

February 7, 2024

Guillermo Viera Rosa, Chief Probation Officer
Los Angeles County Probation Department
1601 Eastlake Avenue
Los Angeles CA 90033

*****PLEASE TAKE NOTICE*****

Dear Chief Viera Rosa:

This letter is to provide you with written notice that the California Board of State and Community Corrections will make a determination of suitability of the Los Padrinos Juvenile Hall (LPJH) at its next scheduled board meeting on **February 15, 2024** pursuant to Welfare and Institutions Code section 209, subdivision (d).¹

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

¹ Welfare and Institutions Code section 209, subdivision (d), provides:

[a] juvenile hall, special purpose juvenile hall, camp, ranch, secure youth treatment facility, law enforcement facility, or jail shall be unsuitable for the confinement of juveniles if it is not in compliance with one or more of the minimum standards for juvenile facilities adopted by the Board of State and Community Corrections under Section 210, 210.2, 875, 885, or subdivision (e) of Section 207.1, and if, within 60 days of having received notice of noncompliance from the board or the judge of the juvenile court, the juvenile hall, special purpose juvenile hall, camp, ranch, secure youth treatment facility, law enforcement facility, or jail has failed to file an approved corrective action plan with the Board of State and Community Corrections to correct the condition or conditions of noncompliance of which it has been notified. The corrective action plan shall outline how the juvenile hall, special purpose juvenile hall, camp, ranch, secure youth treatment facility, law enforcement facility, or jail plans to correct the issue of noncompliance and give a reasonable timeframe, not to exceed 90 days, for resolution, that the board shall either approve or deny. In the event the juvenile hall, special purpose juvenile hall, camp, ranch, secure youth treatment facility, law enforcement facility, or jail fails to meet its commitment to resolve noncompliance issues outlined in its corrective action plan, the board shall make a determination of suitability at its next scheduled meeting.

On August 18, 2023, the BSCC notified the Los Angeles County Probation Department that LPJH was noncompliant with the following sections of Title 15 of the California Code of Regulations:

1. § 1321, Staffing
2. § 1322, Youth Supervision Staff Orientation and Training
3. § 1324, Policy and Procedures Manual
4. § 1325, Fire Safety Plan
5. § 1328, Safety Checks
6. § 1354.5, Room Confinement
7. § 1357, Use of Force
8. § 1358.5, Use of Restraint Devices for Movement and Transportation Within the Facility
9. § 1360, Searches
10. § 1370, Education Program
11. § 1371, Programs, Recreation, and Exercise
12. § 1390, Discipline

On October 16, 2023, the BSCC received an approved Corrective Action Plan (CAP) for all outstanding items of noncompliance at LPJH. The CAP indicated a completion date of January 10, 2024 for corrective action and compliance with all outstanding items of noncompliance.

On January 10, 2024, the Los Angeles County Probation Department provided written verification that the corrective action had been completed for all areas.

During January 29 and February 3, 2024, BSCC staff conducted a follow-up inspection at LPJH to verify completion of the CAP and compliance with the remaining above noted sections of Title 15.

Our review of policy, processes, and documentation indicates that LPJH is in compliance with the following section of Title 15:

1. § 1358.5, Use of Restraint Devices for Movement and Transportation Within the Facility

Our review of policy, processes, and documentation indicates that the LPJH remains out of compliance with the following sections of Title 15:

1. § 1321, Staffing
During the inspection, it appeared that there were an adequate number of personnel sufficient to carry out the overall facility operation and its programming, to provide for safety and security of youth and staff and meet established standards and regulations. However, documents reviewed indicate that the reassigned field staff, who were assigned to bolster staffing, were removed from

the facility schedule. The facility's CAP, correction of the noncompliance, and continued compliance is dependent on these staff to meet minimum staffing requirements; without this complement, we are unsure how compliance will be achieved and be maintained.

Because staffing is a critical component in evaluating whether a facility is "suitable" within the meaning of Welfare and Institutions Code section 209, subdivision (a)(4), compliance with section 1321 will be part of the Board's discussion.

