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*Exempt from filing fees pursuant to
Government Code section 6103.*

SUPERIOR COURT OF THE STATE OF CALIFORNIA
COUNTY OF LOS ANGELES

12 **THE PEOPLE OF THE STATE OF**
13 **CALIFORNIA, EX. REL. XAVIER**
14 **BECERRA, ATTORNEY GENERAL OF**
15 **THE STATE OF CALIFORNIA,¹**

Plaintiff,

v.

17 **LOS ANGELES COUNTY; AND LOS**
18 **ANGELES COUNTY OFFICE OF**
19 **EDUCATION,**

Defendants.

Case No. 21STCV01309

**~~[PROPOSED]~~ ORDER AMENDING
STIPULATED JUDGMENT**

Date: November 21, 2024
Time: 8:30 a.m.
Dept: 34
Judge: Hon. Peter A. Hernandez

¹ The current Attorney General of the State of California is Rob Bonta.

1 Having considered the Ex Parte Application for Entry of [Proposed] Order Amending
2 Stipulated Judgment of January 21, 2021 (the Judgment) brought by Plaintiff, the People of the
3 State of California, and Defendant, the County of Los Angeles, and other papers on file in this
4 matter, the Court grants the motion as follows.

5 **IT IS HEREBY ORDERED, ADJUDGED, AND DECREED THAT:**

6 **I. INTRODUCTION**

- 7 1. This Order is entered pursuant to the Court’s continuing jurisdiction under Judgment
8 paragraph 68 and Code of Civil Procedure section 664.6, and pursuant to Judgment
9 paragraph 65, which provides that that “[t]he Attorney General and the County may
10 jointly agree to make changes, modifications, and amendments to the Judgment in
11 writing, and changes the Parties deem to be material revisions will be effective after a
12 joint motion is filed by the Parties with the Court.” (See Stipulated Judgment for
13 Defendant County of Los Angeles (Jan. 21, 2021).)
- 14 2. All the provisions of the Judgment remain in full force and effect, except that
15 Judgment paragraphs 35, 36, 45, 53, 54, 55, 56, 58, and 59 are amended as described
16 in paragraphs 5 through 13 of this order.
- 17 3. The provisions of this Order are in addition to the County’s existing obligations under
18 the Judgment, the Detailed Plan incorporated by reference into the Judgment, and the
19 Stipulated Additional Judgment Terms to Address Noncompliance that the Court
20 approved on November 13, 2023 (“First Amendment”). The provisions of this Order
21 are incorporated into the Judgment and are subject to sections XVI, XVII, XVIII, XIX,
22 XX, XXI, XXII, XXIII, and XXIV of the Judgment. The definitions contained in
23 paragraph 8 of the Judgment and in the preamble to the Detailed Plan also apply to
24 this Order.
- 25 4. As used in this Order, “Los Padrinos Juvenile Hall” includes Los Padrinos Juvenile
26 Hall and any successors or assigns of Los Padrinos Juvenile Hall, including any
27 successor or assign facility or facilities as defined in paragraph 8(l) of the Judgment.
28

1 5. The effective date of this Order is the date that the joint stipulation is signed by the
2 parties.

3 **II. AMENDMENTS TO JUDGMENT PARAGRAPHS 35, 36, 45, 53, 54, 55, 56, 58, AND 59**

4 6. Judgment **Paragraph 35** is amended such that it now provides, in its entirety, as
5 follows: “This Judgment will be overseen by a Monitor who will be provided timely
6 access to information and documents to ensure compliance with this Judgment and
7 whose reasonable costs and expenses, as set forth in Paragraph 37, will be paid by the
8 County. The Monitor will oversee conditions of confinement, as well as compliance
9 with and implementation of this Judgment and any subsequent Amendments. The
10 Monitor will be assisted by at least three Subject Matter Experts (SME) who will
11 evaluate provisions related to their expertise and advise the Monitor. The first SME
12 will be an expert in behavioral health services (hereinafter, Behavioral Health SME).
13 The second SME will be an expert in medical access (hereinafter, Medical Access
14 SME). The third will be an expert in education, educational transition and after-care
15 services, and career technical and post-secondary education programming in the
16 juvenile hall context (hereinafter, Education SME). The Monitor will be Michael
17 Dempsey. Effective September 1, 2024, the Behavioral Health SME will be Dr.
18 Monique Khumalo. Effective September 1, 2024, the Medical Access SME will be Dr.
19 Khandra Tyler-Beynum. The Education SME will be Dr. Peter Leone. The Monitor, in
20 consultation with the appropriate SME, will review and approve the policies,
21 procedures, and protocols specified in the substantive provisions of this Judgment and
22 the Detailed Plan.”

23 7. Judgment **Paragraph 36** is amended such that it now provides, in its entirety, as
24 follows: “The Monitor, Behavioral Health SME, and Medical Access SME will be
25 selected by mutual agreement of the Parties. The Education SME will be selected by
26 mutual agreement of the Parties and LACOE.

27 8. Judgment **Paragraph 45** is amended such that it now provides, in its entirety, as
28 follows: “The Monitor will provide reports on the status of compliance with the

1 Judgment on at least a semi-annual basis until termination of the Judgment. The
2 reports will include a finding of Substantial Compliance, Partial Compliance, or Non-
3 Compliance on each substantive provision of this Judgment, Detailed Plan task, and
4 First and Second Amendments to the Judgment, to the extent these provisions remain
5 subject to reporting under Judgment paragraph 56. For any provision or task with a
6 finding other than Substantial Compliance, the Monitor, after consultation with the
7 County, will provide detailed written direction, consistent with the Judgment, Detailed
8 Plan, and any Amendments to the County to achieve Substantial Compliance. At least
9 60 days before the anticipated filing of each report, the Monitor will provide the
10 Parties with a draft copy and a reasonable opportunity to respond within 30 days. To
11 the extent the County believes that any information in the report is confidential, the
12 County may provide the Monitor and the Attorney General with information about the
13 specific language that it believes should be redacted in the final report along with its
14 response above. For purposes of this paragraph, confidential information is
15 information that would disclose the identity of a youth. The Monitor will consider the
16 Parties' responses and make appropriate changes before submitting a final report to
17 the Parties. The Attorney General shall file the Monitor's reports with the County's
18 redactions under this paragraph with this Court but will not file the document under
19 seal. If the Court requests or orders the Parties to file an unredacted report, the
20 Attorney General shall do so on behalf of the Parties. For any provision or task within
21 the Detailed Plan that received a finding other than Substantial Compliance, the
22 Monitor may in his discretion require that the County provide the Monitor, within 60
23 days of the Monitor's request or at such other later time as the Monitor deems
24 appropriate, a Corrective Action Plan for Monitor review and approval for any such
25 provision or task, addressing the County's plans to come into Substantial Compliance,
26 including a timeline, and incorporating or otherwise addressing any applicable
27 direction the Monitor provided in his report."
28

