1 2 3 4 5 6 7	PETER J. ELIASBERG (SB# 189110) peliasberg@aclusocal.org MELISSA CAMACHO (SB# 264024) mcamacho@acluscal.org ACLU FOUNDATION OF SOUTHERN CALIFORNIA 1313 W. 8th Street Los Angeles, CA 90017 Phone: (213) 977-9500 Fax: (213) 977-5299	CORENE KENDRICK (SB# 226642) ckendrick@aclu.org MARISOL DOMINGUEZ-RUIZ (SB# 345416) mdominguez-ruiz@aclu.org ACLU NATIONAL PRISON PROJECT 39 Drumm St. San Francisco, CA 94111 Phone: (202) 393-4930 Fax: (202) 393-4931
8 9 10 11 12 13	NICOLAS MORGAN (SB# 166441) nicolasmorgan@paulhastings.com STEPHEN TURANCHIK (SB# 248548) sturanchik@paulhastings.com PAUL HASTINGS LLP 515 South Flower Street, 25th Floor Los Angeles, CA 90071-2228 Phone: (213) 683-6000 Fax: (213) 627-0705	
14	Attorneys for Plaintiffs	
15 16		DISTRICT COURT IFORNIA, WESTERN DIVISION
17	ALEX ROSAS and JONATHAN	Case No. CV 12-00428 DDP (MRW)
18	GOODWIN on behalf of themselves and of those similarly situated,	DECLARATION OF MELISSA
19	Plaintiffs,	САМАСНО
20	VS.	
21 22	Robert Luna, Sheriff of Los Angeles	
23	County, in his official capacity,	
24	Defendant.	
25		
26		
27		
27 28		

Case No. CV 12-00428 DDP (MRW)

- 1. I make this declaration of my own personal knowledge and if called to testify I could and would do so competently as follows.
- 2. I am a Senior Staff Attorney at the ACLU Foundation of Southern California (ACLU SoCal) and one of the attorneys for the Plaintiff class in the above-captioned action. I am admitted to practice law in the State of California and before this court.
- 3. Defendants produce self-assessments and use of force packages to plaintiffs' counsel periodically by posting them in a shared secured cloud-based folder. As an attorney in this matter, I have access to the shared folder and can download self-assessments and use of force packages as necessary for review in this matter.
- 4. On Tuesday, May 30, 2023, I received notification by email that LASD had posted self-assessments for *Rosas* provision 6.11. I later went into the shared folder and downloaded the self-assessment posted on May 30, 2023 for the 3rd quarter of 2022.
- 5. Attached here as Exhibit A is a true and correct copy of Defendant's self-assessment for *Rosas* provision 6.11, for the third quarter of 2022.
- 6. On June 1, 2023, Dylan Ford emailed plaintiffs' counsel the new WRAP and limitations on force policy.
- 7. Attached here as Exhibit B is a true and correct copy of Custody Division Manual (CDM) 7-03/050.00 "WRAP restraint" version 33.
- 8. On March 7, 2023 I emailed the Monitors and Defense counsel with our proposed changes to version 31 of the WRAP restraint policy attached to the email. Attached here as Exhibit C is a true and correct copy of the email with attachment showing the Monitors' proposed changes to version 31 of the WRAP policy in red and plaintiffs' proposed changes in blue.

9. Attached here as Exhibit D is version 33 of the WRAP policy with changes proposed in red. 10. Attached here as Exhibit E is a true and correct copy of version 31 of CDM 7-01/030.00, the new "Limitations on Force" policy. It was provided to plaintiffs' counsel by Dylan Ford on June 1, 2023. I declare under penalty of perjury that the foregoing is true and correct. Executed on June 11, 2023, in Culver City, CA. Julin & Camela Melissa L. Camacho

EXHIBIT A

Defendant's self-assessment for *Rosas* provision 6.11, for the third quarter of 2022

FILED SEPARATELY UNDER SEAL

EXHIBIT B

Custody Division Manual (CDM) 7-03/050.00 "WRAP restraint" version 33

CSS# 19-1406 VER. 33

EXECUTIVE SUMMARY

This revision of the Los Angeles County Sheriff's Department's Custody Division Manual (CDM) adds section 7-03/050.00, "WRAP Restraint" to the CDM.

This proposal was requested by Lieutenant Daniel W. Martin, Custody Training and Standards Bureau, to update procedures for the use of the WRAP restraint device in custody facilities.

Staff Assignment: Captain Erick S. Kim, Custody Support Services Bureau, at (213) 893-5977 or Sergeant Jacquelynn Marentes, Custody Support Services Bureau, at (213) 893-5966.

This proposal is presented in legislative format. Proposed additions, amendments, and/or revisions are highlighted, and deletions are indicated by strikeout.

7-03/050.00 WRAP RESTRAINT

The WRAP restraint device manufactured by Safe Restraints, Inc., is a Department-approved security restraint device authorized for use within Custody Services Division. The WRAP restraint device consists of a locking shoulder harness, leg restraint, and a three (3) inch wide ankle strap. The WRAP restraint is not a medically ordered restraint device, but rather a security restraint device as noted in Title 15, section 1058, "Use of Restraint Devices." The WRAP restraint allows for the ability to both walk an inmate, as well as provide extremity exercise while maintaining the safety, security, and control of the inmate."

