

LOS ANGELES COUNTY PROBATION DEPARTMENT
BARRY J. NIDORF- SECURE YOUTH TREATMENT FACILITY
INTERNAL CORRECTIVE ACTION PLAN
APRIL 2024

Title 15. Section	Regulation	Description	Probation's Corrective Action Plan	Staff Assigned	Completion Date
§ 1321. Staffing.	<p>Each juvenile facility shall: (a) have an adequate number of personnel sufficient to carry out the overall facility operation and its programming, to provide for safety and security of youth and staff and meet established standards and regulations.</p> <p>(b) ensure that no required services shall be denied because of insufficient numbers of staff on duty absent exigent circumstances;</p>	<p>Facility shift staffing forms were provided for the week of July 20-July 27, 2023.</p> <p>Some shifts were minimally staffed. Staff are routinely held over with no notice to cover shifts and report they continue to be exhausted as a result. Most staff believe the unscheduled, mandatory holdovers negatively impact attendance.</p> <p>We did note some positive progress in youth getting to school and youth who want to go outside for exercise which was positively confirmed by the youth. However, there continue to be times that youth are not participating in programs or recreation due to lack of staff.</p> <p>We noted instances in which youth were in dayrooms alone because staff were busy with operational requirements (in and out of the office or down the hallway) or they needed to use the restroom.</p> <p>Youth also report not feeling safe due to the lack of staff. Those we spoke to spoke highly of most staff but noted "we need more staff." It was also reported by some youth that they are urinating</p>	<p>The Department has adapted a staffing plan that includes Directors/Managers and DPO IIs being re-assigned to BJN to provided support to the facility for the next 90 days, or until such time as we reach compliance.</p> <p>The process of reassigning the first wave of Directors began the week of 3/4/24. BJN received four (4) Directors for support purposes. The Department is also in the process of reassigning eligible DPOs, this is an on-going process/plan. Initial plans indicate that BJN will gain 50 DPOs from the first group of reassignments. Superintendent Novak is developing a plan for onboarding all designated staff by March 14, 2024, which includes assignments by seniority and skillset to units for best practices.</p>	Williams/ Novak/HR	

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		in receptacles in their rooms due to lack of staff. Staffing has been ongoing Issue.			
§ 1353. Orientation.	<p>The facility administrator shall develop and implement written policies and procedures to orient a youth prior to placement in a living area. Both written and verbal information shall be provided and supplemented with video orientation if feasible.</p> <p>Provision shall be made to provide accessible orientation information to all detained youth including those with disabilities, limited literacy, or English language learners.</p>	The documentation provided did not include information specific to the SYTF population.	<p>BJN-SYTF has revised and updated youth orientation documents that are specific to the SYTF population. Each youth will receive a new orientation that is specific to the SYTF program both verbally and in a booklet form (Youth Handbook).</p> <p>The revised orientation incorporates the new Development Stage System (DSS) so the youth are made aware of the reward-based system including incentives and sanctions deemed suitable to effectively enhance pro-social behaviors.</p> <p>Finalization and implementation are pending ongoing BSCC technical assistance and approval.</p>	Novak	