2. § 1322, Youth Supervision Staff Orientation and Training
A review of documentation indicates that while Youth Supervision Staff assigned to the facility have received appropriate facility specific orientation and training, the reassigned and deployed field staff assigned to the facility have not received this training as outlined in the CAP.
3. § 1324, Policy and Procedures Manual
The facility provided an updated policy and procedure manual for review however, we did not receive a facility specific procedure guide as identified in the CAP. We received no information on a formalized training for the updated manual as noted in the CAP, nor were we provided with documentation of staff review or acknowledgement of this document as required by regulation.
4. § 1325, Fire Safety Plan
The facility has provided a fire safety plan that includes the Department's three (3) East Region Camps as the emergency evacuation; however, these camps collectively have a current bed capacity that is less than the total population of Los Padrinos, rendering this plan insufficient.
5. § 1328, Safety Checks
A review of safety check documentation between January 11 and January 18, 2024 indicates that many safety checks were not completed in compliance with regulation or policy. Specifically, safety checks are not being conducted within 15 minutes of one another and are not random and varied.
6. § 1354.5, Room Confinement
There was no room confinement documentation available for our review for the dates between January 11 and 18, 2024. Through observations and interviews with youth and staff, we found that room confinement continues to occur, although it is not documented and remains out of compliance.
7. § 1357, Use of Force
A review of documentation indicates that not all staff assigned to the facility have received the required training per agency policy and the CAP.

8. § 1360, Searches

The documentation that we reviewed indicates that youth rooms and unit searches are not consistently occurring.

9. § 1370, Education Program

Documentation of current attendance records from both Probation and Los Angeles County Office of Education indicates that youth are still routinely late to class and missing instruction time.

10. § 1371, Programs, Recreation, and Exercise

We reviewed the facility program calendar, activity logs for the units, and sign in sheets. While the facility is compliant with the exercise component of this regulation, programs and recreation continue to be noncompliant.

11. § 1390, Discipline

While the facility has implemented a new Behavior Management Process, not all aspects of the program are in place.

Because LPJH remains out of compliance following the corrective action plan period, the BSCC is required to make a determination of suitability at its next scheduled board meeting, February 15, 2024. (Welf. & Inst. Code, § 209, subd. (d).)

* * *

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

Agency Response

The agency may, but is not required to, participate at the February 15, 2024 Board meeting as part of the Board's determination of suitability. If the agency wishes to respond in writing, we request that a response be submitted no later than February 11, 2024 to Adam.Lwin@bscc.ca.gov. If the agency anticipates that the facilities will be in compliance prior to the Board meeting, or soon thereafter, please include in the response specific facts articulating to what extent the facilities are, in fact, in compliance with the Board's regulations and estimated dates of compliance. This response will be included as part of the Board's 10-day agenda, which will be posted prior to the start of the February 15, 2024 board meeting.

The Board meeting will be held in-person in Sacramento, California at the BSCC office, as well as on Zoom. A link to the meeting will be available at the Board's website 10 days prior to the meeting at: www.bscc.ca.gov. If you, your staff, or any other agency representative will be participating, please contact Adam.Lwin@bscc.ca.gov and provide the names and contact information of those participating no later than February 8, 2024.

While participation is not mandatory, the Board formally requests that you or designee appear to discuss any outstanding issues of noncompliance.

Determination of Suitability

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

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

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

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

Sincerely,



LINDA PENNER
Chair

cc:

Board Members, Board of State and Community Corrections

Kathleen T. Howard, Executive Director, Board of State and Community Corrections

Aaron R. Maguire, General Counsel, Board of State and Community Corrections

Allison Ganter, Deputy Director, Board of State and Community Corrections

Lisa Southwell, Field Representative, Board of State and Community Corrections

Los Angeles County Board of Supervisors

Fesia Davenport, Los Angeles Chief Executive Officer

The Honorable Samantha P. Jessner, Presiding Judge Los Angeles County Superior Court

Dawyn R. Harrison, County Counsel, Office of the County Counsel, County of Los Angeles

Tyson Nelson, Senior Deputy County Counsel, Office of the County Counsel, County of Los Angeles

Nicole Rommero, Deputy County Counsel, Office of the County Counsel, County of Los Angeles



February 7, 2024

Guillermo Viera Rosa, Chief Probation Officer
Los Angeles County Probation Department
1601 Eastlake Avenue
Los Angeles CA 90033