Only trained personnel shall be authorized to perform, assist, or directly supervise the placement or removal of the WRAP restraint. The respective facility's training unit shall maintain a record of custody personnel trained in the use of the WRAP restraint. The WRAP restraint shall never be used as punishment, harassment, or for the purpose of knowingly causing harm to an inmate.

In the instance it is determined the WRAP restraint will be used in a planned use of force as delineated in Custody Division Manual (CDM) section 7-01/040.00, "Planned Use of Force," healthcare staff shall be requested to determine if placement in the WRAP restraint is contraindicated.

The WRAP restraint shall only be used when other less restrictive alternatives have failed, or it is apparent less restrictive alternatives will be ineffective at controlling the inmate.

CSS# 19-1406 VER. 33

USE OF THE WRAP RESTRAINT

The WRAP restraint may only be used on inmates who pose an immediate threat to themselves or others when the circumstances reasonably perceived by personnel at the time indicate the WRAP restraint application is necessary to control the inmate. An immediate threat is present when:

- an inmate is violent or is physically resisting; or
- an inmate has demonstrated, by words or actions, an intent to be violent or to physically resist, and reasonably appears presently capable of causing physical harm to themselves, custody staff, or others if the WRAP restraint is not applied.

Absent exigent circumstances, placement in the WRAP restraint shall be video recorded, use of the WRAP restraint shall be authorized by the on-duty watch commander, and a supervisor at the permanent rank of sergeant or above shall be present during the inmate's placement in the WRAP restraint.

When applying the WRAP restraint after a use and force, if circumstances permit, the inmate shall be placed in the recovery position while waiting for the WRAP restraint to arrive to the scene.

When an inmate is placed in the WRAP restraint, the inmate shall remain under direct visual observation at all times. The cinching straps of the shoulder harness shall never be tightened to the point it restricts the inmate's ability to breathe. All components of the WRAP restraint shall be physically checked to ensure they are properly secured and present no obvious signs of circulatory restrictions to the inmate's extremities. Additionally, personnel shall not use unreasonable pressure on the inmate's back and shoulders to fasten the cinching straps. Every effort will be made to minimize the amount of time that the inmate is restrained.

The WRAP restraint shall not be used on inmates who are known to be pregnant.

Personnel shall immediately request medical aid if an inmate in a WRAP restraint complains of, or exhibits medical distress (e.g. respiratory distress, including gasping, snorting or gurgling sounds, complaint of chest pain, change in facial color, restricted blood circulation, complaints of extreme heat, sudden quiet or inactivity, loss of consciousness, vomiting, etc.) and remove the inmate from the WRAP restraint if a medical emergency appears to exist. If personnel identify that the inmate placed in the WRAP restraint has a need for mental health care, mental health staff shall be requested and personnel shall adhere to procedures delineated in Custody Division Manual (CDM) section 4-05/000.00, "Behavioral Observation and Mental Health Referral Reports."

EXHIBIT B PAGE 58

CSS# 19-1406 VER. 33

MONITORING INMATES SECURED IN THE WRAP RESTRAINT

A medical assessment shall be conducted within one (1) hour from the time of placement in the WRAP restraint to determine if placement is contraindicated. Following a use of force, the inmate shall be taken for a documented medical assessment as indicated in CDM section 7-07/000.00, "Use of Force Review Procedures." The medical opinion as to whether the inmate shall remain in the WRAP restraint shall take precedence over custody personnel's evaluation. Any refusals for medical treatment shall be made by the inmate directly to medical personnel. Inmates cannot refuse a medical assessment of the WRAP restraint.

Upon the inmate's placement in the WRAP restraint, Department personnel shall initiate the WRAP Restraint Security Check Log (SH-J-480). If it is determined an inmate shall remain in the WRAP restraint longer than fifteen (15) minutes, safety checks shall be documented twice (2) every thirty (30) minutes, approximately fifteen (15) minutes apart, until the WRAP restraint is removed. Safety checks shall verify that the WRAP restraint is not causing injury or an obvious medical problem (e.g. respiratory distress, chest pain, restricted blood circulation, loss of consciousness, vomiting, etc.).

A sergeant shall also conduct a safety check which evaluates the application of the WRAP restraint and shall assess its continued use at a minimum of once (1) every thirty (30) minutes. During this check, the sergeant shall reassess whether or not each inmate needs to remain in the WRAP restraint.

The sergeant shall ensure each inmate has been offered or provided access to toilet facilities, drinking water, prescribed medication, and be allowed to exercise their extremities (when safe), which shall be documented in the WRAP Restraint Security Check Log (SH-J-480). If the inmate misses a regularly scheduled meal due to being placed in the WRAP restraint, a meal shall be provided to the inmate upon removal of the WRAP restraint.

The sergeant shall attempt to have the inmate removed from the WRAP restraint before one (1) hour. If it is determined the inmate cannot be safely removed from the WRAP restraint before one (1) hour, the reason for continued retention shall be documented in the WRAP Restraint Security Check Log (SH-J-480). The sergeant shall have the inmate removed from the WRAP restraint within two (2) hours.

A supervisor at the rank of sergeant or above shall be present when the WRAP restraint is removed, absent exigent circumstances. The removal of the WRAP restraint should occur when the inmate can be safely confined within a housing location or an alternative location, or if the inmate is no longer deemed a threat. If necessary, the sergeant shall adhere to CDM section 7-01/040.00, "Planned Use of Force," upon determining the WRAP restraint can be removed, absent exigent circumstances

CSS# 19-1406 VER. 33

WRAP CART

Use of the WRAP CART for Short-Term Movement

If personnel utilize the WRAP CART only for security reasons during short-term movement/escort when the inmate is affixed to the WRAP CART, the provisions in Title 15, section 1058 do not apply. Use of the WRAP CART for short-term movement shall not exceed one (1) hour. The following procedures will apply and conform to the policies of the CDM.

