signed by the employee's immediate supervisor.
- Submit the OSMSIR to the county office of Security Management, and send a copy of the badge and identification card coordinator.
- The Department shall issue a replacement badge and/or identification card upon receipt of all required documents including; the police report, the OSM SIR, and a declaration stating, under penalty of perjury that the badge has been lost or stolen. The badge and identification card will be provided upon this declaration to the employee at the appointment scheduled to issue the replacement badge.

SECTION – F: DEPARTMENTAL RETIREMENT BADGE, REPLICA BADGE AND

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IDENTIFICATION CARD

A Probation Department employee who is authorized to have a badge issued to him/her and has ten (10) cumulative years of Los Angeles County Probation peace officer service, or as a peace officer at the time of retirement, and who subsequently is honorably retired may be issued and possess an official Badge with the words, Honorably Retired, plainly shown on the face of the Badge. The Badge and the Identification Card shall be issued to the employee at the time county's expense upon the employee's retirement.

During the separation interview, the employee will have the opportunity to request or decline a retirement Badge and Identification Card. An employee requesting a retirement Badge shall complete the Request for Retirement Badge Form. A retiree may request a retirement badge and identification card at the time of the separation interview and at any time after retirement. A retirement Badge and Identification Card may be issued so long as the retiree continues to meet this date Penal Code Section Requirements for a Peace Officer.

The retiring employee may elect to encase the Badge in a clear Lucite block. This will be at the employee's expense. The cost for this process will be collected at the time the employee makes the request for the Badge.

RETIREE IDENTIFICATION CARD WITH CONCEALED CARRY (CCW)

To qualify for a required Identification Card with a CCW notation, a retiree must be honorably retired and must have been authorized to carry a firearm during the scope of his/her appointment as a peace officer. The retiree must meet the requirements set forth in Penal Code Section 25450.

LOST OR STOLEN RETIREMENT BADGE AND/OR IDENTIFICATION CARD

A retired Probation Department employee must immediately notify the Probation Department if his/her Badge or Identification Card is lost or stolen and the file a police report with the appropriate law enforcement agency.

REPLICA BADGE

A former Probation Department employee who has previously authorized to have a badge issued to him/her and worked ten or more years of Los Angeles County Probation Peace Officer Service before leaving, may request the issuance of a (replica badge) (also known as a keepsake badge) if he/she honorably left the Probation Department. Issuance of a replica badge is contingent on approval by the Chief Probation Officer. Each replica badge shall be permitted permanently encased in a block of Lucite, or other similar material, in a fashion as to render the badge unusable

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for active service.

REPLICA BADGE FOR THE FAMILY OF AN ACTIVE DUTY OFFICER THAT DIES

The next of kin of an employee that dies may request the retention of the Badge as a keepsake so long as the employee met the requirements of Penal Code Section 16690 at the time of death.

The Badge and Identification Card shall render the badge number as "Retired." The next of kin shall incur the cost of this process which shall be collected at the time the request is made. The cost is based on the manufacturing cost. The next of kin requesting retention of the Badge shall complete the Next of Kin Request for Retention of a Badge Form.

The County may confiscate a Badge and/or Identification Card that are/is used for unlawful purposes.

2124 HEALTH INFORMATION PORTABILITY AND ACCOUNTABILITY ACT COMPLAINT POLICY AND PROCEDURES (DIRECTIVE 1385)

INTRODUCTION

The purpose of this policy is to establish procedures to ensure that privacy complaints regarding the use of disclosure of Protected Health Information (PHI) are addressed and resolved effectively and promptly in accordance with the Health Insurance Portability

EXPECTATIONS

Employees who violate this policy may be subjected to progressive discipline action up to and including discharge, as well as civil and criminal penalties. Non-county employees, including contractors, may be subject to termination of contractual agreements, denied of access and/or civil and criminal penalties.

POLICY

It is the Probation Department's policy to protect the privacy of PHI in compliance with applicable laws, as well as existing departmental policies and business practices. All complaints related to privacy will be investigated and resolved internally or with incidences of the County's Chief HIPAA Privacy Officer (CHPO) and Chief Information Security Officer (CISO), as applicable. The Probation Department will help ensure that individuals who report security and privacy related complaints understand the complaint process and are appropriately informed through investigation and resolution. As a general practice, complaints will be internally facilitated, resolved and closed within thirty (30) business days of the investigation being opened by the assigned staff.

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Complaints that have not been resolved internally will be promptly forwarded to the CHPO for resolution.

Individuals may utilize this complaint process for issues concerning;

1. Disagreement with probation privacy policy and/or procedures.
2. Suspected violations and the use of disclosure, or disposal of PHI.
3. Retaliatory or intimidating actions resulting from the use, disclosure, or disposal of PHI.

Complaints

Any person, regardless of whether the Probation Department maintains his or her PHI, may file a complaint regarding suspected violations of the HIPAA Privacy and/or

Security Rules while an employee or work force member of the Probation Department. (The Probation Department or its associates may file a complaint regarding a suspected violation of the HIPAA Privacy and Security Rules by another member of the Probation Department work force). As such, the Probation Department may not intimidate, threaten, coerce, discriminate against, or take other retaliatory actions against its workforce, including whistle blowers and clients, for filing complaints.

Anonymous complaints are permitted, but insufficient details may delay, hinder, or prevent a full investigation.

Any complainant may exercise the right to have a representative intervene on his or her behalf, and/or assist during the complaint process. A complainant may file a complaint with the Office of Civil Rights, U.S. Department of Health and Human Services at any time before, during, or after initiating the complaint process.

The Probation Department will refer complaints and is not responsible for filing to the appropriate county department or business associate for investigation and resolution.

Definitions

“Business Associate” has the same meaning as the term (Business Associate) 45 CFR Subsection 160.103 for the convenience of the parties, a (Business Associate) is a person or incident, other than a member of the workforce of covered entity, who performs functions or activities on the behalf of or, provides certain services, to a covered entity that involves access by the Business Associate to Protected Health Information. A (Business Associate) can also be a subcontractor that creates, receives, maintains, or transmits protected health information on behalf of other business associates.

“Protected Health Information” has the same meaning as the term (Protected Health

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Information) at 45 CFR Subsection 160.103, limited to the information created or received by Business Associates from or on behalf of covered entity. For the convenience of the parties, Protected Health Information includes information that (I) relates to the past, present or future physical or mental health or condition of an individual; the provision of health care to an individual, or the past, present or future payment for the provision of health care to an individual; (II) identifies the individual (or for which there is a reasonable basis for believing that the information can be used to identify the individual); and (III) these created, received, maintained, or transmitted by Business Associates from or on behalf of the covered entity, and included Protected Health Information that has been made accessible to Business Associates by covered entity. (Protected Health Information) includes electronic pertinent health information.

