

**LOS ANGELES COUNTY SHERIFF'S DEPARTMENT**



**SUICIDE INTERVENTION AND  
FIRST AID KITS AUDIT -  
NORTH COUNTY CORRECTIONAL FACILITY  
NO. 2016-6-A**

**JIM McDONNELL  
SHERIFF**

**September 13, 2016**

**LOS ANGELES COUNTY SHERIFF'S DEPARTMENT  
Audit and Accountability Bureau**

**SUICIDE INTERVENTION AND FIRST AID KITS AUDIT  
North County Correctional Facility  
Project No. 2016-6-A  
Audit Report**

**PURPOSE**

The Audit and Accountability Bureau (AAB) conducted the Suicide Intervention and First Aid Kits Audit under the authority of the Los Angeles County Sheriff. The audit was performed to determine how the North County Correctional Facility (NCCF) complied with policy relating to Suicide Intervention Kits (SIKs) and First Aid Kits (FAKs). The audit also determined compliance, in part, with the requirements of the United States Department of Justice (DOJ)/Mental Health Joint Settlement Agreement (Settlement Agreement).<sup>1</sup> The audit included examining the presence of the kits and training in the use of their contents.

The AAB conducted this performance audit under the guidance of the Generally Accepted Government Auditing Standards.<sup>2</sup> The AAB has determined the evidence obtained is sufficient and appropriate to provide a reasonable basis for the findings and conclusions based on the audit objectives.

**BACKGROUND**

The Los Angeles County Sheriff's Department (Department), in partnership with the Los Angeles County Department of Mental Health, works to provide for the mental health and well-being of all inmates housed within the Los Angeles County jail system. Although every effort is made to provide the highest level of mental health treatment, individuals who are determined to end their lives continue to attempt suicide while in custody.

It is the mission of the Department's Custody Services Division to provide a secure, safe, and constitutionally managed jail environment for both staff and inmates. The prevention of inmate suicides is the responsibility of all personnel.<sup>3</sup>

The Settlement Agreement addresses remaining allegations concerning suicide prevention and mental health care in custody from the partial implementation of the 2002 Memorandum of Agreement<sup>4</sup> which outlined a series of reforms to ensure

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<sup>1</sup> On August 5, 2015, Sheriff Jim McDonnell and the Department entered into an agreement with the United States Department of Justice to address suicide prevention and mental health care in custody, Case CV 15-5903.

<sup>2</sup> United States Government Accountability Office – By the Comptroller General of the United States, December 2011, Government Auditing Standards 2011 Revision.

<sup>3</sup> Correctional Services Division Informational Bulletin 2009-06, "Inmate Suicide Prevention"

<sup>4</sup> In 2002, former Sheriff Leroy D. Baca entered into a Memorandum of Agreement regarding mental health services at the Los Angeles County Jail between the U.S. Department of Justice and the Los Angeles County Sheriff's

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adequate and reasonable mental health care services were provided while in custody. Despite considerable progress, the Department of Justice alleged systemic deficiencies relative to suicide prevention and mental health care continue to exist.

The Settlement Agreement recognizes the Department's commitment to addressing the serious medical and mental health needs of inmates in its custody, and the need to ensure their reasonable safety. The Settlement Agreement is intended to build upon measures that are underway to sustain systemic improvements designed to protect inmates from conditions in custody that place them at unreasonable risk of harm from suicide and injurious behavior.

The Settlement Agreement calls for the presence of SIKs and FAKs in the control booth or officer's station of each housing unit. The Settlement Agreement further states all custody staff, who have contact with prisoners, will be trained in the use of the kits' contents.<sup>5</sup>

The Department has established policies and procedures to mandate the presence of SIKs in all secure staff stations to assist in the intervention of suicide attempts.<sup>6</sup> In addition, FAKs are required to be available in all custody facilities.<sup>7</sup> The Custody Division Manual (CDM) establishes the contents, inspection documentation, and location of the kits.