- The inmate shall remain in direct and unobstructed visual observation by the supervising sergeant and designated custody personnel.
- The inmate's safety and physical condition shall be monitored continuously by designated custody personnel throughout the movement/escort. Personnel shall remove the inmate from the WRAP CART if a medical emergency appears to exist.
- If during the placement of the inmate in the WRAP CART, the inmate struggles
 against the restraints, has any visible signs of injury, or complains of pain, they
 shall be medically evaluated immediately after being secured.
- The use of the WRAP CART for security reasons during short-term movement shall be documented in the WRAP Restraint Security Check Log (SH-J-480) and the Custody Automated Reporting and Tracking System (CARTS) along with the reason for placement, time of placement, and time of removal from the WRAP CART.

Procedures in this policy will not apply when the WRAP CART is used solely as a transportation device and the inmate is not affixed to any portion of the WRAP CART. Notification of the use of the WRAP CART shall be made to the sergeant upon placement. Inmates placed in the WRAP CART may be restrained by methods consistent with Department policy.

If the inmate remains affixed to the WRAP CART for more than one (1) hour, all procedures for the WRAP restraint shall be followed.

Pregnant inmates shall not be handcuffed to the rear during transportation in the WRAP CART.

REPORTING USE OF THE WRAP RESTRAINT

Absent any other factors, the un-resisted placement of an inmate in the WRAP restraint device does not constitute reportable force. However, if in the course of applying the WRAP restraint, the inmate resists personnel, it constitutes a use of reportable force and must be reported pursuant to CDM section 7-06/000.00, "Use of Force Reporting Procedures."

EXHIBIT B PAGE 60

CSS# 19-1406 VER. 33

The WRAP Restraint Security Check Log (SH-J-480) shall be entered into CARTS by the supervising sergeant prior to the end of their shift.

EXHIBIT B PAGE 61

EXHIBIT C

Monitors' Proposed Changes to WRAP Policy

Case 2:12-cv-00428-DDP-MRW Document 259-3 Filed 06/12/23 Page 12 of 26 Page ID

From: Melissa Camacho

To: Robert Dugdale; dford kkenney bdhouston@c Nicholas Mitchell Cc:

Corene Kendrick; Peter Eliasberg; Jacob Reisberg; Marisol Dominguez-Ruiz; Ganapathi, Anuva; Stephen

Turanchik

Rosas: WRAP restraint - Monitors and Plaintiffs proposed changes Subject:

Tuesday, March 7, 2023 9:15:00 AM Date:

Attachments: WRAP RESTRAINT Monitors and Plaintiffs Proposed Changes 03.07.2023.docx

Hello Bob D., Dylan, Kathy, Bob H., and Nick,

We have reviewed the monitors' proposed changes to the WRAP policy. They are a welcome move toward properly categorizing WRAP use as a Use of Force and provide necessary safeguards to protect the health and lives of class members.

While we continue to assert that medical expert evaluation of the WRAP is necessary to determine whether it can be safely used in a custody environment, we propose the following changes in addition to those recommended by the monitors. We also invite the monitors to respond to this email because most of the proposed changes are meant to clarify and amplify the monitors' position.

- 1. Because placement in the WRAP restraint constitutes a use of reportable force, we recommend adding the following to paragraph 3: "The WRAP restraint constitutes a reportable use of force and as such may only be used as a last resort on inmates who pose an immediate threat to themselves or others . . ." For the same reason, we recommend adding a third bullet: "and no other means of restriction, including handcuffs and/or leg restraints, will be effective."
- 2. We recommend first creating and then including a list of medical or mental health conditions that contraindicate WRAP use. This reinforces our request for a medical expert to evaluate WRAP. The list would likely include conditions like include asthma or other respiratory illness, musculo-skeletal injuries (e.g., cracked rib), obesity, agoraphobia, and certain heart conditions.
- 3. For WRAP application to be within policy, personnel must attempt force prevention. We recommend the following addition to the monitors' proposed changes to paragraph 4. "The use of the WRAP restraints shall only be used when an inmate poses an immediate threat to themselves or others, and when other less restrictive alternatives have failed, or it is apparent they will be ineffective at controlling the inmate. Before the decision to approve WRAP application is made, the inmate must be placed into the recovery position as a forceprevention measure."
- 4. We see a contradiction in a change proposed in paragraph 5. Because WRAP application constitutes a use of force, it is impossible to be placed in a recovery position during WRAP application. But if WRAP application takes longer than a few minutes, WRAP application should pause, and the person placed in a recovery position.
- 5. We are not sure about the recommendation to place an individual in a recovery position after WRAP application but before placement in the cart. It seems like it would cause greater positional stress to be fully enclosed in the WRAP harness, with the chest clip to the legs, and laid on the side, than to be sitting in the CART. We welcome further conversation with the monitors on this point.