“Workforce” means employees, volunteers, trainees, and other persons whose conduct, in the performance of work, is under the direct control of Probation, whether or not they are paid by the County.

Authority

HIPAA privacy rule title 45 Code of Federal Regulations (CFR) Section 164.530 (d).

Complaint Process

All privacy and security complaints must follow the HIPAA privacy complaint notification procedures to ensure proper handling. The objectives of the complaint procedures are to:

- Respond to complainants (or the complainant’s personal representatives) concerns regarding the use or disclosure of PHI in a timely manner, effective, sensitive and confidential manner.
 - Provide a process to resolve complaints regarding privacy or PHI in accordance with HIPAA privacy rules.
 - Provide a mechanism for monitoring, tracking, and evaluating HIPAA privacy complaints.
1. The complainant must complete Section 1 through Section 3 of the HIPAA privacy complaint notification form and submit the form to;

Departmental Information Security Officer
Los Angeles County Probation Headquarters
9150 E. Imperial Highway, Downey, California 90242.

2. If the HIPAA privacy complaint form is incomplete or inaccurate, the probation DISO or a designated representative who logged receipt of the form will contact the individual who filed the complaint to assist with proper completion or correction. The complainant will not be prevented from accessing the complaint

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3. Process solely on the grounds of the complaint being filed incorrectly. Upon receipt of the completed HIPAA privacy complaint form, the DISO or a designated representative will also log the information.
4. The DISO will inform the complainant within five (5) business days, by email, letter or phone call, that his or her complaint has been received. The method of contact and date/time must be documented. Notification to the complainant will state that an investigation has been initiated and that the complainant will be contacted by the individual investigating the complaint within fifteen (15) business days.
5. If the complainant meets one of the three criteria of a valid HIPAA privacy complaint identified in the policy section of this procedure, the DISO will also consult the county's chief HIPAA privacy officer (CHIPO) and the Chief Information Security Officer as applicable. If the complaint does not meet one of the three criteria, of a valid HIPAA privacy complaint, the DISO will consult with the County's CHPO for confirmation and/or refer the complaint as necessary to the appropriate individual or entity, and official notification will be sent to the complainant stating the outcome or referring using U.S. Postal Service First Class Mail.
6. If at any time during the complaint process a delay in response experienced due to an unexplained circumstance, the complainant will be made aware of the nature of the delay. Reasons for delay will be documented in the complaint log. As general practice, complaints will be internally facilitated, resolved and closed within thirty (30) business days of the investigation being opened by the assigned staff.
7. The DISO is responsible for assessing the nature of the complaint, identifying all individuals named in the complaint, and determine possible courses of action to resolve the problem.
8. The DISO will notify the Probation Department's Chief Information Officer, or his or her designee, to contact the Chief Probation Officer and/or other entities named in the complaint and inform them of the receipt, nature of the complaint, and the HIPAA privacy complaint process. If the Chief Probation Officer is specifically named by the complainant as the subject of the complaint, or if there is any concern for a potential conflict of interest, the DSO will contact the County's CHPO to review the complaint resolution process.
9. All notes generated by the DISO during the complaint resolution process, including the DISO's investigation strategy, activities, and attempts to resolve the complaint, will be recorded and documented. DISO will also create a file with the complainant's name that will contain the HIPAA privacy complaint and any relevant documentation submitted to the County's CHPO.
10. The DISO will provide to the complainant written notice of the determination using U.S. Postal Service via First Class Mail, and determine whether a separate letter to the facility is required. Copies of the determination letter will be sent to the individuals named in the complaint (if applicable); and, a copy will be sent to the department head of the affected department (if applicable), Chief Probation Officer and the County's CHPO.

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11. In the event that the DISO determinant violation has occurred which has resulted in a harmful effect to the complainant, the DISO will takes steps to mitigate such a harmful effect pursuant to HIPAA privacy rules.
12. If the complainant does not agree with the findings and actions presented in the determination, the DISO will escalate the complaint to the Chief Probation Officer, and the County's CHPO and CISO as applicable. The DISO will also contact the complainant to inform him or her of the escalation. The CHPO will conduct any additional investigation deemed necessary or appropriate at his or her discretion, and will also consult with County Counsel as needed. If the County CHPO or County Counsel requests a complainant's file for review, the DISO will record the request on a complaint log and forward copies of the materials. Original documents will not be sent unless requested as a part of a formal litigation request; all original documents should be returned to the DISO at the end of the litigation. CHPO will coordinate with Probation's DISO in the final resolution of the complaint and will ensure that the Probation DISO is notified of all related correspondence.

Administrative Review for Violation Determinations

In the event of a determination that the workforce member has violated probation's HIPAA policies and procedures, appropriate initiated review and actions will be initiated.

- It is the responsibility of the Probation Human Resources to take appropriate initiative action in accordance with all applicable probation and/or county-wide policies and procedures.
- Probation Human Resources will consult with the workforce members' management, and the Probation's DISO in determining the appropriate administration action. The workforce members' manager and/or supervisor will provide a written report to the Probation DISO regarding the administrative action taken.

Documentations Retention

Probation Human Resources will be the custodian for probation records related to personnel activities concerning HIPAA violations. The Probation DISO will be the custodian for probation records related to investigations of HIPAA complaints. All documents created or completed under this policy and procedure must be retained for a period of at least six (6) years from the date of creation or date when it was last in effect, whichever is later.

2125 STANDARDS AND TRAINING FOR CORRECTIONS (DIRECTIVE 894)

INTRODUCTION

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It is the requirement of the Board of State and Community Corrections (BSCC), Standards and Training for Corrections (STC), governed by Section 6035, 6036, Penal Code, that all newly hired or promoted peace officer employees must successfully complete the BSCC-STC mandated core training for position. This training must be completed within twelve (12) months of the employee's appointment. Peace officer employees are placed on Core status until the requisite core training is completed.

BSCC-STC strictly enforces the training completion requirement. The employee's failure to comply with this mandate will result in a loss of STC funds for the department.

Approving Time Off for Employees On Core Status

Core Training shall be scheduled and completed within twelve (12) months of appointment. Therefore, scheduled core classes take precedence over all previously scheduled or last minute requests for time off. Completion of Core Training is required for successful completion of an employee's probationary term.

Managers and supervisors approving the time off for Core status employees are checked and verified that the employee has completed or is scheduled to complete his/her Core Training, before the end of the probationary period, prior to granting approval for requests for time off. Failure to complete Core as a result of time off is non-excusable according to STC. Therefore, managers and supervisors shall ensure that staff is released to attend training period. Managers and supervisors must verify the employee has successfully completed Core prior to recommending final appointment on the employee's probation status.

Absences, either full days or partial days, will be deemed failure to comply with training requirement. In accordance with STC Title 15 Regulations, exigent circumstances require an absence as deemed by the State will require review by the department.