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§ 1357. Use of Force.	<p>The facility administrator, in cooperation with the responsible physician, shall develop and implement written policies and procedures for the use of force, which may include chemical agents. Force shall never be applied as punishment, discipline, retaliation or treatment.</p> <p>(7) define the role, notification, and follow-up procedures required after use of force incidents for medical, mental health staff and parents or legal guardians.</p> <p>(c) Facilities shall develop policies and procedure which require that agencies provide initial and regular training in use of force and chemical agents when appropriate.</p>	<p>This remains an ongoing issue. The directive/policy was implemented despite practices not being implemented. Staff have not been trained for Use of Force, including the use of OC; training requires initial training and an annual refresher. We are aware that training has been developed and scheduling is being planned.</p> <p>The incident documentation reviewed has improved; however, there were a few packets missing the incident debriefs or parent contact as required. This is being addressed through a training memo to the supervisors responsible for the tasks.</p>	<p>BJN-STYF has developed a training plan to comply with this section. The training will include a policy training curriculum for all staff who were not previously trained.</p> <p>The Department has also implemented an annual refresher training on the appropriate use of OC Spray.</p> <p>The Department, with assistance from the California Department of Justice monitor, has developed a CARE model that will assist in lowering the need for use of force and aid in de-escalation. The model utilized at BJN is termed the Crisis Intervention Team (CIT), made up of 2 Probation staff and ideally 1 DMH staff.</p>	Novak/ Staff Training/ Williams/ Compliance Team	
§ 1371. Programs, Recreation, and Exercise.	The facility administrator shall develop and implement written policies and procedures for programs, recreation, and exercise for all youth. The intent is to minimize the amount of time	Recreation: The facility does not provide youth with age-appropriate, stimulating recreational activities to engage in during recreation. Youth do not have access to television or age- appropriate movies or entertainment.	The Department has implemented the usage of Standardized Juvenile Facility Forms to ensure proper tracking, monitoring and	Novak/QC Team/ Compliance Team	

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	<p>youth are in their rooms or their bed area. Juvenile facilities shall provide the opportunity for programs, recreation, and exercise a minimum of three hours a day during the week and five hours a day each Saturday, Sunday or other non-school days, of which one hour shall be an outdoor activity, weather permitting.</p> <p>(a) Programs. All youth shall be provided with the opportunity for at least one hour of daily programming to include, but not be limited to, trauma focused, cognitive, evidence-based, best practice interventions that are culturally relevant and linguistically appropriate, or pro-social interventions and activities designed to reduce recidivism. These programs should be based on the youth's individual needs as required by Sections 1355 and 1356. Such programs may be provided under the direction of the Chief Probation Officer or the County Office of Education and can be administered by county partners such as mental health agencies, community-based</p>	<p>Staff provide youth with game consoles in some units as they are not provided by the agency. It has been repeatedly noted that "they (the youth) break them or take them apart", which is why they are not provided by the agency. This is a supervision issue.</p> <p>It was also noted there is no consistency between units in what items are offered. We understand there are different units and different phases to the facility; however, recreation and related activities should be provided to all youth consistently. Moreover, Probation Managers should have access to replacement items. Youth must have age appropriate, suitable, engaging recreation and recreational activities.</p> <p>Programs: Programs are not consistently being provided. In some cases, sign-in sheets of youth attendance are being provided by program provider, but facility documentation does not consistently match sign-ins. We suggest that staff be retrained in how the form should be completed to ensure compliance going forward.</p>	<p>accountability for programming within the facilities.</p> <p>Standardized Activity Log released to BJN staff for usage on 03/09/24.</p> <p>Standardized Sign-In Sheet released for usage at BJN to all staff on 03/09/24.</p> <p>On 03/01/24 the Department issued an Expectation Letter to all Program Providers outlining expectations for service delivery and cancellation notices.</p> <p>On 03/01/24 the Department issued a Program Provider process memo as identified and shared with all Program Providers and Partner Agencies outlining the process at BJN SYTF for signing in and out, facility access/escorts, and facility safety protocols.</p>		

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	<p>organizations, faith-based organizations or Probation staff.</p> <p>(b) Recreation. All youth shall be provided the opportunity for at least one hour of daily access to unscheduled activities such as leisure reading, letter writing, and entertainment. Activities shall be supervised and include orientation and may include coaching of youth.</p>				
§ 1390. Discipline.	The facility administrator shall develop and implement written policies and procedures for the discipline of youth that shall promote acceptable behavior; including the use of positive	The facility continues to operate with no contemporary behavior management process or disciplinary process for negative behavior including assaultive behavior.	The Department has begun a mandatory Developmental Stage System (DSS) training. BJN SYFT has initiated the training to all staff. According to the Training Plan, all staff will	Novak	