EXHIBIT C PAGE 63

Case 2:12-cv-00428-DDP-MRW Document 259-3 Filed 06/12/23 Page 13 of 26 Page ID #:5654

- 6. Paragraph 7 as written allows custody staff to make a medical determination. Plaintiffs suggest instead "Personnel shall immediately request medical aid . . ., place the inmate in a recovery position until medical aid arrives, and remove the inmate from the WRAP restraint, if medical staff so direct. If medical personnel identify that the inmate placed in the WRAP restraint has a need for mental health care" We also recommend adding "complaint of inability to breathe."
- 7. In paragraph 8, because medical staff have to determine whether WRAP use is contraindicated before initial application, this paragraph should instead detail how medical staff determine whether continued restraint is contraindicated. "A medical assessment shall be conducted . . . to determine if *continued restraint* is contraindicated."
- 8. We recommend that the presumptive time of release absent exceptional circumstances should be one hour, and the maximum time in the WRAP, two hours. Two hours is a very long time. Plaintiffs would need some assurance from a medical expert that WRAP use over two hours would not cause permanent psychological or physical damage to class members.
- 9. We do not see anything in the policy that allows personnel to cut off people's clothing as part of the WRAP application. Does that mean that cutting off clothing during WRAP application is no longer permitted?

We have added our changes to those proposed by the monitors. In the attached document, the monitors' proposed changes are in red, and plaintiffs' counsel's proposed changes are in blue. Bob, Kathy, and Nick, we would appreciate if you look over our recommendations to see if there any that you would like to adopt in addition to your own.

Best regards, Melissa

Melissa Camacho

she/her/ella Senior Staff Attorney ACLU of Southern California 1313 W 8th Street, Suite 200 Los Angeles, CA 90017

MCamacho@aclusocal.org

EXHIBIT C PAGE 64

WRAP RESTRAINT

PURPOSE

The purpose of this Custody Operations Directive is to update procedures for the use of the WRAP Restraint and WRAP CART in Custody Division facilities in accordance with Title 15 Regulations.

ORDER

The WRAP restraint device manufactured by Safe Restraints, Inc., is a Department approved security restraint device authorized for use within Custody Services Division. The WRAP restraint device consists of a locking shoulder harness, leg restraint, and a three (3) inch wide ankle strap. The WRAP allows for the ability to both walk an inmate as well as provide extremity exercises while maintaining the safety, security, and control of the inmate. The WRAP restraint is not a medically ordered restraint device, but rather a security restraint device as noted in Title 15, section 1058, "Use of Restraint Devices."

Only trained personnel shall be authorized to perform, assist, or directly supervise the placement or removal of the WRAP restraint. The respective facility's training unit shall maintain a record of custody personnel trained in the use of the WRAP restraint. The WRAP restraint shall never be used as punishment, harassment, or for the purpose of knowingly causing harm to an inmate.

The WRAP restraint constitutes a reportable use of force and as such may only be used as a last resort on inmates who pose an immediate threat to themselves or others when the circumstances reasonably perceived by personnel at the time indicate the WRAP restraint application is reasonably necessary to control the inmate. An immediate threat is present when:

- an inmate is violent or is physically resisting; or
- an inmate has demonstrated, by words or actions, an intent to be violent or to
 physically resist, and reasonably appears presently capable of causing physical harm to
 themselves, custody staff, or others if the WRAP restraint is not applied; and
- no other means of restriction, including handcuffs and/or leg restraints, will be effective.

Absent exigent circumstances, use of the WRAP restraint shall be authorized by the on-duty watch commander, and a supervisor at the permanent rank of sergeant or above shall be present during the inmate's placement in the WRAP restraint. Prior to authorizing the use of the WRAP Restraint, the on-duty watch commander will check with medical and mental health staff to determine whether the inmate has any medical or mental health conditions that would contraindicate the use of the WRAP. The use of the WRAP restraint shall only be used when an inmate poses an immediate threat to themselves or others, and other less restrictive alternatives have failed, or it is apparent they will be ineffective at controlling the inmate. Before the decision to approve WRAP application is made, the inmate must be placed into the recovery position as a force-prevention measure. The on-site supervisor will provide a written report with an explanation for using the WRAP and Cart. Every application of the WRAP shall be captured on videotape. Finally, spit masks should not ordinarily be used in conjunction with the WRAP restraint. Spit masks can only be authorized by the on-duty watch commander and staff must specifically articulate the inmate's actions that warrant use of the spit mask. If a spit mask is utilized, medical staff must conduct a medical assessment within fifteen minutes from the time of placement of the spit mask and every fifteen minutes thereafter.

When an inmate is placed in the WRAP restraint, the inmate shall remain under direct visual observation at all times. The inmate must be placed in the recovery position before or during placement in the WRAP. If WRAP application takes longer than three minutes, application must be stopped for the inmate to be placed in a recovery position. If any amount of weight is placed on an inmate back to apply the WRAP, the inmate must again be placed in the recovery position before placement in the Cart. The cinching straps of the shoulder harness shall never be tightened to the point it restricts the inmate's ability to breathe. Additionally, personnel shall not use unreasonable body weight or pressure on the inmate's back and shoulders to fasten the cinching straps. Every effort will be made to minimize the amount of time that the inmate is restrained.

The WRAP restraint shall not be used on inmates who are known to be pregnant.