CORRECTIVE ACTION PLAN – VERIFICATION OF COMPLIANCE – LOS PADRINOS JUVENILE HALL

Dear Chief Viera Rosa:

The 2023-2024 Comprehensive Inspection of the Los Padrinos Juvenile Hall was conducted between August 14, 2023, and August 18, 2023. On August 18, 2023, the Board of State and Community Corrections (BSCC) provided you with an Initial Inspection Report (IIR) notifying you of the following item of noncompliance with Title 15, California Code of Regulations at the Los Padrinos Juvenile Hall:

1. § 1321, Staffing
2. § 1322, Youth Supervision Staff Orientation and Training
3. § 1324, Policy and Procedures Manual
4. § 1325, Fire Safety Plan
5. § 1328, Safety Checks
6. § 1354.5, Room Confinement
7. § 1357, Use of Force
8. § 1358.5, Use of Restraint Devices for Movement and Transportation Within the Facility
9. § 1360, Searches
10. § 1370, Education Program
11. § 1371, Programs, Recreation, and Exercise
12. § 1390, Discipline

On October 16, 2023, the BSCC received an approved Corrective Action Plan (CAP) for all outstanding items of noncompliance at Los Padrinos Juvenile Hall. The CAP indicated a completion date of January 10, 2024, for corrective action and compliance with all outstanding items of noncompliance.

On December 15, 2023, BSCC staff conducted an unannounced inspection at the facility to follow up on a concern presented to the BSCC Board related to the lack of programming. We met with the facility Bureau Chief and Senior Director and visited various units and met with youth. In the units we visited, we found the youth out of their rooms, in the day rooms participating in holiday, regular unit, and recreational activities.

Youth were questioned regarding their involvement in rehabilitational programming, and youth reported that they were participating.

On January 10, 2024, the Los Angeles County Probation Department provided written verification that the corrective action had been completed for all areas.

During January 29 and February 3, 2024, BSCC staff conducted a follow-up inspection at Los Padrinos Juvenile Hall to verify completion of the CAP and compliance with the remaining above noted sections of Title 15.

Our review of policy, processes, and documentation indicates that Los Padrinos is **in compliance** with the following sections of Title 15:

§ 1358.5, Use of Restraint Devices for Movement and Transportation Within the Facility

We reviewed numerous use of force reports and observed that facility staff is not routinely utilizing handcuffs to secure youth during or after an incident. We were provided with three (3) incident reports in which handcuffs were utilized. While we were provided with documentation that an individual assessment was done at the time of the incident; this documentation appeared to be contained on a corrected report submitted five (5) to seven (7) days after the date of the incident. This information must be included on the original incident reports for the facility to remain in compliance.

Our review of policy, processes, and documentation indicates that Los Padrinos remains **out of compliance** with the following sections of Title 15:

§ 1321, Staffing

A staffing analysis was provided to BSCC staff; this analysis indicated the minimum staffing required to carry out the overall facility operation and its programming, to provide for safety and security of youth and staff and meet established standards and regulations.

Our review of documentation indicates that these minimum staffing numbers were not consistently met. Additionally, we observed that the reassigned field staff who were assigned to the facility to bolster staffing were removed from the facility. The facility's CAP, correction of the noncompliance, and continued compliance is dependent on these staff to meet minimum staffing requirements; without this complement, we are unsure how compliance will be achieved and be maintained.

§ 1322, Youth Supervision Staff Orientation and Training

A review of documentation indicates that while Youth Supervision Staff assigned to the facility have received appropriate facility specific orientation and training, the reassigned and deployed field staff assigned to the facility have not received this training as outlined in the CAP.

§ 1324, Policy and Procedures Manual

The facility provided an updated policy and procedure manual for review; however, we did not receive a facility-specific procedure guide as identified in the CAP. We received no information on a formalized training for the updated manual as noted in the CAP, nor were we provided with documentation of staff review or acknowledgement of this document as required by regulation.