- 1 9. Judgment **Paragraph 53** is amended such that it now provides, in its entirety, as
2 follows: “The Behavioral Health SME will have access to observe or review
3 individual behavioral health treatment sessions, and the Medical Access SME will
4 have access to observe and review health treatment sessions, that directly relate to the
5 County’s implementation of and compliance with this Judgment, only with the express
6 permission of the youth and/or the youth’s parent or guardian as required by law.”
- 7 10. Judgment **Paragraph 54** is amended such that it now provides, in its entirety, as
8 follows: “The Behavioral Health SME, a licensed mental health professional, will be
9 permitted, with reasonable notice in advance, to observe group facilitation and therapy
10 sessions for the purpose of advising DMH staff and providing technical assistance and
11 direction.”
- 12 11. Judgment **Paragraph 55** is amended such that it now provides, in its entirety, as
13 follows: “The Medical Access SME will have access to only de-identified medical
14 records, and the Behavioral Health SME will have access only to de-identified
15 behavioral health records, for purposes of assessing compliance with this Judgment,
16 unless there is a particularized need related to an individual youth.”
- 17 12. Judgment **Paragraph 56** is amended such that it now provides, in its entirety, as
18 follows: "Upon the Monitor's conclusion that the County has achieved and maintained
19 Substantial Compliance with any substantive provision(s) and/or individual task from
20 the Detailed Plan for a period of 12 consecutive months ("Compliance Period"), that
21 provision or task will be deemed completed and the Monitor will no longer assess or
22 report on that provision, and the County will no longer be required to provide
23 compliance or proof of practice documentation after a provision or task is no longer
24 being assessed. Where the Monitor concludes that the County has achieved and
25 maintained Substantial Compliance for the entirety of the Compliance Period with a
26 substantive provision or task of the Judgment or the Amendments, as described
27 immediately above, at one facility but not another, the Monitor will no longer assess
28

1 or report on that provision or task for the Juvenile Hall where Substantial Compliance
2 has been achieved."

3 13. Judgment **Paragraph 58** is amended such that it now provides, in its entirety, as
4 follows: "If a Party objects to the Monitor's determination as to whether the County
5 has achieved and maintained Substantial Compliance as set forth in Paragraph 56, the
6 objecting party shall provide its rationale for that objection in writing to the other
7 Party and the Monitor. If the Monitor does not agree with the objection, the Parties
8 and the Monitor shall engage in the dispute resolution process described in Section
9 XVI of the Judgment."

10 14. Judgment **Paragraph 59** is amended such that it now provides, in its entirety, as
11 follows: "This Judgment and the Court's jurisdiction will automatically terminate once
12 all substantive provisions of the Judgment have been deemed complete as set forth in
13 paragraphs 56 and 57. The Attorney General will file a joint order to terminate
14 jurisdiction within 10 business days of the automatic termination."

15 **III. COMPOSITION AND AUTHORITY OF MONITORING TEAM**

16 15. The Monitor shall continue to issue monthly reports to the Parties as to compliance
17 with the First Amendment until the County reaches Substantial Compliance with those
18 provisions and their corresponding Detailed Plan tasks. The County shall be required
19 to consider any written guidance contained in the monthly reports to remedy the
20 County's noncompliance or partial compliance with those provisions or their
21 corresponding Detailed Plan tasks, and incorporate or otherwise address such guidance
22 in any Corrective Action Plan the County submits in response to the Monitor's semi-
23 annual reports pursuant to Judgment paragraph 45, as amended above, for the
24 Monitor's review and approval.

25 16. The County shall continue to work with the Data SME to develop data systems that
26 will effectively support the County's compliance efforts and operations, including
27 adopting the Guard1 system or an equivalent system for tracking data related to
28 paragraph 24(c) of the Judgment by December 31, 2024, and working on the

1 development of monthly reports containing data sufficient to assess the County's
2 compliance with the Judgment, consistent with the requirements of and compliance
3 measures set forth in the Detailed Plan and Amendments, and as directed by the
4 Monitor.

5 17. If, by June 30, 2025, the County has not achieved Substantial Compliance with the
6 Judgment provisions and corresponding Detailed Plan Tasks identified in the
7 Probation Department DOJ Compliance Action Plan attached hereto as Exhibit A, the
8 monitoring team shall—without further order of this Court—expand to include one
9 Deputy Monitor for Los Padrinos Juvenile Hall. The parties will meet to discuss
10 whether a Deputy Monitor is necessary for Barry J. Nidorf Secure Youth Treatment
11 Facility prior to June 30, 2025. The Monitor will make final decision whether a
12 Deputy Monitor is necessary for Barry J. Nidorf Secure Youth Treatment Facility. The
13 Deputy Monitors shall be selected by the Monitor subject to mutual agreement of the
14 Parties and will report directly to the Monitor. If practicable, the Deputy Monitors
15 shall reside in the Los Angeles area and, if they do not, the County will not be
16 obligated to pay for their lodging expenses. The hourly rate of the Deputy Monitors
17 will not exceed the rate paid by the County to the Monitor. The Deputy Monitors shall
18 have a collaborative relationship and ongoing communication with facility
19 superintendents and the Compliance Team Lead, and shall engage in daily check-ins
20 and joint problem-solving to address identified issues with facility leadership. The
21 Deputy Monitors shall be on site no less than four days per week, at varying hours of
22 the day so that they can see the operations of different shifts, and shall provide direct
23 reports weekly to the Monitor and the County. The County shall be provided the
24 Deputy Monitors' weekly schedule at least one week in advance. The County is not
25 responsible for providing any equipment or electronics to the Deputy Monitors. The
26 parties agree that the Deputy Monitors will be onsite for six months and, during that
27 time, will focus on the County's compliance with the Detailed Compliance Action
28 Plan elements and any other Judgment provisions or Detailed Action Plan tasks the

1 Monitor deems necessary. Due to the expected cost to the County, after six months,
2 the Monitor will re-assess, with input from the parties, whether continued use of the
3 Deputy Monitors is necessary and/or helpful. The Monitor's determination is final.

4 **IV. USE OF FORCE AND YOUTH SAFETY**

5 18. By January 30, 2025, the County shall review and amend all relevant policies to
6 address excessive force and youth-on-youth violence either instigated or tolerated by
7 staff and provide such revised policies to the Monitor for review and approval. The
8 County's review will consider whether existing policies contain appropriate protocols
9 to expeditiously investigate allegations of such misconduct and place staff on leave
10 during such investigation, and appropriately provide that any staff found to be
11 involved in such an incident shall be subject to discipline up to and including
12 discharge, shall be reported to child abuse and outside law enforcement agencies as
13 required by law, including the Child Abuse and Neglect Reporting Act, Penal Code
14 section 11164 et seq., and that Probation shall consider referral for prosecution.

- 15 a. On August 12, 2024, the Attorney General's office provided revisions to
16 DSB 609/SYTF 609 (Reduction of Youth-On-Youth Violence (YOYV)),
17 DSB 1000/SYTF 1000 (Physical Interventions), DSB 1500/SYTF 1500
18 (Prison Rape Elimination Act), DSB 1917/SYTF 1917 (Child Abuse
19 Reporting), DSB 2341/SYTF 2431 (Staff Investigations), and the
20 Supplemental Disciplinary Guidelines to implement paragraph 15. The
21 County shall consider these proposed revisions when conducting its review.
- 22 b. The County's Office of Inspector General (OIG) will report to the Monitor,
23 on a monthly basis, the number of new Internal Affairs referrals, number of
24 open cases, and aggregate data on investigation outcome.
- 25 c. Substantial Compliance requires: (i) email distribution list shows that 98% of
26 staff were sent notice of any revised policies by November 30, 2024; (ii)
27 Monitor approval of training, including a training schedule, on revised
28

1 policies; (iii) Monitor verification that the County is implementing the
2 approved policies; and (iv) monthly reporting to the Monitor.

