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LOS ANGELES COUNTY SHERIFF'S DEPARTMENT

Part III of Public Complaints Audit: Adjudication of Public Complaints Antelope Valley Stations Project No. 2025-3-A

Prepared By:

Audit and Accountability Bureau



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**Los Angeles County Sheriff's Department
Audit and Accountability Bureau**

**Part III of Public Complaints Audit:
Adjudication of Public Complaints
Antelope Valley Stations
Project No. 2025-3-A**

AUDIT REPORT

PURPOSE

The Audit and Accountability Bureau (AAB) conducted the Public Complaints Audits under the authority of the Los Angeles County Sheriff's Department (LASD or the Department), pursuant to the United States Department of Justice (US-DOJ) Antelope Valley (AV) Settlement Agreement¹ (Agreement). The purpose of Part III audits (2025-3-A, 2025-13-A, and 2025-26-A) was to determine whether the adjudication of public complaints complied with the Agreement. Specifically, the audit assessed whether Lancaster and Palmdale Stations (AV Stations) complied with paragraphs 128, 130, 131, 133 through 137, 140, and 142 of the Agreement.

As mandated by the Agreement, the primary objectives of the audit were to ensure whether the AV Station supervisors conducted thorough investigations, leading to reliable and well-supported conclusions. In addition, the Agreement mandates a review of management's role in overseeing the adjudicative process. These objectives helped assess the Department's transparency practices with the public, as well as its compliance with established policies and the terms of the Agreement.

The results from each audit report were based on the AV Stations' adherence to the Agreement's provisions, the US-DOJ and Monitoring Team (MT) established Agreement Compliance Metrics (compliance metrics) and Department policies. The AAB's audit findings and recommendations provided the MT with essential data for consideration to use toward compliance² and assessed whether the Department met its obligations under the Agreement.

¹ [Antelope Valley Settlement Agreement, No. CV 15-03174, United States v. Los Angeles County et al. \(D.C. Cal. April 28, 2015\)](#)

² Compliance when mentioned throughout the report refers to whether the AV Stations met the established compliance metrics.

Paragraph 140 of the Agreement states:

LASD shall conduct a semiannual, randomized audit of LASD-AV's complaint intake, classification, and investigations. This audit will assess whether complaints are accepted and classified consistent with policy, investigations are complete, and complaint dispositions are consistent with a preponderance of the evidence.

Additionally, Paragraph 149 of the Agreement states:

The Monitor shall... determine whether LASD has implemented and continues to comply with the material³ requirements of this Agreement... Where appropriate, the monitor will make use of audits conducted by the [Audit and Accountability Bureau] taking into account the importance of internal auditing capacity and independent assessment of this agreement.

The auditors independently conducted the audits to ensure the audit process, and its outcomes were accurate, thorough, and in line with auditing standards. Key areas of emphasis included comprehensive strategies in audit planning, such as gathering necessary data, and establishing audit populations. This approach ensured the audit evidence was reliable and relevant to the Agreement and the compliance metrics.

The Public Complaints Audits were conducted in the following manner:

Part	Audit
I	Availability and Acceptance of Complaint Information & Initiation and Classification of Complaints
II	Investigation of Public Complaints
III	Adjudication of Public Complaints

This audit is scheduled to be recurring. The table below lists the project numbers, due dates, and population time periods, which are subject to change.

Project Numbers, Due Dates, and Population Time Periods

Project No.	Projected Due Date	Population Time Period
2025-3-A	April 2025	July 1, 2024, through July 31, 2024
2025-13-A	December 2025	TBD

³ Per the MT, "material" refers to relevant and important information that is generally significant enough to determine or affect the outcome of an issue.

The AAB conducted this audit under the guidance of Generally Accepted Government Auditing Standards (GAGAS)⁴. The AAB determined whether the evidence obtained was sufficient and appropriate to provide a reasonable basis for the findings based on the audit objectives.

BACKGROUND

On April 28, 2015, the County of Los Angeles, the Department, and the US-DOJ entered into the Agreement with the goal of ensuring police services are provided to the AV community in a manner that fully complies with the Constitution and the laws of the United States. The Department is responsible for implementing the mandated stipulations of the Agreement, ensuring both public and deputy safety, while fostering renewed public trust in the LASD.

The AAB was authorized by the Sheriff of Los Angeles County, the US-DOJ, and the MT to conduct audits of the Department. To improve efficiency and effectiveness, the AAB shifted its audit approach from conducting full-scale audits to limited scope audits. These limited scope audits focus on a narrow set of audit objectives and specific audit populations, which are referred to by the AAB as “mini” audits. The purpose of the mini audits was intended to provide timely feedback to the AV Stations, facilitate opportunities for operational improvements, and demonstrate an increasing commitment toward meeting the established compliance metrics.

OBJECTIVES, SCOPE, AND METHODOLOGY

The Department recognizes the importance of evaluating Department members’ actions when interacting with members of the public. Department members’ interactions with the AV community are essential to developing and maintaining community trust. This audit provided an opportunity to identify areas for process improvement and implement corrective actions where necessary.

Audit Scope and Criteria

The scope of this audit evaluated the adjudication of public complaints. The AAB carefully developed the audit objectives, scope, and methodology focusing on the Agreement and the established compliance metrics. The Department’s compliance was measured against the established compliance metrics, along with additional direction provided by the MT to ensure the appropriate audit test work was conducted and relevant audit documentation was collected and analyzed.

⁴ The GAGAS, also known as the Yellow Book, is issued by the Comptroller General of the United States through the U.S. Government Accountability Office and refers to *Government Auditing Standards*, July 2018 Revision, Technical Update April 2021.