Personnel shall immediately request medical aid if an inmate in a WRAP restraint complains of, or exhibits medical distress (e.g., respiratory distress, including gasping, snorting, or gurgling sounds, complaint of chest pain, change in facial color, restricted blood circulation, complaints of extreme heat or inability to breathe, sudden quiet or inactivity, loss of consciousness, vomiting, etc.), place the inmate in a recovery position until medical aid arrives, and remove the inmate from the WRAP restraint if a medical emergency appears to exist staff so direct. If medical personnel identify that the inmate placed in the WRAP restraint has a need for mental health care, mental health staff shall be requested and personnel shall adhere to procedures delineated in Custody Division Manual (CDM) section 4-05/000.00, "Behavioral Observation and Mental Health Referral Reports."

MONITORING INMATES SECURED IN THE WRAP RESTRAINT

A medical assessment shall be conducted within one (1) hour from the time of placement in the WRAP restraint to determine if placement continued restraint is contraindicated. Any refusals for medical treatment shall be made by the inmate directly to medical personnel. Inmates cannot refuse the medical assessment of the WRAP restraint. All components shall be physically checked to ensure they are properly secured and present no obvious signs of circulatory restrictions to the inmate's extremities. Following a use of force, the inmate shall be taken for a documented medical assessment as indicated in CDM section 7-07/000.00, "Use of Force Review Procedures." The medical opinion as to whether the inmate shall remain in the WRAP restraint shall take precedence over custody personnel's evaluation.

Upon the inmate's placement in the WRAP restraint, Department personnel shall initiate the WRAP Restraint Security Check Log (SH-J-480). If it is determined an inmate shall remain in the WRAP restraint longer than fifteen (15) minutes, safety checks shall be documented twice (2) every thirty (30) minutes, approximately fifteen (15) minutes apart, until the WRAP restraint is removed. Safety checks shall verify that the WRAP restraint is not causing injury or an obvious medical problem (e.g., respiratory distress, chest pain, restricted blood circulation, loss of consciousness, vomiting, etc.).

A sergeant shall also conduct a safety check which evaluates the application of the WRAP restraint and shall assess its continued use at a minimum of once (1) every thirty (30) minutes. During this check, the sergeant shall reassess whether or not each inmate needs to remain in the WRAP restraint.

The sergeant shall attempt to have the inmate removed from the WRAP Restraint before two (2) one (1) hours absent exceptional circumstances. If it is determined the inmate cannot be safely removed from the WRAP restraints before two (2) one (1) hours, the watch commander shall be notified and respond to the location of the inmate(s) to evaluate the application of the WRAP restraint assess its continued use. If the watch commander determines that exceptional circumstances exist that require continued retention in the WRAP restraint, the inmate will remain in the WRAP restraint, the reasons for continued retention shall be documented with specificity in the WRAP Restraint Security Check Log (SH-J-480). The watch commander shall ensure each inmate has been offered or provided access to toilet facilities, drinking water, prescribed medications, and be allowed to exercise their extremities (when safe), which shall be documented in the WRAP Security Check Log (SH-J-480). If an inmate is released from a portion of the WRAP restraint for any reason, e.g., to use the toilet, consumption of food or beverage, etc. without continuing disruptive aggressive behavior, the watch commander should release the inmate from the WRAP restraint. If an inmate is returned to the WRAP restraint after a non-disruptive break, the watch commander must document the reasons for this action. If an inmate misses a regularly scheduled meal due to being placed in the WRAP restraint, a meal shall be provided to the inmate upon removal of the WRAP restraint.

The sergeant shall attempt to have the inmate removed from the WRAP restraint before two (2) hours. If it is determined the inmate cannot be safely removed from the WRAP restraint before two (2) hours, the watch commander shall be notified and respond to the location of the inmate(s) to evaluate the application of the WRAP restraint and assess its continued use. If the watch commander determines the inmate will remain in the WRAP restraint, the reason for continued retention shall be documented in the WRAP Restraint Security Check Log (SH-J-480). The watch commander shall ensure each inmate has been offered or provided access to toilet facilities, drinking water, and be allowed to exercise their extremities (when safe), which shall be documented in the WRAP Restraint Security Check Log (SH-J-480). If the inmate misses a regularly scheduled meal due to being placed in the WRAP restraint, a meal shall be provided to the inmate upon removal of the WRAP restraint.

If an inmate remains in the WRAP restraint in excess of three (3) one and a half (1.5) hours, notification and consultation shall be made with the facility's unit commander. The reason for continued retention shall be documented in the WRAP Restraint Security Check Log (SH-J-480).

Inmates shall not remain in the WRAP restraint or WRAP CART beyond four (4) two (2) hours.

A supervisor at the rank of sergeant or above shall be present when the WRAP restraint is removed, absent exigent circumstances. The removal of the WRAP restraint should occur when the inmate can be safely confined within a housing location or an alternative location, or if the inmate is no longer deemed a threat. If necessary, the sergeant shall adhere to CDM section 7-01/040.00, "Planned Use of Force," upon determining the WRAP restraint can be removed, absent exigent circumstances.

WRAP CART

Use of the WRAP CART for Short-Term Movement

If personnel utilize the WRAP CART only for security reasons during short-term movement/escort when the inmate is affixed to the WRAP CART, the provisions in Title

15, section 1058 do not apply. Use of the WRAP CART for short-term movement shall not exceed one (1) hour. The following procedures will apply and conform to the policies of the CDM.

- The inmate shall remain in direct and unobstructed visual observation by the supervising sergeant and designated custody personnel.
- The inmate's safety and physical condition shall be monitored continuously by designated custody personnel throughout the movement/escort. Personnel shall remove the inmate from the WRAP CART if a medical emergency appears to exist.
- If during the placement of the inmate in the WRAP CART, the inmate struggles against the restraints, has any visible signs of injury, or complains of pain, they shall be medically evaluated immediately after being secured.
- The use of the WRAP CART for security reasons during short-term movement shall be documented in the WRAP Restraint Security Check Log (SH-J-480) along with the reason for placement, time of placement, and time of removal from the WRAP CART.