3 19. The County has provided the Monitor the plan for camera installation at Los Padrinos
4 Juvenile Hall, and the Monitor previously approved it. The Monitor shall again review
5 the plan and provide the County with any comments he has regarding camera
6 coverage, as reflected in this plan, by no later than November 20, 2024. The County
7 will consider any comments the Monitor has provided, and revise the installation plan
8 as appropriate. Once the plan has been implemented and cameras installed, the
9 Monitor may conduct an in-person "blind-spot" analysis of Los Padrinos Juvenile Hall
10 to determine whether video camera coverage is not available in certain locations,
11 including youth cells and the medical unit, and provide his findings to the County
12 within two weeks thereafter. The County shall consider the Monitor's comments,
13 discuss any concerns and requests for revision with the Monitor, and add additional
14 cameras per the Monitor's final direction.

15 20. The County has previously provided the Monitor a CCTV Review Protocol. By
16 December 30, 2024, the County shall provide the Monitor a finalized CCTV Review
17 Protocol for Monitor review and approval. The County shall implement the protocol
18 and take steps to ensure sufficient staff is assigned and appropriately trained to
19 conduct this review.

- 20 a. OIG will select two random days a month to audit compliance with
21 Probation's CCTV Review Protocol. The audit shall include review of the
22 random days' paperwork and video footage, and assessment of whether
23 footage has been tampered with and whether incidents that may violate the
24 law, Judgment, and/or policy have been properly identified and elevated.
- 25 b. Substantial Compliance requires OIG verification to the Monitor, on a
26 monthly basis, that the County is compliant with the protocol. Systemic
27 findings and recommendations from OIG's reports to the Monitor under this
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1 paragraph will be included, as appropriate, in OIG's existing reports required
2 by the Judgment.

3 21. By October 31, 2024, the County will create a stand-alone "anti-retaliation" policy and
4 provide to the Monitor for review and approval. By November 15, 2024, the Monitor
5 will provide any feedback. By January 1, 2025, the County will issue the anti-
6 retaliation policy. The policy shall be aligned with best practice and the County shall
7 consider, at a minimum, requirements that all staff who are under investigation for
8 credible allegations of abusive or unlawful conduct be immediately removed from the
9 facility pending the outcome of the investigation and interim protections for youth that
10 include ensuring that youth have no contact with such staff are implemented. The
11 County also shall consider the Attorney General's office comments provided on DSB
12 1000/SYTF 1000 (Physical Interventions), DSB 1500/SYTF 1500 (Prison Rape
13 Elimination Act), DSB 1706/SYTF 1706 (Ombudsman), and DSB 1917/SYTF 1917
14 (Child Abuse Reporting) in drafting its anti-retaliation policy.

15 a. Substantial Compliance requires: (i) email distribution list shows that 98% of
16 staff were sent the stand-alone anti-retaliation policy within 10 days of
17 issuance of the policy; and (ii) Monitor approval of training, including a
18 training schedule, on the policy.

19 22. By November 15, 2024, the County shall employ at each facility under this Judgment
20 an onsite Ombuds staff person from Probation's Office of the Ombudsman. The Office
21 of the Ombudsperson shall report to Probation executives independently from the
22 operational chain of command. The County shall provide the Monitor by November
23 15, 2024, the duties and responsibilities of the onsite Ombuds staff person(s) for the
24 Monitor's review and approval.

25 a. The County has confirmed that the Ombuds staff persons will attend the
26 United States Ombudsperson Association's New Ombudsman Training on
27 November 18-22, 2024.
28

- 1 b. A Senior Probation Director shall assume the duties of the Bureau Chief as
2 described in Judgment paragraph 18.
- 3 c. Substantial Compliance requires: (i) Monitor confirmation that approved
4 individuals have been hired; (ii) Monitor approval of job duties; (iii) Monitor
5 confirmation that the Ombuds staff persons have received the necessary
6 training; (iv) Monitor approval of an infographic with information about the
7 Ombuds staff persons, including all contact information, and it is posted in
8 each Unit and in the orientation and intake area; (v) information regarding
9 and contact information for the Ombuds staff persons is included in the youth
10 handbook; and (vi) verification that the onsite Ombuds staff person is present
11 and appropriately performing their duties during three consecutive separate
12 in-person visits to the facilities.

13 23. By October 31, 2024, for Monitor review and approval, the County shall revise its
14 Juvenile Hall DSB 700 - Searches policy regarding room searches to set forth
15 requirements to ensure that youths' belongings that are not contraband or otherwise
16 inconsistent with County policy are maintained in a secure bag marked with the
17 youth's name, not destroyed or removed from the Juvenile Halls, and returned to the
18 youth upon release. The County shall continue to require that all searches of youths'
19 persons or belongings, regardless of the individual or team conducting the search,
20 comply with the County's Juvenile Hall policies, procedures, and directives pertaining
21 to searches of youths' persons and belongings and with the law.

22 24. All staff assigned to supervise youth at Los Padrinos Juvenile Hall and Barry J. Nidorf
23 Secure Youth Treatment Facility, including any Special Enforcement Operations
24 (SEO) staff, shall have completed Juvenile Corrections Officers Core (JCOC) course
25 as required under Penal Code Section 6035 and Title 15 section 1322. The JCOC
26 Course is approved by the State and includes searches. The County will ensure any
27 SEO staff working or providing support in the facilities will have the JCOC course
28 training which includes searches prior to working inside the facilities. All staff

1 assigned to search youth in the Juvenile Halls shall be required to annually review and
2 follow the County's Juvenile Hall policy DSB 700 – Searches, which pertains to
3 searches of youths' belongings and persons.

4 25. OIG will review compliance with Probation's search policy in the Juvenile Halls,
5 including by conducting a random review of a representative sample of searches and
6 assessing whether searches were conducted within policy and consistent with law and
7 were fully and accurately documented. OIG will report its findings to the Monitor and
8 include them, as appropriate, in OIG's existing reports required by the Judgment
9 during the term of this Judgment.

10 a. Substantial Compliance requires OIG determines that 90% of searches
11 reviewed are in compliance with policy and law.

12 26. By November 30, 2024, the County shall hire and maintain any additional outside
13 contractors necessary to supplement those required by paragraph 10 of the First
14 Amendment. Any new outside contractors shall be reviewed and approved by the
15 Monitor, receive the Monitor-approved training, and be employed until such time as
16 the County can demonstrate to the Monitor that it has adequate staff with appropriate
17 training and expertise to conduct the initial review and staff its Internal Affairs unit.
18 The parties have agreed that backlogged use of force incidents need not be subject to
19 secondary review by attorneys.

20 a. By October 15, 2024, the County will submit to the Monitor the County's
21 Chief Executive Officer's analysis for the creation of new Internal Affairs
22 (IA) classification for the Probation Department.

23 b. Substantial Compliance requires: 100% of the backlog is eliminated by
24 December 15, 2024.

25 27. By November 15, 2024, the County shall provide to the Monitor for review and
26 approval a plan for ensuring that all use-of-force incidents are timely reviewed and
27 appropriately investigated, such that backlogs of un-reviewed incidents do not
28 continue to accumulate. The County will identify any staff (a) still employed as of

1 October 9, 2024, and (b) involved in a use of force policy violation incident between
2 2022 through the present, which was (c) referred to IA by first level reviewers or an
3 independent committee; and (d) yet declined by IA for review. All such incidents shall
4 be re-referred to IA and IA shall review. Any future incidents involving the same staff
5 will be assessed by the FIRST Team for patterns or repeat behaviors that require
6 corrective or disciplinary action.

