Reform and Oversight Efforts: Los Angeles County Sheriff's Department

October through December 2024

Issued February 26, 2025

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ABOUT QUARTERLY REPORTS

Quarterly reports provide an overview of the Office of Inspector General's regular monitoring, auditing, and review of activities related to the Los Angeles County Sheriff's Department (Sheriff's Department) over a given three-month period. This quarterly report covers Department activities and incidents that occurred between October 1 and December 31, 2024, unless otherwise noted. Quarterly reports may also examine particular issues of interest. This report includes special sections on the following topics:

- Revisions to the Sheriff's Department's Use of Force Policy
- Sheriff's Department's Adoption of Civilian Oversight Commission Recommendations on Deputy Gang Policy
- Letter to a Journalist Threatening Litigation

During the fourth quarter of 2024, the Office of Inspector General also issued the following reports relating to the Sheriff's Department:

- Report Back on Proper Maintenance and Accounting for All Cameras in the Los Angeles County Jails, Court Holding Tanks, and Patrol Station Lockups
- Report on the Sheriff's Department's Taser Policy, Training, and Usage

MONITORING SHERIFF'S DEPARTMENT'S OPERATIONS

Deputy-Involved Shootings

The Office of Inspector General reports on all deputy-involved shootings in which a deputy intentionally fired a firearm at a human, or intentionally or unintentionally fired a firearm and a human was injured or killed as a result. During this quarter, there were two incidents in which people were shot or shot at by Sheriff's Department personnel. The Office of Inspector General staff responded to each of these deputy-involved shootings. Two people were struck by deputies' gunfire, one fatally. The information in the following shooting summaries is based on the limited information provided by the Sheriff's Department and is preliminary in nature. While the Office of Inspector General receives information at the walk-through at the scene of the shooting, receives preliminary memoranda with summaries, and attends the Sheriff's Department Critical Incident Reviews, the statements of the deputies and witnesses are not provided until the Sheriff's Department completes its investigation. The Sheriff's Department permits the Office of Inspector General's staff limited access to monitor the ongoing

investigations of deputy-involved shootings. The Sheriff's Department also maintains a page on its website listing deputy-involved shootings that result in injury or death, with links to incident summaries and video.

Santa Clarita Station: Hit-Shooting – Non-Fatal

On October 11, 2024, at approximately 12:10 p.m., deputies from the Santa Clarita Station responded to a radio call regarding a domestic dispute with shots fired on Sloan Canyon Road. A deputy arrived at the scene and saw the suspect, a 43-year-old Hispanic man holding a handgun and struggling with a woman next to a white Lexus SUV. The man turned toward the deputy with the gun in his hand, and the deputy fired one round striking the suspect in the head. The man fell to the ground, and the deputy placed him in handcuffs and called for backup. Los Angeles County Fire Department paramedics arrived, treated the man, and transported him to the hospital for non-life-threatening injuries.

No other deputies were involved in this incident. The suspect's 6-year-old son was seated in the SUV during the incident and was not injured. Investigators recovered two loaded handguns at the scene as well as what appeared to be a spent shell casing.

The Sheriff's Department posted a Critical Incident Briefing on its website with video from the deputy's body-worn camera.

Areas for further inquiry:

Did deputies provide any medical aid prior to the arrival of the paramedics? Did the deputies un-cuff the suspect when medical aid was being rendered?

East Los Angeles Station: Hit-Shooting – Fatal

On December 10, 2024, at approximately 12:55 p.m., deputies from the East Los Angeles Station responded to a report of a man with a gun at a convenience store on Olympic Boulevard in East Los Angeles. The reporting party stated that the subject was inside the store when they observed what they believed was a handgun in his waistband, but the subject was not causing a disturbance.

Three deputies responded in two marked patrol cars. Before the deputies arrived, the subject reportedly purchased goods and left the store, at which point the clerk locked the doors to keep him from re-entering.

Although all three of the deputies were equipped with body-worn cameras (BWCs), none of them activated the devices before the shooting. Two of the deputies activated their BWCs shortly after the shooting, capturing one minute of video of the shooting without audio for the automatic buffer period programmed in the BWCs. Both those

deputies were positioned behind their patrol car doors for cover, and the vehicles' doors, windshield pillars, and windshields obscure the view of the subject during part or the entire interaction. And because the BWC video does not contain audio, it does not reveal any of the deputies' communications with or commands to the subject. Surveillance cameras for the convenience store also captured the shooting without audio.

According to the deputies' accounts and the available video, upon arriving, they pulled into the store's parking lot and contacted the suspect, a 24-year-old White man wearing over-the-ear headphones, who was standing at the closed entrance of the store, gesturing at the clerk with his back to the parking lot. The deputies reportedly saw the gun in his waistband as they pulled up. Security footage from the store shows the subject with a gun visible in his rear waistband. The deputies got out of their patrol cars and, using the doors for cover, reportedly commanded him to put his hands up. Initially, he complied, but then began shifting a phone and card he was holding from hand to hand, gesturing, dropping his hands, and pacing to one side. He then removed the handgun from his waistband, holding its handle between his thumb and fingertips so that it dangled upside-down while he gestured at it with the other hand. Deputies reportedly told him to drop it, but he shifted it, so he held the handle in his palm. Three deputies then fired a total of 13 rounds at the man, striking him numerous times.

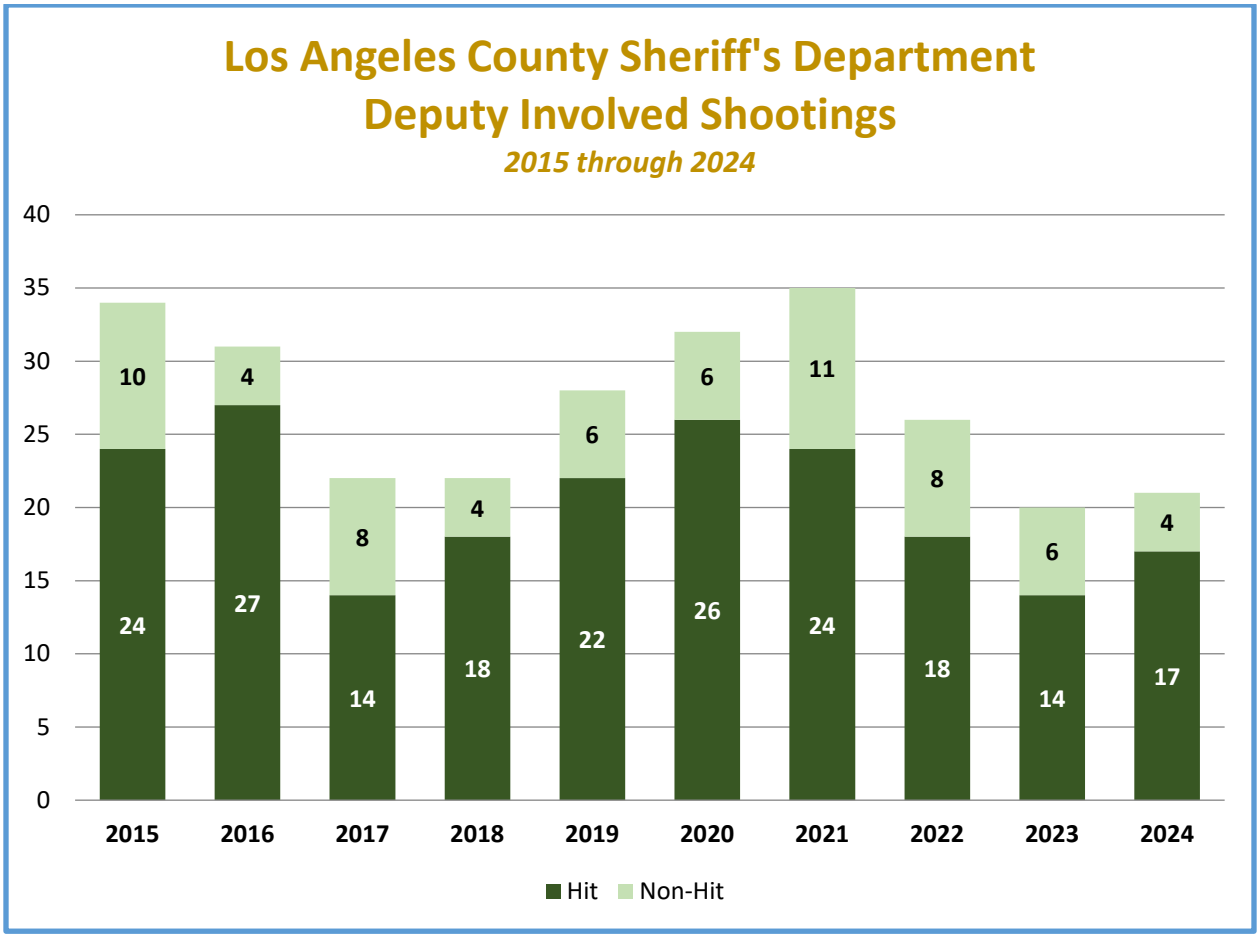
The deputies approached the subject and moved him away from the handgun and then rendered aid. Los Angeles County Fire Department paramedics transported the man to the hospital where he was pronounced dead. A replica semi-automatic firearm, later determined to be a BB gun, was retrieved at the scene.

The Sheriff's Department posted a Critical Incident Briefing on its website with video from the deputies' body-worn cameras and from the convenience store's surveillance cameras.

Areas for further inquiry:

Did the deputies formulate a plan prior to arriving at the location? Were the tactics used consistent with best practices? What commands did the deputies give the deputies? Was there any attempt to de-escalate the situation? Were the number of rounds fired excessive? Did the deputies activate their body-worn cameras in compliance with Sheriff's Department policy?

Comparison to Prior Years



District Attorney Review of Deputy-Involved Shootings

The Sheriff's Department's Homicide Bureau investigates deputy-involved shootings in which a person is hit by a bullet, except for deputy-involved shootings that result in the death of an unarmed civilian, which California law requires the Attorney General to investigate.[1] For those shootings it investigates, the Homicide Bureau submits the completed criminal investigation of each deputy-involved shooting that results in a person being struck by a bullet and which occurred in the County of Los Angeles to the

[1] In 2020, the California Legislature passed AB 1506, which requires that a state prosecutor investigate all shootings involving a peace officer that result in the death of an unarmed civilian. *See* A.B. 1506 (McCarty 2020) (codified at Govt. Code § 12525.3). The Attorney General's findings in these investigations are reported in the section of this report below entitled *California Department of Justice Investigations of Deputy-Involved Shootings Resulting in the Death of Unarmed Civilians***.** Until the law took effect in 2021, the Sheriff's Department's Homicide Bureau investigated all deputy-involved shootings in which a person was hit by a bullet.