Audit Population and Sampling

The AAB specifically designed the audits to provide the MT with essential data for consideration to use toward compliance and assessed whether the Department was meeting its obligations under the Agreement. Parts II and III of the Public Complaints Audit, along with Objective No. 3 – Initiation and Classification of Complaints for Part I of the Public Complaints Audit, used the same audit population.

The auditors identified the investigations for the audit period in the Performance Recording and Monitoring System (PRMS)⁵, and reconciled the data with the Report Navigator⁶ to ensure the population selected was accurately accounted for.

The auditors evaluated completed investigations. This allowed for the evaluation of the effectiveness of the management review process. The population consisted of all WCSCR investigations initiated from July 1, 2024, through July 31, 2024.

Lancaster Station had a total of 15 WCSCR investigations in PRMS. However, of the 15 investigations, three were commendations, one was a duplicate investigation which was voided by the Station, and three were reviewed under the 2024 Public Complaints Audits, Part II – Initiating and Classifying of Public Complaints (Project No. 2024-57-A), and Part III – Investigation and Management Review & Oversight of Public Complaints (Project No. 2024-58-A). One investigation was a mock complaint conducted in the 2024 Part I – Assessment of Availability and Acceptance of Complaint Information (Project No. 2024-56-A) and was voided. The remaining seven investigations were reviewed for this audit. Palmdale Station had a total of 16 WCSCR investigations in PRMS.

Of these, four were commendations, and one was reviewed under the 2024 Public Complaints Audits, Part II – Initiating and Classifying of Public Complaints (2024-57-A) and Part III – Investigation and Management Review & Oversight of Public Complaints (2024-58-A). Three investigations from Palmdale Station, initially classified as WCSCRs, were later reclassified as Administrative Investigations and analyzed under Objective 1(f) – Unit Commander’s Referral of WCSCR Investigations to Administrative Investigations and did not apply to the remaining objectives. However, one of the reclassified investigations had a Service Comment Review completed prior to becoming an Administrative Investigation which was analyzed by auditors. As a result, nine investigations were reviewed for all other objectives in this audit.

⁵ The PRMS is a web-based application that systematically records data relevant to incidents involving uses of force, shootings, and commendations/complaints regarding Sheriff’s Department personnel. In addition, PRMS tracks the progress of administrative investigations, civil claims & lawsuits, discovery motions, employee commendations, preventable traffic collisions, custody complaints, and special conditions that the Department handles.

⁶ Report navigator is a database used by the Department to identify current and overdue complaint investigations.

The identified Administrative Investigations were subsequently evaluated in a separate supplemental review report (*Supplemental Review of PART II and III of Public Complaints Audits*), which confirmed compliance with the Department policy and the Agreement.

Note: Administrative Investigations are more complex than SCRs and, therefore, require more time to complete. Rather than hold up the SCR portion of this audit, SA compliance for the Administrative Investigations will be addressed in a supplemental report.

A total of 16 completed WCSCR investigations were reviewed for the audit; seven from Lancaster Station and nine from Palmdale Station. The investigations initiated and audited are indicated below:

Audit Population

Audit Project No.	WCSCR Investigations Initiated		WCSCR Investigations Audited	
	Lancaster Station	Palmdale Station	Lancaster Station	Palmdale Station
2025-3-A	15	16	7	9 ⁷
2025-13-A	TBD	TBD	TBD	TBD

Using a one-tailed statistical test with a 95% confidence level and a 4% error rate, the auditors identified a statistically valid random sample of incidents for the audit period to determine if sampling would be cost effective. Given the minimal size of the resulting sample, the auditors evaluated the entire audit population as indicated.

The associated documentation and Body-Worn Camera (BWC)⁸ recordings, when applicable, were evaluated for each audited investigation. The auditors provided a detailed summary of procedures and audit findings within each objective.

Audit Procedures

The auditors reviewed the compliance metrics related to public complaints and examined the AV Stations' processes, materials, and documents, including logs, the WCSCR, the Result of Service Comment Review form(s), associated memoranda, correspondence, reports, dispatch calls, audio and all associated BWC recordings for the audit population, photographs, or other related documents.

⁷ Of the 11 investigations analyzed, three were correctly referred by the Unit Commander for an Administrative Investigation under Objective 1(f) – Unit Commander's Referral of WCSCR Investigations to Administrative Investigations. Two did not apply to the other objectives because they were referred to the Internal Affairs Bureau for investigation and a Service Comment Review was not completed.

⁸ A BWC is a video and recording device worn by a Department member that allows an event to be recorded and saved as a digital file.

The auditors conducted detailed testing using audit tools designed for various audit objectives. The auditors analyzed the information gathered and documented their findings on audit work papers⁹ and which underwent further levels of review.

Summary of Findings

This audit consisted of one main objective with a total of 11 sub-objectives. However, there are no established compliance metrics for sub-objective 1(e), "Corrective Action" and sub-objective 1(g), "Timeliness of Adjudication." As a result, nine of the 11 sub-objectives were measured against the established compliance metrics.

The AV Stations were evaluated separately for each sub-objective. The results were combined to assess whether they met the established compliance metrics. However, for sub-objective 1(j) – Recordation of Critical Information in the Performance Recording and Monitoring System (PRMS) and sub-objective 1(k) – Recordation of Non-Critical Information in the PRMS, the compliance rate is solely based on the Risk Management Bureau's Discovery Unit's compliance with the applicable criteria.

