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DEATH

AUTHORITY

Title 15 Regulation:

Section 1341 Death and Serious Illness or Injury of a Youth While Detained

California Government Code (GOV):

Section 12525
Section 27491

Related Probation Department Policy:

IV23 Officer-Involved Critical Incident Protocol

If a youth dies in custody of a Juvenile Detention Facility (JDF), the Supervising Deputy Probation Officer – Institutions (SDPO (I)) or shift supervisor shall:

- Notify dispatch (9-911) for an ambulance.
- Attempt immediate First Aid/CPR and continue trying to revive the youth until the ambulance arrives.
- Cut the victim down and begin First Aid/CPR, if by hanging.
- Secure all youth in sleeping rooms, if possible. If a roommate is with the victim, an alternative location may be more appropriate than a sleeping room.
- Record the time the youth was discovered and the phone call to dispatch in the logbook.
- Notify the Assistant Superintendent, Superintendent, and the Chief Probation Officer.
- Make all required phone calls.
- As soon as possible, get the statements of all staff on duty regarding the incident.
- Have every DPO (I) on duty prepare a detailed, accurate SIR, or supplemental SIR, regarding their knowledge and involvement. This should include:
  1. All times Room Safety Checks were made.
  2. All efforts made to revive the youth.
  3. Circumstances leading up to the death.
  4. Notification of resource people.

The El Dorado County Sheriff's Office, Coroner Unit, per Section 27491 of the Government Code, shall investigate the circumstances and conditions surrounding the death.

The Supervisor should discuss with the Sheriff/Coroner investigators whether the Officer-Involved Critical Incident Protocol is applicable, and invoke when appropriate.

REQUIRED TELEPHONE CALLS

Once a death has been discovered, the shift supervisor shall immediately notify by telephone the following:

- El Dorado County Sheriff's Office, Coroner Unit.
- Facility Assistant Superintendent and Superintendent.
- Chief Probation Officer.

THE CHIEF PROBATION OFFICER OR THEIR DESIGNEE SHALL NOTIFY THE FOLLOWING

- The youth's parents, next of kin, or appropriate other person.
- The presiding Superior Court Judge and Juvenile Court Judge.
- County Chief Administrative Officer.
- County Counsel.
- Chairman of Board of Supervisors.
- Risk Management.
- El Dorado County District Attorney.
- Board of State and Community Corrections.
- California Attorney General's Office.

Note: Only the Chief Probation Officer or their designee shall discuss or give a statement to the press in regard to an incident of a youth's death.

REQUIRED WRITTEN REPORTS – SUPERINTENDENT

Within 10 days, a written report must be submitted to the California Department of Justice, Bureau of Criminal Statistics, Statistical Data Center, P.O. Box 903427, Sacramento, CA 94203-4270.

A written report must also be submitted to the Attorney General of the State of California pursuant to Government Code Section 12525 within 10 calendar days. Within 10 days, a copy of the report to the Attorney General must also be submitted to the Board of State and Community Corrections Title 15 Section 1341.

The reports shall consist of the following:

- A form letter for youth's death reporting.
- All departments and investigating department reports.
- Coroner's autopsy report.

SCENE MANAGER'S (SHIFT SUPERVISOR'S) RESPONSIBILITY

The Scene Manager, being the highest-ranking officer at the time, shall preserve the scene and direct other officers as the need arises. Once the immediate emergency is defused, the entire area shall be secured. No individual shall change, alter or move any object, item, clothing, furniture, etc. until cleared to do so by the El Dorado County Sheriff's Office, Coroner Unit. Once the body has been removed from the facility, and it has been determined that the scene can be returned to normal, staff may proceed with their routine duties.

POST TRAUMA COUNSELING

Counseling will be provided upon request, through Mental Health staff, Risk Management, and other resources as needed, to both staff and youth affected by a death within the facility

MEDICAL AND OPERATIONAL REVIEW

In addition to any criminal or Coroner investigations, the facility Superintendent and the designated Health Administrator will assemble a team to review all medical and operational aspects surrounding every in custody death of a youth. The review team shall include the Superintendent, the Health Administrator, the responsible physician, and any other health care and supervising staff related to the incident.