

**DEATHS, SERIOUS ILLNESS AND OTHER SERIOUS INCIDENTS  
RELATED TO YOUTH IN CUSTODY**

**AUTHORITY:** Administrative Directive  
California Code of Regulations, Title 15 – Minimum Standards for Juvenile Facilities, Section 1341  
California Government Code 12525  
California Penal Code 5021 **and 10008**

**RESCINDS:** Procedure Manual Item 3-1-106, dated **08/18/23**

**FORMS:** Special Incident Report (ICMS)

**PURPOSE:** To establish a uniform procedure for staff to follow regarding response and notification procedures involving death, serious **illness**, injury, or other serious incidents related to youth in custody.

- I. General Information – Death of a Youth, Serious Illness or Injury of a Youth
  - A. The DD or designee, in cooperation with the health administrator and the behavioral/mental health director, shall develop written policies and procedures in the event of a death of a youth while detained or **serious illness or injury of a youth**, which include notifications to necessary parties, which may include the Juvenile Court, the parent, guardian or person standing in loco parentis and the youth's attorney of record.
  - B. The health administrator, in cooperation with the DD, shall develop written policies and procedures to assure there is a medical and operation review of every in-custody death of a youth. The review team shall include the DD and/or facility manager, the health administrator, the responsible physician and other health care and supervision staff who are relevant to the incident.
  - C. The DD shall provide the Board (**Board of State and Community Corrections**) a copy of the report submitted to the Attorney General under Government Code Section 12525. A copy of the report shall be submitted to the Board within 10 calendar days of the death.
  - D. Upon receipt of the report of the death of a youth from the DD, the Board may within 30 calendar days inspect and evaluate the juvenile facility, jail, lockup or court holding facility pursuant to the provisions of this subchapter. Any inquiry made by the Board shall be limited to the standards and requirements set forth in these regulations.
  - E. Incidents falling into the above noted categories include, but are not limited to, the following:
    1. Serious injury, **serious illness** or serious incident requires immediate action by staff and triggers specific notification requirements.
    2. Any serious injury **or serious illness** resulting in a youth's transportation to the hospital by ambulance or hospitalization.

3. Any incident in which there is reasonable cause to believe that a youth has violated one or more of the following Penal Code violations while in custody: 261.5 (Unlawful Sexual Intercourse), 286 (Sodomy), 288 (Lewd and Lascivious Acts), 288a (Oral Copulation), or involvement in a sexual act with another.
4. Any incident in which there is reasonable cause to believe a staff member has committed a criminal act that involves a youth or affects the operation of the facility.
5. Any environmental or structural condition that requires evacuation or relocation of youth or otherwise affects their safety or welfare.
6. Any serious condition or incident including, but not limited to, riots, mass escapes, fire, disruptive labor actions, or breach of security.

## II. Immediate Response – Staff

A. The preservation of human life is of paramount importance. Upon discovering **what appears to be a death**, suicide, suicide attempt, **serious illness or** serious injury, determine the necessity for immediate aid (e.g., CPR, pressure for arterial bleeding, rescue breathing). Call for staff assistance and initiate the necessary treatment. Staff not involved in immediate treatment will call for assistance via Control. Control staff will call for medical assistance in the following order:

1. Medical Unit/Medical staff (if the incident occurs in Juvenile Hall, Youth Guidance Center, or the Youth Leadership Academy, explain the nature of the emergency and the location.)
2. Paramedics

### B. Preservation of scene

1. Preserve the scene by not moving or altering any item in the room. The handling DPCO (**Deputy Probation Correctional Officer**) should immediately begin taking notes of the scene and limit all unnecessary access into the scene, pending the arrival of the handling investigators.
2. When possible, the SPCO (**Supervising Probation Correctional Officer**)/DO shall take a video or photographs on county cellular phone of the scene prior to the arrival of the medical staff, so the integrity of the initial crime scene will be documented, prior to any unintentional contamination by the attending medical aid. Obtain written statements of all staff involved and witnesses.
3. Keep other youths away from the area and keep the scene secured until all necessary actions related to the incident are complete. In the event a weapon or another significant item of evidence within the scene, may be contaminated by the responding medical staff, or for safety reasons it must be moved away from the youth, a SPCO/DO shall photograph the evidence in-place and then retrieve the item (with gloves on hands) and place it into a paper bag/envelope. The SPCO/DO retrieving the item of evidence shall

along retain this in their custody until the arrival of the handling investigators. The SPCO/DO will then relinquish the chain-of-custody for the evidence to one of the handling investigators.

4. The highest-ranking staff on duty should direct the activity until an administrator or their designee is on site.
  5. Any photographs or video taken shall be immediately disclosed to the handling investigators (if a crime is involved), and the county cell phone may be relinquished to the investigators until they can retrieve the photos/videos from the Crime Lab. (The investigators will return the county phone to Probation when the evidence retrieval has been completed).
- C. When medical staff arrives (e.g., nurse, paramedics, doctor), they will assume medical responsibility and facility staff will assist as needed.