⁹ Audit work papers are formally known as audit working papers and are created, gathered and compiled by the auditor throughout the audit process. These documents provide the supporting documentation for the audit findings and conclusions.

The table below outlines the audit objectives and their corresponding compliance metrics findings.

Summary of Compliance Metrics Findings

Obj. No.	Audit Objectives	Lancaster %	Palmdale %	AV Total	Compliance Metrics %
1	ADJUDICATION OF PUBLIC COMPLAINTS				
1(a)	<i>Statement Discarded Due to Criminal History</i>	100%	100%	100%	85%
1(b)	<i>Deputy Statement Given Preference</i>	86%	100%	94%	85%
1(c)	<i>Address all Substantive Allegations</i>	100%	100%	100%	95%
1(d)	<i>Preponderance of Evidence</i>	86%	100%	94%	95%
1(e)	<i>Corrective Action</i>	100%	100%	100%	N/A ¹⁰
1(f)	<i>Unit Commander's Referral of WCSCR Investigations to Administrative Investigations</i>	100%	100%	100%	95%
1(g)	<i>Timeliness of Adjudication - 60 Day Requirement</i>	0%	33%	19%	N/A ¹⁰
	<i>Timeliness of Adjudication - 90 Day Requirement</i>	0%	22%	13%	
1(h)	<i>Recordation of Critical Information on the Results of Service Comment Review Form</i>	100%	78%	88%	95%
1(i)	<i>Recordation of Non-Critical Information on the Results of Service Comment Review Form</i>	71%	89%	81%	80%
1(j)	<i>Recordation of Critical WCSCR Investigation Information in the Performance Recording and Monitoring System (PRMS)</i>	100%	100%	100%	95%
1(k)	<i>Recordation of Non-Critical WCSCR Investigation Information in PRMS</i>	100%	100%	100%	80%

¹⁰ There is no applicable (N/A) compliance metrics for sub-objectives 1(e), Corrective Action and 1(g), Timeliness of Adjudication.

Detailed Findings

This report provides detailed information on the findings noted during the audit for all objectives.

Objective No. 1 – Adjudication of Complaints

This objective will evaluate the adjudication of WCSCR investigations.

Objective No. 1(a) – Statement Discarded Due to Criminal History

Criteria

Antelope Valley Settlement Agreement Compliance Metrics, Personnel Complaints, Investigation, Paragraphs 131 (partial), 133, 134, 135, 136, and 137 (October 2019), Section 3B (8) states:

3. *LASD will be deemed in substantial outcomes compliance when: ...*

B. At least 85% of AV's public personnel complaint investigations meet the investigative requirements identified in the SA. This will involve a qualitative and quantitative evaluation of the following SA requirements: ...

8. Personnel complaint investigations do not disregard a witness' statement merely because the witness has some connection to the complainant or because of any criminal history.

Per the MT, this should not be limited to witness statements alone. The auditors will determine whether any statements, including those from the complainant, were disregarded for any of the prohibited reasons.

Procedures

The auditors reviewed the complainant and civilian witness interviews, as well as the statements from the Department members who were involved or witnessed the incident. Additionally, the auditors assessed all available corresponding documentation and BWC recordings. The auditors reviewed the adjudication to determine whether any witness statements were dismissed solely because the witness had a connection to the complainant or a prior criminal history. Furthermore, the auditors determined whether any statements, including those from the complainant, were disregarded for the prohibited reasons outlined in the Agreement, ensuring a thorough and impartial review of all evidence.

Findings

For the AV Stations combined, all 16 (100%) WCSCR investigations reviewed met the criteria for this objective because witness or complainant statements were not disregarded solely because the witness had a connection to the complainant or a prior criminal history.

For Lancaster Station, all seven (100%) WCSCR investigations reviewed met the criteria for this objective because witness or complainant statements were not disregarded solely because the witness had a connection to the complainant or a prior criminal history.

For Palmdale Station, all nine (100%) WCSCR investigations reviewed met the criteria for this objective because witness or complainant statements were not disregarded solely because the witness had a connection to the complainant or a prior criminal history.

Recommendations

There are no recommendations for the AV Stations because they met the compliance requirements for this objective.

Objective No. 1(b) – Deputy Statement Given Preference

Criteria

Antelope Valley Settlement Agreement Compliance Metrics, Personnel Complaints, Investigation, Paragraphs 131 (partial), 133, 134, 135, 136 and 137 (October 2019), Section 3B (7) states:

3. *LASD will be deemed in substantial outcomes compliance when: ...*

B. At least 85% of AV's public personnel complaint investigations meet the investigative requirements identified in the SA. This will involve a qualitative and quantitative evaluation of the following SA requirements: ...

7. Personnel complaint investigations do not give automatic preference for a deputy's statement over a non-deputy's statement.

Procedures

The auditors reviewed recorded interviews of complainants and civilian witnesses. In addition, the auditors reviewed the statements from the Department members who were involved in or witnessed the incident, as well as all available corresponding documentation and BWC recordings. The auditors reviewed the adjudication to determine whether a Department member's statement was given automatic preference.

Findings

For the AV Stations combined, 15 (94%) of the 16 WCSCR investigations reviewed met the criteria for this objective because automatic preference was not given to a deputy's statement over a non-deputy's statement in the WCSCR investigations.

For Lancaster Station, six (86%) of the seven WCSCR investigations reviewed met the criteria for this objective because automatic preference was not given to a deputy's statement over a non-deputy's statement in the WCSCR investigations. The one remaining (14%) investigation did not meet the criteria because automatic preference was given to a deputy's statement over a non-deputy's statement in the WCSCR investigations.