Therefore, newly hired peace officers who fail to complete the scheduled Core classes, shall be subject to probationary failure and termination. Newly promoted staff shall be subject to probationary failure and demotion and returned to the prior position.

2126 EMPLOYEE SUPPORT SERVICES (DIRECTIVE 1387)

INTRODUCTION

On June 1, 2014, the department entered into a memorandum of understanding with the Los Angeles County Sheriff's Department (LASD) for the provision of Employee Support Services (ESS).

POLICY

The Employee Support Services program for the LACSD has been providing a wide

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range of personnel resources to administrators, managers, supervisors, and employees working in organizations with a public safety mission.

The resources to be provided to department employees include the following;

- Critical incident debriefings.
- Law enforcement psychological services.
- Education-Based Discipline for early prevention and diversion.

In order to accommodate the needs of all employees throughout their department, ESS will provide services at the following locations;

- Palmdale; 1529 Palmdale Boulevard, Suite 114, Palmdale.
- Santa Clarita City Hall building; 23920 Valencia Boulevard, Suite 270, Santa Clarita.
- STAR Center; 1151 S. Colima Road, Building C-102, Whittier.
- Wilshire; 3055 Wilshire Boulevard, Suite 200, Los Angeles.

A description of each and method of access in services outlined below;

- Critical incident debriefings.
- Personnel involved in a shooting incident or other life-threatening event often experience significant trauma. These circumstances have the potential to affect the performance and health of an employee involved. A debriefing conducted by a department psychologist can assist in reducing potential problems. The exact impact of the incident varies with each individual and is difficult to predict. In some cases, there is no change in the individual. In others, the change may occur immediately, several hours later, or even days, weeks or months later.

Critical incident debriefing is **CONFIDENTIAL**, protected by law and is **NOT** a fitness for duty reevaluation which is governed by Civil Service rule 9.07, which can only be performed by chief executive officers Occupational Health Program (OHP). The only information that can and will be communicated back to the department is notification that the employee(s) involved in a critical incident attended the debriefing as required. Should the employee request the need for additional services or time off to recover from the traumatic experience, the employee may choose to contact the Return to Work (RTW) Unit himself or sign a waiver for LASD ESS to initiate the RTW process on their behalf.

All other critical incident debriefings are voluntary. When a department employee is involved or is affected by any other job related critical incident as a participant or observer, the concerned director shall contact employee LASDESS at (213) 738-3500 to schedule a debriefing. Time to attend a job-related critical incident debriefing will be compensable.

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Enforcement Psychological Services

Similar to the Employee Assistant Program with the Chief Executive's Office Occupational Health Programs, LASDESS provides free psychological services to all department employees that wish to voluntarily participate due to any personal issues that they may be experiencing. Requests for counseling are initiated by the employee by contacting LASDESS at (213) 738-3500, or the manager/supervisor can request LASDESS to provide outreach to the employee utilizing the referral form found on Probnet and sending it via email to PROBESS at Probation.lacounty.gov. LASDESS will schedule the employee for psychological county services within three (3) business days. All counseling sessions are confidential. Services can be accessed at one of the LASDESS offices located throughout the county.

Participating employees are required to utilize available personal time when participating in these services. The first visit may be on county time if preapproved by the concerned director who will be provided with verification of participation, which should not include any disclosure of personal, psychological/medical information.

Educational Based Discipline

Education-Based Discipline is a way of addressing behavior that is inconsistent with departmental policies and procedures or conduct required of a peace officer who is held to a higher standard based on Government Code Section 1029 and Penal Code

Section 830.5.

The provision upon philosophy is that discipline should be imposed to correct negative actions and behaviors. Studies have shown that punishment alone does not always correct unwanted behavior or failure to comply with policies and procedures. A better approach (when reasonable) is to offer Education-Based Discipline (EBD) so that the employee will have a higher probability of decreasing future incidences when provided additional training and mentorship. EBD is a positive way of reinforcing departmental policies and expectations while minimizing the detrimental impact to the employee and their dependents due to a loss of pay.

EBD can be used in lieu of suspension without pay or in conjunction to minimize the number of days without pay.

2127 RESPONDING TO BREACHES OF PERSONALLY IDENTIFIABLE INFORMATION (PII) AND PROTECTED HEALTH INFORMATION (PHI) (DIRECTIVE 1384)

INTRODUCTION

The purpose of this policy is to establish procedures for the Probation Department's

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workforce members to adhere to in the event a breach or suspected breach of PII or PHI is discovered.

POLICY

It is the Probation Department's policy to investigate and notify the County's Chief Information Security Officer (CISO) and Chief HIPAA Privacy Officer (CHPO) immediately (same business day) upon discovery of a breach of unsecured PII or PHI.

Definitions

- Breach - the term breach refers to the unauthorized acquisition, access, use or disclosure of PII and/or PHI which compromises the security, privacy, or integrity of such information.
- Personally Identifiable Information (PII) - PII is any information maintained by the department that identifies or describes an individual, including, but not limited to, name, social security number (SSN), date of birth, physical description, home address, telephone number, education, financial matters, medical, or employment history. PII applies to all bureaus.
- Protected Health Information (PHI) - PHI is any information maintained, created, or received by the department that relates to the past, present, or future health, or payment for health care that is individually identifiable health information, such as a person's name or SSN that is transmitted or maintained in any form or medium, including electronic information, written, or verbal. An example of

PHI is any pertinent information maintained, used, or disclosed by a covered department in probation, such as patient's name, medical record number,

Financial information, diagnosis, address, treatment, payment history, etc. Currently, PHI is accessible to and stored within the Probation Electronic Medical Records System (PEMRS).

- Unsecured PII or PHI - Unsecured PII or PHI is any PII or PHI that is not rendered or determined by the CISO or CHPO to be unusable, unreadable, or indecipherable to unauthorized individuals through the use of pathology or methodology (e.g. encryption).
- Discovery - A breach of PII or PHI will be deemed discovered as of the first day a department's workforce member knows of the breach, or by exercising reasonable diligence, would or should have known about the breach.

Procedures

1. If a workforce member discovers or becomes aware of a breach or suspected breach of PII or PHI, he or she must immediately (same business day) report the incident to his or her bureau chief, who shall ensure that the breach reported to the Probation Department's Information Security Office (DISO) and CHPO.

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2. If the breach involved PII, the probation's DISO shall make the initial report by telephone call to (562) 940-3335 immediately when he or she becomes aware of the breach, followed by a full written report to the CISO at CISO notify at CIO.lacounty.gov no later than ten (10) business days for the date he or she became aware of the breach.
3. If the breach involved PHI, the bureau chief shall ensure that the initial report is made by telephone call to (213) 974-2164, which is the HIPAA hotline, or email at HIPAA at auditor.lacounty.gov. The bureau chief, or his or her designee, who work with the CHPO in producing a full written report no later than ten (10) business days for the date the breach was reported to the CHPO.
4. Following the initial notice of discovery of a breach, the Probation Department's CISO, and CPDO shall conduct a risk assessment to determine if the breach is an unsecured or secured breach of PII or PHI and may exercise a mitigation effort to prevent the breach from occurring again.