### III. Notifications

- A. SPCO Notification Responsibilities – Death, Serious Injury, **Serious Illness** or Serious Incident.
1. Contact The Orange County Sheriff's Department (OCSD) (714) 647-7000 or (714) 647-7400.
  2. Notify the Administrator In Charge (AIC).
- B. The AIC will contact the Facility Division Director (DD), or designee, Notification Responsibilities – Death, Serious Suicide Attempt, Serious Injury, **Serious Illness**, or Serious Incident.
1. Verify that the CPO has been notified via the chain of command. If any person within the chain of command cannot be reached promptly, that person may be temporarily left out of the notification process in order to ensure the CPO is notified.
  2. The facility Director, or designee, in cooperation with the health administrator and the behavior/mental health director, will assume responsibility for developing a notification plan for the youth's parent or guardian or person standing in loco parentis. This notification should be made in person in the event of a death.
  3. The facility Director or designee shall notify the youth's attorney of record.
  4. The facility Director or designee shall notify the youth's assigned Deputy Probation Officer (DPO) and Supervising Probation Officer (SPO).
  5. The facility Director or designee will notify the Association of Orange County Deputy Sheriffs (AOCDS) by calling 714-285-2800 as soon as practical and possible.
  6. In the event of a sexual assault of a youth while the youth is in custody, the facility Director or designee will notify the department's PREA Coordinator.

7. It is the facility Director's responsibility to ensure that all provisions of this procedure are carried out.

C. Chief Probation Officer, or Designee, Notification Responsibilities – Death

1. Orange County Sheriff - Coroner's Office: Pursuant to Penal Code Section 5021, any death that occurs within a county juvenile facility shall be reported within a reasonable time, not to exceed two hours of its discovery to the county sheriff or designee by calling (714) 647-7400. The initial report of the death may be transmitted by telephone, direct contact, or by written notification and shall outline all pertinent facts known at the time the report is made. Within eight hours of the discovery of the death, a written report shall be made, including all circumstances and details of the death that were known at the time the report was prepared and shall include the names of all persons involved in the death and all persons with knowledge of the circumstances surrounding the death.
2. Orange County District Attorney: Pursuant to Penal Code Section 5021, any death that occurs within a county juvenile facility shall be reported to the district attorney or designee as soon as the district attorney or representative is on duty. The initial report of the death may be transmitted by telephone, direct contact, or by written notification and shall outline all pertinent facts known at the time the report is made. Within eight hours of the discovery of the death, a written report shall be made, including all circumstances and details of the death that were known at the time the report was prepared and shall include the names of all persons involved in the death and all persons with knowledge of the circumstances surrounding the death.
3. **Chief of Police: Pursuant to Penal Code Section 5021, any death that occurs within a county juvenile facility shall be reported to the chief of police or to his or her designated representative, within a reasonable time, not to exceed two hours of its discovery, if the facility is located within the city limits of an incorporated city. The initial report of the death may be transmitted by telephone, direct contact, or by written notification and shall outline all pertinent facts known at the time the report is made. Within eight hours of the discovery of the death, a written report shall be made, including all circumstances and details of the death that were known at the time the report was prepared and shall include the names of all persons involved in the death and all persons with knowledge of the circumstances surrounding the death.**
4. The Presiding Judge of the Juvenile Court, immediately by telephone with follow-up, in writing, within 24 hours.
5. The Chair of the Juvenile Justice Commission or the Juvenile Justice Commission office immediately by telephone with follow-up, in writing, within 24 hours.
6. The County Executive Officer (CEO), in writing, within 24 hours.

7. Clerk of the Board of Supervisors and the County Administrative Officer, in writing, within 24 hours. If exceptional circumstances exist, the Chairman of the Board shall be notified immediately.
8. County Risk Management, in writing, within 24 hours.
9. The Probation Department Safety Officer, by telephone, with follow up in writing within 24 hours.
10. Attorney General: Pursuant to Government Code Section 12525, in any case in which a person dies in the custody of any law enforcement agency or in a local correctional facility, the agency shall report in writing to the Attorney General within 10 days after the death, all facts in the possession of the agency concerning the death. In order to comply with this requirement, the Probation Department will complete the Death in Custody Reporting Form within 10 days and forward it to the California Department of Justice, Criminal Justice Statistics Center, P.O. Box 903427, Sacramento, California 94203-4270.
11. Board of State and Community Corrections (BSCC): As required by Title 15 Section 1341, a copy of the report submitted to the Attorney General under Government Code Section 12525 (see above) shall be submitted to the BSCC within 10 calendar days after the death.
12. **Notice made on internet website; as required by Penal Code Section 10008:**
  - (a) **When a person, including a juvenile, who is in custody dies, the agency with jurisdiction over the state or local correctional facility with custodial responsibility for the person at the time of their death shall, consistent with reporting requirements pursuant to [Section 12525 of the Government Code](#), post all of the following on its internet website:**
    - (1) The full name of the agency with custodial responsibility at the time of death.
    - (2) The county in which the death occurred.
    - (3) The facility in which the death occurred, and the location within that facility where the death occurred.
    - (4) The race, gender, and age of the decedent.
    - (5) The date on which the death occurred.
    - (6) The custodial status of the decedent, including, but not limited to, whether the person was awaiting arraignment, awaiting trial, or incarcerated.
    - (7) The manner and means of death.