§ 1325, Fire Safety Plan

The facility has provided a fire safety plan that includes the Department's three (3) East Region Camps as the sites for emergency evacuation. These camps, Camp Rockey, Camp Paige and Camp Afflerbaugh have a combined current bed capacity that is less than the total population of Los Padrinos, rendering this plan insufficient. We have provided technical assistance noting that there must be enough emergency beds at evacuation sites to house the entire population. A plan that includes the emergency housing for the entire population of Los Padrinos must be in place.

§ 1328, Safety Checks

A review of safety check documentation between January 11 and January 18, 2024 indicates that many safety checks were not completed in compliance with regulation or policy. Specifically, safety checks are not being conducted within 15 minutes of one another and are not random and varied. We found no evidence of that the Quality Assurance Team actions outlined in the CAP are occurring. Documentation of safety check audits were provided; however, they do not provide notice of policy violations or Special Incident Report documentation of the late checks or documentation of corrective action as indicated in the CAP and in policy.

§ 1354.5, Room Confinement

There was no room confinement documentation available for our review for the dates between January 11 and 18, 2024. Through observations and interviews with youth and staff, we found that room confinement continues to occur, although it is not documented and remains out of compliance.

Interviews with youth indicate that youth continue to be placed in their rooms for various periods of time for a "cool down" after an incident; however, this room confinement is not documented, and we are unable to determine compliance. This practice, as described, is noncompliant with regulation.

Staff and youth report that youth are also routinely placed in their rooms following an incident while waiting to be transported to medical. This practice is documented; however, a review of available documentation indicates that the time that youth are in their rooms is not compliant with regulation and often exceeds the brief period of time necessary for "institutional operations."

Finally, during our walk-through of the facility, we observed in Units C and D (Intake) that several youth were in their rooms while only one youth was present in the

dayroom. We were informed that the youth in the dayroom was 20 years old and could not be out with other youth on the unit. The youth in intake are routinely placed on these modified programs and are placed in room confinement while other youth are allowed out on the dayroom. This practice constitutes room confinement and is noncompliant with regulation. Staff responded to this observation by noting that they struggle with the physical plant and classification issues and in getting youth cleared to the housing units, so the youth are placed in their rooms on modified program.

We requested to review documentation of the audits of the CCTV that were required by the CAP to determine if room confinement was occurring but not being documented; this audit documentation was not provided to us.

It is significant to note that the facility's CAP included that the Department would send an updated instructional memo to include examples of room confinement and ensure that staff, supervisors, directors, and facility management were aware of room confinement and the procedures. We were provided with a memo that was distributed to staff on January 10, 2024, the final day of the corrective action period, that simply reiterates the room confinement policy but does not include in detail examples of noncompliant room confinement that continues to occur at the facility.

§ 1357, Use of Force

A review of documentation indicates that not all staff assigned to the facility have received the required training.

Policy Section 1002 States "All sworn officers that are authorized to utilize physical intervention techniques in the performance of their duties shall receive department-approved training (initial training and annual refresher training) on de-escalation, physical intervention, and chemical intervention/decontamination techniques prior to being authorized to utilize force."

The approved CAP indicated that updated training would conform to policy requiring 24-hour training: eight (8) hours on policy and 16 hours on hands-on techniques, further noting "The Department will determine that all staff have had appropriate training on use of force either the initial or refresher that conforms to the policy and § 1357." The CAP also stated the Department will implement a two (2) hour training on the appropriate use of OC Spray for all staff that have previously not had the training.

We reviewed use of force reports for the purpose of determining compliance for incident debriefs, parent contacts and for decontamination expectations; while parent contacts are routinely being made, supervisor review for the purposes of training is not occurring. Incident reports lack consistency and in some cases, clarity, regarding whether all required elements are being met.

§ 1360, Searches

Special Incident Reports (SIRs) and the Facility Search Log for January 11 through 19, 2024, were provided for our review.

Facility policy requires that youth rooms and units are searched each shift. Two facility searches are to be conducted weekly, which should include the youths' rooms and property. Policy also requires that facility perimeters (inside and outside), the school, and other areas of the facility shall be routinely searched for any contraband, including weapons, as directed by the Assistant Superintendent. The documentation we reviewed indicates that K9, general facility, school, and perimeter searches are occurring; however, room and unit searches are not consistently being conducted each shift.