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	<p>behavior interventions and supports. Discipline shall be imposed at the least restrictive level which promotes the desired behavior and shall not include corporal punishment, group punishment, physical or psychological degradation. The facility administrator shall establish rules of conduct and disciplinary penalties to guide the conduct of youth. Such rules and penalties shall include both major violations and minor violations, be stated simply and affirmatively, and be made available to all youth. Provision shall be made to provide accessible information to youth with disabilities, limited English proficiency, or limited literacy.</p>	<p>The facility lacks a suitable discipline process. There were eight (8) SCMs provided, of which, two (2) were missing the Sanctions and Appeals form, one (1) was a Mental Health Incident, and five (5) were not completed correctly. Of the five (5), three (3) did not have sanctions identified and in the other two (2), the form was not completed correctly. A suitable, age-appropriate incentive-based program to encourage positive and proactive behavior and include disciplinary actions as appropriate must be developed and implemented.</p> <p>This section also impacts 1391 and Due Process forms. We strongly suggest reviewing both for implementation purposes and to ensure consistency between the two policies.</p>	<p>complete training by 03/22/24, in preparation of implementing throughout the facility.</p> <p>The DSS model will replace the previous framework to enhance the traditional compliance-based behavior management approach, by creating a strength-based developmental system that fosters skill building and positive behavioral change.</p>		

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§ 1321. Staffing.	<p>Each juvenile facility shall: (a) have an adequate number of personnel sufficient to carry out the overall facility operation and its programming, to provide for safety and security of youth and staff, and meet established standards and regulations;</p> <p>(b) ensure that no required services shall be denied because of insufficient numbers of staff on duty absent exigent circumstances;</p>	<p>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.</p> <p>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.</p>	<p>Los Padrinos staffing is being closely monitored to ensure that the facility is within staffing ratios and adjustments are made in real time. The facility is assessing the requirements to meet the minimum staffing while having a compliment of officers to be able to complete all operational needs. The facility will continue with overtime volunteers to ensure minimum staffing is met.</p> <p>Deployment has been expanded to include 90-day reassignments of field officers to assist with direct supervision. As a final option, officers can be held over as needed for a second shift when staffing ratios reach critical levels.</p> <p>Probation obtained technical assistance of Michael Dempsey, the California Department of Justice court-appointed monitor to develop a new staffing analysis.</p> <p>Proof of Practice Documentation: Staffing Plan, Shift Staffing Schedule, and Senior DSO Shift Condition Report.</p>	Roman / Director on Duty/ Williams / HR / LPJH Quality Control / Compliance Team	

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§ 1325. Fire Safety Plan.	The facility administrator shall consult with the local fire department having jurisdiction over the facility, or with the State Fire Marshal, in developing a plan for fire safety which shall include, but not be limited to: (f) a written plan for the emergency housing of youth in the case of fire;	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.	Enough safety beds at East Camps, evacuation location. Proof of Practice Documentation: BSCC will verify beds at evacuating East Camps.	Roman / VanKirk	

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§ 1328. Safety Checks.	The facility administrator shall develop and implement policy and procedures that provide for direct visual observation of youth at a minimum of every 15 minutes, at random or varied intervals during hours when youth are asleep or when youth are in their rooms, confined in holding cells or confined to their bed in a dormitory. Supervision is not replaced, but may be supplemented by, an audio/visual electronic surveillance	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	LPJH issued a Safety Check Memo to all officers along with Safety Check Accountability Measures. An officer is dedicated to monitor the Guard One system every shift and alert the unit of any late safety checks that need to be immediately addressed. Guard One Review Process has been implemented which includes supervisors completing daily audits of Guard One for their units and utilizing training or progressive discipline to address policy violations. Supervisors are to reconcile the Special Incident Report documentation provided by the unit with the audit report. Policy Unit has reviewed and is updating the safety check policy to include accountability measures and progressive discipline procedures. The facility will provide Safety Check training and incorporate any new updates made to the policy.	Roman / QC Team / Compliance Team	