Note: Two workforce members - employment records are excluded from the definition of PHI see 45 CFR, Subsection 164.104; in other words, employee records are not under the jurisdiction of the HIPAA regulations. For disclosure of PHI made for workers' compensation purposes under 45 CFR 164.512 (l), HIPAA permits disclosure of information to the full extent authorized by the State or other laws.

Authority 45 CFR, Subsection 164.404; Section 13402 of title Indicate 13, Health Information Technology for Economic and Clinical Health Act of the American Recovery and Reinvestment Act of 2009; AB-1149 Identify Theft; Civil Code Section 179829; Board of Supervisors Policy 6.109; and the Board of Supervisors Policy 3.040.

2128 EMPLOYEE COOPERATION (DIRECTIVE 1335)

INTRODUCTION

This policy is intended to reiterate existing standards of employee cooperation during administrative hearings, internal and external investigations, and law enforcement inquiries.

EXPECTATIONS

Cooperation by a charging party, witness, or subject of investigation is required during inquiries, investigations, pre-disciplinary hearings, settlement negotiations, legal proceedings and appeals; with those authorized to perform such functions. This may involve internal and external entities at any point of a case; including but not limited to other law enforcement agencies, county departments, commissions, or boards.

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Expectations relative to cooperation are detailed below.

POLICY

Inquiries and Investigations

The Probation Department has developed a process for collecting evidence to support or refute allegations of employee misconduct. An administrative inquiry and/or investigation may be conducted by the work location or by a specialized unit within the department such as the Internal Investigation Office (IIO) or the department's Affirmative Action Compliance Programs Office (AACPO). In addition, FBI representatives of the government and criminal justice community, it is important that we assist associates of other agencies in carrying out their official duties. This includes, but is not limited to, cooperating with law enforcement, criminal justice and external county agencies during their inquiries and investigations.

Without full cooperation, the Department and other external agencies are unable to make appropriate determinations. It is therefore important that a complete record of all relevant facts having impact on the agency's operation is obtained. A complete record supports the integrity of the investigation and ensures that all interested parties are treated fairly.

Employees who are identified as a charging party, witness or subject of an internal or external investigation, or law enforcement inquiry, shall comply with the following;

1. Notify their supervisor, manager or other appropriate supervisor upon receipt of subpoena or notice so appropriate steps can be taken to mitigate workload or scheduling impact.
2. Appear at the date, time and location identified on the interview notice.
3. Promptly notify the unit or person issuing the interview notice of any scheduling conflicts.
4. Provide truthful and complete responses to questions asked by the investigator.
5. Provide any and all requested information or evidence. Concerns about provisions of confidential documentation should be discussed with performance manager before documentation is released.
6. Cooperate fully with designated law enforcement personnel in carrying out their official duties.

The Public Safety Officer's procedural Bill of Rights and the Weingarten Rights, allow the subject to be represented during the investigatory interview. The subject of the investigation may not be represented by someone who is also a subject or who is the witness of the matter being investigated. Witnesses are not entitled to representation. Employees who fail to answer questions directly related to the administrative

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investigation may be charged with insubordination, which could result in disciplinary action up to and including discharge.

At times employees may be required to participate in a disposition process. Disposition testimony shall be truthful and complete. Trial, hearing, and/or civil service testimony that is substantially inconsistent with statements made by the same individual within a disposition and/or as part of an investigation are subject to investigation. Anyone providing inaccurate testimony may lead to disciplinary action.

Administrative Hearings

The Civil Service Commission plays an important role in evaluating various administrative actions. Probation employees may be issued subpoenas requiring their appearance and testimony at Civil Service hearings. Decisions by Probation to subpoena a witness are made with careful consideration of the relevance of the witness to the proceedings, and the operational burden of the employee's absence from his/her regular work assignment. Subpoenas may also be issued by the plaintiff's representative. Employees who receive a subpoena for their appearance or testimony shall comply with the following:

1. Notify the supervisor, manager, or other appropriate superior upon receipt of the subpoena or notice so appropriate steps can be taken to mitigate workload or scheduling impact.
2. Promptly contact the party who issued the subpoena.
3. Make themselves available to discuss their testimony.
4. Fully answer all questions and provide requested documentation.
Consents about confidential documentation should be discussed with performance management before provisions to the plaintiff's counsel.
5. Appear at the date, time and location identified on the subpoena.
6. Testify truthfully.

Employee cooperation is required in preparation for the proceedings with designated department representatives and for the duration of the proceedings.

It may also be necessary for employees to provide relative documentation for or testifying at other administrative hearings, such as the California Unemployment Insurance Appeals Board or the Workers' Compensation Appeals Board. These proceedings differ from Civil Service Commission in that subpoenas may not be issued; however, employees who are notified to appear or provide documentation are expected to comply in the same manner as having received a subpoena. Administrative hearings are not limited to those described above.

Retaliation and Interfering

Employees who participate in the administrative or criminal investigation process should do so free from any improper influence. Under no circumstances shall an

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employee contact another employee, directly or indirectly, for the purpose of interfering with their cooperation or participation at any point of the process. This includes but is not limited to inquiries, investigations, pre-disciplinary hearings, settlement negotiations, legal proceedings, appeals; and though the final disposition, resolution, and discipline of an administrative or criminal matter. Retaliation, and adverse action due to individuals involvement in a matter (post or present), is absolutely prohibited. The department will take any action to prevent retaliation, including the discipline of any employee who engages in such behavior. These admissions extend to prohibit any such contact with probationers, department staff conducting the investigation, or any other individual who may have been involved.

Confidentiality

Other than as part of the investigation interview process or testimony described above, the content of an investigation or administrative hearing shall be kept confidential at all times. Employees who are involved in these proceedings shall not discuss the nature of their testimony or documentation with anyone other than the designated department staff, their own representative or person through a subpoena.

Employees who fail to cooperate with designated staff or who fail to comply with the admonition not to discuss matters outside the investigation setting could be subject of disciplinary action up and to including discharge.

It should be noted that nothing in this policy is intended to limit and employee's constitutional rights, rather it is intended to address critical needs to cooperate with similar agencies or other county departments.

2129 PERSONAL APPEARANCE (DIRECTIVE 1333)

INTRODUCTION

All staff is required while on duty or when representing the department in any official capacity to be neat, clean, well groomed, and conform to consideration of safety, professionalism, and modesty. This policy extends to all representatives of the department including contact employees and volunteers. With the exception of two (2) earrings per ear, piercing jewelry is not permitted during work hours. This includes but is not limited to piercings in eyebrows, tongue, lips, nose, cheeks; and plugs in the ear. Due to safety concerns, holes for plugs must be covered. Likewise, only modest size earrings or jewelry may be worn, and dangling earrings shall not be worn in juvenile halls or camps.