Los Angeles County District Attorney's Office (District Attorney's Office or District Attorney) for review and possible filing of criminal charges.

Between October 1 and December 31, 2024, the District Attorney's Office issued 11 findings on deputy-involved shooting cases involving the Sheriff's Department's employees.[2]

- In the January 27, 2024, non-fatal shooting of Jerald Hardcastle, the District Attorney opined in a memorandum dated October 16, 2024, that the deputies Daniel Rodriguez, Juan Cruz, Richard Simms and Aaron Agajanian acted in lawful self-defense when they fired their weapons and that deadly force was necessary to defend against an imminent deadly threat.

- In the December 18, 2021, non-fatal shooting of Nicholas Hernandez, the District Attorney opined in a memorandum dated October 17, 2024, that the deputies Jeremy Licona and Aaron Agajanian acted in lawful self-defense when they fired their weapons reasonably believing, based on the totality of the circumstances, that deadly force was necessary to defend against an imminent deadly threat.

- In the September 23, 2021, fatal shooting of Barry Ross, the District Attorney opined in a memorandum dated October 21, 2024, Deputy Trevor Moore acted in lawful self-defense at the time his weapon was fired.

- In the November 26, 2022, non-fatal shooting of Bridget Blaney, the District Attorney opined in a memorandum dated November 6, 2024, that Deputy Ernesto Valencia acted in lawful self-defense at the time his weapon was fired.

- In the October 6, 2010, fatal shooting of Marco Vazquez, Jr. and the non-fatal shooting of Christopher Vazquez, the District Attorney opined in a memorandum issued November 10, 2024, that there is insufficient evidence to prove that Sergeant Vincent Cisneros, and deputies Patricia Miramontes and Gregory Nickell did not act in lawful self-defense at the time they fired their weapons.

- In the September 4, 2023, fatal shooting of Robert Bryant Boozer, the District Attorney opined in a memorandum issued November 13, 2024, that Deputy Bobby Olivares acted in lawful self-defense when he fired his weapon,

[2] The District Attorney's Office posts its decisions on deputy and officer-involved shootings on its website under Officer-Involved Shootings. The Office of Inspector General retrieves the information on District Attorney decisions from this webpage. As of the writing of this report, District Attorney decisions through November 27, 2024, were posted.

reasonably believing, in the totality of the circumstances, that deadly force was necessary to defend against an imminent deadly threat.

- In the October 5, 2021, fatal shooting of Jesse Medrano, the District Attorney opined in a memorandum issued November 13, 2024, that deputies Chase Morales and Jorge Fajardo, along with California Highway Patrol officers, that the evidence supports a reasonable belief by the deputies and officers, that the use of deadly force was necessary in self-defense when they each fired their duty weapon.

- In the December 16, 2019, fatal shooting of Jorge Serrano, the District Attorney opined in a memorandum issued November 14, 2024, that deputies Nikolis Perez and Kevin Thompson acted in lawful self-defense and defense of another when they used deadly force against Jorge Serrano.

- In the November 12, 2021, non-fatal shooting of Manuel Fidel Chavez, the District Attorney opined in a memorandum issued November 19, 2024, that the evidence establishes that the use of deadly force by deputies Estevan Perez, Matthew Doud and Michael Thompson, was in lawful defense of themselves and others.

- In the February 15, 2022, fatal shooting of Stephanie Browne, the District Attorney opined in a memorandum issued November 26 2024, that insufficient evidence exists to prove beyond a reasonable doubt that deputies Michael Thompson and Luis Valle did not act in lawful self-defense when they each fired their duty weapon.

- In the June 6, 2019, fatal shooting of Ryan Twyman, the District Attorney opined in a memorandum issued November 27, 2024, that there is insufficient evidence to prove beyond a reasonable doubt that deputy Christopher Muse did not act in a lawful self-defense when he used deadly force against Ryan Twyman.[3]

[3] The other deputy involved in the shooting, Deputy Andrew Lyons, fired his handgun at the vehicle driven by Mr. Twyman while the vehicle was still moving. Deputy Lyons then retrieved a Department-issued semiautomatic assault rifle and resumed firing at the vehicle after it stopped. The District Attorney filed criminal charges against Deputy Lyons. In return for a plea to one felony count of assault with a semiautomatic firearm and one count of assault under color of authority, Deputy Lyons was placed on probation for 2 years with a 30-day jail sentence . In addition to his sentence, Deputy Lyons surrendered his POST certification and as a result is no longer certified as a peace officer in California. See the District Attorney's press release of January 12, 2024: *District Attorney Gascón Announces Conviction of Sheriff's Deputy in Fatal On-Duty Shooting*.

Homicide Bureau's Investigation of Deputy-Involved Shootings

For the present quarter, the Homicide Bureau reports that it has 11 shooting cases involving Sheriff's Department personnel open and under investigation. The oldest case in which the Homicide Bureau maintained an active investigation at the end of the quarter relates to a May 3, 2024, shooting in the jurisdiction of Industry Station. For further information as to that shooting, please refer to the Office of Inspector General's report *Reform and Oversight Effort: Los Angeles Sheriff's Department, April through June 2024*. The oldest case that the Homicide Bureau has open is a 2019 shooting in the city of Lynwood, which was submitted to the District Attorney's Office and for which the Sheriff's Department still awaits a filing decision.

This quarter, the Sheriff's Department reported it sent one deputy-involved-shooting case to the District Attorney's Office for filing consideration.

California Department of Justice Investigations of Deputy-Involved Shootings Resulting in the Death of Unarmed Civilians

Under California law, the state Department of Justice (DOJ) investigates any peace officer-involved shooting resulting in the death of an unarmed civilian and may issue written reports or file criminal charges against a peace officer, if appropriate.[4] The DOJ is currently investigating four shootings involving deputies from the Sheriff's Department, the oldest of which occurred in February 2022. During the last quarter, the DOJ issued no written reports regarding shootings involving Sheriff's Department deputies.

Internal Criminal Investigations Bureau

The Sheriff's Department's Internal Criminal Investigations Bureau (ICIB) reports directly to the Division Chief and the Commander of the Professional Standards Division. ICIB investigates allegations of criminal misconduct committed by Sheriff's Department personnel in Los Angeles County.[5]

The Sheriff's Department reports that ICIB has 74 active cases. This quarter, ICIB reports sending no cases to the District Attorney's Office for filing consideration. The District Attorney's Office is still reviewing 21 cases from ICIB for filing. The oldest open

[4] Gov't Code § 12525.3(b).

[5] Misconduct alleged to have occurred in other counties is investigated by the law enforcement agencies in the jurisdictions where the crimes are alleged to have occurred.

case that ICIB submitted to the District Attorney's Office and still awaits a filing decision relates to conduct that occurred in 2018, which ICIB presented to the District Attorney in 2019.

Internal Affairs Bureau

The Internal Affairs Bureau (IAB) conducts administrative investigations of policy violations by Sheriff's Department employees. It also responds to and investigates deputy-involved shootings and significant use-of-force cases. If the District Attorney declines to file criminal charges against the deputies involved in a shooting, IAB reviews the shooting to determine whether Sheriff's Department personnel violated any policies during the incident.

The Sheriff's Department also conducts administrative investigations at the unit level. The subject's unit and IAB determine whether an incident should be investigated by IAB or remain a unit-level investigation based on the severity of the alleged policy violations.

During this quarter, the Sheriff's Department reported opening 113 new administrative investigations. Of these 113 cases, 37 were assigned to IAB, 57 were designated as unit-level investigations, and 19 were entered as criminal monitors (in which IAB monitors an ongoing criminal investigation conducted by the Sheriff's Department or another agency). In the same period, IAB reports that 99 cases were closed by IAB or at the unit level. There are 487 pending administrative investigations, of which 329 are assigned to IAB and the remaining 158 are unit-level investigations.

Civil Service Commission Dispositions

The Civil Service Commission hears employees' appeals of major discipline, including discharges, reductions in rank, or suspensions of more than five days. Between October 1 and December 31, 2024, the Civil Service Commission issued final decisions in two cases involving Sheriff's Department employees.[6] In both cases, the Civil Service Commission sustained the Department's discipline.

One of these cases concerned a custody assistant and the other concerned a sworn peace officer at the rank of deputy. Both cases sustained Sheriff's Department decisions to discharge a custody assistant and suspend the sworn employee.

[6] The Civil Service Commission reports its actions, including final decisions, in minutes of its meetings posted on the County's website for commission publications.

Employee Position	Date of Department action	Case number	Department actions	Date of Civil Service Hearing	Civil Service decision
Custody Assistant	**1-4-22**	**22-10**	**Discharge**	**10-9-24**	**Sustained the Department's decision.**
Deputy Sheriff	**2-6-23**	**23-28**	**10-day suspension**	**7-17-24**	**Sustained the Department's decision**

The Sheriff's Department's Use of Unmanned Aircraft Systems

According to data posted by the Sheriff's Department, it deployed its Unmanned Aircraft Systems (UAS) 24 times between October 1 and December 31, 2024, as summarized in the chart below, which reflects data from the Sheriff's Department Transparency page as of January 16, 2025.[7]

DATE	OPERATION TYPE	LOCATION	SUMMARY
10-2-24	High-Risk Tactical Operations	Malibu	UAS used to assist with a high-risk tactical operation to search for a felony suspect in the area along the coastline.
10-5-24	Search and Rescue	Agoura Hills	UAS used to search for a missing person.
10-6-24	Barricaded Suspect Operation	Palmdale	SEB responded to assist Palmdale station a barricaded suspect operation. UAS used to locate an armed suspect inside a residence.
10-11-24	High-Risk Tactical Operations	Calabasas	Malibu/Lost Hills station conducted a high-risk tactical operation to search for an elderly female believed to be injured on a large residential property owned by an armed man. UAS was used to provide overwatch for deputy personnel.
10-18-24	High-Risk Tactical Operations	Topanga	Malibu/Lost Hills station conducted a high-risk tactical operation to search for a suspect of assault with a deadly weapon. UAS was used to provide overwatch for deputy personnel.
10-25-24	High-Risk Warrant Service	Baldwin Park	SEB personnel serving arrest warrant for armed suspect. UAS was used to search interior of location prior to entry.
10-29-24	Search and Rescue	Sierra Madre	SEB personnel responded to assist Search and Rescue Team to search for a missing hiker. UAS used to search for missing hiker. Unable to locate hiker.
10-30-24	High-Risk Tactical Operations	East Los Angeles	SEB personnel deployed to assist Sheriffs Response Team. UAS used to assist to locate persons assaulting deputy personnel with explosives.