7 a. Upon the Monitor's approval, the County shall implement the plan within 30
8 days. Until such time as the Monitor confirms that the plan is fully
9 implemented and the backlog is eliminated, the requirements of Paragraph 25
10 remain in effect.

11 b. Substantial Compliance requires: (i) Monitor approval of the plan; (ii)
12 Monitor verification that the County is implementing the plan; (iii) 90% of
13 use of force cases will be reviewed to determine if an Internal Affairs referral
14 is necessary within 90 days unless good cause exists for an extension of time;
15 and (iv) monthly reporting by the County to the Monitor on the number of
16 Juvenile Hall use-of-force incident investigations.

17 28. The County has provided the Monitor for a plan, including a training video, for
18 training staff on the use of the temporary cold-water decontamination showers
19 described in paragraph 8 of the First Amendment. The Monitor has reviewed and
20 approved the plan and the training video. The Compliance Team shall conduct
21 monthly compliance checks to assess whether the temporary cold-water
22 decontamination showers are charged, whether staff have been properly
23 decontaminating youth for all O.C. spray incidents. As of September 27, 2024, the
24 County has installed eye wash stations in the sinks in each unit at Los Padrinos. The
25 County will continue to explore all humane alternative decontamination avenues
26 pending the completion of cold water shower installation. The County shall verify
27 alternative decontamination avenues with the Monitor prior to usage.
28

- 1 a. Substantial Compliance requires monthly audits by the Compliance Team
- 2 provided to the Monitor, and Monitor verification that youth are timely and
- 3 properly decontaminated in at least 93% of instances in which youth are
- 4 exposed to OC spray.
- 5 29. By November 15, 2025, the County shall complete the installation of functioning cold-
- 6 water decontamination showers in all living units of the Juvenile Halls.
- 7 30. By December 13, 2024, the County will provide an enhanced CIT² team plan, which
- 8 shall include all of the elements required by Paragraphs 17 and 20 of the First
- 9 Amendment and mechanisms for increasing the use of the CIT team to reduce
- 10 incidents of violence.
- 11 a. Substantial Compliance requires: (i) Monitor approval of the plan; (ii)
- 12 Monitor verification that the County is implementing the approved enhanced
- 13 CIT team plan; and (iii) Monitor review of random sample of use of force
- 14 incidents demonstrates that in 90% of instances in which the CIT team was
- 15 not employed, there was not sufficient time for the CIT team to be called to
- 16 prevent escalation of the incident.
- 17 31. By November 30, 2024, the County shall develop and issue a post order documenting
- 18 enhanced security at Juvenile Hall entries, including use of canines, pat-downs where
- 19 probable cause exists, use of security specialists to conduct entry searches, and
- 20 consideration of the implementation of low-radiation body scanners, and a timeline for
- 21 implementation of enhanced security measures.
- 22 a. The County shall submit its proposed post order to the Monitor for review
- 23 and approval by November 30, 2024.
- 24 b. Upon the Monitor’s approval, the County shall issue the post order within
- 25 one business day.
- 26

27 ² The First Amendment provide for the creation and implementation of a “CARE team.”
28 The County, with Monitor approval, has renamed the CARE team the “Critical Incident Team” or
“CIT.”

1 c. Substantial Compliance requires: (i) Monitor approval of the post order and
2 any updates the County makes to it thereafter; (ii) email distribution list
3 shows that 98% of current staff were sent notice of the post order by
4 December 20, 2024; and (iii) Monitor verification that the County is
5 implementing the post order.

6 **V. JOINT MEDICAL TRANSPORTATION PLAN**

7 32. By November 30, 2024, the County shall provide to the Monitor for review and
8 approval a revised draft of the Joint Medical Transport Plans for Barry J. Nidorf
9 Secure Youth Treatment Facility and Los Padrinos Juvenile Hall required under
10 paragraph 6 of the First Amendment. As required by paragraph 6 of the First
11 Amendment, the Joint Medical Transport Plans shall be developed jointly by the heads
12 of the Probation Department, the Department of Mental Health, and Juvenile
13 Correctional Health Services, shall be in writing, and shall incorporate a quality-
14 assurance review process and weekly collection and review of data in a form that shall
15 also be provided to the Monitor, the Behavioral Health SME, and the Medical Access
16 SME on a biweekly basis.

17 33. The County acknowledges that it remains out of compliance with paragraph 6 of the
18 First Amendment, which required the implementation of Joint Medical Transportation
19 Plans. If the County fails to provide the Monitor with its revised proposed Joint
20 Medical Transport Plans by November 30, 2024, or if the Monitor determines that the
21 County has failed to implement the Joint Medical Transport Plans within 30 days of
22 approval, the County shall deposit \$100 into an interest-bearing account for each
23 additional day that it fails to provide the Monitor with its proposed Joint Medical
24 Transport Plans or fails to implement the approved proposed Joint Medical Transport
25 Plans.

26 a. Upon the Monitor’s approval, the County shall fully implement the Joint
27 Medical Transport Plans within 30 days.

28

- 1 b. Substantial Compliance requires: (i) Monitor approval of the Joint Medical
2 Transport Plans; (ii) Monitor verification that the Joint Medical Transport
3 Plans are being implemented; (iii) biweekly data provided by the County to
4 the Monitor, the Behavioral Health SME, and the Medical Access SME; and
5 (iv) Monitor finds that sufficiently reliable data provided by the County
6 establish that youth receive timely medical services 93% of the time.
- 7 c. Any money deposited shall be used for youth focused incentives or wellness
8 items for youth housed at Los Padrinos Juvenile Hall with a plan approved
9 by the Monitor.

10 **VI. STAFFING**

11 34. By January 30, 2025, the County shall provide an updated plan to the Monitor for
12 review and approval, which shall address staff recruitment and retention, staff
13 wellness, minimum staffing levels and regular adjustment of such levels to ensure it is
14 balanced and adequate for actual daily population consistent with the staffing relief
15 plan attached hereto as Exhibit B, and a plan for addressing callouts and other abusive
16 leave practices. The County shall also provide, for review and approval by the
17 Monitor, daily staffing data sheets that include the number of staff assigned to each
18 unit, the number of youth on each unit, the minimum mandatory and full staffing
19 numbers for each unit, and the number of call-outs, no-call no-shows, and staff on
20 light duty. Upon the Monitor's approval of the form of the daily data sheets, the
21 County shall provide the daily staffing data sheets on a weekly basis to the Monitor
22 and to the Attorney General's office.

- 23 a. Substantial Compliance requires: (i) Monitor approval of the updated plan,
24 the updated recruitment materials to reflect youth rehabilitation focus, and
25 the daily staffing data sheet; (ii) Monitor verification that the County is
26 implementing the updated plan; (iii) continued monthly reporting to the
27 Monitor on staffing, including but not limited to: (a) call outs; (b) number of
28 staff on light duty; (c) - (d) number of staff resigning or terminated; (e)

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number of staff on leave by position, leave type, and length of leave; (f) number of new staff hired, if any; and (g) vacancy numbers; and (iv) the Monitor and the Attorney General’s office are provided with the daily staffing data sheets on a weekly basis.