For Palmdale Station, all nine (100%) WCSCR investigations reviewed met the criteria for this objective because automatic preference was not given to a deputy's statement over a non-deputy's statement in the WCSCR investigations.

Specifically:

L-5¹¹: The R/P alleged she called 911 and was hung up on as she attempted to report an incident. She alleged the sergeant she spoke with at the station was discourteous and was also unhappy regarding the Department members' response times. The investigator did not state they attempted to contact the reporting party (R/P) on the telephone number provided on the complaint form. In addition, the sergeant did not have their BWC during the conversation with the R/P. The investigation relied solely on the written complaint. Had the investigator been able to contact the R/P, it may have clarified allegations by the R/P. In addition, although the investigator stated there were communication issues with the R/P's telephone, the investigator should have documented their attempt to contact the R/P.

Recommendations

There are no recommendations for the AV Stations because they met the compliance requirements for this objective.

¹¹ L refers to Lancaster Station. The number represents the sample being referred to for the WCSCR investigations reviewed for Lancaster Station.

Objective No. 1(c) – Address all Substantive Allegations

Criteria

Antelope Valley Settlement Agreement Compliance Metrics, Personnel Complaints, Management Oversight and Adjudication, Paragraph 130 states:

...LASD shall investigate every allegation of misconduct that arises during an investigation even if an allegation is not specifically articulated as such by the complainant.

Antelope Valley Settlement Agreement Compliance Metrics, Personnel Complaints, Management Oversight and Adjudication, Paragraphs 128, 130, 131 (partial) and 140 (partial) (October 2019), Section 3C states:

3. *LASD will be deemed in substantial outcomes compliance when: ...*

C. For at least 95% of public complaints, each significant allegation of misconduct is identified, ...

Procedures

The auditors reviewed the investigative packets and intake interviews (audio and/or video) for the WCSCR investigations, to identify the allegations made by the complainant.
Note

In addition, the auditors reviewed BWC recordings that depicted the interaction between the Department members and complainants to ensure there were no additional allegations of misconduct that should have been identified.

Findings

For the AV Stations combined, all 16 (100%) WCSCR investigations reviewed met the criteria for this objective because each significant allegation of misconduct was identified.

For Lancaster Station, all seven (100%) WCSCR investigations reviewed met the criteria for this objective because each significant allegation of misconduct was identified.

For Palmdale Station, all eight (100%) of the nine WCSCR investigations reviewed met the criteria for this objective because each significant allegation of misconduct was identified.

Recommendations

There are no recommendations for the AV Stations because they met the compliance requirements for this objective.

Objective No. 1(d) – Preponderance of Evidence

Criteria

Antelope Valley Settlement Agreement Compliance Metrics, Personnel Complaints, Management Oversight and Adjudication, Paragraphs 128, 130, 131(partial) and 140 (partial), (October 2019), Section 3E states:

3. *LASD will be deemed in substantial outcomes compliance when: ...*

C. ...each significant allegation of misconduct is identified, investigated and appropriately adjudicated, or the error is corrected during the management review.

*E. For **at least 95%** of public complaints, each significant allegation is adjudicated using the preponderance of evidence standard.*

Procedures

The auditors verified each identified allegation [from Objective 1(c)] to ensure it was appropriately adjudicated or the error was corrected during management review. Additionally, the auditors used the preponderance of evidence standard by appropriately taking into account the weight of credible evidence, when viewed as a whole, more likely than not supports the determination standard.

Findings

For the AV Stations combined, 15 (94%) of the 16 WCSCR investigations reviewed met the criteria for this objective because each significant allegation was adjudicated using the preponderance of evidence standard, and the disciplinary action for all personnel who committed misconduct was acceptable.

For Lancaster Station, six (86%) of the seven WCSCR investigations reviewed met the criteria for this objective because each significant allegation was adjudicated using the preponderance of evidence standard, and the disciplinary action for all personnel who committed misconduct was acceptable. The one remaining (14%) investigation did not meet the criteria because each significant allegation was not adjudicated using the preponderance of evidence standard.

For Palmdale Station, all nine (100%) of the nine WCSCR investigations reviewed met the criteria for this objective because each significant allegation was adjudicated using the preponderance of evidence standard, and the disciplinary action for all personnel who committed misconduct was acceptable.

Specifically:

L-5: The R/P alleged she called 911 and was hung up on as she attempted to report an incident. She alleged the sergeant she spoke with was discourteous and she was unhappy regarding response times. The investigator did not state they attempted to contact the (R/P) on the telephone number provided on the complaint form. The investigation relied solely on the written complaint. Had the investigator been able to contact the R/P, it may have clarified allegations by the R/P.

In addition, although the investigator stated there were communication issues with the R/P's telephone, the investigator should have documented their attempt to contact the R/P. The sergeant failed to have her BWC activated during her interaction with the R/P. Without a BWC recording or an additional interview with the R/P the auditors determined the disposition should have been classified as, "Unable to Make a Determination" (the review revealed insufficient information to assess the employee's alleged conduct). With a disposition of "Unable to Make a Determination", disciplinary action would not have followed.

Recommendations

It is recommended Unit Commanders conduct a thorough and objective review of WCSCR investigations, ensuring that findings are adjudicated based on the preponderance of the evidence standard. In cases when a Unit Commander fails to properly review and assess an investigation, Division Commanders should take prompt and documented corrective action to address the deficiency. This oversight mechanism is essential to maintaining the integrity of the investigative process while upholding the Department's commitment to accountability and the fair resolution of complaints.