EXPECTATIONS

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While on duty, employees shall not display body art including tattoos, brands, intentional scarring, mutilation (split tongue), foreign objects inserted under the skin for decoration, or dental ornamentation (design, jewelry, etc. on teeth); except tattoos on hands and above the neckline. New body art is not permitted on exposed areas of the body after the effective date of this directive for current employees or post hire for new employees. Visible body art depicting nudity, violence, sexuality, explicit or vulgar art, words is prohibited.

POLICY

Employees should be mindful that their body art although unintentional, may be similar to body art adapted by a gang or criminal organization and may create safety and security issues. Managers are responsible for assessing all visible body art to ensure that they conform to policy and are not a threat to safety and security. The department reserves the right to instruct an employee to cover their body art (with clothing, skin tone patch or makeup), or reassign the employee to a location where their body art does not increase safety and security risks.

Supervisors and Managers are responsible for enforcing the Personal Appearance standards. Disregard of Personal Appearance policy may result in disciplinary action.

2130 EMPLOYEE HONESTY (DIRECTIVE 1316)

INTRODUCTION

This policy incorporates elements of the Los Angeles County Employee handbook, Performance Expectation Section, ethical and moral standards - page C6, and Probation Department manual Sections 601 and 615 under Employee Conduct. This is not to be all inclusive.

EXPECTATIONS

The mission of the Probation Department can only be carried out with the expectation of honesty from all employees at all levels. While the majority of the staff is honest in their day-to-day work habits, the actions of a few staff can turn to diminish the reputation of the department. This policy has been formulated in order to cultivate and maintain the trust and confidence of our community, partner agencies and coworkers. In addition, it is intended to reemphasize existing standards of behavior.

POLICY

Employees are expected to act in a way that embraces honesty in **all matters of work**, including oral and written communication. All dishonest acts committed during the course of employment are considered a violation of this policy. The following are some

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examples of situations where, if an employee is dishonest, discipline may be warranted. (This is not intended to be exhaustive);

- Falsification of time records.
- Work-related written, oral, or electronic communications.
- Responses to questions during investigation and/or inquiries, deliberate omission of relevant information will also be considered as an act of dishonesty.
- Leave request (abusing leave policies to obtain time off while not ill or injured).
- Pilfering departmental property for personal use (regardless of the value).
- Using departmental funds or equipment such as vehicles for unauthorized personal use.

When employees are completing documentation including Special Incident Reports (SIRs), Physical Intervention Reports (PIRs), court reports or any other document in the course of their duty, it is required that the information be truthful, accurate, and complete.

When employees commit dishonest acts, they negatively affect the interest of the County of Los Angeles and this department. Honesty is an essential element of an employee's official duties. Failure to adhere to the principles contained in this policy may be grounds for discipline, up to and including discharge from county service. In addition, in some instances, it could lead to criminal prosecution.

Known and suspected action of dishonesty should be immediately reported to the management staff or an outside investigative agency as appropriate.

2131 OVERTIME AND WORK HOURS

Overtime standards are established by law and regulatory standards including, but not limited to, the Fair Labor Standards Act, California Labor Code, Board of Supervisors policy, Title 6 of the County Code, and within some collective bargaining agreements.

In conjunction with ongoing efforts to effectively manage overtime and work hours, this section will establish general overtime policies for authorizing, reporting, monitoring, and controlling overtime use. This will also clarify some aspects of work hours related to break periods. Bureau specific procedures may be in place to define overtime policy in greater detail based upon the unique aspects of Bureau operations.

Overtime. Authorized overtime shall be paid if the total hours actually worked (excluding paid leave such as sick and vacation) by a covered employee exceeds 40 hours during the work week, or the maximum hours allowed for any other work period permitted by the Federal Fair Labor Standards Act.

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All overtime must be preapproved by a Bureau Chief except in the event of an immediate major emergency. A major emergency defined by Title VI as a fire, flood, or other cause involving significant danger to life or property.

Pre-approvals shall be specific to a particular timeframe or limited duration need, and shall not be delegated below the manager level. Pre-approval shall be appropriately documented to minimally include the name of the staff working overtime, the authorizing manager, time and date of the pre-approval, and the reason(s) for overtime. Managers shall not grant open-ended approvals.

Pre-approvals shall specifically document the need for the overtime. Documentation shall be retained locally and provide a reasonably sufficient audit trail. For example, overtime documentation shall verify the specific project or task requiring overtime. Special assignment is not sufficient documentation. When overtime is necessary to meet staffing ratios, approval documentation shall identify the current number of youth supervision staff and the number of youths in the facility. For reasons such as late relief or callouts, the specific name of the late or sick staff shall be documented. It is anticipated that the supervisors and the managers will pursue progressive corrective actions for staff that violate attendance standards.

Overtime worked at a location other than the employee's usual work assignments shall be subject to the same documented manager pre-approval requirements discussed above. The employee's usual work location manager and the overtime location manager must each pre-approve a specific assignment when overtime is worked outside of the employee's usual Bureau. Employees shall not act independent of their usual work location manager to "shop" for overtime opportunities - rather, in a timely manner, employees will keep their usual manager informed in advance of overtime to be worked in other work assignments. Documentation verifying overtime pre-approvals shall be forwarded by the supervisor/manager from the overtime location directly to the supervisor/manager at the usual work assignment prior to approval of the employee's pay-period timecard. The employee who worked the overtime shall not be involved in the forwarding/handling of overtime documentation to his/her usual supervisor.

The supervisor of the employee's usual work assignments shall ensure a local record is maintained at each of his/her employees' cumulative overtime hours worked, including overtime hours worked at other locations.

Excesses overtime by an individual employee can result in fatigue and inattentiveness. Cumulative overtime hours for an individual employee shall not exceed 24-hours in any seven consecutive days. Employees shall not work back-to-back double shifts, defined as an eight-hour period of overtime on each of two consecutive days.

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Staff working overtime shall be relieved of duty as soon as the need for overtime is resolved. **Overtime need not be worked in full shift increments.**

Overtime shall be distributed as equitably as possible among all qualified employees in the same organizational unit and/or work location. Management may consider special skills required to perform a particular assignment.

All hours shall be supported by appropriate internal control structure that includes a secondary record trail such as schedules, logs, time off approvals, and/or shift notations. Uncertainties about regular and/or overtime hours actually claimed should be confirmed with applicable records before approving a timecard.