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	<p>system designed to detect overt, aggressive or assaultive behavior and to summon aid in emergencies. All safety checks shall be documented with the actual time the check is completed.</p>	<p>corrective action as indicated in the CAP and in policy.</p>	<p>Proof of Practice: Guard One Audits, Training memos, Live Guard One training memos.</p>		
<p>§ 1354.5. Room Confinement .</p>	<p>(a) The facility administrator shall develop and implement written policies and procedures addressing the confinement of youth in their room that are consistent with Welfare and Institutions Code Section 208.3.</p> <p>The facility administrator, in cooperation with the responsible physician, shall develop and implement written policies and procedures for the use of force, which may include chemical agents. Force shall never be applied as punishment, discipline, retaliation or treatment.</p> <p>(a) At a minimum, each facility shall develop policies and procedures which: (b) (5) define a standardized reporting format that includes time period and procedure for documenting and reporting the use of force, including reporting requirements of management and line staff and procedures for reviewing and tracking use of force incidents by supervisory and or management staff, which include procedures for debriefing a particular incident with staff</p>	<p>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.</p> <p>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.</p> <p>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.”</p> <p>Finally, during our walk-through of the facility, we observed in Units C and D (Intake)</p>	<p>Los Padrinos implemented a 2-hour STC certified room confinement policy refresher training for all direct supervision officers. To date, 416 officers, supervisors and managers have been trained.</p> <p>As a quality control measure, an officer has been dedicated to monitor CCTV in real time and Guard One. They contact the unit and movement control when a non-compliant Guard One is detected or room confinement is observed.</p> <p>The Compliance Team audits room confinement paperwork and reports non-compliance to the Quality Control Director for follow-up. Quality Control evaluates room confinement documentation and video to determine if any policy violations occurred. Disciplinary recommendations are made by the QC Director such as Training or Progressive Discipline based on policy violation review. Directors are responsible for monitoring the documentation of progressive discipline.</p> <p>Proof of Practice: Staff training records, Live Guard One audits, updated room confinement memo, Disciplinary recommendations</p>	<p>Roman /Shields/ Unit Directors / Compliance Team</p>	