35. The County shall consult with the Monitor and any SMEs or specialized experts designated by the Monitor prior to and during negotiations with labor partners to renew or update memoranda of understanding that will impact staff employed in the Juvenile Halls.

VII. DEVELOPMENT OF SMALL, HOME-LIKE FACILITIES

36. By March 1, 2025, the County shall provide the Monitor for review and approval plans to renovate and/or reconstruct Los Padrinos Juvenile Hall and Barry J. Nidorf Secure Youth Treatment Facility (or another juvenile facility[ies]) to create small, homelike facilities that employ a care-first model that includes evidence-based practices and a youth development, education, and mental health-focused approach to rehabilitation and which have a range of security levels to house and step-down youth. Upon Monitor approval, the County shall brief the Board of Supervisors within 60 days. Upon Board approval, the County shall make all best efforts to implement the Monitor-approved plans within the timelines set forth in the approved plans.

a. Substantial Compliance requires: (i) Monitor consultation and input provided to County and any designer or architect early in the process; (ii) Monitor approval of the plans; and (iii) Monitor verification that the County is making best efforts to implement the Monitor and Board-approved plans within the timelines set forth in the approved plans.

IT IS SO ORDERED.

DATED: 12/11/2024



Peter A. Hernandez / Judge
JUDGE OF THE SUPERIOR COURT

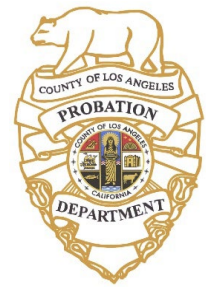
EXHIBIT A



COUNTY OF LOS ANGELES PROBATION DEPARTMENT

9150 EAST IMPERIAL HIGHWAY – DOWNEY, CALIFORNIA 90242

(562) 940-2501



GUILLERMO VIERA ROSA
Chief Probation Officer

Probation Department DOJ Compliance Action Plan

This proposal intends to adopt a more targeted approach that prioritizes emergent provisions critical to the safety and security of the youth in our care. By employing a strategic targeted approach, we will attempt to enhance our efficiency and effectiveness in achieving and implementing the numerous provisions outlined in the settlement agreement. Also, by focusing our resources and efforts on the most critical areas, we can address high-impact issues first, streamline our processes, and optimize resource allocation. With this approach, we will be better equipped to meet the agreed compliance requirements in a coordinated and timely manner, ultimately leading to more sustainable and successful outcomes.

This plan in no way reduces existing compliance efforts on other provisions but merely highlights an increased focus on these high priority provisions. We believe that an increased focus on these provisions should have a positive impact on compliance efforts with numerous other provisions.

Technical Assistance

Moving forward, technical assistance meetings will be more efficient and effective by being organized to target and address specific tasks associated with one of the five identified provisions. This focused approach will allow for a more streamlined process, ensuring that each meeting is purpose-driven and directly contributes to advancing compliance for each identified provision. By focusing on particular provisions during each session, we can enhance collaboration, reduce redundancy, and achieve more meaningful outcomes within a shorter timeframe.

Technical assistance meetings will be scheduled on a monthly basis or as needed to provide consistent support for the ongoing development and implementation of key tasks. Each meeting will involve identified Subject Matter Experts (SMEs) who will contribute their specialized knowledge and experience to assist in developing plans, processes, or procedures related to a specific provision. Additionally, we will continue to provide relevant updates to the status of all the provisions as required by the Judgement, ensuring that all participants and the Monitor are informed of the latest progress and any emerging challenges. This focused approach will ensure that each meeting is purposeful and aligned with the goal of each provision.

Action Plan

This action plan outlines a comprehensive approach for our department to collaborate closely with the monitor and subject matter experts to address specific high-need areas of our Detailed Plan referenced in the California Department of Justice Stipulated Judgement. In collaboration with the Monitor, our efforts will prioritize the following provisions:

- 1) **XII. Education, Transition, and After-Care**
- 2) **IV. (Joint Stipulation) Medical Transportation**

- 3) **VI. Use of Force and Youth Safety/VII. Joint Stipulation Care and Yes Team**
- 4) **V. Technology and Data Management**
- 5) **VII. Room Confinement**

Action Plan for Each Provision.

The department aims to take a comprehensive approach to achieve and sustain compliance. While not explicitly mentioned, every aspect of this action plan will take into account and include a staffing component, as it forms the basis for the success we aim for in terms of compliance and the overall success of our department. Each identified provision below will be addressed utilizing the following steps, each requiring an initial audit to assess and determine the appropriate next steps. The completion of the audit and assessment for each provision will also help establish a more precise and accurate timeline for achieving compliance. The department is proposing a twelve-month timeline, **from January 1, 2025, through December 31, 2025**, to achieve significant and sustainable compliance with the abovementioned provisions.

1. Audit Implementation

Objective: Develop a comprehensive audit system to ensure operational efficiency and compliance.

Action Steps:

- 1. Develop an Audit Tool**
 - i. Create an audit tool based on Key Performance Indicators (KPIs) that align with organizational goals and standards.
 - 2. Conduct Operational Audit**
 - i. Conduct a full operational audit to assess current processes, identify gaps, and measure compliance.
 - 3. Identify Deficiencies**
 - i. Review audit findings to pinpoint any deficiencies in policy, procedures, proof of practice, training, and quality assurance processes.
- 2. Policy, Procedures, and Quality Assurance Improvement**

Objective: Address and correct any deficiencies in policies, procedures, and quality assurance mechanisms.

Action Steps:

- 1. Policy Deficiency Correction**
 - i. Assess existing policies and make necessary updates.
- 2. Procedure Deficiency Correction**
 - i. Evaluate and update procedures as needed.
 - ii. Identify the most appropriate format for procedure documentation, either the Policy Manual or Desk Reference Manual.

- a. Desk Reference Manual: Generate formal notification for process updates.
- b. Policy Manual: Follow the established departmental policy and procedure development and notification process.

3. Quality Assurance (QA) Improvement

- i. Address deficiencies in QA by identifying responsible personnel and processes.
- ii. Determine whether QA procedures will be published in the Policy Manual or a Desk Reference Manual.
 - a. Desk Reference Manual: Generate formal notification for process updates.
 - b. Policy Manual: Follow the established departmental policy and procedure development and notification process.

3. Proof of Practice Enhancement

Objective: Ensure reliable tracking and documentation of operational practices.

Action Steps:

1. Address Deficiencies in Proof of Practice

- i. Revise or create forms as needed to capture proof of practice.
- ii. Incorporate technology to improve efficiency in tracking and monitoring practices.

4. Training Development and Execution

Objective: Ensure comprehensive training programs are in place to meet organizational needs.

Action Steps:

1. Identify Training Gaps

- i. Address any deficiencies in current training programs.
 - a. Identify the best mechanism for implementing each type of training, considering their distinct processes.
- ii. Conduct training assessments
 - a. Create and/or revise trainings to address youth population demographics and staff needs.
 - i.e., create/revise trainings to target an older, larger in stature, and long-term committed youth population.

2. Trainer Identification

- i. Identify internal and external trainers for each training program.

3. Lesson Plan Development

- i. Create detailed lesson plans and develop relevant training materials.
- ii. Ensure trainers have the necessary skills and resources to deliver effective training.

- 4. we add a bullet or sentence that targets assessing and revising trainings to focus more on the population demographics and staff needs

a.

5. Training Plan Creation and Execution

- i. Develop and implement a comprehensive training plan to address identified training needs.