Objective No. 1(e) – Corrective Action

Criteria

The auditors noted there are no established compliance metrics for sub-objective 2(d), "Corrective Action".

The proposed draft of the Service Comment Report Handbook¹² (August 2022) states,

“Once the watch commander has completed the service review, he shall prepare a memo to the unit commander describing the complaint, the statements and evidence that support or refute the complaint, any corrective action taken, and the watch commander’s recommendation as to the disposition...”

Manual of Policy and Procedures MPP, Section 3-04/010.25, Personnel Complaints (October 2014) which states:

“The concerned Unit Commander is responsible for evaluating each personnel complaint to determine the appropriate supervisory response. The nature and seriousness of the allegation(s), the potential for employee discipline, and the concerned employee’s performance history are potential factors to consider in the evaluation.”

Administrative Investigations Handbook (Revised October 2005), which states:

“The booklet Guidelines for Discipline and Education-Based Alternatives (revised August 2020) assists managers in deciding when and how to impose discipline. This booklet is to be used by Department managers and executives as a resource document when determining discipline.”

In accordance with Department Policy, the auditors evaluated any corrective action taken, considering the severity of the offense, the impact on the Department and community, and the employee’s work history.

¹² Proposed draft Service Comment Report (SCR) Handbook, revised 08/01/2022.

Procedures

The auditors reviewed the completed WCSCR investigations adjudicated by NPD to determine whether investigations dispositioned as “Appears employee conduct should have been different” or “Appears employee conduct could have been better” resulted in corrective action. The auditors examined whether corrective action was taken, given the severity of the offense, the employee’s prior history, and the Department’s established discipline guideline. Corrective actions reviewed included counseling, training, and written reprimands, when applicable. If the auditors determined a corrective action should have been taken but was not, this would result in an audit finding.

Findings

Of the four WCSCR investigations¹³ with documented corrective action, all (100%) met the criteria for this objective because auditors determined the corrective action was within a reasonable range of management discretion, given the severity of the offense, employee history, and the Department’s established discipline guidelines.

Recommendations

There are no recommendations for the AV Stations because they met the compliance requirements for this objective.

¹³ WCSCR investigations with documented corrective action – (P-2, P-4, P-7, and P-9).

Objective No. 1(f) – Unit Commander’s Referral of WCSCR Investigations to Administrative Investigations

Criteria

Antelope Valley Settlement Agreement Compliance Metrics, Personnel Complaints, IAB Referral, Paragraph 132 (October 2019), Section 2A states:

2. LASD will be deemed in substantial outcomes compliance when:

A. At least 95% of the complaints in an audit sample are handled in accordance with this SA provision.

[LASD agrees to continue to require station commanders in the Antelope Valley to refer alleged incidents of misconduct to the IAB or ICIB for further investigation or review consistent with the Administrative Investigations Handbook...]

The auditors will use the factors outlined in the Manual of Policy and Procedures (MPP), Section 3-04/010.25, Personnel Complaints (October 2014), which states:

The concerned Unit Commander is responsible for evaluating each personnel complaint to determine the appropriate supervisory response. The nature and seriousness of the allegation(s), the potential for employee discipline, and the concerned employee’s performance history are potential factors to consider in the evaluation.

Additionally, the auditors used the factors outlined in the Administrative Investigations Handbook (Revised October 2005), which states:

Administrative Investigations

While most investigations will be conducted at the unit level, there may be situations that require assignment to the Internal Affairs Bureau.

Criminal Investigations

If the allegations involved are criminal in nature, the unit commander shall notify the division chief, who may request a criminal investigation. If the incident will be investigated criminally, there should be no discussion regarding the incident with the subject.

Lastly, the auditors used the proposed draft of the Service Comment Report Handbook (August 2022), which states:

If the unit commander determines that the complaint, if found true, may result in formal discipline, then the unit commander may initiate an administrative investigation. Should the unit commander decide to elevate the inquiry, the division chief must determine whether the administrative investigation would be handled at the unit level or by Internal Affairs Bureau (IAB), refer to MPP 03-04/020.05 Initiation of Administrative Investigations.

Procedures

The Unit Commander is responsible for determining whether a public complaint should remain a WCSCR investigation, which excludes the imposition of discipline, or whether it should be classified as an administrative or criminal investigation, both of which may result in disciplinary measures.

In accordance with the Administrative Investigations Handbook, SCR Handbook, and MPP policy, the auditors determined whether alleged incidents of misconduct associated with public complaints were appropriately directed to the IAB or ICIB for further investigation.

Per discussions with the MT, compliance was based on whether the investigations the AAB determined should have been referred to IAB or ICIB were appropriately routed.

Findings

For this sub-objective, all 18 WCSCR investigations were analyzed. For the AV Stations combined, all (100%) met the criteria for this objective because the Unit Commander correctly determined whether a public complaint should remain a WCSCR investigation, which would exclude the imposition of discipline, or whether it should be classified as an administrative or criminal investigation, both of which may result in disciplinary measures.

For Lancaster Station, all seven (100%) WCSCR investigations reviewed met the criteria for this objective because the Unit Commander correctly determined whether a public complaint should remain a WCSCR investigation, which would exclude the imposition of discipline, or whether it should be classified as an administrative or criminal investigation, both of which may result in disciplinary measures. None of the investigations were upgraded to an Administrative Investigation.