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	<p>and/or youth for the purposes of training as well as mitigating the effects of trauma that may have been experienced by staff and /or the youth involved. Facilities that authorize chemical agents as a force option shall include policies and procedures that:</p> <p>(1) identify who is approved to carry and/or utilize chemical agents in the facility and the type, size and the approved method of deployment for those chemical agents.</p> <p>mandate that chemical agents only be used when there is an imminent threat to the youth's safety or the safety of others and only when de-escalation efforts have been unsuccessful or are not reasonably possible.</p> <p>(3) outline the facility's approved methods and timelines for decontamination from chemical agents. This shall include that youth who have been exposed to chemical agents shall not be left unattended until that youth is fully decontaminated or is no longer suffering the effects of the chemical agent.</p> <p>(4) define the role, notification, and follow-up procedures required after use of force incidents involving chemical agents for medical, mental health staff and parents or legal guardians.</p> <p>(5) provide for the documentation of each incident of use of chemical</p>	<p>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.</p> <p>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.</p> <p>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.</p>			
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	<p>agents, including the reasons for which it was used, efforts to de-escalate prior to use, youth and staff involved, the date, time and location of use, decontamination procedures applied and identification of any injuries sustained as a result of such use.</p> <p>(c) Facilities shall develop policies and procedure which require that agencies provide initial and regular training in use of force and chemical agents when appropriate that address: (1) known medical and behavioral health conditions that would contraindicate certain types of force; (2) acceptable chemical agents and the methods (c) of application. (3) signs or symptoms that should result in immediate referral to medical or behavioral health. (4) instruction on the Constitutional Limitations of Use of Force. (5) physical training force options that may require the use of perishable skills. (6)</p> <p>(d) timelines the facility uses to define regular training.</p>				
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<p>§ 1357. Use of Force.</p>		<p>A review of documentation indicates that not all staff assigned to the facility have received the required training.</p> <p>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.”</p> <p>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.</p> <p>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.</p>	<p>The Department will train all full-duty officers working at Los Padrinos in 16 hours of Use of Force training. With the approval of BSCC, this will be done in two sessions. The first 8 hours of training will be completed before April 15, 2024, and the second 8 hours will be completed before June 30, 2024.</p> <p>Department will implement a 2-hour re-training on the appropriate use of OC Spray for all DSB staff.</p> <p>The LPH Quality Control Team will audit debriefings process to ensure that incident debriefs, parent contacts and decontamination expectations are being conducted/adhered to.</p> <p>Proof of Practice: Staff Training Records</p>	<p>Roman / Falcon / Compliance Team</p>	
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§ 1360. Searches.	<p>The facility administrator shall develop and implement written policies and procedures governing the search of youth, the facility, and visitors. Policies and procedures shall provide that: (a) Searches shall be conducted to ensure the safety and security of the facility, public, visitors, youth, and staff.</p> <p>(b) Searches shall be conducted in a manner that preserves the privacy and dignity of the person being searched and shall not be conducted for harassment or as a form of discipline or punishment.</p>	<p>Special Incident Reports (SIRs) and the Facility Search Log for January 11 through 19, 2024, were provided for our review.</p> <p>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.</p>	<p>The County has updated its policy and forms for clarity and standardized to one form for all facilities. Forms have been distributed to the officers at Los Padrinos.</p> <p>To ensure compliance with searches, unit search logs and SIRs related to searches are sent directly to facility superintendent. They are reviewed to confirm that they are being completed in a consistent manner on each shift. The search log was also updated for uniformity and consistency. Non-compliance regarding searches is addressed through training.</p> <p>Proof of Practice: Search logs and finalized search policy.</p>	Roman / Unit Directors / QA Team / Compliance Team	

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§ 1370. Education Program.	(b)(6) The minimum school day shall be consistent with State Education Code Requirements for juvenile court schools. The facility administrator, in conjunction with education staff, must ensure that operational procedures do not interfere with the time afforded for the minimum instructional day. Absences, time out of class or educational instruction, both excused and unexcused, shall be documented.	<p>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.</p> <p>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.</p> <p>Assistant Principal Wang confirmed that attendance has improved; however, the facility remains out of compliance with this regulation.</p>	<p>Facility Superintendent in conjunction with LACOE developed strategies to increase timely school attendance. A staggered school movement schedule was created to have youth arrive to class on time and safely. The process is in place. The County worked with LACOE to develop an instructional memorandum for Probation and LACOE staff. This memo is pending approval. The County intends for the memo to be issued the week of March 11, 2024, and a copy will be provided on March 15, 2024, to all staff.</p> <p>The facility and LACOE will continue to reconcile school reports for accuracy. Additional deployed managerial assignments have been made to enhance collaboration for on time school attendance and appropriate reconciliation of records. The Quality Control Team will be monitoring daily.</p> <p>Proof of Practice: Attendance records, Reconciliation reports, LACOE memorandum regarding movement.</p>	Roman / Unit Directors / Compliance Team / Education Team	
1371. Programs, Recreation, and Exercise.	<p>The facility administrator shall develop and implement written policies and procedures for programs, recreation, and exercise for all youth. The intent is to minimize the amount of time youth are in their rooms or their bed area.</p> <p>Juvenile facilities shall provide the opportunity for programs, recreation, and exercise a</p>	<p>We reviewed the Facility Activity Logs and sign in sheets for the units and Recreation Accountability Logs.</p> <p>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 rehabilitation programs were not provided in some units or where the programming schedule was inconsistent with the proof</p>	<p>The Department is completing a youth survey to identify and acquire activities, services and programming that youth are interested in to confirm that what is currently in place meets their needs and is age appropriate. 20 antennas were ordered for the facility to provide live tv and sports.</p> <p>The Department will ensure all youth are provided the required amount of exercise and programming by assigning two dedicated officers on each shift to coordinate and attend recreation for time-keeping purposes. Director on Duty will be notified, and an SIR must be completed if youth receive less than one hour of recreation for any reason.</p>	Roman / Unit Directors / Roman / Compliance Team	