Procedures in this policy will not apply when the WRAP CART is used solely as a transportation device and the inmate is not affixed to any portion of the WRAP CART. Notification of the use of the WRAP CART shall be made to the sergeant upon placement. Inmates placed in the WRAP CART may be restrained by methods consistent with Department policy.

If the inmate remains affixed to the WRAP CART for more than one (1) hour, all procedures for the WRAP restraint shall continue to be followed.

Pregnant inmates shall not be handcuffed to the rear during transportation in the WRAP CART.

REPORTING USE OF THE WRAP RESTRAINT

Absent any other factors, the unresisted The placement of an inmate in the WRAP restraint device does not constitute reportable force. However, if in the course of applying the WRAP restraint, the inmate resists personnel, it constitutes a use of reportable force and must be reported pursuant to CDM section 7-06/000.00, "Use of Force Reporting Procedures." When only the inmate's legs/lower body is placed in the bottom portion of the WRAP, and walked from the location of the application, this is not reportable force as this level of restraint is similar to handcuffing.

As with all uses of force, the WRAP Restraint Security Check Log (SH-J-480) shall be entered into the Custody Automated Reporting and Tracking System (CARTS) by the supervising sergeant prior to the end of their shift.

Questions regarding this directive should be directed to Custody Support Services Bureau, Captain Erick S. Kim, at (213) 893-5102.

Revised 09/22/22. COD 04/25/22

EXHIBIT D

WRAP Policy, Version 33 with Proposed Changes

7-03/050.00 WRAP RESTRAINT — Proposed changes in red 6.12.2023

The WRAP restraint device manufactured by Safe Restraints, Inc., is a Department- approved security restraint device authorized for use within Custody Services Division. The WRAP restraint device consists of a locking shoulder harness, leg restraint, and a three (3) inch wide ankle strap. The WRAP restraint is not a medically ordered restraint device, but rather a security restraint device as noted in Title 15, section 1058, "Use of Restraint Devices." The WRAP restraint allows for the ability to both walk an inmate, as well as provide extremity exercise while maintaining the safety, security, and control of the inmate."

Only trained personnel shall be authorized to perform, assist, or directly supervise the placement or removal of the WRAP restraint. The respective facility's training unit shall maintain a record of custody personnel trained in the use of the WRAP restraint. The WRAP restraint shall never be used as punishment, harassment, or for the purpose of knowingly causing harm to an inmate.

In the instance it is determined the WRAP restraint will be used in a planned use of force as delineated in Custody Division Manual (CDM) section 7-01/040.00, "Planned Use of Force," medical and mental healthcare staff-shall be requested to determine if placement in the WRAP restraint is contraindicated.

The WRAP restraint is an exceptional restraint device, to be used in exceptional circumstances. The WRAP restraint constitutes a reportable use of force and as such shall only be used as a last resort when other less restrictive alternatives have failed, or it is apparent less restrictive alternatives will be ineffective at controlling the inmate cannot be used without risk to the safety of the inmate or others.

USE OF THE WRAP RESTRAINT

The WRAP restraint may only be used on inmates who pose an immediate threat to themselves or others when the circumstances reasonably perceived by personnel at the time indicate the WRAP restraint application is necessary to control the inmate. An immediate threat is present when:

- an inmate is violent or is physically resisting; or
- an inmate has demonstrated, by words or actions, an intent to be violent or to physically resist, and reasonably appears presently capable of causing physical harm to themselves, custody staff, or others if the WRAP restraint is not applied; and
- an inmate remains violent or is physically resisting while in traditional restraints

Absent exigent circumstances, placement in the WRAP restraint shall be video recorded, use of the WRAP restraint shall be authorized by the on-duty watch commander, and a supervisor at the permanent rank of sergeant or above shall be present during the inmate's placement in the WRAP restraint.

When applying the WRAP restraint after a use of force, <u>custodial staff shall employ a 10-minute cooling off period</u>, where the inmate is restrained with handcuffs or hobble <u>strap if circumstances permit</u>, the <u>inmate shalland be placed</u> in the recovery position. If a spinal injury is suspected, the inmate should be maintained on their back with cervical spinal precautions maintained, and the WRAP should not be place. while waiting for the WRAP restraint to arrive to the scene.

During the cooling-off period, the on-duty watch commander shall consult with medical and mental healthcare staff to determine whether the inmate has any medical or mental health conditions that would contraindicate the use of WRAP. The on-duty watch commander shall determine whether the inmate poses an immediate threat requiring WRAP use based on the circumstances at the end of the cooling-off period, including the current level of risk and resistance posed by the restrained individual.

When an inmate is placed in the WRAP restraint, and until the inmate is removed from the WRAP restraint, the inmate shall remain under direct visual observation at all times. The cinching straps of the shoulder harness shall never be tightened to the point it restricts the inmate's ability to breathe. All components of the WRAP restraint shall be physically checked to ensure they are properly secured and present no obvious signs of circulatory restrictions to the inmate's extremities.