For Palmdale Station, all 11 (100%) WCSCR investigations reviewed met the criteria for this objective because the Unit Commander correctly determined whether a public complaint should remain a WCSCR investigation, which would exclude the imposition of discipline, or whether it should be classified as an administrative or criminal investigation, both of which may result in disciplinary measures. Three were correctly referred by the Unit Commander for an Administrative Investigation. In two of the investigations, the Unit Commander initiated a unit level investigation in reference to allegations of misconduct. The remaining investigation was appropriately forwarded to the Internal Affairs Bureau for a thorough investigation and disposition.

Recommendations

There are no recommendations for the AV Stations because they met the compliance requirements for this objective.

Objective No. 1(g) – Timeliness of Adjudication

Criteria

There is no specific compliance metric for sub-objective 1(g), “Timeliness of Adjudication.” The current, approved SCR Handbook (June 2011) and the Manual of Policy and Procedures, Section 3-04/010.05, Procedures for Department Service Reviews (December 2013), indicate a 30-day timeline to submit the completed WCSCR investigation packet to NPD and a 60-day timeline to submit the completed WCSCR investigation packet to the Discovery Unit.

The SCR Handbook is currently being revised to propose a 60-day timeline for submission to the NPD and a 90-day timeline to the Discovery Unit. Per discussions with the MT, the auditors have agreed to utilize the proposed timeliness in the draft SCR Handbook as the standard for evaluating the timeliness of WCSCR investigations for this audit.

Procedures

To determine whether each of the WCSCR investigations reviewed was submitted to the NPD within the 60-day requirement, the auditors calculated the number of days from the complaint report date on the WCSCR to the Unit Commander’s approval date on the Result of Service Comment Review form.

To determine whether each of the WCSCR investigations reviewed were submitted to the Discovery Unit within the 90-day requirement, the auditors calculated the number of days from the complaint report date to the NPD Commander’s approval date on the Result of Service Comment Review form.

To meet the criteria for this sub-objective, the WCSCR investigations must be submitted to NPD within the 60-day requirement, and to the Discovery Unit within the 90-day requirement.

Findings

For the AV Stations combined, three (19%) of the 16 WCSCR investigations reviewed met the criteria for this objective because the WCSCR investigation was submitted to the NPD within the proposed 60-day timeline requirement. In addition, two (13%) of the WCSCR investigations were submitted to the Discovery Unit within the 90-day timeline requirement.

For Lancaster Station, none of the seven WCSCR investigations (0%) met the criteria for this objective because the investigations were not submitted within the proposed timeline requirement.

For Palmdale Station, three of the nine WCSCR investigations reviewed (33%) met the criteria for this objective because they were submitted to the NPD within the proposed 60-day timeline.

Additionally, two (22%) of the nine WCSCR investigations were submitted to the Discovery Unit within the 90-day timeline requirement,

Specifically:

Sample No.	No. of Days WCSCR Investigations Exceeded the 60-Day Requirement	No. of Days WCSCR Investigations Exceeded the 90-Day Requirement
L-1	33	32
L-2	70	87
L-3	104	119
L-4	49	218
L-5	169	166
L-6	166	199
L-7	67	134
P-1	3	8
P-2	6	10
P-3	100	152
P-4	30	9
P-6	18	23
P-7	Met the 60-day timeline requirement	4
P-9	16	26

During the review, the auditors also noted:

- The investigators for Lancaster Station took a median of 74 days and for Palmdale Station, 29 days to submit their report.
- Operations for Lancaster Station took a median of 2 and for Palmdale Station, 16 days to complete their review.
- The NPD took a median of 67 days to complete reviews for Lancaster Station and 6 days for Palmdale Station.

Recommendations

It is recommended the Department implement the revised timelines in the proposed draft SCR Handbook. The expanded timelines may help ensure investigations are thorough and complete prior to submission to the Unit Commander, as well as to NPD.

In addition, it is recommended the AV Stations conduct an analysis to determine the main cause of the delays in completing the investigations in a timely manner. It is also recommended an internal tracker be developed to monitor the completion status of the WCSCR investigation at each level of review.

Objective No. 1(h) – Recordation of Critical Information on the Result of Service Comment Review Form

Criteria

Antelope Valley Settlement Agreement Compliance Metrics, Personnel Complaints, Management Oversight and Adjudication, Paragraphs 128, 130, 131(partial) & 140(partial), (October 2019), Section 3F states:

3. *LASD will be deemed in substantial outcomes compliance when: ...*

F. In at least 95% of public complaints, critical information is recorded accurately in the Service Comment Review packet... Critical information includes all accused employees, allegations of significant misconduct, disposition of each allegation and any corrective action recommended or taken.

Per the MT, the critical information on the Result of Service Comment Review form should be compared to the corresponding information in the WCSCR investigation packet, BWC recordings, and audio recordings, to ensure the accuracy of the critical information recorded on the Result of SCR form. For example, if the disposition on the Result of Service Comment Review was “Employee Conduct Appears Reasonable” but the auditors determined the disposition should have been “Appears Employee Conduct Could Have Been Better”, the investigation was noncompliant because the disposition was not accurately recorded on the Result of SCR form.

Procedures

The auditors reviewed all documentation within the completed packets for each investigation, including incident reports, supplemental reports, and booking packets to verify all critical information was accurately documented. The auditors reviewed information related to all accused employees, allegations of significant misconduct, disposition of each allegation, and any recommended or implemented corrective actions. In addition, if any discrepancies were found among the critical data recorded, the auditors identified which data was accurate.

Findings

For the AV Stations combined, 14 (88%) of the 16 WCSCR investigations reviewed met the criteria for this objective because critical information was accurately recorded on the Result of Service Comment Review form.