§ 1370, Education Program

Documentation of current attendance records from both Probation and Los Angeles County Office of Education (LACOE) was reviewed for the period of January 11 through 18, 2024. Attendance records were received from Probation and LACOE has been providing weekly attendance records by email for our review.

The documentation we reviewed indicated that youth are still routinely late to class and missing instruction time. Youth were "On Time" 51% of the time during the period reviewed and noted as "Late" 49% of the time. Late arrival was due to facility staff 76% of the time and due to school personnel 24% of the time.

Assistant Principal Wang confirmed that attendance has improved; however, the facility remains out of compliance with this regulation.

§ 1371 Programs, Recreation and Exercise

We reviewed the Facility Activity Logs and sign in sheets for the units and Recreation Accountability Logs.

Activity logs and sign in sheets are not consistently documented and lack details to discern whether programming is routinely occurring. We found multiple occurrences where rehabilitational programs were not provided in some units or where the programming schedule was inconsistent with the proof of practice. Interviews with youth and staff indicate that youth are not always being provided with their full required hours of Title 15 mandated programming and activities.

There continues to be a lack of availability and lack of consistency of recreational activities. While a few activities have been added, we were informed that outside bureaus have been responsible for "adopting" a housing unit and developing recreational activities for the youth in that unit. This results in inconsistency in the types of activities available across the facility. For example, some units have pickleball or basketball courts, while others have no visible activities available. Most units do have access to gaming systems provided by probation; however, there are still a few units where staff have brought in systems or televisions on their own accord.

The activities offered at the facility appear to be the same as those that were previously offered. We understand that the facility is actively working on this issue; however, as of the inspection date, youth still do not have access to live or recorded television, they cannot watch live sports events or other pro-social television programming. All units can view movies on DVD; however, it was noted that some units did have access to either current movies through other means dependent on what staff or managers were willing to do for the youth. All youth should have equal access to an age-appropriate recreational program. Because of this, it is not possible to determine compliance with this regulation at this time; this is an ongoing issue and remains noncompliant.

We provided technical assistance on the recently implemented activity log; the log does not accurately document compliance with the regulation or align with the programs that are actually occurring. Updating this form will help meet and maintain compliance.

§ 1390, Discipline

The facility has implemented a new Behavior Management Process (BMP) in which most staff appear to be meeting the basic documentation expectations. However, the new program appears to have been implemented prematurely, without all planned incentives implemented. The facility and BMP team appear to be committed to working with the youth and building a successful program but are tied to the bureaucratic processes of the department and the procurement process. We were told items for incentives have been ordered but have not been received. For example, the program notes the Gold level youth will have access to electronics, yet there are none available beyond what the unit has for all level youth. The program notes there are stay-ups, work programs and other rewards and incentives available; however, these were not seen consistently across the facility. Most youth noted that they are put in their rooms at 830 for bedtime regardless of level.

The BMP process needs more time for proper implementation before the facility can be found compliant with this regulation.

* * *

As you are aware, because Los Padrinos remains out of compliance with items of Title 15 following the corrective action plan period, the BSCC is required to make a determination of suitability at its next scheduled board meeting, February 15, 2024. (Welf. & Inst. Code, § 209, subd. (d).) Notice will be provided under separate cover.

Please email me at lisa.southwell@bscc.ca.gov or call (916) 322-1638 if you have any questions.

Chief Viera Rosa

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Sincerely,

A handwritten signature in black ink that reads "Lisa Southwell". The signature is written in a cursive, flowing style.

LISA SOUTHWELL

Field Representative

Facilities Standards and Operations Division

Enclosures

Cc: Presiding Judge, Los Angeles County Juvenile Court
Chair, Juvenile Justice Commission, Los Angeles County
Chair, Board of Supervisors, Los Angeles County
County Administrator, Los Angeles County
Jocelyn Roman Senior Director, Superintendent Los Padrinos
Steven Cuevas, Director, Assistant Superintendent Los Padrinos
Dawyn Harrison, County Counsel, Los Angeles Office of the County Counsel
Tyson Nelson, Senior Deputy County Counsel, Los Angeles Office of the County
Counsel
Fesia Davenport, Los Angeles County Executive Officer