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	<p>minimum of three hours a day during the week and five hours a day each Saturday, Sunday or other non-school days, of which one hour shall be an outdoor activity, weather permitting.</p> <p>(a) Programs. All youth shall be provided with the opportunity for at least one hour of daily programming to include, but not be limited to, trauma focused, cognitive, evidence-based, best practice interventions that are culturally relevant and linguistically appropriate, or pro-social interventions and activities designed to reduce recidivism. These programs should be based on the youth's individual needs as required by Sections 1355 and 1356. Such programs may be provided under the direction of the Chief Probation Officer or the County Office of Education and can be administered by county partners such as mental health agencies, community based organizations, faith-based organizations or Probation staff. Programs may include but are not limited to: (1) Cognitive Behavior Interventions; (2) Management of Stress and Trauma; (3) Anger Management; (4) Conflict Resolution; (5) Juvenile Justice System; (6) Trauma-related interventions; (7) Victim Awareness; (8) Self-Improvement; (9) Parenting Skills</p>	<p>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.</p> <p>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.</p> <p>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</p>	<p>Standardized Activity Log released to LPJH staff for usage on 03/09/24.</p> <p>Standardized Sign-In Sheet released for usage at LPJH to all staff on 03/09/24.</p> <p>On 03/05/24 the Department issued an Expectation Letter to all Program Providers outlining expectations for service delivery and cancellation notices.</p> <p>On 03/05/24 the Department issued a Program Provider process memo as identified and shared with all Program Providers and Partner Agencies outlining the process at LPJH for signing in and out, facility access/escorts, and facility safety protocols.</p> <p>Proof of Practice: Youth Survey Results, Recreation Logs</p>		
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	<p>and support; (10) Tolerance and Diversity; (11) Healing Informed Approaches; (12) Interventions by Credible Messengers; (13) Gender Specific Programming. (14) Art, creative writing, or self-expression; (15) CPR and First Aid training; (16) Restorative Justice or Civic Engagement; (17) Career and leadership opportunities; and, (18) Other topics suitable to the youth population.</p> <p>(b) Recreation. All youth shall be provided the opportunity for at least one hour of daily access to unscheduled activities such as leisure reading, letter writing, and entertainment. Activities shall be supervised and include orientation and may include coaching of youth.</p> <p>(c) Exercise. All youth shall be provided with the opportunity for at least one hour of large muscle activity each day.</p>	<p>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.</p> <p>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.</p>			
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Title 15. Section	Regulation	BSCC Preliminary Finding	Probation's Corrective Action Plan	Assigned To	Completion Date
§ 1390. Discipline.	<p>The facility administrator shall develop and implement written policies and procedures for the discipline of youth that shall promote acceptable behavior; including the use of positive behavior interventions and supports. Discipline shall be imposed at the least restrictive level which promotes the desired behavior and shall not include corporal punishment, group punishment, physical or psychological degradation. Deprivation of the following is not permitted:</p>	<p>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.</p> <p>The BMP process needs more time for proper implementation before the facility can be found compliant with this regulation.</p>	<p>Los Padrinos is integrating Behavior Management Process (BMP) into every aspect of the facility and continues to customize BMP rewards and incentives based upon the age, needs and desires of the youth in the units. Technical assistance will continue in the unit between the officers and the BMP trainers.</p> <p>Proof of Practice: BMP Audits range of incentives ordered for youth as stage reward.</p>	Roman / Unit Directors / Roman	