For Lancaster Station, all seven (100%) WCSCR investigations reviewed met the criteria for this objective because all critical information was accurately recorded on the Result of Service Comment Review form.

For Palmdale Station, seven (78%) of the nine WCSCR investigations reviewed met the criteria for this objective because all critical information was accurately recorded on the Result of Service Comment Review form. The two remaining (22%) investigations did not meet the criteria because all critical information was not accurately recorded on the Result of Service Comment Review form.

Specifically:

P-9: In the “Approved Disposition” section of the Result of Service Comment Review form, the associated Internal Affairs Bureau – Unit Level Administrative Investigation number (IAB # or IV #) was incorrectly documented. Instead of documenting the investigation associated with this incident, the form referenced a different number. When investigations are not documented accurately, it can create system issues in PRMS, leading to inaccurate tracking or potential misclassification of the involved Department member.

P-10: The “Approved Disposition” section of the Result of Service Comment Review form was not completed. It should have been documented as, “Recommended Outcome Approved – No Further Action, as the investigation revealed the deputy’s conduct appeared reasonable.”

Recommendations

It is recommended clear and specific guidelines be established for unit-level Operations staff responsible for reviewing and distributing completed WCSCR packets. Providing targeted training on the accurate transcription of all critical information on the Result of Service Comment Review form will help minimize the recurring errors currently identified in finalized packets.

In addition, implementing a second level of review after the form is completed by Operations staff will enhance quality assurance and reduce the likelihood of inaccuracies.

Furthermore, it is recommended the Result of Service Comment Review form include a section indicating the individuals responsible for completing the form through each stage of the approval process. NPD Commanders must take timely and documented corrective action when discrepancies or inaccuracies are identified and not adequately addressed.

Objective No. 1(i) – Recordation of Non-Critical Information on the Result of Service Comment Review Form

Criteria

Antelope Valley Settlement Agreement Compliance Metrics, Personnel Complaints, Management Oversight and Adjudication, Paragraphs 128, 130, 131(partial) & 140(partial), (October 2019), Section 3G states:

3. *LASD will be deemed in substantial outcomes compliance when: ...*

G. In at least 80% of public complaints, non-critical information is recorded accurately on the Results of Service Comment Review form. Non-critical information is anything not classified as critical, e.g., accused employees, allegations, dispositions and corrective action.

Procedures

The auditors reviewed the non-critical information from the Result of Service Comment Review forms and compared this information to the corresponding information, BWC recordings, and audio recordings. This comparison ensured all non-critical information was accurately recorded on the Result of Service Comment Review form. In addition, if any discrepancies were found among the non-critical data recorded, the auditors determined which data was accurate.

Findings

For the AV Stations combined, 13 (81%) of the 16 WCSCR investigations reviewed met the criteria for this objective because non-critical information was accurately recorded on the Result of Service Comment Review form.

For Lancaster Station, five (71%) of the seven WCSCR investigations reviewed met the criteria for this objective because all non-critical information was accurately recorded on the Result of Service Comment Review form. The two remaining (29%) investigations did not meet the criteria because non-critical information related to the investigation was not accurately recorded or was missing from the Result of Service Comment Review form.

For Palmdale Station, eight (89%) of the nine WCSCR investigations reviewed met the criteria for this objective because all non-critical information was accurately recorded on the Result of Service Comment Review form. The one remaining (11%) investigation did not meet the criteria because non-critical information related to the investigation was not accurately recorded or was missing from the Result of Service Comment Review form.

Specifically:

L-5: The Result of Service Comment Review form was not submitted for “Unknown (#999000).

L-7: This WCSCR investigation lists two involved employees. On the Result of Service Comment Review form for one of the involved employees, the “SC# (PDE)” number is listed incorrectly.

P-6: This WCSCR investigation was appropriately classified as a Personnel and Service Complaint. However, the Result of Service Comment Review form is not marked to include the Service Complaint category.

Recommendations

There are no recommendations for the AV Stations because they met the compliance requirements for this objective.

Objective No. 1(j) – Recordation of Critical WCSCR Investigation Information in PRMS

Criteria

Agreement Paragraph 142 states:

LASD-AV will ensure that PPI¹⁴ data is accurate and hold responsible AV personnel accountable for inaccuracies in any data entered.

Per discussions with the MT, the compliance metrics for this objective is 95%.

Procedures

The auditors reviewed the Service Comment module of PRMS to determine whether all critical information from the Result of Service Comment Review form for each reviewed investigation was accurately recorded in PRMS. Specifically, the auditors reviewed the critical information in the Result of Service Comment Review forms to ensure they align with the information documented in PRMS.

Findings

For the AV Stations combined, all (100%) WCSCR investigations reviewed met the criteria for this objective because the recordation of critical information in PRMS was recorded accurately.

For Lancaster Station, seven (100%) WCSCR investigations reviewed met the criteria for this objective because the recordation of critical information in PRMS was recorded accurately.

For Palmdale Station, 11 (100%) WCSCR investigations reviewed met the criteria for this objective because the recordation of critical information in PRMS was recorded accurately.

Recommendations

There are no recommendations for the AV Stations because they met the compliance requirements for this objective.

¹⁴ PRMS is formerly known as the Personal Performance Index (PPI).

Objective No. 1(k) – Recordation of Non-Critical Information in PRMS

Criteria

Agreement Paragraph 142 states:

LASD-AV will ensure that PPI data is accurate and hold responsible AV personnel accountable for inaccuracies in any data entered.

Per discussions with the MT, the compliance metrics for this sub-objective is 80%.