Additionally, At all times during WRAP application, personnel shall not use unreasonable pressure on the inmate's back and shoulders that would cause respiratory discomfort or risk respiratory function. No pressure should be placed on the inmate's neck or head to fasten the cinching straps. Every effort will be made to minimize the amount of time that the inmate is restrained.

The WRAP restraint shall not be used on inmates who are known to be pregnant.

Spit masks should not ordinarily be used in conjunction with the WRAP restraint. Spit masks can only be authorized by the on-duty watch commander, and only if an inmate is actively spitting or attempting to spit on personnel. If a spit mask is placed during WRAP application because an inmate is actively spitting, the on-duty watch commander should be immediately notified. The on-duty watch commander shall determine the need for continued use of the spit mask within five minutes. If a spit mask is utilized, medical staff must conduct an assessment every 15 minutes, which shall include assessment of the inmate's oxygenation status with portable pulse oximetry.

Personnel shall immediately request medical aid if an inmate in a WRAP restraint complains of, or exhibits medical distress (e.g. respiratory distress, including gasping, snorting or gurgling sounds, complaint of chest pain, change in facial color, restricted blood circulation, complaints of extreme heat, sudden quiet or inactivity, loss of consciousness, vomiting, etc.) and remove the inmate from the WRAP restraint if a medical emergency appears to exist or medical staff so direct. If personnel identify that the inmate placed in the WRAP restraint has a need for mental health care, mental health staff shall be requested and personnel shall adhere to procedures delineated in Custody Division Manual (CDM) section 4-05/000.00, "Behavioral Observation and Mental Health Referral Reports."

MONITORING INMATES SECURED IN THE WRAP RESTRAINT

The inmate shall remain under direct visual observations at all times. A medical assessment shall be conducted within one (1) hour from the time of placement in the WRAP restraint to determine if placement is contraindicated. Following a use of force, the inmate shall be taken for a documented medical assessment as indicated in CDM section 7-07/000.00, "Use of Force Review Procedures." The medical opinion as to whether the inmate shall remain in the WRAP restraint shall take precedence over custody personnel's evaluation. Any refusals for medical treatment shall be made by the inmate directly to medical personnel. Inmates cannot refuse a medical assessment of the WRAP restraint. The medical assessment must include documentation of temperature, pulse, and pulse oximetry.

Upon the inmate's placement in the WRAP restraint, Department personnel shall initiate the WRAP Restraint Security Check Log (SH-J-480). If it is determined an inmate shall remain in the WRAP restraint

longer than fifteen (15) minutes, safety checks shall be documented twice (2) every thirty (30) minutes, approximately fifteen (15) minutes apart, until the WRAP restraint is removed. Safety checks shall verify that the WRAP restraint is not causing injury or an obvious medical problem (e.g. respiratory distress, chest pain, restricted blood circulation, loss of consciousness, vomiting, etc.).

A sergeant shall also conduct a safety check which evaluates the application of the WRAP restraint and shall assess its continued use at a minimum of once (1) every thirty (30) minutes. During this check, the sergeant shall reassess whether or not each inmate needs to remain in the WRAP restraint.

The sergeant shall ensure each inmate has been offered or provided access to toilet facilities, drinking water, prescribed medication, and be allowed to exercise their extremities (when safe), which shall be documented in the WRAP Restraint Security Check Log (SH-J-480). If an inmate is released from a portion of the WRAP restraint for any reason, e.g., to use the toilet, consumption of food or beverage, etc. without continuing disruptive aggressive behavior, the sergeant must release the inmate from the WRAP restraint. If the inmate misses a regularly scheduled meal due to being placed in the WRAP restraint, a meal shall be provided to the inmate upon removal of the WRAP restraint.

The sergeant shall attempt to have the inmate removed from the WRAP restraint before one (1) hour. If the sergeantit is determinesd the inmate cannot be safely removed from the WRAP restraint before one (1) hour, the watch commander shall be notified and respond to the location of the inmate to assess its continued use. If the watch commander determines that exceptional circumstances exist that require continued retention in the WRAP restraint, the reasons for continued retention shall be documented in the WRAP Restraint Security Check Log (SH-J-480). The sergeant shall have the inmate removed from the WRAP restraint within two (2) hours.

A supervisor at the rank of sergeant or above shall be present when the WRAP restraint is removed, absent exigent circumstances. The removal of the WRAP restraint should occur when the inmate can be safely confined within a housing location or an alternative location, or if the inmate is no longer deemed a threat. If necessary, the sergeant shall adhere to CDM section 7-01/040.00, "Planned Use of Force," upon determining the WRAP restraint can be removed, absent exigent circumstances

WRAP CART

Use of the WRAP CART for Short-Term Movement

If personnel utilize the WRAP CART only for security reasons during short-term movement/escort when the inmate is affixed to the WRAP CART, the provisions in Title 15, section 1058 do not apply. Use of the WRAP CART for short-term movement shall not exceed one (1) hour. The following procedures will apply and conform to the policies of the CDM.

- The inmate shall remain in direct and unobstructed visual observation by the supervising sergeant and designated custody personnel.
- The inmate's safety and physical condition shall be monitored continuously by designated custody personnel throughout the movement/escort. Personnel shall remove the inmate from the WRAP CART if a medical emergency appears to exist.

- If during the placement of the inmate in the WRAP CART, the inmate struggles against the restraints, has any visible signs of injury, or complains of pain, they shall be medically evaluated immediately after being secured.
- The use of the WRAP CART for security reasons during short-term movement shall be documented in the WRAP Restraint Security Check Log (SH-J-480) and the Custody Automated Reporting and Tracking System (CARTS) along with the reason for placement, time of placement, and time of removal from the WRAP CART.