[7] MPP5-09/570.10 - Unmanned Aircraft System Procedures requires that the Special Enforcement Bureau (SEB) unit commander notify the executive director of the COC of an authorized or unauthorized UAS use within 48 hours of deployment. In checking for such notifications from the Department, the COC executive director found a notification from December 2023. The Office of Inspector General is inquiring as to whether the Department is regularly notifying the COC as required by the MPP and also requested supporting documentation for UAS deployments to search for a felony suspect.

11-7-24	High-Risk Tactical Operations	Calabasas	Malibu/Lost Hills Station personnel deployed UAS regarding calls of illegal shooting or transformers blowing in high fire danger, red flag wind area. UAS unable to located source of noise and no fire danger observed.
11-10-24	Search and Rescue	Topanga	Malibu/Lost Hills Station personnel deployed UAS regarding to search for possible human remains over a cliffside. UAS unable to locate any human remains. Source of odor determined to be a dead animal.
11-17-24	Explosive Ordinance Detection	Santa Monica	SEB personnel deployed UAS to visually inspect interior and exterior of home. SEB used UAS technology to identify and observe destructive devices. UAS used to identify devices construction for render safe procedures.
11-23-24	High-Risk Operations	Agoura Hills	Malibu/Lost Hills Station personnel conduct search for a felony suspect. UAS used to assist search.
11-29-24	High-Risk Operations	Malibu	Malibu/Lost Hills Station personnel conduct search for a felony suspect. UAS used to assist search.
11-30-24	Barricaded Suspect Operation	East Los Angeles	SEB conduct search for felony suspect. UAS used to assist search.
12-3-24	Search and Rescue	Calabasas	Malibu/Lost Hills Station personnel used UAS to check for occupants of a vehicle located over a cliff. No persons located or seen within the vehicle.
12-10-24	High-Risk Tactical Operation	Cerritos	SEB personnel assisted Cerritos station to locate an armed and barricaded suspect. UAS used to locate the suspect.
12-17-24	High-Risk Tactical Operation	Malibu	Malibu/Lost Hills Station personnel used UAS to conduct a search for reported fire and smoke during a high wind event. Hot spots of fire reported to fire personnel.
12-18-24	Barricaded Suspect Operation	Carson	SEB personnel responded to location regarding a barricaded suspect. UAS used to view interior and suspect location.
12-21-24	Search and Rescue	Malibu	Malibu/Lost Hills Station personnel used UAS to check several vehicles over the cliff side for occupants. No persons found inside vehicles.
12-23-24	High-Risk felony suspect containment	Hidden Hills	Malibu/Lost Hills Station personnel used UAS to search for a felony suspect. One suspect detained.
12-23-24	Search and Rescue	Malibu	Malibu/Lost Hills Station personnel used UAS to search for a critical missing adult. Missing person located.
12-24-24	Search and Rescue	Agoura Hills	Malibu/Lost Hills Station personnel used UAS to search for a critical missing adult. Missing person unable to be located.
12-27-24	High-Risk Operation	Calabasas	Malibu/Lost Hills Station personnel used UAS to search for a felony suspect.
12-30-24	Search and Rescue	Westlake Village	Malibu/Lost Hills Station personnel conduct search and rescue for a missing hiker. UAS used to search for missing hiker.

Semi-Annual Report on Implementation of the Family Assistance Program

The Los Angeles County Board of Supervisors established the Family Assistance Program (Family Assistance), first in 2019 as a one-year pilot that it later made permanent, with the aim of improving compassionate communication and providing trauma-informed support to families of those who died following a fatal use of force by a

Sheriff's Department employee or while in the custody of the Sheriff's Department. The Office of Inspector General reports semi-annually on Family Assistance in its quarterly reports on the Sheriff's Department.

Family Assistance Status

On February 8, 2024, the administration of Family Assistance officially transitioned from the Department of Mental Health (DMH) to the Office of Violence Prevention (OVP) within the Department of Public Health (DPH), pursuant to the plan to make Family Assistance permanent as recommended to the Board in 2022.[8] DPH reported to the Board on the OVP Family Assistance Program in its report dated January 21, 2025, *Permanent Funding and Implementation of the Family Assistance Program*. OVP has a webpage with an overview of Family Assistance with links to the Family Assistance brochure in English and in Spanish and to the Family Assistance Application Form.

OVP reports that OVP and the Los Angeles County Medical Examiner (DME) finalized a draft Memorandum of Understanding (MOU) that outlines the roles and responsibilities of the two Psychiatric Social Workers (PSW) IIs that will be housed at DME including the process for next-of-kin notifications and the process for families to claim the decedent's personal effects and property. The MOU is currently being processed by DPH - Contracts and Grants Division. Once the MOU between OVP and DME is executed, the PSW IIs will begin working onsite at the DME.

In March 2024, OVP formed a multidisciplinary work group that meets monthly to discuss program design and implementation, protocols, eligibility criteria, and reviews cases. The work group includes representatives from the Sheriff's Department, DME, the Office of Inspector General, the Sheriff Civilian Oversight Commission (COC), Los Angeles County District Attorney Office, DMH, Los Angeles County Correctional Health Services, and Los Angeles Office of the County Counsel. In collaboration with the workgroup partners, OVP drafted Family Assistance protocols, which are expected to be approved in February 2025.

Family Assistance Service Data

OVP reports that from July 1 to December 31, 2024, OVP was notified of 25 families who experienced the death of a loved one through a fatal use of force by a Sheriff's

[8] *See Office of Inspector General's Semi-Annual Report on Implementation of the Family Assistance Program and Report Back on Permanent Support for Families Affected by Los Angeles County Sheriff's Department: Identifying Sustainable Funding for and Streamlining the Family Assistance Program (Item No.14, Agenda of July 9, 2019 and Item No. 9, Agenda of October 19, 2021)* (Feb. 22, 2022).

Department employee or while in their loved one was in the custody of the Sheriff's Department. Out of these 25 deaths, 20 individuals lost their lives while in custody at a LASD facility. The remaining 5 individuals died due to a fatal use of force. OVP engaged with 23 families and provided at least some Family Assistance services. The remaining 2 families did not respond to multiple outreach efforts to provide them assistance. OVP distributed burial expenses to 13 families, with expenses ranging from $1,391 to $7,500, totaling approximately $80,335. for the period. In its report, DPH notes that families sometimes incur burial and other expenses that may be covered by the program in an amount greater than the $7,500 maximum. The DPH report recommends aligning the burial expense limit with the state's California Victims of Crime Compensation limit as they were prior to the state increasing the limit in 2022, with the limit now $12,818.

Status of the Sheriff's Department's Adoption of an Updated Taser Policy and Implementation of a System of Tracing and Documenting Taser Use

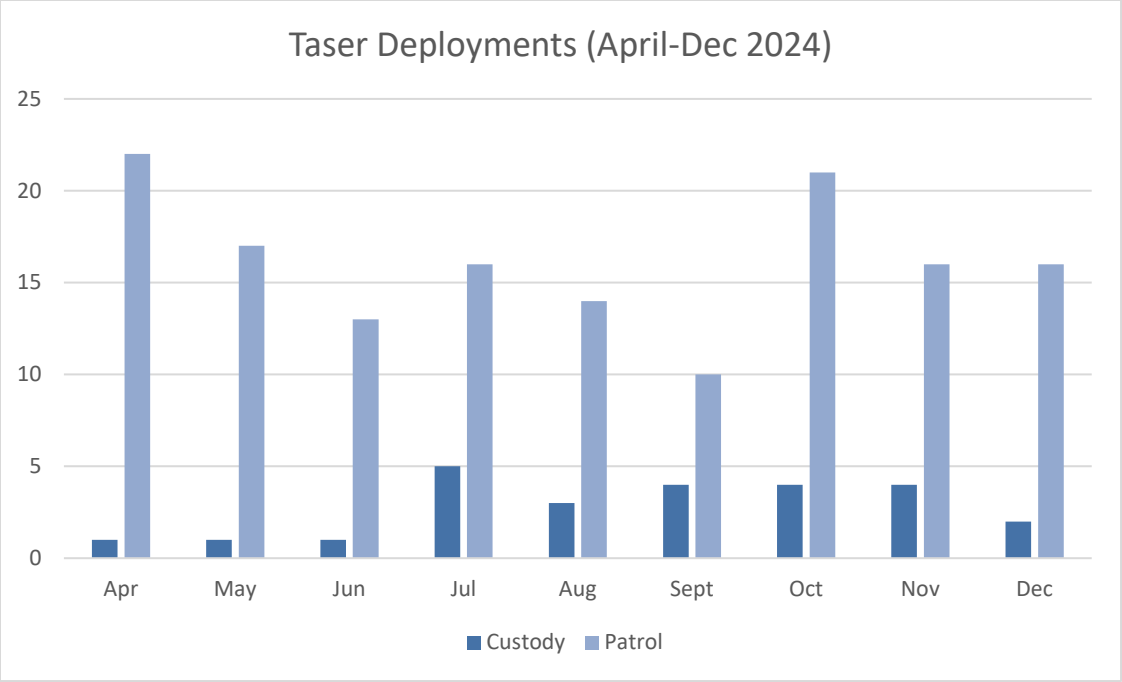
Status of Taser Policy Implementation and Training