Work Hours. Employees are expected to arrive and depart at workplace as scheduled. The employee is responsible for keeping his/her supervisor informed if arriving or leaving other than as scheduled. Generally, the supervisor should be informed of scheduled deviations in advance, and in writing when practical.

With certain regulatory or industry-specific expectations (such as some peace officer assignments supervising detained youth in camp) California Labor Code requires that employees take a meal period of at least 30 minutes in length if the employee's workday is more than five hours. The meal period must be provided by the fifth hour. A specific meal may be waived by mutual written agreement if the workday is longer than six hours. Employees working over six hours must take a 30-minute meal period (excluding peace officers working in custody supervision positions). California law specifically states an employee and/or the supervisor are not permitted to arrange a meal period at the beginning or end of the day in order to shorten their workday. Meal periods are not part of the eight-hour workday. Thus, an eight-hour workday consistent of eight hours of work plus the required 30-minute meal period. An eight-hour workday is not 7 ½ hours of work plus a half-hour lunch.

With the exception of peace officer assignments supervising detained youth in camps, employees are entitled to two fifteen-minute break periods in an eight-hour shift. The availability of breaks for camp peace officers is based on operational need, and the need to allow staff reasonable opportunities to use the restroom. Like meal periods, break periods may not be arranged at the end of the day in order to shorter the workday. Two break periods may not be combined to create one longer break, and the meal period may not be combined with a break period(s) to create a longer meal period.

Overtime and Holdover Policy

RTSB fosters a safe and secure environment for youth and staff and maintains

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compliance with established standards as they relate to institutional staffing. When a facility is unable to meet mandated staffing levels, or an emergent or critical situation exists, the following protocol shall go into effect:

As-Needed Employees. Each facility shall establish and maintain a current list of as-needed staff along with at least two contact numbers for each staff. As-needed staff shall be called in order of their appearance on the list and moved to the bottom of the list once they have worked a shift.

Volunteers, Using the Overtime List. Each facility shall establish and maintain lists of volunteers who can make themselves available to work overtime shifts. Overtime shall be offered in a fair and equitable manner. Once a staff has worked an overtime shift, their name shall be placed at the bottom of the list.

Holdover List. If there remains inadequate coverage, the holdover list shall be used. All employees shall be included on the holdover list; which shall be sorted by shift and classification. Once an employee is held over, the employee's name shall be placed at the bottom of the holdover list. Employees shall be held over only when needed.

Holdover Exceptions:

- Any employee who has completed two shifts (16 hours)
- Any employee who is scheduled to work the shift following the holdover shift. (Creating 24 consecutive hours of work)
- The facility manager or designee shall approve any emergency situation where an employee may be excluded from being held over
- Two-hour notice shall be given for possible holdover
- One-hour notice shall be given for confirmed holdover

Each facility shall make every reasonable effort to ensure that employee holdover is the means of the last resort to ensure adequate coverage and used only when the safety and security of the youth and staff is in jeopardy.

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Subject: RESIDENTIAL TREATMENT SERVICES BUREAU MANUAL NON-SWORN PERSONNEL AND PARTNER AGENCIES HANDBOOK	Section Number: RTSB-2200
	Effective Date: July 21, 2020
	Approved By: Jennifer Kaufman, Bureau Chief

2200 NON-SWORN PERSONNEL AND PARTNER AGENCIES HANDBOOK

The Board of State and Community Corrections (BSCC) Title 15, Section 1324 regulation requires the Residential Treatment Services Bureau (RTSB) to develop an initial orientation process to include safety and security issues and anti-discrimination policies for all non-sworn personnel and partner agencies which include:

- Support staff
- Contract employees
- Los Angeles County Office of Education (LACOE)
- Department of Mental Health (DMH)
- Department of Health Services (DHS)
- Department of Public Health (DPH)
- Program providers
- Volunteers
- Attorney or agent (investigator, social worker)
- Court appointed psychiatrist
- Group Home personnel
- Advocates

To meet this requirement, all support staff, volunteers, contracted service providers, partner agencies and other departmental staff must read the attached document and sign the acknowledgement form. For the purposes of this handbook “support staff” will be used to describe the above-mentioned list of individuals.

Introduction

Your job duties as a support staff have necessitated your entrance into a juvenile institutional facility today. The safety and security of you, our staff, and the youth at this facility require that you adhere to the following rules and protocols which align with legislation and Departmental policies. If at any time you are unclear about your role, responsibilities and/or actions, or you need immediate assistance, please speak to the nearest sworn staff member. Officers are easily identified by their uniform and will be your first point of contact.

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Dress Code

All visitors must be appropriately dressed and closed toe shoes are to be worn at all times. Clothing considered inappropriate includes: white t-shirts as outer wear, strapless tops, spaghetti strap tops, transparent (i.e., see-through) outfits, tank tops, short skirts or short dresses (higher than mid-thigh), shorts, halter tops, tight fitting clothing, low cut tops or clothing exposing mid-section of stomach, clothing bearing inappropriate messages and/or insignias, bandanas, sunglasses, hats, broaches, stickpins, open toe shoes, or shoes with heels in excess of two inches.

Conduct

- You may enter the facility with only your automobile key and your identification, unless given signed permission (Attachment A-authorization for snacks and supplies) by a Facility Director or designee to bring supplies, which will be searched. Any other items are considered **contraband** and are not permitted into the facility.
- Always wear your Departmental issued identification.
- Keep information confidential as required.
- No cell phones are allowed inside the facility by visitors.
- The Los Angeles County Probation Department adheres to a strict NO TOUCHING POLICY.
- You may not remove or carry anything from the facility that is given to you by a youth.
- If you are part of a group and need to leave due to an emergency or illness, notify the nearest staff member and they will assist you in leaving the facility.
- Do not engage in a conversation with the youths regarding their case or their reason for incarceration.
- There is to be no contact with the youth outside of the facility unless prior authorization has been received.

Possession of Alcohol, Drugs and Weapons in Los Angeles County Juvenile Facilities

It is against the law to knowingly send, assist, or bring into any Los Angeles County facility (juvenile hall or camps) paraphernalia, controlled substances, drugs/non-controlled substances, alcohol, prescription medication not prescribed for their specific use, firearms or other weaponry, objects modified for use as weapons, or explosives of any kind. It is also the policy of the Probation Department to forbid any person who is or is reasonably believed to be under the influence of any substance.

Failure on the part of any visitor, or support staff to observe these restrictions shall represent a violation of Probation Department policy, as well as statutory law pursuant to Penal Code (PC) Section 4573 (Controlled substances; bringing into prison, camp, jail, etc.), PC 4573.5 (Alcoholic beverages or drugs other than controlled substances; bringing into prison, camp, jail, etc.) or PC4574 (Firearms, deadly weapons or explosives; brining into prison, camp, jail, etc.).

All individuals visiting a juvenile facility, found or believed to be in violation of these statues shall be subject to arrest and criminal prosecution.