Procedures in this policy will not apply when the WRAP CART is used solely as a transportation device and the inmate is not affixed to any portion of the WRAP CART. Notification of the use of the WRAP CART shall be made to the sergeant upon placement. Inmates placed in the WRAP CART may be restrained by methods consistent with Department policy.

If the inmate remains affixed to the WRAP CART for more than one (1) hour, all procedures for the WRAP restraint shall be followed.

Pregnant inmates shall not be handcuffed to the rear during transportation in the WRAP CART.

REPORTING USE OF THE WRAP RESTRAINT

Absent any other factors, the un-resisted placement of an inmate in the WRAP restraint device does not constitute reportable force. However, if in the course of applying the WRAP restraint, the inmate resists personnel, it Applying the WRAP restraint constitutes a use of reportable force and must be reported pursuant to CDM section 7-06/000.00, "Use of Force Reporting Procedures-."

The WRAP Restraint Security Check Log (SH-J-480) shall be entered into CARTS by the supervising sergeant prior to the end of their shift .

EXHIBIT E

Limitations on Force Policy CDM 7-01/030.00, Version 31

CSS #20-1887 Ver. 31

EXECUTIVE SUMMARY

This revision to the Los Angeles County Sheriff's Department's Custody Division Manual (CDM) revises section 7-01/030.00, "Prohibited Force."

This proposal was requested by Custody Services Division – Specialized Programs Commander Larry A. Alva, in order to maintain the consistency between this section, related Department force policies, Rosas settlement provisions, and Department of Justice settlement provisions.

Staff Assignment: Captain Erick S. Kim, Custody Support Services Bureau, at (213) 893-5845, or Sergeant Jacquelynn Marentes, Custody Support Services Bureau, at (213) 893-5966.

This proposal is presented in legislative format. Proposed additions, amendments, and/or revisions are highlighted, and deletions are indicated by strikeout.

7-01/030.00 Prohibited Force Limitations on Force

The following uses of force are prohibited unless circumstances justify the use of deadly force:

- Head strike(s) with an impact weapon
- Deliberately or recklessly striking an individual's head against a hard, fixed object (e.g. concrete floor, wall, jail bars, etc.)
- From a standing position, kicking an individual in the head with a shod foot while the individual is lying on the ground/floor
- Kneeing an individual in the head, deliberately or recklessly causing their head to strike the ground, floor, or other hard, fixed object
- Any choke holds

The following uses of force are prohibited absent life threatening or high risk/assaultive situations:

- Any kicking above the knee
- Carotid restraints
- Head strikes

(see following page for revision)

CSS #20-1887 Ver. 31

Department members shall not use the types of force described below in response to mere verbal threats from an inmate. Department members may only use these force options when they reasonably believe that an inmate is violent or has demonstrated by their physical action an intent to be violent and reasonably appears presently capable of causing serious physical injury. Department members shall use only that level of force necessary for the situation, reduce force immediately as resistance decreases, and immediately discontinue using force once a threat or resistance no longer exists.

Use of Personal Weapons (Head Strikes and Kicks)

The following types of force may only be used when (1) the inmate is assaultive, (2) there is an imminent danger of serious injury to personnel or others, and (3) there are no other reasonable means to avoid serious physical injury:

- Head strikes with personal weapons
- Kicking an inmate who is on the ground
- Kicking a standing inmate anywhere above the knee

Department members may only kick an inmate who is not on the ground below the knee if the inmate is (1) physically assaultive and (2) the kick is necessary to create distance between the Department member and the assaultive inmate.

Use of Force Against Restrained Inmates

The following types of force on restrained inmates may only be used when (1) an inmate is assaultive or self-injurious, (2) presents an immediate threat of injury to themselves, personnel, or others, and (3) there are no other more reasonable means to control the inmate:

- Use of personal weapons (anywhere on the body)
- Use of the Taser
- Use of chemical agents

If an assaultive inmate restrained to a fixed object presents an immediate threat of injury to personnel engaged with the inmate, force de-escalation principles require personnel to distance themselves from the assaultive conduct and request the presence of a sergeant rather than utilize the force options listed above, unless immediate intervention is required.

Deadly Force

The following types of force may only be used if a Department member can reasonably articulate that the circumstances justify the use of deadly force as defined in AB392 and PC 835a, Subsection (c)(1):

CSS #20-1887 Ver. 31

- Intentional head or neck strikes with an impact weapon
- Intentionally causing an inmate's head to impact against a hard fixed object (e.g., concrete floor, wall, jail bars, etc.)
- Intentionally kicking an individual in the head or neck from a standing position while the individual is lying on the ground/floor
- Kneeing an individual in the head, deliberately or recklessly causing their head to strike the ground, floor, or other hard, fixed object
- Special weapons, electronic immobilization devices (TASERs), and chemical agents, including aerosol chemical agents used against an inmate known to be pregnant (refer to CDM section 7-02/010.00 Pregnant Inmates)

Carotid Restraint Holds and Choke Holds

Department members may not use carotid restraint holds or choke holds. Any use of a carotid restraint or choke hold will be investigated as Category 3 force with a mandatory Internal Affairs Bureau (IAB) rollout.

Revised XX/XX/XXXX 11/02/2015 Rosas 2.5, 2.6, 17.1; DOJ 81