- (b)(1) Subject to paragraph (2), the information shall be posted for the public to view on the agency's internet website within 10 days of the date of death. If any of the information changes, including, but not limited to, the manner and means of death and the date on which the death occurred, once determined by a medical examiner or similar entity, the agency shall update the posting within 30 days of the change.
- (2) If the agency seeks to notify the next of kin and is unable to notify them within 10 days of the death, the agency shall be given an additional 10 days to make good faith efforts to notify next of kin before the information shall be posted for the public to view on the agency's internet website.
- (c) “In-custody death” means the death of a person who is detained, under arrest, or is in the process of being arrested, is in route to be incarcerated, or is incarcerated at a municipal or county jail, state prison, state-run boot camp prison, boot camp prison that is contracted out by the state, any state or local contract facility, or other local or state correctional facility, including any juvenile facility. “In-custody death” also includes deaths that occur in medical facilities while in law-enforcement custody.

- IV. Post-Incident Reviews – Death, Serious Injury, **Serious Illness** and Other Serious Incidents
  - A. Staff shall refer any youth witnessing a suicide, **serious illness**, serious suicide attempt, or serious incident to a mental health clinician as soon as reasonably possible.
  - B. In the event of a suicide or serious suicide attempt, the Chief Deputy Probation Officer assigned to the Juvenile Operations Bureau and the facility Director will conduct a joint administrative review as soon as possible. The review will include an evaluation of the circumstances surrounding the incident, responses proceeding **to** the incident, responses during the incident, and responses after the incident.
  - C. As required by Title 15 Section 1341, in the event of an in-custody death of a youth, a medical and operational review will occur within 10 days. The review team shall include the Chief Probation Officer, the Chief Deputy of the Juvenile Operations Bureau, the facility Division Director, **the** Health Care Agency Correctional Health Administrator, **the** responding physician, other health care staff, and supervision staff relevant to the incident and other administrative and supervisory staff relevant to the incident. The facility administrator shall jointly establish written policies and procedures for such review in cooperation with the county health administrator.
- V. Employee Assistance Program (EAP), The Counseling Team International (**TCTI**), and the Peer Support Team (PST)

- A. Involved staff shall be given a referral to EAP and an opportunity to contact a representative from EAP.
- B. The facility Director or designee shall contact The Counseling Team International at 1-800-222-9691 to provide critical incident/crisis intervention counseling services if deemed necessary. A stress debrief for the involved staff can **help mitigate** the effects of trauma on staff.
- C. Members of the Peer Support Team (PST) do not self-deploy. However, the facility Director or designee shall contact a member of the PST Advisory Board or a PST Coordinator within twenty-four (24) hours of the critical incident and provide the nature of the incident and the names of staff involved.
  - 1. The involved staff can contact a member of the PST directly or request **that** a PST member respond to the scene. If the involved staff requests a non-PST support officer to be contacted and remain with them, the facility Director or designee will attempt to contact the requested officer and inform them of the request.
  - 2. If a PST member responds to the scene or location of the involved staff member(s), their role is to ensure the staff member's basic physical and emotional needs are met and to provide support and assistance to the staff member(s) involved or affected.
  - 3. PST members will not inquire **about** the facts of the incident. This is essential to preserve the staff member's Public Safety Officers Procedural Bill of Rights and the integrity of any subsequent investigation.

VI. Media Contact

The CPO or designee will handle all press and public inquiries regarding deaths or other serious incidents.

**REFERENCES**

Procedures:	1-2-006	<b>Employee Wellness and Program</b>
	1-4-001	Notification Guidelines for any Case Where an Adult Dies While in the Custody of the Probation Department/Officer-Involved Deaths
	1-4-128	Critical Incident Manager (CIM)
	1-4-123	Prevention, Detection, Reporting, and Response to Incidents of Sexual Abuse, Harassment, and Misconduct in Juvenile Facilities (PREA)
	2-1-004	Child Abuse Reporting Responsibilities of Deputized Probation Staff
	3-6-001	Use of Force – Facilities

Attachments

**APPROVED BY:**