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Juvenile facilities staff shall have the right and responsibility to deny access to any person(s) suspected of attempting to violate this policy, or otherwise is believed to represent a potential threat to the facility's safety and security, and/or that of any occupants' therein.

In support of the above expressed Probation Department policy and to ensure for facility safety and security, the following shall be subject to search and seizure at any given time:

- All persons entering a juvenile facility
- Clothing items worn or carried
- Personal property brought to the facility
- Containers
- Purses/bags

As well as all areas within any county juvenile facility, including but not limited to:

- Facility lockers/storage areas
- Breakrooms
- Facility furniture
- Staff and guest vehicles entering onto county property

Examples of contraband include, but are not limited to: pens, pencils, markers, paper clips, staples, scissors, rulers, tweezers, pointers, laser pointers, money, wallets, backpacks, fanny packs, purses, jewelry, cellular phones or pagers, cameras, electronic devices, pocket knives or box cutters, cigarettes or pipes, lighters or matches, alcoholic beverages, chewing gum, unauthorized and/or illegal drugs, mouthwash, toothpaste or toothbrushes, glass or metal containers, firearms or any item built to the purpose of propelling an object, ammunition, OC spray, handcuffs, handcuff keys, or any object that can be used as a weapon.

As indicated, this search policy shall apply equally to all county employees, facility staff, contractors and guest to any juvenile facility. Sworn staff shall be subject to the provisions of the Public Safety Officers Procedural Bill of Rights, Government Code Section 3300 et seq.

Confidentiality

All support staff must comply with Departmental policies relative to maintaining confidentiality. It is a criminal offense to release a youth's present or past criminal history or probation status to members of the public who are not authorized by statute to receive that information. The following types of records and/or information are governed by Welfare and Institutions Code (WIC) Section 827, and are considered confidential:

- Case record information regarding youth
- Name and date of birth
- Physical description
- Dates of arrests
- Disposition of youth's case

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- Criminal charges for youth
- Detention information
- Release date from juvenile facility
- PDJ file information
- X-file information
- Health Insurance Portability and Accountability Act (HIPAA) information
- Education Information
- Dependency information

Media and Research

All requests to utilize dependent and delinquent wards for media and/or research are governed by the Juvenile Court, as defined in statute of the Welfare and Institutions Code Sections 300, 601, 602 and California Rules of Court, rule 5.501.

Section 7.3(c) Requests for Interviewing, Photographing, Videotaping, or Voice Recording of Dependent/Delinquent Children.

A member of the public or media representative must obtain a court order from the Presiding Judge of the Juvenile Court prior to contacting a youth if (1) the person seeks to interview, photograph, videotape or voice record a youth, who that person knows, or has reason to know, is under juvenile court jurisdiction and has been removed from the physical custody of the parent or legal guardian, and (2) confidential information regarding the child's case or dependency or wardship status may or will be disclosed as a result.

Research

Community-based organizations and other public agencies who want to conduct focus groups with detained youth must submit a petition to the court.

The petition for "access to juvenile records for research purposes" must be submitted using the "Petition and Order for Research" form and include a copy of any materials/questions to be utilized in the research.

Therefore, photos (includes de-identified bodies) questionnaires, program materials (written work) are not permitted to be utilized to promote or support a program, without permission from the court, in accordance with state law.

Identification Badge

Every support staff entering a juvenile facility is required to wear proper identification. The identification must be visible and worn in the chest area with the photo showing when applicable. The loss or theft of an Identification Card must be reported immediately to the respective facility supervisor or Acting Director (AD).

RTSB Facility Telephone Directory

The following telephone directory will connect you to the appropriate juvenile facility, including the Director's Office, AD Office, DMH Office, LACOE School Office, and Nurse's Office:

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Camp Clinton B Afflerbaugh (909) 971-6300
Camp Glenn Rockey (909) 599-2391
Campus Kilpatrick (818) 889-1353

Camp Joseph Paige (909) 971-6375
Camp Joseph Scott (661) 296-8500
Dorothy Kirby Center (323) 981-4301

Reporting Emergencies

It is every staff's responsibility to immediately notify the Acting Director (AD) or Director when an emergency occurs by using the telephone system. When reporting the emergency, please give the appropriate code (Blue, Red, Green or Yellow).

Reporting Emergency Tips

It is the role of each facility's Acting Director (AD) and Director to ensure the safety, security and continuity of care for each youth in the juvenile facility. If you do not know a code, please report it as appropriate, either verbally, written or in private.

The essential facts must be given in a concise and logical manner, such as indicated below:

1. As soon as the AD or Director responds, state: "This is an emergency" or "Code Blue;"
2. Give the location of trouble. Example: "This is School room 1, Volunteer Smith;"
3. Explain the nature of the emergency in a few words. Example: "Three boys are on the school roof trying to escape."

Medical Emergency (Code Blue)

Should any person appear to be in immediate danger of death or in need of immediate medical attention, the support staff shall immediately shout "**Code Blue**" as loudly as possible to alert staff. Emergencies requiring a Code Blue action include but are not limited to the following:

- Unconsciousness
- Suicide attempt
- Drowning
- Heart attack
- Respiratory arrest
- Electrical shock
- Seizures

Major Disturbances (Code Red)

In the event of a major behavioral disturbance, the support staff shall immediately notify staff in close proximity and provide them with location and number of youth involved in the incident. Emergencies requiring a Code Red include but are not limited to the following:

- Fights
- Youth on youth violence
- Assaults on staff
- Multiple fights

Escapes (Code Green)

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When a support staff observes a youth or youths attempting to escape or escaping from a juvenile facility, immediately notify any staff in proximity. Under no circumstance are support staff to pursue or apprehend a fleeing youth(s) or escapee(s). Once this emergency is reported, await further instruction.

Outside Intruder (Code Yellow)

In the event that a support staff encounters a possible unauthorized person or intruder, they shall immediately notify any staff in proximity, the AD or Director.

Outside Law Enforcement Notification

The AD or designee is authorized to call for local law enforcement assistance.

Supervision

Support staff shall not leave their assigned activity without specific authorization of the AD or designee.

Safe Crisis Management (SCM) / Physical Intervention

It is the policy of the Probation Department that Probation staff shall use only that level of intervention (verbal, physical or chemical) necessary to restore order and/or to achieve and maintain control. Under no circumstance shall a support staff intervene or interrupt a staff(s) implementing a SCM. Should the use of SCM be in question, immediately notify the AD, Director or RTSB Administration.

Youth's Grievance Procedures

All detained youth shall have access to a grievance procedure which will provide an opportunity for a fair review and resolution of complaints concerning any aspects of their care while in a juvenile facility. Any support staff who receives a grievance shall immediately forward the grievance to the Acting Director (AD) or Director.