### **PRIOR AUDITS**

This is the first Suicide Intervention and First Aid Kits Audit conducted at the NCCF. In May 2016, the AAB published a Suicide Intervention and First Aid Kits Audit of the Twin Towers Correctional Facility, Audit No. 2015-7-A.

### **METHODOLOGY**

#### **Scope**

This audit encompassed four objectives including a physical inspection of SIKs and FAKs located within NCCF, and a review of training records to determine if NCCF personnel received the required training in the use of the kits' contents.

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Department which required adequate mental health care and suicide prevention at the Los Angeles County Jail System.

<sup>5</sup> Settlement Agreement Section G, "Suicide Risk Procedures," subparagraph 45 (p. 26), requires the presence of Suicide Intervention Kits and First Aid Kits in housing units and that custody staff having contact with prisoners be trained in the use of their contents.

<sup>6</sup> Custody Division Manual, Section 5-01/050.00, Handling of Suicidal Inmates

<sup>7</sup> Custody Division Manual, Section 3-14/090.00, First Aid Kits

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The Department's Manual of Policy and Procedures (MPP), CDM, Custody Division Training Bulletins, NCCF Unit Orders, Medical Services Bureau (MSB) Unit Order M10.01, Board of State and Community Corrections Policy and Procedure Manual for Participating Agencies, Minimum Standards for Adult Local Detention Facilities (Title 15), and the United States Department of Justice – Mental Health Joint Settlement Agreement were utilized in the analysis of this audit.

### **Audit Time Period**

Pertaining to Objective Nos. 1 and 2, the physical inspection of the SIKs and FAKs occurred on March 2, 2016.<sup>8</sup> Personnel from NCCF escorted the auditors throughout the facility to identify the locations of SIKs and FAKs.

Pertaining to Objective Nos. 3 and 4, only those personnel assigned to line positions,<sup>9</sup> on a randomly selected date during the March scheduling cycle, were sampled during the physical inspection.

### **Audit Population**

Pertaining to Objective Nos. 1 and 2, a lack of clarity was found in the CDM defining a list of locations that should maintain SIKs and FAKs. The auditors and NCCF management collaborated and identified a total of 20 housing locations, which were selected for these objectives.<sup>10</sup>

Pertaining to Objective Nos. 3 and 4, the population included sworn and Custody Assistant personnel assigned to line positions. With a total population of 351 line personnel, a statistically valid sample of 76 personnel was selected for these objectives.<sup>11</sup>

## **SUMMARY OF AUDIT FINDINGS**

North County Correctional Facility management and their staff were helpful in providing the necessary information to complete the audit objectives. Custody Training and Standards Bureau (CTSB), Custody Support Services (CSS), and Data Systems Bureau (DSB) also provided invaluable resources to complete this audit. Overall, NCCF performed well in all four objectives of this audit.

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<sup>8</sup> This date corresponds with the March 2016 scheduling cycle for NCCF.

<sup>9</sup> Personnel whose primary duties entail working directly with inmates.

<sup>10</sup> All 20 of the locations were selected for review.

<sup>11</sup> A statistically valid sample was identified using a statistical one-tail test with a 95% confidence level and a 4% error rate.

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**Table No. 1 – Summary of Audit Findings**

<b>Objective No.</b>	<b>Objectives</b>	<b>Met the Standards</b>
1	Presence, Contents, and Condition of Suicide Intervention Kits	100%
2	Presence, Contents, and Condition of First Aid Kits	100%
3	Staff Training in the Use of the Contents of Suicide Intervention Kits	97%
4	Staff Training in the Use of the Contents of First Aid Kits	100%

**Objective No. 1 – Presence, Contents, and Condition of Suicide Intervention Kits**

**Criteria**

Custody Division Manual, Section 5-01/050.00, Handling of Suicidal Inmates, Suicide Intervention, states:

*Each “secure” staff station has been assigned a Suicide Intervention Kit. All housing areas shall maintain a Suicide Intervention Kit. The Suicide Intervention Kit is contained in a white waterproof container with red stenciling on the sides labeled “SUICIDE INTERVENTION KIT.” The Suicide Intervention Kit shall only be removed from the staff station to assist in suicide intervention or during suicide intervention drills. The Suicide Intervention Kit contains the following items:*

- *Cut down tool*
- *CPR mask*
- *Two towels*
- *Latex gloves*

*Personnel responsible for the staff station shall inspect the Suicide Intervention Kit at the beginning of their shift to ensure the tamper-resistant tape is intact.*

United States Department of Justice/Mental Health Joint Settlement Agreement - CV 15-5903, Section G, “Suicide Risk Procedures,” subparagraph 45 (p. 26) states:

*Consistent with existing Sheriff’s Department policies, the County and the Sheriff will provide both a Suicide Intervention Kit that contains an*

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*emergency cut-down tool... in the control booth or officer's station of each housing unit.*

**Audit Procedures**

Twenty housing locations were inspected to determine if a SIK was present inside the secure staff station. The physical inspection determined if each kit was properly marked and sealed with a tamper resistant seal. For each kit, the seal was broken, and the kit was opened and inspected to determine if it contained all the necessary items as specified by the CDM. Additionally, the contents were inspected to determine if all items were in good working order. The kit containers and their contents were photographed.

**Findings**

All 20 (100%) of the inspected SIKs met the standards for this objective.

**Objective No. 2 – Presence, Contents, and Condition of First Aid Kits**

**Criteria**

Custody Division Manual, Section 3-14/090.00, First Aid Kits, states:

*First aid kits shall be available in all custody facilities pursuant to Title 15, Minimum Standards for Local Adult Detention Facilities, section 1220, "First Aid Kits," to provide emergency medical supplies for applying aid pending the arrival of trained medical staff. The Medical Services Bureau shall approve the contents, number, location, and procedure for periodic inspection of the kits.*

Medical Services Bureau Unit Order M10.01, First Aid Kit(s), states:

*First Aid Kit(s) will be located in each facility housing module and operations custody booth. First Aid Kit(s) will be secured within the custody booth/area...The following items are recommended for the Los Angeles County Sheriff's Department First Aid Kit container:*

*Povidone iodine swabs - 1 box w/10 individual swabs  
High risk exam gloves - 2 boxes w/2 pairs per box  
Instant ice compress - 2 boxes w/1 compress each  
4" bandage compress - 2 boxes w/1 each  
Burn cream w/lidocaine - 1 box w/6 foil packs*

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*Sting relief swabs - 1 box w/10 individual swabs*  
*Gauze pads - 1 box w/4 individual pads*  
*1"x3" adhesive bandages - 4 boxes w/16 bandages per box*  
*Alcohol prep pads - 2 boxes w/10 pads each*  
*Triangular bandage (Ace bandage) w/2 pins - 2 boxes w/1 bandage each*  
*Waterproof adhesive tape - 1 roll*  
*Res-cue mask (CPR mask) - 1 mask*  
*4" conforming stretch gauze - 1 package*  
*Triple antibiotic ointment - 1oz. tube*  
*Medical scissors - 1 pair*  
*Mylar rescue blanket 52"x84" - 1 blanket*  
*ABD pad (Tampon abdominal) - 1 package*  
*Tweezers - 1*

United States Department of Justice/Mental Health Joint Settlement Agreement - CV 15-5903, Section G, "Suicide Risk Procedures," subparagraph 45 (p. 26) states:

*Consistent with existing Sheriff's Department policies, the County and the Sheriff will provide both a Suicide Intervention Kit...and a first-aid kit in the control booth or officer's station of each housing unit.*

### **Audit Procedures**

Twenty housing locations equipped with a SIK were inspected to determine if a FAK was also present. In addition, auditors determined if the FAKs contained all of the recommended contents according to the MSB recommendations specified in MSB Unit Order M10.01.

### **Findings**

All 20 (100%) of the FAKs met the standards for this objective.