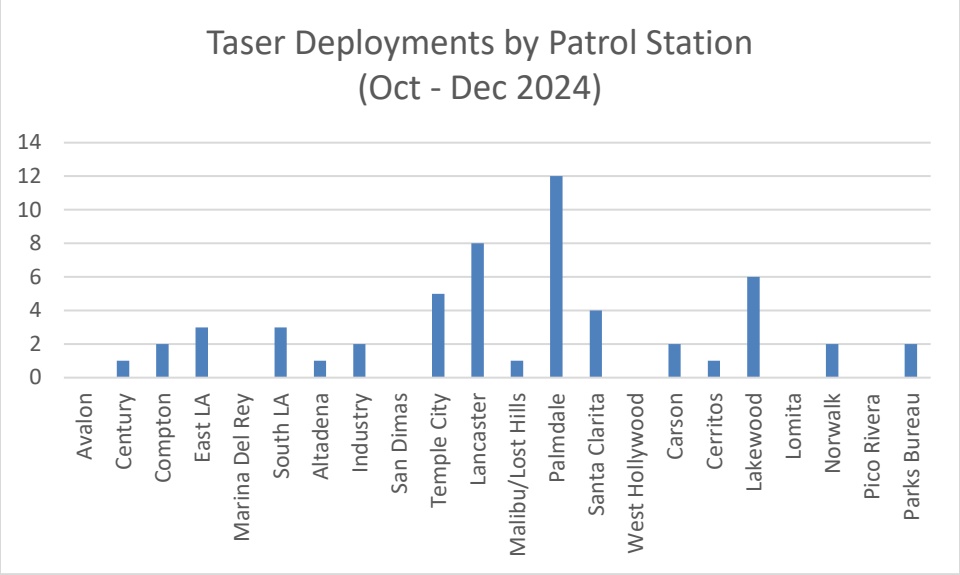
On October 3, 2023, the Board of Supervisors passed a motion instructing the Sheriff's Department to revise its Taser policies and incorporate best practices from other law enforcement agencies to ensure its policies complied with State and Federal law. The motion directs the Inspector General to include in its quarterly reports to the Board the status of the Sheriff's Department updated Taser policy, deputy compliance with updated policies and training, and documentation on the Department's Taser use.

On December 16, 2024, the Office of Inspector General published a detailed analysis of the policy titled *Report on the Sheriff's Department's Taser Policy, Training, and Usage*. As set forth in that report, the Sheriff's Department purchased 3,197 Taser 10s and conducted its first Taser 10 training class on July 17, 2024. As of the end of December 2024, approximately 1,400 deputies and sergeants in the Patrol Division had attended the 8-hour training course for the Taser 10 and been equipped with Taser 10s; approximately 1,200 of the 1,400 employees trained attended the course during the fourth quarter of 2024.

Tracking Taser Use

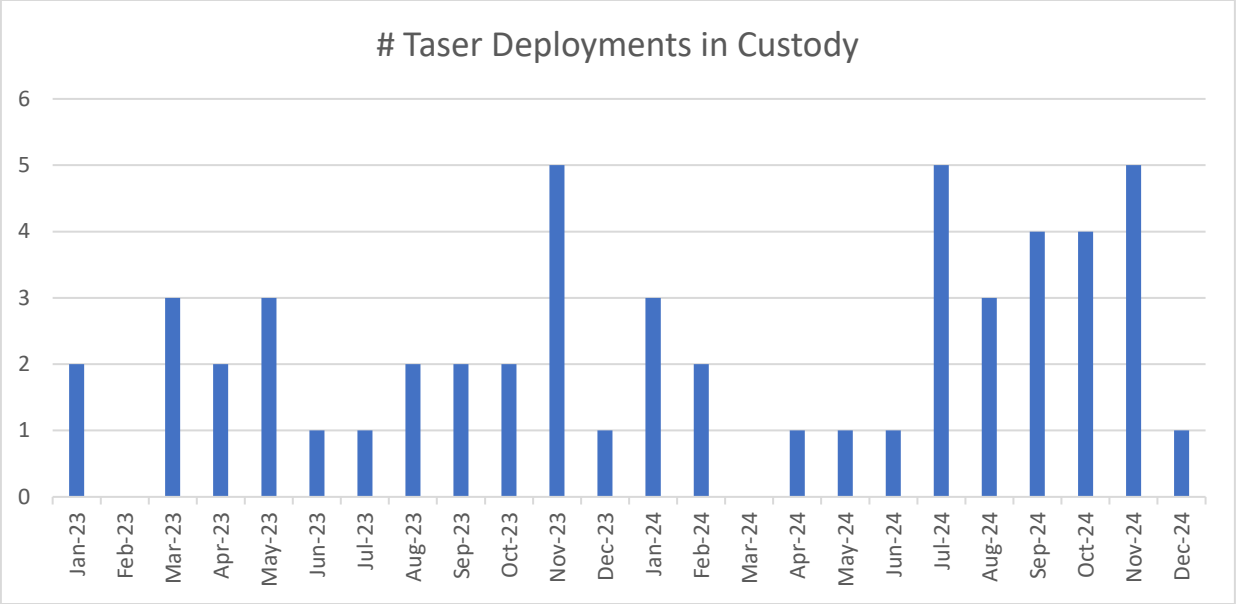
In May 2024, the Sheriff's Department launched a web dashboard reporting Taser usage after April 1, 2024, by patrol station or facility, date, and subject description. Beginning in July 2024, the Department began including in that data the "Result of the Use of Force" (i.e., whether the use resulted in serious injury or death) for all incidents that occurred on or after July 1, 2024.





Taser Use in Custody

The following chart reflects the number of use-of-force incidents in custodial settings over the past two years in which deputies employed a Taser, according to the *Monthly Force Synopsis* that the Sheriff's Department produces and provides to the Office of Inspector General each month:



Review of Sheriff's Department's Internal Audits

The Office of Inspector General's office reviews audit work plans and completed audits performed by the Sheriff's Department's Audit and Accountability Bureau (AAB). Going forward, the Office of Inspector General will provide a broad overview of the audits reviewed during the quarter focusing on the information that is of the greatest public interest. Links to each audit on the Sheriff's Department webpage are provided for access to specifics including the auditing period and sample size. During the fourth quarter of 2024, the Office of Inspector General reviewed 11 audits and one audit work plan:[9]

- Inmate Welfare Fund (IWF) Audit – Financial Programs Bureau (2023-10-A): an assessment of the policies and procedures for adherence to internal controls, County rules, and best practices for procurement and expenditures. The audit makes appropriate recommendations to ensure that policies are regularly updated, and staff are trained to ensure adherence to internal controls. The audit did not cover the use of funds for inmate welfare, which is of greater concern to the County given that the IWF is funded by revenue from jail commissary sales

[9] Audits are not reviewed until after the Sheriff's Department completes the audit. Thus, the Office of Inspector General review may not correspond to the quarter in which the audit is dated.

as noted in the Board motion of July 9, 2024.[10] The Office of Inspector General report, *Report Back on People Over Profit: Fairness and Equity in Commissary Prices for the Los Angeles County Jails* discusses the relationship between commissary pricing and IWF funding.

- Body-Worn Camera Audit – Lakewood Sheriff's Station (2024-4-A): an assessment of the use of body-worn cameras (BWC) including requirements for training, activation, recording, and proper data entry for BWC exemptions. The audit found 100% compliance with training, 87% compliance with proper activation, 80% compliance with continuous recording, 86% compliance with proper entry of video content information, 82% compliance with proper entry of video retention, 97% compliance with timeliness in uploading video recordings, 81% compliance with proper identification of video for non-investigative/non-enforcement contacts and 65% compliance with proper use of notations for clearances not requiring a BWC recording. The audit found 0% compliance for documenting the reason for delayed BWC activation and for documenting incomplete video recordings. Because the audit only analyzed a randomized sample of BWC recordings, the data analyzed in the audit did not include instances where the deputy entirely failed to activate the BWC when required to do so under Departmental policy, resulting in the absence of any recording at all.[11] Additionally, the audit does not cover the required supervisory review of BWC activation compliance, a necessary tool for improving compliance. While the audit makes appropriate recommendations, they are limited to corrective action at Lakewood station and did not make any departmentwide recommendations.

- Stops and Detentions Performance Audits Part II – Supervisory Review and Deputy's Daily Worksheet (2024-7-A): an assessment of the process and controls for supervisory reviews of Deputy's Daily Worksheets (DDWS) and the implementation of recommendations made by the Antelope Valley Monitoring Team (MT or monitoring team) based on a September 2023 audit by the

[10] See Board motion dated July 9, 2024, *People Over Profit: Fairness and Equity in Commissary Prices for the Los Angeles County Jails*.

[11] The audit identified a total of 4,773 BWC recordings. However, Office of Inspector General inspectors noted that the Department's BWC Dashboard, which also tracks recordings, tallied 5,658 recordings for the audit period. Additionally, the BWC Dashboard indicated a total of 154 calls/observations that required BWC video but did not contain any BWC recording.

monitoring team.[12] The Departmental audit found a lack of established processes and controls to ensure all DDWS Log Compliance checks were submitted, that the stations lack effective DDWS log review processes and controls for weekly reviews by sergeants, a failure of watch deputies and sergeants to thoroughly review the logs, and a failure to direct the deputies to correct errors. Additionally, AV unit orders were insufficient for the stations to track repeated DDWS log errors and the 15-day unit order requirement to document DDWS log reviews did not align with the CAD system's 7-day and 10-day time windows. The audit concluded that this lack of processes increased the *risk of inadequate and inaccurate data in the CAD system*, which the auditors determined increased the risk of inappropriate decision making.[13] The audit makes recommendations to improve processes to enhance the Antelope Valley (AV) stations operations and also includes the status of adopting the monitoring team's recommendations in its audit along with corrective action to fully implement the monitoring team's recommendations.

- Public Complaints Audit Part I – Assessment of Availability and Acceptance of Complaint Information (2024-23-A): an assessment of availability and acceptance of complaint information for the AV stations. To evaluate the complaint process at the AV stations, the auditors submitted 2 email complaints, 6 certified mail-in complaints, and 23 telephone complaints.[14] The audit accessed the availability of complaint materials at each station, each of which was found to be in 100% compliance, and the acceptance of public complaints, for which there were areas of noncompliance. For mail-in complaints, the combined AV station compliance total was 67%, for email complaints it was 100%, for the Department 800 number it was 86%, for the AV stations compliance with calls being transferred without delay it was 81% and for supervisor's willingness to accept

[12]The monitoring team is the monitor for a settlement agreement by the Sheriff's Department with the United States Department of Justice covering the two Antelope Valley stations, Lancaster and Palmdale. For information on the AV Settlement Agreement, see *Monitoring of the Antelope Valley Settlement Agreement* to review the agreement and to access related documents. The September 2023 MT audit is *Antelope Valley Monitoring Team – First Stops and Bias-Free Policing Audit* (September 2023)

[13] CAD stands for Computer-Aided Dispatch.