5. Notification Accountability

Objective: Ensure accountability and clear communication in the notification process.

Action Steps:

1. Assign Notification Responsibility

- i. Identify the person(s) responsible for sending policy, procedure, and training updates notifications.

2. Establish Accountability and Tracking

- i. Develop an accountability process for tracking notifications to ensure timely dissemination and compliance.

3. Notification Tracking Responsibility

- i. Designate specific individuals responsible for tracking and ensuring accountability within the notification process.

TARGETED PROVISIONS

XII. EDUCATION, TRANSITION, AND AFTER-CARE

Paragraph(s) and subdivisions: 16

Mandated Tasks: 48

The Department will partner with the Monitor and Los Angeles County Office of Education to develop seamless and collaborative processes and quality assurance mechanisms that support youth's right to education.

Goal:

The goal is to transition all education-related tasks from non-compliance to substantial compliance. This will be accomplished by addressing service delivery gaps, enhancing collaboration with the Monitor and Los Angeles County Office of Education, and establishing processes to ensure adherence to standards. The ultimate goal is to achieve and maintain compliance through regular assessments, timely interventions, and continuous improvement.

Key Performance Indicators:

- **26(a)**- 90% of youth were made available for enrollment within 24 hours of arrival, or the morning of the next school day.
- **26(b)**- 90% of youth were made available for enrollment within 24 hours of arrival, or the morning of the next school day.

Rebuild Lives and Provide for Healthier and Safer Communities

- **26(c)**- The County reviewed the accuracy of LACOE's data 100% of the time on a weekly basis for the first three months.
- **26(e)**- 90% of youth who were not timely transported to class was the result of an immediate threat to the safety of youth or others or a LACOE authorized excused absence.
- **26(e)**- 93% of the youth who have not been determined to be an immediate threat to safety of youth or others or have a LACOE authorized excused absence are timely transported to class.
- **26(f)**- 90% of the education services occurred in a classroom.
- **26(f)**- 90% of the education services that did not occur in a classroom are because of a particularized and documented risk of harm.
- **26(g)**- Documentation that shows 95% of current staff attended training within 30 days and on annual basis thereafter.
- **26(g)**- 90% of the time youth were provided an hour of quiet time. No youth was denied school time as punishment.
- **26(h)**- Documentation that shows 95% of current staff attended training within 30 days and on annual basis thereafter.
- **26(i)**- 90% of the time, the County invites LACOE to the same day meetings and the same day meetings are held as described in Paragraph 26(i) and documenting efforts to assess the reasons and send youth to the classroom.
- **26(k)**- 93% of the youth who have not been determined to be an immediate threat to safety of youth or have a LACOE authorized excused absence are timely transported to class.
- **26(k)**- 90% of youth who were not timely transported to class was the result of an immediate threat to the safety of youth or others or a LACOE authorized excused absence.
- **26(q)**- 90% of eligible youth are identified and offered post- secondary, career exploration, and job readiness programs offered by the County.
- **26(q)**- 85% of the delays or denials were a result of an immediate threat to the safety of youth or others.
- **26(q)**- 90% of youth are provided regular access by the County to LACOE's career exploration and/or job readiness programs.
- **27(c)**- 100% of the time a monthly report and any disputes are provided within timeframes, unless the Monitor approves an extension.
- **27(d)**- 100% of the time a report is provided to the Probation Oversight Commission.

IV. MEDICAL TRANSPORTATION (JOINT STIPULATION)

Paragraphs: 1

The department will collaborate with the Monitor and Juvenile Court Health Services to develop collaborative processes and reporting standards that ensure youth attend scheduled medical appointments and enhance the safety and efficiency of medical transfers.

Goal:

The goal is to achieve a status substantial compliance with the medical transportation of youth by collaborating closely with the Monitor, Juvenile Court Health Services, and the transportation unit to develop a comprehensive plan that ensures timely and safe transport to medical appointments. This plan will focus on coordinating schedules, optimizing transportation logistics, and implementing protocols that prioritize the health and well-being of the youth.

Performance Indicators:

- The Monitor and the Health and Behavioral Health SME approve the Joint Medical Transportation Plans, and;
- Monthly data provided by the County to the Monitor and the Health and Behavioral Health SME show and the Monitor and the Health and Behavioral Health SME verify that youth are timely transported to medical services 93% of the time and the Monitor and the Health and Behavioral Health SME verify the data provided.

VI. USE OF FORCE AND YOUTH SAFETY/VII. JOINT STIPULATION CARE AND YES TEAM

Paragraph(s) and subdivisions: 24

Mandated Tasks: 38

In collaboration with the Monitor and subject matter experts, we will revise and develop current policies and procedures, as needed, to support the creation and implementation of the Care and Yes Team (CIT) and reinforce best practices in de-escalation and response.

Goal:

The goal is to move all tasks related to the use of force provision from non-compliance to substantial compliance, emphasizing the reduction of use of force incidents, the implementation of Crisis Intervention Teams (CIT), and improved crisis intervention outcomes. This will be accomplished by updating protocols, providing comprehensive training, and deploying CIT teams to ensure that responses are de-escalated and aligned with best practices.

Performance Indicators:

- **12-** 100% of Units have a functioning cold water shower installed.
- **12-** 93% of the Units visited have either functioning cold water showers or functioning temporary eye wash station available.
- **13(a)-** 100% of the time, the County evaluates whether staffing was a contributory factor of non-compliance for two consecutive quarters for any substantive provision.
- **13(b)-** Documentation that shows 85% of staff received training within 120 days and 95% of current staff attended training within 365 days.
- **14(a)-** 90% of decontamination after use of OC spray is in compliance with State law and current Probation policy.
- **14(b)-** The County completed 90% of the required review and developed appropriate corrective measures, as needed.

- **14(c)**- OIG will review whether the County is identifying any needs for training and support to Probation staff and providing the identified support in 90% of cases where training and support are identified.
- **15**- OIG finds that the County is accurately reporting and documenting use of force incidents, and that all use of force incidents not accepted by Internal Affairs for review are timely reviewed by FIRST for compliance with State law and Probation policy in 90% of the cases, and the Monitor does not disagree with the assessment.
- **16(b)**- Documentation that shows 85% of staff received training within 150 days and 95% of current staff attended training within 365 days.
- **17**- 90% of use of force incidents reviewed are in compliance with policy and law.
- **17**- 90% of the cases reflect that recordings are being properly used in relation to use of force incidents.
- **17**- 90% of cameras are operational, in use, and provide sufficient coverage.
- **18(a)-(h) and (j)-(k)**- Documentation that shows 85% of staff received training within 120 days and 95% of current staff attended training within 365 days.
- **18**- Documentation that shows 85% of staff received training within 180 days and 95% of current staff attended training within 365 days.
- **18**- 95% of the time the use of mechanical restraints during transport was appropriate and compliant with state law.
- **18(i)**- Documentation that shows 85% of staff received training within 180 days and 95% of current staff attended training within 365 days.
- **18(l)**- 95% of the time the use of mechanical restraints during transport was appropriate and compliant with state law.
- **18(m)-(o)**- Documentation that shows 85% of staff received training within 180 days and 95% of current staff attended training within 365 days.
- **18(m)-(o)**- All reports or grievances of Probation staff permitting or encouraging youth to engage in physical fights or assaults are forwarded to IA and handled within approved procedures. If the Department determines that a report or grievance should not go to IA, the Department will inform the Monitor of any such decision and provide a copy of the report or grievance upon Monitor request.
- That in 93% of instances when staff observe behaviors escalating, the CARE team be utilized at the earliest possible opportunity.
- That in 93% of instances when staff observe behaviors escalating, the CARE team be utilized at the earliest possible opportunity.