### **Objective No. 3 – Staff Training in the Use of the Contents of the Suicide Intervention Kits**

#### **Criteria**

United States Department of Justice/Mental Health Joint Settlement Agreement - CV 15-5903, Section G, "Suicide Risk Procedures," subparagraph 45 (p. 26) states:

*All custody staff who have contact with prisoners will... be trained to use their contents.*

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**NOTE:** Currently, there are two courses mandated by the Standards and Training for Corrections (STC), which are taught by the Department to train personnel on the use of the SIKs: “Suicide Prevention” (Course #6315-0803) and “Suicide Intervention and Prevention” (Course #6317-1003). Additionally, the use of the SIKs is included in the curriculum of the “Adult Corrections Officer Core Course” (Custody Assistant Academy Course #1275) and “Adult Corrections Officer Supplemental Core Course” (Jail Operations Course #2632).

### **Audit Procedures**

Personnel who have attended any of the aforementioned courses, at any time during their career, met the standards for this objective. Training records for the 76 sampled personnel were reviewed to determine if they received the required training related to the use of the SIKs’ contents.

A report was generated from the Scheduling Management System (SMS) which listed all NCCF personnel assigned to line positions. Personnel holding classification titles other than sworn or Custody Assistant, as well as personnel working outside security where there is no inmate contact, were excluded.

The Custody Training System (CTS), Training Record System (TRS), and Employee Information System (EIS)<sup>12</sup> were queried to determine if the sampled personnel attended training courses related to the use of the SIKs.

### **Findings**

Seventy-four of the 76 (97%) selected employees’ training records met the standards for this objective. One sergeant and one deputy did not receive the required Suicide Intervention training.

### **Objective No. 4 – Staff Training in the Use of the Contents of First Aid Kits**

#### **Criteria**

California Code of Regulations, Title 22, Division 9, Chapter 1.5., First Aid and CPR Standards and Training for Public Safety Personnel, §100022. Public Safety First Aid and CPR Retraining Requirements.

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<sup>12</sup> The Custody Training System, Training Record System, and Employee Information System are databases used to document training and are maintained by the Department.

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*(a) The retraining requirements of this Chapter shall be satisfied every two years by successful completion of:*

*(1) An approved retraining course which includes a review of the topics and demonstration of skills prescribed in this Chapter and which consists of no less than eight (8) hours of first aid and CPR including AED every two (2) years...*

Manual of Policy and Procedures, Section 3-02/080.01, Training Requirements for Sworn Personnel, section states in part:

*This policy identifies mandatory training requirements and programs for sworn personnel who have completed basic recruit academy training...*

**STATE MANDATED**

*Recurring Training*

*Cardiopulmonary Resuscitation (CPR), 4 hours – A CPR refresher course must be completed every three years. Personnel whose duties are “primarily clerical or administrative” for at least 90 percent of their total monthly work hours are exempt (13518 PC).*

*First Aid, 8 hours – A first aid refresher course must be completed every three years. Personnel whose duties are “primarily clerical or administrative” for at least 90 percent of their total monthly work hours are exempt (13518 PC).*

**NOTE:** Although Department policy states first aid and CPR refresher courses must be completed every three years, effective April 1, 2015, state mandate requires sworn personnel to attend a refresher course every two years.<sup>13</sup> However, California Code of Regulations Title 22, §100015 affords the Department a 24-month transitional period to comply with the two-year requirement. Therefore, the current standard used for this audit is the three-year refresher requirement.

Adult Corrections Officer Core Course – Board of State and Community Corrections

**SECTION C. CORE TRAINING COURSE OUTLINE AND UNIT  
SCHEDULE**

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<sup>13</sup> California Code of Regulations, Title 22, Division 9, Chapter 1.5, Article 3, § 100022, Public Safety First Aid and CPR Retraining Requirements.