[14] The 2 email complaints were submitted through the LASD.org website, the 6 mail-in complaints were sent to both the AV stations and the Professional Standards Bureau (PSD), and the 23 telephone complaints were made to the AV stations and the Sheriff's Information Bureau.

the complaint it was 79%.[15] While the audit noted some glitches with the usability of the online complaint forms in Spanish, steps were taken to fix the problems and reported in the audit. The audit report makes appropriate recommendations for corrective action. While the auditors submitted complaints in English and Spanish only, the report recommends responding to complainants in the same language as the complaint.

- Public Complaints Audit Part III Investigation and Management Review and Oversight of Public Complaints – (2024-25-A): an assessment of investigations of complaints, management review, and oversight procedures for complaints at the AV stations. The audit reviewed Watch Commander Service Comment Reports (WCSCR or complaints) for the AV stations. The audit looked at complaints submitted during the first quarter of 2024, that were to be completed by the date the data was extracted. For both the AV stations, this was a total of 29 complaints. For the Palmdale station, 22% of the complaints were completed timely, for the Lancaster 0% of the complaints were completed. Specific sub-objectives for the handling of complaint investigations are noted in the audit, with some of Palmdale's achieving compliance rates of 100% for seven of the sub-objectives but falling below the metrics required by the AV Settlement Agreement for the remaining sub-objectives. Because Lancaster did not complete any of the investigations, the compliance rate was 0%. The audit makes detailed recommendations toward achieving compliance with the AV Settlement Agreement.

- Stops and Detentions Audit Part I – Backseat Detentions (2024-10-A): an assessment of explanations for backseat detentions to civilians and documentation of reasons for the backseat detentions. The audit found that the AV stations failed to meet the compliance metrics for the two metrics measured: (1) explanation of backseat detentions to civilians (40%) and (2) backseat detentions documentation and articulation (70%).[16] The settlement agreement

[15] The breakdown for each station may be found in the link to the audit in this report. It is noteworthy that for mail-in complaints Lancaster was 100% complaint and Palmdale was at 50% compliance. The compliance rate for the complaints received by PSD was also only 50%. While a Spanish language complaint was received and handled properly, the mail-in complaint in English was not responded to by Lancaster or PSD. Additionally, PSD submitted the complaint to the Lancaster station captain four days beyond the required timeframe.

[16] Backseat detentions are when a subject is placed in the backseat of a patrol vehicle. The percentage of backseat detentions in compliance for each metric are noted here for the AV stations combined. For a breakdown of each station, the audit may be accessed through the Sheriff's Department's Transparency page for audits or following the link to the audit in this report.

requires 90% compliance. Along with other recommendations, the audit makes recommendations to include an MDC/CAD function to allow deputies to digitally attest that they explained the reason for the backseat detention and to require adherence to the Sheriff's Department Body Worn Camera (BWC) policy requiring continuous video coverage of the entire interaction with a subject.

- Stops and Detentions Audit Part V- Initiations of Stops and Detentions – Parole/Probation Searches (2024-15-A): an assessment of stops and detentions by AV deputies focused evaluating the treatment of individuals searched based on their parole/probation status. The audit does not evaluate whether the stops were legally justified, nor does it examine whether racial or ethnic disparities existed in the stops and detentions. While the audit found 80-90% compliance in the combined AV totals for all but one sub-objective, there was notably only 50% compliance at both AV stations in an objective that included the reason for the stop,[17] now a legal requirement in California. While BWC activation was among the metrics in the 80-90%, the rate of compliance with this metric should be closer to the 100% metric required by the AV Settlement Agreement. The audit does not assess supervisors' roles in identifying, addressing, or preventing noncompliance. An evaluation of supervisory practices, particularly during the Daily Stop Audits, is recommended. Finally, the audit fails to identify patterns on noncompliance by specific deputies, units, or shifts, if any, which could identify systemic issues, including ineffective leadership or training. The audit includes recommendations to increase compliance rates.

- Stops and Detentions Audit Part III – Backseat Detentions – Domestic Violence Related (2024-28-A): an assessment of backseat detentions related to domestic violence calls for service at the AV stations. The audit found 63% compliance for the two AV stations in explaining the backseat detentions to the subjects and 66% compliance for both stations for documenting the backseat detention. The audit does not identify systemic reasons for noncompliance or inability to achieve the required 90% metric required by the AV Settlement Agreement. The audit omits any analysis of racial or ethnic demographic patterns in backseat detentions. Additionally, there is some inconsistency in the audit with regard to finding justification for two backseat detentions with similarities to two other

[17]Objective 1(b) of this audit also assessed whether deputies introduced themselves in addition to providing the reason for the stop. A failure in this objective indicated that the deputy either did not introduce themselves, did not state the reason for the stop, or both. When considered separately, compliance with stating the reason for the stop was 80% at the Palmdale station and 100% at the Lancaster station.

backseat detentions that were found to be unnecessary. The audit includes recommendations to increase compliance rates.

- Use of Force Audit Part I – De-escalation and Use of Force Assessment (2024-18-A): an assessment on de-escalation and uses of force at the AV stations. The 100% compliance rate is somewhat surprising as there have been notable recordings of uses of force by AV deputies that evidence a lack of de-escalation and force that is not proportional.[18] The Office of Inspector General notes that the sample size chosen is small and that the exclusion of Category 3 uses of force, which are the most serious, and the conclusions that may be drawn from it are therefore limited. The audit found recurring failures in management oversight, such as delayed notifications to IAB, incomplete documentation, and inaccuracies in reports. The audit also did not analyze whether there were any racial or ethnic disparities related to uses of force.

- Use of Force Audit Part III – Use of Force Training (2024-22-A): an assessment of use-of-force training at the Antelope AV stations that included compliance with mandated use-of-force training.[19] The audit found a combined compliance rate for both stations to be 30% for annual Force Training, 5% for annual Supervisors Use of Force Investigations Refresher Training, and 50% for biennial Deputy Tactics and Survival Training (TAS). Notably, at Palmdale station, ***none*** of the 10 randomly selected personnel completed the annual training for use of force or for supervisors and only 40% completed the TAS training. The audit does not discuss reasons for the lack of compliance with training requirements and does not discuss the availability of training. There are no meaningful recommendations in the audit to increase the compliance rate.

- Stops and Detentions Audit – Initiation of Stops and Detentions – Consent Searches (2024-29-A): an assessment of initiated stops and detentions with an evaluation of policy compliance for consent searches of persons and vehicles by AV station deputies. While most of the sub-objectives that were the subject of the audit had compliance rates between 80-100% combined for the AV stations, the

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[18] See, for example the following videos: New video shows what sparked the controversial arrest in the Antelope Valley, 12/14/2024 LASD DUI Stop, and video embedded in the Los Angeles Times article by Keri Blakinger and James Queally, *Body-cam footage shows Palmdale Sheriff's deputy punching a woman holding her baby* (July 12, 2023).

[19] The audit included data from the AV monitoring team's audit regarding adherence to policies prohibiting interference with photographing or recording law enforcement activities. This portion of the audit is not summarized in this report as the audit was not conducted by the Sheriff's Department.

combined compliance rate for articulation and documentation of the consent search was 45% for the two stations combined. Also noteworthy is the 82% compliance rate for the category on consent search request and response, which falls short of the AV Settlement Agreement compliance metric of 95%. In addition to other recommendations, the auditors recommend that Daily Stop Audits should continue so that supervisors regularly review BWC recordings with deputies to ensure proper introductions to the subjects of stops and that deputies are stating the reason for the stop as soon as practicable. In two of the Lancaster stop reviews, the deputies did not receive consent for the search of the subject, despite being classified as a "Consent" search. In one vehicle search classified as consent, the deputy did not clearly phrase his request to conduct a consent search of the vehicle. The Office of Inspector General recommended policy changes for consent searches in its report: *Reform and Oversight Efforts: Los Angeles County Sheriff's Department October to December 2020* in the section titled, *Consent Search Policy*.

- Stops and Detentions Audit Work Plan East Patrol Division (2024-42-A): A work plan for an audit on stops and detentions in East Patrol Division: The Office of Inspector General reviewed the audit work plan and provided comments to the Sheriff's Department.

Letter to a Journalist Threatening Litigation

On December 12, 2024, the Red State, an online political blog, published an opinion article, *EXCLUSIVE: LA County Sheriff Threatens Investigative Journalist With Lawfare Over X Post*.[20] The article discussed a December 11, 2024 letter sent by an attorney for Sheriff Luna to online journalist CeCe Woods threatening her with a defamation action for a November 10, 2024 post on X that said:

> NEW: Rumors have been heavily circulating throughout @LASDHQ and @LBPD that @LACoSheriff could potentially step down as the head of the largest sheriff's department in the country due to health concerns (multiple sources say Parkinson's disease).

A link to the letter was available through the RedState article. The Office of Inspector General requested a copy of the letter from Sheriff Luna to confirm its accuracy. While a member of the Sheriff's command staff referred us to the copy of the letter on RedState,

[20] The Library of Congress summarizes the RedState as "an American conservative political blog. (*RedState*. United States, 2006. Web Archive. https://www.loc.gov/item/lcwaN0007962/.)

to date the Sheriff has declined to provide us with the letter, instead asking the Office of Inspector General to provide the Sheriff with the reason for requesting the letter. In the email requesting the explanation for our request, a representative of the Sheriff stated that the "letter was sent privately."

As the Office of Inspector General explained in response, we requested the letter as it is a matter of public concern that the Sheriff retained an attorney to threaten litigation against a journalist for publishing a statement about a public official's health. The Sheriff potentially stepping down for health reasons concerns his fitness for duty as a public official and is therefore not a private matter. In fact, the letter refers to Sheriff Luna in his official capacity in the very first sentence thereby acknowledging that the matter is not private. Additionally, on page 3 of the letter in the last paragraph, states, "[y]ou knew that the Statement could cause substantial damages to a public official," further acknowledging that the statement in the post does not refer to a private matter, but rather one of public interest based on the Sheriff's position as an elected public official.