V. TECHNOLOGY AND DATA MANAGEMENT

Paragraph(s) and subdivisions: 2

Mandated Tasks: 2

In collaboration with the Monitor, provided subject matter experts, the Los Angeles County Internal Services Department, and Probation's Internal Services Bureau, develop and acquire the necessary technological infrastructure and software to improve data accuracy, accessibility, security, and our ability to meet required metrics and key performance indicators.

Goal:

The goal is to transition all tasks related to technology and data management from non-compliance to substantial compliance by modernizing department systems, operations, and processes. This will involve acquiring or developing the necessary technology to improve data gathering, enhance reporting efficiency, and reinforce accountability. Through the implementation of tools and systems, our goal is to simplify processes, guarantee accurate and timely data collection, and offer increased transparency in our operations.

Performance Indicators:

- **10-** Monitor approval of improvement to, or development of, electronic data system to address each data deficiency or inadequacy identified by the County or Monitor.
- **11-** Monitor approval of internal process.

VII. ROOM CONFINEMENT

Paragraph(s) and subdivisions: 2

Mandated Tasks: 9

In collaboration with the Monitor and subject matter experts, we will revise and develop current practices, policies, and procedures and leverage current technology to ensure that room confinement is accurately documented, appropriate, and minimized.

Goal:

The goal is to move all tasks associated with the room confinement provision from non-compliance to substantial compliance by revising existing policies and procedures. This revision will focus on improving documentation and enhancing the monitoring of youth placed in room confinement for both behavioral and operational confinement purposes. By establishing clear processes/guidelines and leveraging technology, we aim to ensure that room confinement is used appropriately, that all instances are accurately documented, and that youth are closely monitored to safeguard their well-being through a variety of increased quality assurance and fidelity measures.

Performance Indicators:

- **20-** Documentation shows that 85% of staff received training within 180 days and 95% of current staff attended training within 365 days.
- **20-** 90% of the time Room Confinement and length of Room Confinement were appropriate, compliant with law and the County's policy, and documented.
- **20-** 90% of the time, any reviews, consultations, or authorizations occurred as required.
- **20-** 95% of the time, when a youth is held more than four hours, an individualized plan to reintegrate the youth is developed and implemented.
- **20-** 90% of the time that youth in Room Confinement were not provided programming, recreation, exercise, or religious services, was due to a written finding that the youth represents a threat to the safety and security of the facility.

- **20-** 90% of the time that youth in Room Confinement were not provided education was due to an immediate threat to the safety of youth or others or a LACOE authorized excused absence.
- **20-** 93% of youth who have not been found to represent a threat to safety and security have been provided programming, recreation, exercise, religious services, and education.
- **20-** 90% of the time appropriate subsequent remedial measures were implemented.

Conclusion:

In closing, this proposal outlines a strategic approach to achieving compliance by focusing our efforts on the key categories of Education, Transition, and After-Care; Medical Transportation; Use of Force and Youth Safety; Technology and Data Management; and Room Confinement. By concentrating on these critical areas, we are confident that we can make significant progress toward meeting compliance standards while enhancing the overall safety, care, and well-being of the youth we serve. We believe that this targeted strategy, emphasizing collaboration and tangible progress, will move us closer to compliance and lay the foundation for sustained success.

EXHIBIT B

BJN-SYTF 72 Operating Capacity (Short-term Operating Cap)
 (*Designates Light Duty Posts)

24-Hour/7-Day Living Unit Posts	Direct Care FTE's	Hours/days of assignment	Level	Relief Factor	Unit Capacity (PREA Ratio)	Staff:Youth Ratio	Baseline EM	Baseline AM	Baseline PM	EM Shift Min Mandatory	AM Shift Min Mandatory	PM Shift Min Mandatory	EM 64-bed Min Mandatory	AM 64-bed Min Mandatory	PM 64-bed Min Mandatory
Housing Unit A w Control Center*	Vacant	24/7	Mandatory	1.96											
Housing Unit B	Vacant	24/7	Mandatory	1.96											
Housing Unit C w Control Center*	Vacant	24/7	Mandatory	1.96											
Housing Unit D	Vacant	24/7	Mandatory	1.96											
Housing Unit E w Control Center*	Vacant	24/7	Mandatory	1.96											
Housing Unit F	Vacant	24/7	Mandatory	1.96											
Housing Unit G w Control Center*	Vacant	24/7	Mandatory	1.96											
Housing Unit H	Vacant	24/7	Mandatory	1.96											
Housing Unit I w Control Center*	Vacant	24/7	Mandatory	1.96											
Housing Unit K	Vacant	24/7	Mandatory	1.96											
Housing Unit L w Control Center*	Vacant	24/7	Mandatory	1.96											
Housing Unit M	Vacant	24/7	Mandatory	1.96											
Housing Unit N w Control Center*	6	24/7	Mandatory	1.96	4	1:4	2	2	2	2	2	2	0	0	0
Housing Unit O	3	24/7	Mandatory	1.96	4	1:4	1	1	1	1	1	1	0	0	0
Housing Unit P w Control Center*	Vacant	24/7	Mandatory	1.96											
Housing Unit Q - HOPE Center	Vacant	24/7	Mandatory	1.96											
Housing Unit R w Control Center*	Vacant	24/7	Mandatory	1.96											
Housing Unit S	Vacant	24/7	Mandatory	1.96											
Housing Unit T w Control Center*	8	24/7	Mandatory	1.96	8	1:4/1:8	2	3	3	2	2	2	2	2	2
Housing Unit V	7	24/7	Mandatory	1.96	8	1:4/1:8	1	3	3	1	1	1	1	1	1
Housing Unit W1 w Control Center*	Vacant	24/7	Mandatory	1.96											
Housing Unit W2	Vacant	24/7	Mandatory	1.96											
Housing Unit X1: Adult HC w Control Center*	8	24/7	Mandatory	1.96	8	1:4/1:8	2	3	3	2	2	2	2	2	2
Housing Unit X2: Adult HC	7	24/7	Mandatory	1.96	8	1:4/1:8	1	3	3	1	1	1	1	1	1
Housing Unit Y1 w Control Center*	8	24/7	Mandatory	1.96	8	1:4/1:8	2	3	3	2	2	2	2	2	2
Housing Unit Y2	7	24/7	Mandatory	1.96	8	1:4/1:8	1	3	3	1	1	1	1	1	1
Housing Unit Z1 w Control Center*	8	24/7	Mandatory	1.96	8	1:4/1:8	2	3	3	2	2	2	2	2	2
Housing Unit Z2	7	24/7	Mandatory	1.96	8	1:4/1:8	1	3	3	1	1	1	1	1	1
MOU - Medical	6	24/7	Mandatory	1.96	Varied	Varied	2	2	2	1	1	1	1	1	1
Levels 1:1/1:2 Supervisions	6	24/7	Mandatory	1.96	72	1:1/1:2	2	2	2	2	2	2	2	2	2
Total Number of Posts	81			1.96			19	31	31	18	18	18	15	15	15
Total Number of FTE's with Relief Factor				158.76											