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*Certified CPR and First Aid (FA) courses... must be completed.*  
United States Department of Justice/Mental Health Joint Settlement Agreement -  
CV 15-5903, Section G, "Suicide Risk Procedures," subparagraph 45 (p. 26) states:

*All custody staff who have contact with prisoners will know the location of the Suicide Intervention Kit and First-Aid kit and be trained to use their contents.*

### **Audit Procedures**

The training records for the 76 sampled personnel for Objective No. 3 were analyzed to determine if the employees received the appropriate training associated with the use of the FAKs' contents.

Training records for the selected sworn personnel were queried through CTS, TRS, and EIS to determine if they had attended the required first aid and CPR courses. Training records for sworn personnel were queried to determine if they attended the refresher courses within the last three years. Sworn personnel who attended both courses within three years met the standards for this objective.

Training records for Custody Assistants were queried through TRS to determine if they completed the Department's Custody Assistant Academy within the past three years. Personnel who attended the academy more than three years ago, a query of training records was conducted to determine if they completed first aid and CPR refresher courses.

### **Findings**

All 76 (100%) of the selected employees met the standards for this objective.

### **OTHER RELATED MATTERS**

Other Related Matters are pertinent issues discovered during the audit, but were not objectives that are measurable against Department policies or procedures.

#### *Maintaining a Suicide Intervention Kit*

The CDM states each secure staff station has been assigned a SIK and that all housing areas shall maintain a SIK. Of the 43 areas originally identified by NCCF management as having SIKs and FAKs, 23 were excluded from Objective No. 1 as the areas were not housing areas (ref. Objective No. 1).

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In the 23 areas which were excluded, the contents of the SIKs and FAKs were checked by the audit team. Nineteen of the 23 contained all of the necessary items per policy. During the inspection of the kits, it was discovered two locations (Front Desk and Hall Control), had secure staff stations. However, since these locations were not housing areas, and personnel are not in contact with inmates, a SIK was not required. Outside of the facility, in the inmate yard area, there was a secure staff station contained within a chain link fence. There were no SIKs or FAKs located within the staff station because it was not considered to be a housing area.

Two other locations (Warehouse and Paint Shop) were discovered to be part of the facility's Vocational Shops; however, they were not secure staff stations and they were not housing areas. Inmates are often escorted into these areas by NCCF personnel; however, current policies do not require SIKs in these areas. During the inspection, NCCF agreed to place SIKs in the Paint Shop, as well as the various non-housing areas, due to frequent inmate presence.

There were eight other locations which were not considered to be secure staff stations (500 Sergeants Office, Sign Shop, Sewing Shops 1-3, and Print Shops 1-3). Although these areas included SIKs, they were not considered to be secure locations. Also, one of the SIKs (500 Sergeants Office) did not have a tamper resistant seal placed on the outside of the container.

Inmate workers who perform their assigned functions in the above listed non-housing locations throughout the facility have access to materials that can be used to facilitate a suicide attempt. In the event an inmate was to attempt suicide in a non-housing area, responding personnel would be required to go to the nearest housing area in order to retrieve a SIK. The potential for a delayed response, due to the absence of SIKs in non-housing areas runs contrary to the exigency associated with the intervention concept. Therefore, it is critical to maintain a SIK in all areas that house or have inmates present for long periods of time, due to vocational activities, to ensure their safety.

#### *Items Contained in the Suicide Intervention Kits*

The CDM specifically indicates the following items should be contained in the SIK: Cut-down tool, CPR mask, two towels, and latex gloves.

Custody Training and Standards Bureau provided auditors with a training video entitled, "The Suicide Intervention Kit." This video illustrated the Craftsman Handi-Cut tool, which, according to the video, "...has been tested and proven to be effective against the most common materials used by inmates to hang themselves." The Court Services Division Instructional Bulletin entitled "Suicide Intervention Kit," August 2002, and Field

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Operations Directive 98-11, "Station Jail Suicide Intervention Kits," describe the same cut-down tool specifications and characteristics as described in the video. However, auditors found most SIKs throughout NCCF contained bandage-type scissors. It is important the tools contained in the SIKs be consistent with the tools used and described in the mandated training video and associated documents.