Procedures

The auditors reviewed the Service Comment module of PRMS to determine whether all non-critical information from the Result of Service Comment Review form was accurately recorded. Specifically, the auditors reviewed the non-critical information in the Result of Service Comment Reviews forms to ensure it aligns with the information documented in PRMS.

Findings

For the AV Stations combined, all (100%) WCSCR investigations reviewed met the criteria for this objective because the recordation of critical information in PRMS was recorded accurately.

For Lancaster Station, seven (100%) WCSCR investigations reviewed met the criteria for this objective because the recordation of critical information in PRMS was recorded accurately.

For Palmdale Station, nine (100%) WCSCR investigations reviewed met the criteria for this objective because the recordation of critical information in PRMS was recorded accurately.

Recommendations

There are no recommendations for the AV Stations because they met the compliance requirements for this objective.

CONCLUSION

The AAB believes addressing the findings and implementing the recommendations will ensure prompt corrective actions for all sub-objectives which are out of compliance. This may improve the AV Station's overall compliance with the Department policies, the stipulations set forth in the Agreement, and the compliance metrics.

The AAB will continue to conduct audits to uphold transparency and accountability, assess progress, and provide recommendations for ongoing improvement at the AV Stations. These efforts are essential in assisting the AV Stations in achieving their goals of adhering to the Agreement and meeting the established compliance metrics. By systematically evaluating operational practices, the AAB is committed to fostering a culture of continuous improvement, ultimately enhancing the effectiveness and integrity of operations within the AV Stations.

SUMMARY OF RECOMMENDATIONS

The purpose of this section is to provide a concise reference for all recommendations aimed at improving compliance with the AV Settlement Agreement and Department policies and procedures. The recommendations listed below are the same as those detailed in the above report.

Objective No. 1 – Adjudication of Public Complaints

- d) **Preponderance of Evidence:** It is recommended Unit Commanders conduct a thorough and objective review of WCSCR investigations, ensuring that findings are adjudicated based on the preponderance of the evidence standard. In cases where a Unit Commander fails to properly review and assess an investigation, Division Commanders should take prompt and documented corrective action to address the deficiency. This oversight mechanism is essential to maintaining the integrity of the investigative process while upholding the Department's commitment to accountability and the fair resolution of complaints.
- g) **Timeliness of Adjudication:** It is recommended the Department implement the revised timelines in the proposed draft SCR Handbook. The expanded timelines may help ensure investigations are thorough and complete prior to submission to the Unit Commander as well as to NPD.

Additionally, it is recommended the AV Stations conduct an analysis to determine the main cause of the delays in completing the investigations in a timely manner. It is also recommended an internal tracker is developed to monitor the completion status of the WCSCR investigation at each level of review.

- h) **Recordation of Critical Information on the Results of Service Review Form:** It is recommended clear and specific guidelines be established for unit-level Operations staff responsible for reviewing and distributing completed WCSCR packets. Providing targeted training on the accurate transcription of all non-critical information on the Result of Service Comment Review form will help minimize the recurring errors currently identified in finalized packets.

In addition, implementing a second level of review after the form is completed by Operations staff will enhance quality assurance and reduce the likelihood of inaccuracies.

Furthermore, it is recommended the Result of Service Comment Review form include a section indicating the individuals responsible for completing the form through each stage of the approval process. NPD Commanders must take timely and documented corrective action when discrepancies or inaccuracies are identified and not adequately addressed.

FOLLOW-UP PROCEDURES

The AAB will conduct a follow-up of the recommendations and verify if the auditee has made necessary improvements. Verification of corrective action will be assessed by examining new directives, amended unit orders, and/or relevant documentation. The AAB will work with the auditee in understanding the implementation of audit recommendations, as it may be a lengthy process and require a collaborative effort with other Department resources.

DEPARTMENT APPLICATIONS

- Performance Recording and Monitoring System (PRMS), Service Comment Module
- Station/Bureau Administration Portal (SBAP)¹⁵ Risk Management Tracker
- NICE Inform
- Scheduling Management System (SMS)
- LASD.Evidence.com

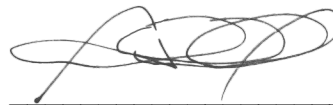
REFERENCES

- United States Department of Justice – Los Angeles County Sheriff's Department Antelope Valley Settlement Agreement, Case Number CV 15- 03174 (April 2015)
- Antelope Valley Settlement Agreement Compliance Metrics (October 2019)
- Antelope Valley Monitoring Team Monitor's Second Audit of Community Complaints (December 2020)
- Manual of Policy and Procedures Section:
 - 3-04/010.05, Procedures for Department Services Reviews (December 2013)
 - 3-04/010.25, Personnel Complaints (October 2014)
- Proposed Draft Service Comment Report Handbook (August 2022)
- Administrative Investigations Handbook (October 2005)

¹⁵ The SBAP is a data entry system designed to collect and track data related to risk management incidents, which are primarily used at a station level. The system includes data on uses of force, traffic collisions, public comments, pursuits, administrative investigations, shots fired, employee injuries, and lawsuits and civil claims.

Views of Responsible Officials

On May 8, 2025, Palmdale Station command staff submitted a response to the AAB concurring with the corresponding audit findings. On May 16, 2025, Lancaster Station command staff submitted a response to the AAB concurring with the corresponding audit findings. The AAB presented the final audit report to the Division Director, Office of Constitutional Policing.



10/29/2025

GEOFFREY N. CHADWICK

DATE

Captain

Audit and Accountability Bureau

Los Angeles County Sheriff's Department