24-Hour/7-Day Ancillary Posts	Number of staff to operate	Hours/days of assignment	Level	Relief Factor
Movement & Control*	9	24/7	Mandatory	1.96
Programming (3 Sworn/3 Non-Sworn)	6	24/7	Mandatory	1.96
GSNs for Breaks	3	24/7	Mandatory	1.96
Security Gate Cameras*	3	24/7	Mandatory	1.96
Intake	3	24/7	Mandatory	1.96
Crisis Response Team	9	24/7	Mandatory	1.96
Yard Observation Post*	3	24/7	Mandatory	1.96
Utility/CIT	6	24/7	Mandatory	1.96
Total Number of Posts	42			1.96
Total Number of Staff to Operate Posts	82.32			

Baseline EM	Baseline AM	Baseline PM	EM Shift Min Mandatory	AM Shift Min Mandatory	PM Shift Min Mandatory	64-Pop EM	64-Pop AM	64-Pop PM
2	4	3	2	2	2	2	4	3
0	3	3	0	3	3	0	3	3
1	1	1	0	0	0	1	1	1
1	1	1	1	1	1	1	1	1
1	1	1	1	1	1	1	1	1
3	3	3	3	3	3	3	3	3
1	1	1	1	1	1	1	1	1
2	2	2	2	2	2	2	2	2
11	16	15	10	13	13	11	16	15

8-Hour/5-Day Ancillary Posts	Number of staff to operate	Hours/days of assignment	Level	Relief Factor
Movement Coordinator* (Non-Sworn)	3	8/5	Mandatory	1.54
Livescan & DNA	1	8/5	Mandatory	1.54
School Posts	6	8/5	Mandatory	1.54
Court Holding Area	2	8/5	Mandatory	1.54
Visiting*	2	8/5	Mandatory	1.54
Medical/Dental Transports	2	8/5	Mandatory	1.54
BMP/DSS*	4	8/5	Mandatory	1.54
Q&A (Non-Sworn)	5	8/5	Mandatory	1.54
Recreation Team	4	8/5	Mandatory	1.54
DMC (Non-sworn)	1	8/5	Mandatory	1.54
STC/Scheduler* (Non-Sworn)	1	8/5	Mandatory	1.54
Total Number of Posts	31			1.54
Total Number of Staff to Operate Posts	47.74			

Baseline EM	Baseline AM	Baseline PM	EM Shift Min Mandatory	AM Shift Min Mandatory	PM Shift Min Mandatory	64-Pop EM	64-Pop AM	64-Pop PM
1	1	1	0	1	1	1	1	1
0	1	0	0	0	0	0	1	0
0	3	3	0	3	3	0	3	3
0	1	1	0	1	1	0	1	1
0	1	1	0	1	1	0	1	1
0	1	1	0	1	1	0	1	1
0	2	2	0	1	1	0	2	2
0	3	2	0	1	1	0	3	2
0	2	2	0	2	2	0	2	2
0	1	0	0	0	0	0	1	0
0	1	0	0	0	0	0	1	0
1	17	13	0	11	11	1	17	13

Total Posts:	154
Total FTE's w/Relief Factor(s):	288.82

Total Baseline			Minimum/Mandatory Post per Shift					
72-Beds EM	72-Beds AM	72-Beds PM	72-Beds EM	72-Beds AM	72-Beds PM	64-Beds EM	64-Beds AM	64-Beds PM
31	64	59	28	42	42	27	48	43

	2022 Relief Factor 7-Day	2021 Relief Factor 7-Day	2019 Relief Factor 7-Day	7-Day Average	2022 Relief Factor 5-Day	2021 Relief Factor 5-Day	2019 Relief Factor 5-Day	5-Day Average
Supervising DSO's	1.89	2.047	1.956	1.96	1.46	1.462	1.397	1.44
Senior DSO's	2.3	2.026	2.434	2.25	1.64	1.447	1.739	1.61
DSO's	1.85	1.951	2.362	2.05	1.38	1.393	1.687	1.49
GSN's	1.81	2.053	3.069	2.31	1.29	1.466	2.192	1.65
TOTAL ALLOCATED POSTIONS:	1.9625	2.02	2.46	2.1425	1.4425	1.44	1.75	1.5475

2024 Current			
Barry J. Nidorf/SYTF			
2024			
Title	Authorized	Filled	Vacant
GRP,SPVR,NIGHTS	46	35	11
DETNT SRVC OFFR	66	62	4
DPY PRB OFFR I	21	17	4
DPY PRB OFFR II	20	9	11
SR DETNT SRV OF	24	21	3
SPVG DETNT SRVC	32	25	6
Current Total Funded FTE's	209	169	39

County of Los Angeles
 Probation Department
 Juvenile Hall Staffing
 2019/2021

Juvenile Hall Allocated Direct Care FTE's

Central Juvenile Hall

2019

Title	Authorized	Filled	Vacant
GRP,SPVR,NIGHTS	102	98	4
DETNT SRVC OFFR	306	285	21
SR DETNT SRV OF	51	43	8
SPVG DETNT SRVC	22	20	2
Total	481	446	35

Central Juvenile Hall

2021

Title	Authorized	Filled	Vacant
GRP,SPVR,NIGHTS	134	111	23
DETNT SRVC OFFR	298	283	15
SR DETNT SRV OF	68	65	3
SPVG DETNT SRVC	25	14	11
Total	525	473	52

Los Padrinos Juvenile Hall

2019

Title	Authorized	Filled	Vacant
GRP,SPVR,NIGHTS	63	61	2
DETNT SRVC OFFR	180	129	51
SR DETNT SRV OF	44	28	16
SPVG DETNT SRVC	17	9	8
Total	304	227	77

Los Padrinos Juvenile Hall

2021

Title	Authorized	Filled	Vacant
GRP,SPVR,NIGHTS	0	0	0
DETNT SRVC OFFR	1	0	1
SR DETNT SRV OF	4	0	4
SPVG DETNT SRVC	6	0	6
Total	11	0	11

Barry J. Nidorf Juvenile Hall

2019

Title	Authorized	Filled	Vacant
GRP,SPVR,NIGHTS	83	76	7
DETNT SRVC OFFR	298	253	45
SR DETNT SRV OF	53	49	4
SPVG DETNT SRVC	20	20	0
Total	454	398	56

Barry J. Nidorf Juvenile Hall

2021

Title	Authorized	Filled	Vacant
GRP,SPVR,NIGHTS	122	89	33
DETNT SRVC OFFR	305	276	29
SR DETNT SRV OF	68	61	7
SPVG DETNT SRVC	28	21	7
Total	523	447	76

Los Padrinos Juvenile Hall

2024

Title	Authorized	Filled	Vacant
GRP,SPVR,NIGHTS	144	118	26
DETNT SRVC OFFR	403	281	122
DPY PRB OFFR I	20	18	2
DPY PRB OFFR II	3	1	2
SR DETNT SRV OF	94	81	13
SPVG DETNT SRVC	48	44	4
Total	712	543	169

Barry J. Nidorf/SYTF

2024

Title	Authorized	Filled	Vacant
GRP,SPVR,NIGHTS	46	35	11
DETNT SRVC OFFR	66	62	4
DPY PRB OFFR I	21	17	4
DPY PRB OFFR II	20	9	11
SR DETNT SRV OF	24	21	3
SPVG DETNT SRVC	32	25	6
Total	209	169	39