Child Abuse Reporting

All support staff and contracted service providers are mandated reporters. Mandated reporters include:

- Peace Officers
- Teachers, school counselors and administrators
- Medical Staff
- Behavioral/Mental Health staff
- All other professionals defined in Penal Code Section 11165.7 (instructional aide, teacher's aide, priest)

Reporting Requirements: A mandated reporter must make a report whenever, in his or her professional capacity, or within the scope of his or her employment, he or she has knowledge of, or observes a child whom the mandated reporter knows or reasonably suspects has been the victim of child abuse or neglect.

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Reasonable Suspicion: Reasonable suspicion occurs when it is objectively reasonable for a person, based upon facts that could cause a reasonable person in a like position, drawing upon his or her training and experience, to suspect child abuse or neglect has occurred.

Types of Reportable Abuse and Neglect: Mandated reporters must report the following types of child abuse and neglect at minimum. The list provided below is considered a basic guide. A complete listing of types of reportable abuse and neglect are contained in the Penal Code.

- Sexual Abuse

- a. Sexual assault: Includes rape, statutory rape, incest, sodomy, lewd or lascivious acts upon a child, oral copulation, sexual penetration and child molestation
- b. Sexual exploitation: includes matter depicting a youth engaged in obscene acts, assisting, inducing, persuading or coercing a child to engage in prostitution or any type of video, film or other media which involves images of a sexual nature

- Neglect

- a. Severe: includes negligent failure of a caregiver to protect a child from severe malnutrition or a medically diagnosed failure to thrive; it also includes situations where the caregiver willfully causes or permits the body or health of a child to be endangered
- b. General: includes negligent failure of the caregiver to provide adequate food, shelter, clothing, medical care and supervision even though no physical injury has occurred

- Physical Abuse

- a. Willful Harm: includes harming or injuring of a child or endangering the person or health of a child to be endangered.
- b. Unlawful Corporal Punishment: includes situations where a caregiver willfully inflicts upon a child any cruel or inhumane punishment or any injury resulting from a traumatic condition
- c. Non-accidental Injury: includes all other types of physical injuries inflicted upon a child by another person other than by accidental means

- Emotional Maltreatment (Psychological Abuse)

- a. Willful infliction of unjustified mental suffering on a child
- b. Permitting a child to suffer unjustifiable mental health suffering
- c. Belittling or berating a child

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- d. Making unreasonable demands on a child, or invoking unreasonable expectations
- e. Objectifying the child through comments related to the child or family
- f. Rejecting the child in private or in a public forum and causing the child to feel unwanted, unneeded or at risk

Any mandated reporter who has knowledge of or observes a child in his or her professional capacity or within the scope of his or her employment, whom he or she knows or reasonably suspects has been the victim of child abuse or neglect shall report such suspected incident of abuse or neglect to the local law enforcement agency servicing the facility immediately, or as soon as practically possible, by telephone and shall prepare and send a written report thereof within 36 hours of receiving the information concerning the incident (PC Section 11166[a]).

Staff from Probation, DMH, JCHS or LACOE who file a SCAR on behalf of a detained youth in a juvenile facility shall immediately report their telephonic contact with local law enforcement to the AD and inform of any relevant information to ensure the safety of youth. The AD shall conduct a follow-up assessment of the situation to ensure that the SCAR was filed in a timely manner and shall ensure the incident is reported to the Department's Child Abuse Special Investigations Unit (CASIU), if applicable.

Incidents involving excessive or unnecessary force that do not appear to involve suspected child abuse shall not be referred to the local law enforcement agency but shall be referred to facility management immediately.

The Department has an expectation that our partner agencies cooperate with all investigations and accurately report incidents.

Prison Rape Elimination Act (PREA)

All support staff who have contact with youth shall be given the pamphlet, "A Guide to the Prevention of and Reporting of Sexual Abuse and Sexual Harassment of Probation Clients," which contains information on their responsibilities regarding the prevention, detection, and reporting of sexual abuse and sexual harassment. The Compliance Officer (DOJ Supervisor) shall maintain documentation as long as services are provided or for four (4) years upon separation of services. The documentation shall confirm the contract employees/vendors, volunteers and visitors understood the training they received.

Non-Discrimination Policy

The Probation Department prohibits discrimination on the basis of race, color, religion, sex, national origin, age, sexual orientation, disability (physical or mental), marital status, political beliefs, organizational affiliation, medical condition, or genetic predisposition.

Further, the Department prohibits inquiries either verbally or through use of an application form, which expresses directly or indirectly any discrimination on any of the aforementioned protected bases. This applies to employees, applicants, the general public, and clients who are provided service by the Department.

Effective January 1, 2001, all employees (supervisors and non-supervisors) are personally liable under the California Fair Employment and Housing Act (FEHA) for unlawful

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harassment. Specifically, AB 1856 amends government Code Section 12940 and adds Section 12940(h)(3), which states that "[an] employee of an entity subject to this subdivision is personally liable for any harassment prohibited by this section that is perpetrated by the employee, regardless of whether the employer or covered entity knows or should have known of the conduct and fails to take immediate and appropriate corrective action."

The Department's Non-Discrimination Policy mirrors County policies and State and Federal non-discrimination laws. The primary laws prohibiting discrimination in employment and provision of services are delineated in the statutes of Title VII of the Civil Rights Act of 1964, as amended, and the FEHA.

In carrying out the functions and duties of the Department, all employees are required to adhere to the County's non-discrimination policies. If there are any questions or clarification is needed with respect to how these policies and laws may affect a particular job function, contact the Department's Affirmative Action Office.

Mental Health Referrals

When a Volunteer In Support Towards Others (VISTO) volunteer, support staff or contracted personnel observes a youth exhibiting unusual or bizarre behavior, the volunteer shall immediately notify staff and the AD.

A VISTO Volunteer, support staff or contracted personnel shall not advise, discourage or prevent youth from taking prescribed medication or from seeking mental health counseling.

Complaints

California law requires this agency to have a procedure to investigate citizen's complaints. Written complaints regarding employee misconduct or case management concerns/issues should be submitted to the Facility Director or AD via the Citizen's Complaint form.

The Citizen's Complaint Form is to be completed, signed and dated before submitting. It is against the law to make a complaint that you know to be false. If you make a complaint against a Peace Officer or any Probation Department employee knowing that it is false, you can be prosecuted on a misdemeanor charge.

All support staff, volunteers, contracted service providers, non-sworn personnel and partner agencies must sign below indicating they have received and read the Orientation Handbook.

I HAVE READ AND UNDERSTAND THE RESPONSIBILITIES AND LIMITATIONS AS STATED IN THE ORIENTATION HANDBOOK AND I AGREE TO ABIDE BY THEM WHEN CARRYING OUT MY DUTIES.

PRINT NAME	NAME OF ORGANIZATION
SIGNATURE	DATE