The Office of Inspector General previously reported on instances when Sheriff Villanueva sought to infringe the rights of journalists under the First Amendment of the United States Constitution. The letter sent by Sheriff Luna's attorney attempts to do the same: chill reporting and public discussion on whether the Sheriff is fulfilling the duties of his office. Two Inspector General reports discuss efforts to chill the conduct of journalists: *Report Back on Unlawful Conduct of Los Angeles County Sheriff's Department*, which includes discussions of the treatment of three journalists in the section titled, *Conduct Suppressing the Exercise of First Amendment Rights* and *Reform and Oversight Efforts: Los Angeles County Sheriff's Department - October to December 2023*, specifically the section *Inaccurate and Biased Analysis of First Amendment Violations against a Reporter*. In addition to the Inspector General's reports, the Los Angeles Times reported on Sheriff Villanueva's efforts to chill negative reporting on him, with the most egregious example being a purported investigation of Alene Tchekmedyian, a reporter for the paper, as reported in its article of April 27, 2022, *Villanueva backs off investigation of Times reporter who revealed cover-up*. The article references Sheriff Villanueva's press conference the previous day during which he posted a photograph of Ms. Tchekmedyian and told the press that all parties who acted upon a leaked investigation of a use of force were subjects of an investigation into a criminal leak. Sheriff Luna ran against former Sheriff Villanueva on a platform of transparency and reform and efforts to chill free speech are contrary to such goals.

Finally, the letter to Ms. Woods fails to specifically state the standard for prevailing on defamation case against a public official. Statements that there are rumors that a Sheriff may step down due to health concerns are clearly statements about a public official and are a matter of public interest. While there are passing references in the letter to maliciousness and recklessness, a public official must prove that there was actual

malice in the statement made, yet that standard is not acknowledged in the letter to Ms. Woods. Actual malice means that the statement was made "with knowledge that it was false or with reckless disregard of whether it was false or not." (See *New York Times Co. v. Sullivan* (1964) 376 U.S. 254, 280.) And for the Sheriff to prevail on a summary judgment motion, actual malice must be proven by clear and convincing evidence. (See *Jackson v. Paramount Pictures Corp.* (1998) 68 Cal. App. 4th 10, 27.) Actual malice is only based upon the attitude of the person making the statement toward the truth or falsity of the material published, not on the person's attitude toward the public official. (*Jackson v. Paramount Pictures Corp.* at pages 31-32.) The letter to Ms. Woods is devoid of any evidence that Ms. Woods knew the rumors to be untrue or acted with reckless disregard for the truth. Quite the contrary, some persons replying to the post also mentioned these rumors. Most notably, on November 12, 2024, Keri Blakinger of the Los Angeles Times posted a reply:

> Yeah, I'd concur this was circulating pretty widely![21]

While there were some replies denying that the rumors were true, on the same day as her post, an article authored by Ms. Blakinger appeared in the Los Angeles Times, *Will L.A. County's sheriff run for reelection in 2026? Absolutely Robert Luna says*. The article repeats the rumors and references that Sheriff Luna and his representative acknowledged the existence of such rumors. The article refers to union leaders being "peppered with these horrible rumors" for at least a week. In the article, Ms. Blakinger again described the rumors as widespread.

As far as we are aware, no such letter was sent to Ms. Blakinger or the Los Angeles Times, supporting Ms. Woods and Ms. Blakinger's statements that the Sheriff's health was a widespread topic of conversation, suggesting that Ms. Woods did not know the information was actually false or acting with reckless disregard of its truth. While certainly repeating rumors may be the subject of a defamation action when the person repeating the rumors knows them to be false or acts with reckless disregard for the truth, the fact that the others had heard these same rumors suggest that Ms. Woods did not act with actual malice as required for the Sheriff to prevail in a lawsuit for defamation. Given the high standard for a public official to prevail on a claim for defamation, sending such a letter to a lone online journalist appears to be an attempt to inhibit her right to free speech.

[21] The X post by Ms. Blakinger is accessible through the RedState article.

CUSTODY DIVISION

Jail Overcrowding

Overcrowding in the Los Angeles County jails continues to jeopardize the ability of the Sheriff's Department to provide humane conditions of confinement as required by the Eighth and Fourteenth Amendments to the U.S. Constitution.[22]

The Los Angeles County jails have a Board of State and Community Corrections (BSCC) total rated capacity of 12,404.[23] According to the Sheriff's Department Population Management Bureau Daily Inmate Statistics, as of December 31, 2024, the total population of people in custody in the Los Angeles County jails was 11,846.

The table below show that the daily count of people in custody, according to the Population Management Bureau Daily Inmate Statistics, at Men's Central Jail (MCJ), Twin Towers Correctional Facility (TTCF), Century Regional Detention Facility (CRDF), Pitchess Detention Center East (PDC East), Pitchess Detention Center North (PDC North), Pitchess Detention Center South (PDC South), and North County Correctional Facility (NCCF) on the last day of the previous four quarters. On these dates, three facilities (MCJ, PDC North, and NCCF) that together account for more than half the Department's jail capacity operated over the BSCC rated capacity. The number of people in custody at four of the facilities (MCJ, TTCF, CRDF, and PDC North) on December 31, 2024, exceeded the number of people in custody at these facilities on March 31, 2024.

[22] See *Fischer v. Winter* (1983) 564 F. Supp. 281, 299 (noting that while overcrowding may not be unconstitutional in itself, overcrowding is a root cause of deficiencies in basic living conditions, such as providing sufficient shelter, clothing, food, medical care, sanitation, and personal safety).

[23] The total rated capacity is arrived at by adding the rated capacity for each of the County jail facilities: MCJ 3512, TTCF 2432, CRDF 1708, PDC-East 926, PDC-North 830, PDC-South 782, and NCCF 2214. Some portions of the jail facilities are not included in the BSCC capacity ratings. When referring to the jail facilities, this report includes only the BSCC rated facilities. The rated capacity has not been recently updated and does not take into account the pandemic, understaffing, or the deteriorating physical plant of MCJ, meaning that the current safe capacity of the Los Angeles County jails is certainly substantially lower than the rated maximum.

Facility	BSCC Capacity	Facility Count			
		3/31/24	6/30/24	9/30/2024	12/31/2024
MCJ	3512	3551	3572	3698	3850
TTCF	2432	2156	2378	2378	2350
CRDF	1708	1269	1255	1371	1341
PDC East	926	14	12	20	10
PDC North	830	1187	1286	1276	1221
PDC South	782	674	663	633	462
NCCF	2214	2923	2775	2718	2612

As the chart indicates, PDC East is well under its rated capacity. The Sheriff's Department should explain why it under-utilizes that facility while operating other facilities over their BSCC rated capacities.[24]

Availability of Menstrual Products in the Los Angeles County Jails

On June 25, 2024, the Board of Supervisors (Board) passed a motion requesting the Sheriff's Department and directing the Office of Inspector General, Sybil Brand Commission, and the Sheriff Civilian Oversight Commission to review and report back on policies related to the availability and accessibility of menstrual products in the Los Angeles County jails, in light of recent legislation, and directing the Office of Inspector General to include status on the availability and accessibility of menstrual products in its quarterly reports to the Board, until further notice.

In January 2025, the Office of Inspector General issued its *Report Back On Dignity and Health For People Who Are Incarcerated: Ensuring Accessibility to Menstrual Products in the Los Angeles County Jails, Patrol Lockups and Court Holding Tanks*. The Office of Inspector General will include updates on the availability and accessibility of menstrual products for people in the custody of the Sheriff's Department in its next quarterly report.

Commissary Prices

On July 9, 2024, the Board passed a motion directing the Sheriff's Department to report back on measures taken to ensure commissary prices for people in the Los Angeles

[24] CRDF also operates well below its rated capacity, that facility does not house males and so cannot readily take up excess capacity from other facilities.

County Jails, especially for food, drinks, and hygiene items, are not excessive but remain on par with prices for grocers and retailers. On February 6, 2025, the Office of Inspector General issued its *Report Back on People Over Profit: Fairness and Equity in Commissary Prices for the Los Angeles County Jails.*

In-Custody Deaths

Between October 1 and December 31, 2024, nine people died in the care and custody of the Sheriff's Department. The Department of Medical Examiner's (DME) website currently reflects the manner of death for four deaths: one natural, one suicide, one accident, and one homicide. Currently, there is no public autopsy record for one death which occurred at a hospital, for which the hospital ruled the preliminary cause of death as natural. For the remaining four deaths, the DME findings remain deferred.[25] Three people died at MCJ, one person died at TTCF, one person died at Inmate Reception Center (IRC), one person died at Century Regional Detention Facility (CRDF), and three people died at hospitals after being transported from the jails. The Sheriff's Department posts the information regarding in-custody deaths on a dedicated page on Inmate In-Custody Deaths on its website.[26]

Office of Inspector General staff attended the Custody Services Division Administrative Death Reviews for each of the nine in-custody deaths. The following summaries, arranged in chronological order, provide brief descriptions of each in-custody death:

[25] In the past, the Office of Inspector General has reported on the preliminary cause of death as determined by the Medical Examiner, Correctional Health Services (CHS) personnel, hospital personnel providing care at the time of death, and/or Sheriff's Department Homicide investigators. Because the information provided is preliminary, the Office of Inspector General has determined that the better practice is to report on the manner of death. There are five manner of death classifications: natural, accident, suicide, homicide, and undetermined. Natural causes can include illnesses and disease and thus deaths due to COVID-19 are classified as natural. Overdoses may be accidental, or the result of a purposeful ingestion. The Sheriff's Department and Correctional Health Services use evidence gathered during the investigation to make a preliminary determination as to whether an overdose is accidental or purposeful. Where the suspected cause of death is reported by the Sheriff's Department and CHS, the Office of Inspector General will include this in parenthesis.

[26] Penal Code § 10008 requires that within 10 days of any death of a person in custody at a local correctional facility, the facility must post on its website information about the death, including the manner and means of death, and must update the posting within 30 days of a change in the information.

Date of Death: October 8, 2024
Custodial Status: Pre-trial.[27]
Custody staff at IRC found multiple people, including the decedent, unresponsive in a Courtline[28] holding tank. Custody staff, Correctional Health Services (CHS) staff and paramedics rendered emergency aid, and custody staff and CHS staff administered four doses of Narcan. The person died at the scene. Areas of concern include the quality of Title 15 safety checks, lack of policy and procedures for multiple people in distress, and not searching people in custody prior to being transported to IRC for Courtline. Preliminary manner of death: Unknown. The DME website does not currently reflect the manner of death, and the cause of death is deferred.