Additionally, the CDM requires latex gloves to be contained in the SIK; however, the Field Operations Directive 98-11 indicates latex gloves should not be included in the kits "...due to the fact that latex breaks down rather quickly and will thus provide a false sense of protection for the user." While the specifications of these items were not specifically evaluated as a part of the audit objectives, the inconsistencies between policy and training reference material should be clarified.

The CDM also requires the SIKs be secured with a tamper-resistant seal, and requires personnel at each staff station to inspect SIKs to determine if the tamper-resistant tape is intact. The auditors believe that requiring a pre-shift inspection of the items contained within the kit provides greater accountability toward the integrity of the contents of SIKs.

Lastly, in a report entitled, "Suicide Intervention Kits: Project #213712," dated August 2014, Custody Support Services recommended SIKs include an "Ambu-Bag".<sup>14</sup> Although Department policy does not require this item, auditors found they were included in 18 of the 20 SIKs inspected.

#### *Training Requirements and Records*

Although there is no current mandate which requires personnel to attend suicide intervention training on a continuous basis, NCCF training staff indicated they cover the course material, including "cut down drills," in their periodic First Aid/CPR refresher training courses. To ensure personnel maintain their proficiency in the use of the SIK, a suicide prevention refresher course should be required to be completed periodically for both sworn and non-sworn custody personnel.

Additionally, during the fieldwork process, auditors were tasked to reconcile several different training databases in order to determine if personnel had received any training related to SIKs and FAKs. Maintaining several databases with conflicting information and inaccurate training records could expose the Department to the risks of being non-compliant with statutory training requirements.

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<sup>14</sup> Ambu-Bag is a proprietary name for a bag valve mask, sometimes referred to as a manual resuscitator.

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### **CONCLUSIONS AND RECOMMENDATIONS**

During the course of this audit, AAB personnel analyzed and assessed the policies and procedures related to SIKs and FAKs, and identified several areas of improvement. The AAB considers the results of this audit to be a helpful management tool for all Department personnel; therefore, makes the following conclusions and recommendations:

1. It is recommended the Custody Services Division, Administration Command consider requiring personnel to personally inspect each item inside the SIKs at the beginning of each shift, and document the inspection in the Uniform Daily Activity Log. It is recommended the requirement to seal the SIKs with a tamper resistant seal be rescinded. And, it is further recommended a checklist of the required items be included inside the kit for personnel conducting the inspection. (Objective No. 1)
2. Inmates working in non-housing locations throughout the facility may gain access to materials that can be used to facilitate a suicide attempt. It is recommended policy be revised to require all secure staff stations, including non-housing areas, to maintain SIKs. (Other Related Matters)
3. To guarantee the contents of the SIKs are in good working order and to reflect the requisite minimum standards articulated in training reference materials, it is recommended the CDM and the training video be revised to match the appropriate characteristics for the “cut-down” tool. (Other Related Matters)
4. An Ambu-Bag was present in most SIKs inspected at NCCF. To ensure compatibility throughout custody facilities with regard to equipment and training, it is recommended the Department standardize the contents of SIKs as related to Ambu-Bags. (Other Related Matters)
5. There is no Department policy which addresses the training requirements for non-sworn custody personnel, including Custody Assistants, Security Officers, and Security Assistants. It is recommended a new Department policy be created to address training requirements for non-sworn custody personnel in the same manner as expressed in MPP Section 3-02/080.01, Training Requirements for Sworn Personnel. (Other Related Matters)
6. There are several databases the Department utilizes to obtain and monitor training record documentation. It is recommended one single database be utilized to input, verify, and retrieve training records for Department personnel. (Other Related Matters)

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**MANAGEMENT RESPONSE**

North County Correctional Facility management submitted a formal response on September 9, 2016, concurring with the audit findings.

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This audit was submitted on this 13<sup>th</sup> day of September 2016, by the Audit and Accountability Bureau.

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