Date of Death: October 24, 2024
Custodial Status: Pre-trial.
Custody staff and CHS staff at MCJ found a person in a multi-person cell unresponsive during pill call. Custody staff, CHS staff, and paramedics rendered emergency aid, and custody staff and CHS staff administered four doses of Narcan. The person died at the scene. Areas of concern include changing mental health level of care during a discipline review process, lack of adequate referral process to Addiction Medicine Services (AMS), and the Department's handling of medical refusals. Preliminary manner of death: Unknown. The DME website does not currently reflect the manner of death, and the cause of death is deferred.

Date of Death: October 30, 2024
Custodial Status: Sentenced.
Custody staff at MCJ were alerted to a "man down" and found a person unresponsive in a multi-person cell. Custody staff, CHS staff, and paramedics rendered emergency aid, and custody staff and CHS staff administered five doses of Narcan. The person died at the scene. Areas of concern include lack of adequate referral process to AMS. Preliminary manner of death: Unknown. The DME website currently reflects the manner of death as accident, and the cause of death as effects of fentanyl and heroin.

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[27] For the purposes of custodial status, "Pre-trial" indicates that the person is in custody awaiting arraignment, hearing, or trial. "Convicted, Pre-sentencing" indicates that the person is being held in custody based on a conviction, pending sentencing, on at least some charges, even if they are in pre-trial proceedings on other charges. "Sentenced" indicates that the person is being held on the basis of a sentence on at least some charges, even if they are in pre-trial proceedings on other charges.

[28] Courtline is the holding area where persons going to court are held prior to being transported to court and where they are held upon their return before being transferred to their assigned housing location.

Date of Death: November 10, 2024
Custodial Status: Pre-trial.
On October 29, 2024, custody staff at TTCF found a person exhibiting signs of distress during a Title 15 safety check. The person was transported to Los Angeles General Medical Center (LAGMC) for a higher level of care. On November 10, 2024, the person died at the hospital while receiving medical treatment. Areas of concern include the mental health evaluation following Behavioral Observation and Mental Health Referral reports, custody staff using force on the person (while he was restrained) prior to transporting him to the hospital, and lack of adequate referral process to AMS. Preliminary manner of death: Unknown. The DME website currently reflects the manner of death as suicide, and the cause of death as sequelae of swallowing foreign objects.[29]

Date of Death: December 4, 2024
Custodial Status: Sentenced.
A person in custody at MCJ alerted custody staff to a "man down" in his two-person cell. Custody staff found the person in custody unresponsive on the floor. Custody staff, CHS staff, and paramedics rendered emergency aid, and custody staff and CHS staff administered three doses of Narcan. The person died at the scene. Areas of concern include quality and timeliness of Title 15 safety checks, pill call procedures, and supervision of trustees.[30] Preliminary manner of death: Unknown. The DME website currently reflects the manner of death as homicide, and the cause of death as asphyxiation and ligature strangulation.

Date of Death: December 10, 2024
Custodial Status: Pre-Trial.
A person in custody at CRDF alerted custody staff of a "man down" inside her two-person cell. Custody staff, CHS staff and paramedics rendered emergency aid, and custody staff and CHS staff administered four doses of Narcan. The person died at the scene. Areas of concern include whether custody staff's emergency response aligned with training and policies. Preliminary manner of death: Unknown. The DME website does not currently reflect the manner of death, and the cause of death is deferred.

[29] As used here, "sequelae" means a consequence or result.

[30] The Sheriff's Department assigns work to some of the people in custody in its facilities. See, e.g., Los Angeles County Sheriff's Department, Custody Division Manual (CDM), § 5-01/025.00, Housing Area Inmate Workers. These workers are commonly referred to as trustees.

Date of Death: December 17, 2024
Custodial Status: Sentenced.
On December 16, 2024, a person in custody who was exhibiting signs of distress was transported from North County Correctional Facility (NCCF) to Henry Mayo Newhall Hospital for a higher level of care. On December 17, 2024, the hospital staff reported his respiratory status decompensated. Despite efforts by hospital staff, the person died. Preliminary manner of death: Natural. The DME website currently reflects the manner of death as natural, and the cause of death as sepsis, bilateral pneumonia, and influenza A infection.

Date of Death: December 26, 2024
Custodial Status: Sentenced.
People in custody at TTCF alerted custody staff of a "man down" in the dayroom. Custody staff, CHS staff, and paramedics rendered emergency aid, and custody staff and CHS staff administered six doses of Narcan. The person was pronounced dead at the scene. Preliminary manner of death: Deferred. The DME website does not currently reflect the manner of death, and the cause of death is deferred.

Date of Death: December 27, 2024
Custodial Status: Pre-Trial.
On December 23, 2024, a person in custody with a pre-existing medical condition was transported from MCJ to DaVita Burbank Dialysis Center for routine care. On the same day, he was transferred to Providence St. Joseph Medical Center for a higher level of care. On December 27, 2024, the hospital staff transitioned the person to comfort care, and he died. The preliminary manner of death according to the hospital is natural, due to intracerebral hemorrhage. The DME website currently does not have a public record for this death.

Other Death

On December 24, 2024, Lakewood Station deputies responded to a business disturbance call and detained the suspect. During the investigation, the suspect suffered a medical emergency. Deputies rendered emergency aid and administered Narcan. Paramedics responded and pronounced the person dead at the scene. Preliminary manner of death: Unknown. The DME website does not currently reflect the manner of death, and the cause of death is deferred.

In-Custody Overdose Deaths in Los Angeles County Jails

On December 19, 2023, the Board of Supervisors passed a motion directing the Sheriff's Department to "[c]ollect and track data outlining narcotics recovery in county

jail facilities to evaluate the efficacy of drug detection interventions and provide information to the Office of Inspector General," and [s]trengthen existing policy on increasing and conducting more comprehensive searches of the belongings of staff and civilians who enter the facility, beyond visual inspections." The Board also directed the Office of Inspector General to report quarterly on the Sheriff's Department's progress on these mandates, including progress or any recommendations included in Office of Inspector General reports, as well as on the number of in-custody deaths confirmed or assumed to be due to an overdose, and on any additional recommendations related to in-custody overdose deaths.

Of the nine people who died in the care and custody of the Sheriff's Department between September 30 and December 31, 2024, the medical examiner's final reports, including toxicology assessments, confirm that one person died due to an overdose. Toxicology results remain pending for five of the nine deaths and may indicate additional overdose deaths once completed.

Tracking Narcotics Intervention Efforts

The Department has made no new efforts to improve tracking of narcotics recovery since the Office of Inspector General's last quarterly report. As described in previous reports, the Sheriff's Department does not presently track narcotics detection in a format that allows data to be analyzed and reports that it does not have the capacity to build a mechanism to track narcotics seizure by drug detection mechanism, nor is it able to compile extractable data collected in the Los Angeles Regional Crime Information System (LARCIS) to evaluate the efficacy of drug detection intervention. Instead, the Department takes the position that constructing an all-encompassing jail management data system would best support the Department's efforts to track narcotics recovery and evaluate the efficacy of drug detection interventions. The Office of Inspector General continues to recommend that the Department examine ways to comply with the Board's directive by improving reporting requirements for staff and compiling data on detection interventions and seizures using existing technologies.

Improving Searches of Staff and Civilians

The Board's second directive required that the Sheriff's Department "[s]trengthen existing policy on increasing and conducting more comprehensive searches of the belongings of staff and civilians who enter the [jails]." The Department previously reported its current policy grants the Department broad authority to search staff and civilians entering the jails, so that no changes to existing Department policy are required to implement more comprehensive searches. The Department previously reported that it implemented more frequent unannounced and randomized staff searches beginning in May 2024.[60]

All jail facilities reported conducting unannounced searches during the previous quarter, beginning in May 2024 as planned, though the comprehensiveness of the searches varied across facilities. The table below details the staff searching practices at all facilities from September 30 to December 31, 2024.[31]

Facility	# Staff Searches			# Staff Searches with K9			Minimum Search Req't	Search Inside Security	Search Evasion Concerns	Where Searches Logged
	Q4	Q3	Q2	Q4	Q3	Q2				
MCJ	166	106	-	40	41	7	Yes	No	Yes	Watch Commander Log
TTCF	8	11	-	8	9	1	Yes	Yes	Yes	Watch Commander Log
IRC	20	10	-	0	6	2	Yes	Yes	Yes	Watch Commander Log
CRDF	4	4	-	5	7	1	Yes	No	Yes	Watch Commander Log
NCCF	111	148	156	4	12	5	Yes	Yes	No	Inconsistent
PDC-North	37	75	19	4	3	0	No	Yes	Yes	Watch Commander Log & Staff Search Log
PDC-South	39	39	28	8	11	4	Yes	Yes	No	Staff Search Log

Office of Inspector General Site Visits

The Office of Inspector General regularly conducts site visits and inspections at Sheriff's Department custodial facilities. In the fourth quarter of 2024, Office of Inspector General personnel completed 133 site visits, totaling 357 monitoring hours, at IRC, CRDF, MCJ, Pitchess Detention Center North, PDC South, NCCF, and TTCF.

As part of the Office of Inspector General's jail monitoring, Office of Inspector General staff attended 113 Custody Services Division (CSD) executive and administrative meetings and met with division executives for 168 monitoring hours related to uses of

[31] Office of Inspector General staff identified discrepancies between 2024 data provided by NCCF and the previously submitted data for the second and third quarters of 2024. NCCF staff attribute the variance to the lack of a formal process and rotating personnel unfamiliar with logging staff searches, but also report that the facility has implemented a new system to address the issue.

force, in-custody deaths, COVID-19 policies and protocols, Prison Rape Elimination Act (PREA) compliance, and general conditions of confinement.

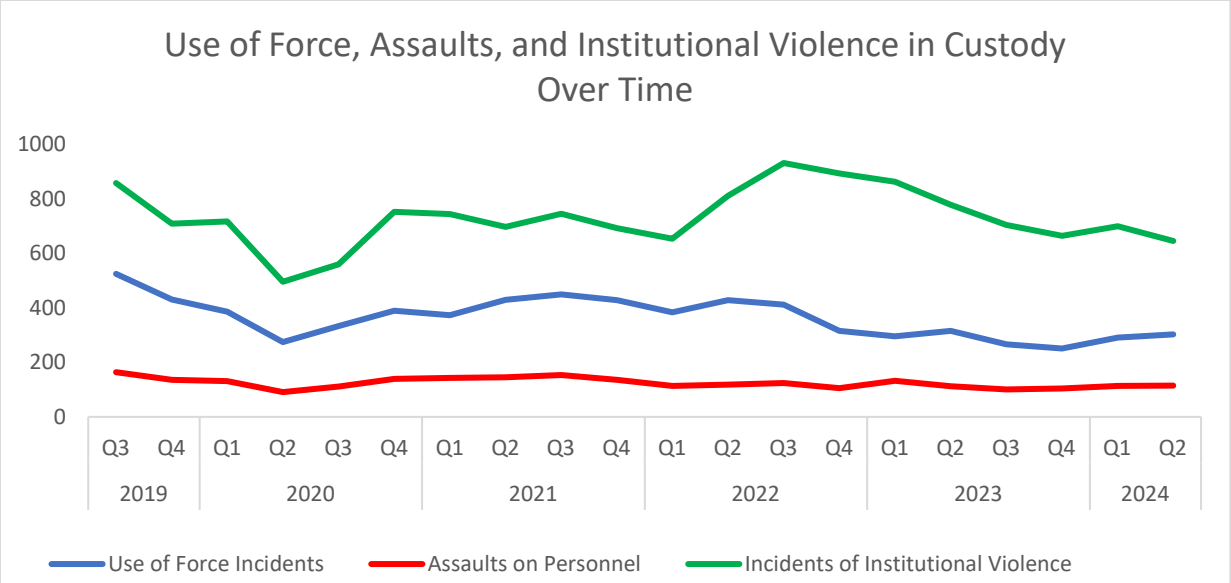
Use-of-Force Incidents in Custody

The Office of Inspector General monitors the Sheriff's Department's use-of-force incidents, institutional violence, and assaults on Sheriff's Department or CHS personnel by people in custody.[32] The Sheriff's Department reports the following numbers for the uses of force and assaultive conduct for people in its custody.[33]

		Use of Force Incidents	Assaults on Personnel	Incidents of Institutional Violence
2019	3rd Quarter	525	164	858
	4th Quarter	431	136	709
2020	1st Quarter	386	131	717
	2nd Quarter	274	91	496
	3rd Quarter	333	111	560
	4th Quarter	390	140	753
2021	1st Quarter	373	143	745
	2nd Quarter	430	145	698
	3rd Quarter	450	153	746
	4th Quarter	428	136	693
2022	1st Quarter	384	114	654
	2nd Quarter	428	118	811
	3rd Quarter	412	124	932
	4th Quarter	316	106	894
2023	1st Quarter	296	133	863
	2nd Quarter	316	112	779
	3rd Quarter	266	101	704
	4th Quarter	251	104	665
2024	1st Quarter	291	114	700
	2nd Quarter	303	115	646

[32] Institutional violence is defined as assaultive conduct by a person in custody upon another person in custody.

[33] The reports go through the fourth quarter of 2023 because the Sheriff's Department has not yet verified the accuracy of reports for the first quarter of 2024. In reviewing this report, the Department noted corrected information for assaults on personnel and incidents of institutional violence for the first quarter of 2022, which is reflected here, and which differs from uncorrected information reported in previous quarterly reports.



HANDLING OF GRIEVANCES AND COMMENTS

Office of Inspector General Handling of Comments Regarding Department Operations and Jails

The Office of Inspector General received 260 new complaints in the fourth quarter of 2024 from members of the public, people in custody, family members and friends of people in custody, community organizations and County agencies. Each complaint was reviewed by Office of Inspector General staff.

Of these grievances, 239 related to conditions of confinement within the Department's custody facilities, as shown in the chart below:

Grievances/Incident Classification	Totals
Medical	97
Personnel Issues	29
Classification	22
Mental Health	19
Living Condition	14
Dental	9
Transportation	7
Food	5
Education	5
Property	5
Mail	2
Bedding	2
Showers	2
Commissary	2
Telephones	2
Visiting	2
Other	15
Total	**239**

Twenty-one complaints related to civilian contacts with Department personnel by persons who were not in custody, as shown in the chart below:

Complaint/Incident Classification	Totals
Personnel	
Harassment	1
Improper Tactics	3
Improper Detention	2
Off Duty Conduct	1
Force	2
Alleged Criminal Conduct	1
Neglect of Duty	3
Service	
Policy Procedures	1
Traffic Citation	2
Response Time	4
Other	**1**
Total	**21**

Handling of Grievances Filed by People in Custody

The Sheriff's Department has not fully implemented the use of computer tablets in its jail facilities to capture information related to requests, and eventually grievances, filed by people in custody. There are currently 77 iPads installed in jail facilities: 40 at TTCF; 12 at MCJ; and 25 at CRDF. During the fourth quarter there were no new installations or iPad replacements. There were 99,441 automated responses provided to people in custody using the iPad application to request information.

The Sheriff's Department continues to experience malfunctioning iPads and have identified power source problems as the major cause. Facility Services Bureau (FSB) was able to install a dedicated power source to limited areas within MCJ and TTCF. The Department found that the Wi-Fi connection was weak and inconsistent. The Department reports that after further discussions with FSB, it was decided that direct power and data sources would yield better results if installed simultaneously. FSB started the project at TTCF in early September and is still pending completion. Custody Support Services Bureau – Correctional Innovative Technology Unity (CITU) acquired two new MacBooks to assist with reconfiguring and programming the iPads. Apple administrator problems have resurfaced preventing the completion of necessary software and program updates. The Department states that once the FSB project is completed at TTCF, the reconfiguring and programming of the iPads will be readdressed.

As previously reported, the Sheriff's Department implemented a policy in December 2017 restricting the filing of duplicate and excessive grievances by people in custody.[34] The Sheriff's Department reports that between October 1 and December 31, 2024, no one in custody had been placed on restrictive filing and it therefore did not reject any grievances under this policy.

The Office of Inspector General continues to raise concerns about the quality of grievance investigations and responses, which likely increases duplication and may prevent individuals from receiving adequate care while in Sheriff's Department custody.

[34] *See* Los Angeles County Sheriff's Department, Custody Division Manual, § 8-04/050.00, *Duplicate or Excessive Filings of Grievances and Appeals, and Restrictions of Filing Privileges*.

Sheriff's Department's Service Comment Reports

Under its policies, the Sheriff's Department accepts and reviews comments from members of the public about departmental service or employee performance.[35] The Sheriff's Department categorizes these comments into three categories:

- External Commendation: an external communication of appreciation for and/or approval of service provided by the Sheriff's Department members;
- Service Complaint: an external communication of dissatisfaction with the Sheriff's Department service, procedure, or practice, not involving employee misconduct; and
- Personnel Complaint: an external allegation of misconduct, either a violation of law or Sheriff's Department policy, against any member of the Sheriff's Department.[36]

The following chart lists the number and types of comments reported for each station or unit.[37]

INVESTIGATING BUREAU/STATION/FACILITY	COMMENDATIONS	PERSONNEL COMPLAINTS	SERVICE COMPLAINTS
ADM: NORTH PATROL ADM HQ	0	0	1
AER: AERO BUREAU	0	1	0
ALD: ALTADENA STN	2	1	0
ASH: OFFICE OF THE ASST SHF I	0	1	0
CAF: COMM & FLEET MGMT BUR	1	0	0
CCS: COMMUNITY COLLEGE BUREAU	3	0	1
CEN: CENTURY STN	2	9	3
CER: CERRITOS STN	6	2	1
CMB: CIVIL MANAGEMENT BUREAU	12	3	4

[35] *See* Los Angeles County Sheriff's Department, *Manual of Policy and Procedures*, § 3-04/010.00, *Department Service Reviews.*

[36] It is possible for an employee to get a Service Complaint and Personnel Complaint based on the same incident.

[37] The chart reflects data from the Sheriff's Department Performance Recording and Monitoring System current as of January 13, 2025.

INVESTIGATING BUREAU/STATION/FACILITY	COMMENDATIONS	PERSONNEL COMPLAINTS	SERVICE COMPLAINTS
CNT: COURT SERVICES CENTRAL	1	4	0
COM: COMPTON STN	5	8	1
CPB: COMMUNITY PARTNERSHIP BUREAU	0	1	0
CRD: CENTURY REG DETEN FAC	2	0	0
CRV: CRESCENTA VALLEY STN	15	4	1
CSB: COUNTY SERVICES BUREAU	6	1	1
CSN: CARSON STN	3	5	3
DSB: DATA SYSTEMS BUREAU	1	0	0
ELA: EAST LA STN	2	3	1
EOB: EMERGENCY OPER BUREAU	1	0	0
EST: COURT SERVICES EAST	0	5	1
HOM: HOMICIDE BUREAU	0	1	1
IND: INDUSTRY STN	3	5	2
LCS: LANCASTER STN	12	27	5
LKD: LAKEWOOD STN	2	7	2
LMT: LOMITA STN	4	4	0
MAR: MARINA DEL REY STN	4	1	3
MCB: MAJOR CRIMES BUREAU	4	0	0
MCJ: MEN'S CENTRAL JAIL	0	1	0
MLH: MALIBU/LOST HILLS STN	12	5	4
MTL: METROLINK	0	2	0
NCF: NORTH CO. CORRECTL FAC	1	0	0
NO: PITCHESS NORTH FACILITY	0	1	0
NWK: NORWALK REGIONAL STN	1	1	0
OCP: OFFICE OF CONSTITUTIONAL POLICING HQ	0	1	0
OJC: DOJ COMPLIANCE UNIT	0	1	0
OSS: OPERATION SAFE STREETS BUREAU	3	6	1
PER: PERSONNEL ADMIN	0	1	1
PKB: PARKS BUREAU	1	1	0
PLM: PALMDALE STN	18	30	1
PRV: PICO RIVERA STN	4	2	3
SCV: SANTA CLARITA VALLEY STN	18	7	1

INVESTIGATING BUREAU/STATION/FACILITY	COMMENDATIONS	PERSONNEL COMPLAINTS	SERVICE COMPLAINTS
SDM: SAN DIMAS STN	6	1	0
SIB: SHERIFF INFORMATION BUREAU	2	0	0
SLA: SOUTH LOS ANGELES STATION	2	9	0
SVB: SPECIAL VICTIMS BUREAU	1	2	1
TEM: TEMPLE CITY STN	6	4	3
TSB: TRANSIT SERVICES BUREAU	0	1	2
WAL: WALNUT/SAN DIMAS STN	3	7	1
WHD: WEST HOLLYWOOD STN	4	11	3
WST: COURT SERVICES WEST	0	3	1
Total:	**173**	**190**	**53**