

## Office of Law Enforcement Support

### 607.1 PURPOSE AND SCOPE

**Agency Content**

This policy sets forth the reporting requirements for the incidents which require reporting to the California Health and Human Services Agency (CHHSA) Office of Law Enforcement Support (OLES) pursuant to the California Welfare and Institutions Code.

#### 607.1.1 PRIORITY 1 AND 2 REPORTING REQUIREMENTS

**Agency Content**

See attachment: [250613 OLES Facility Reporting Guidelines Eff. July 1 2025.pdf](#)

See attachment: [250613 OLES Notification Template Eff. July 1 2025.pdf](#)

### 607.2 INVESTIGATION PROCESS GUIDELINE THRESHOLD INCIDENTS

**Agency Content**

#### Investigative Process

- **Within 2 days:**
  - (a) The Office of Law Enforcement Support (OLES) reviews initial case summary and determines their involvement.
- **Within 120 days:**
  - (a) OLES Attorney Investigation Monitor (AIM) meets with the Office of Protective Services (OPS) Investigator and identifies critical junctures.
  - (b) OPS or OLES completes investigation and submits final report and recommendations through channels to OLES.

See attachment: [OLES Investigation Process Guideline Threshold Incidents.pdf](#)

### 607.3 CRITERIA FOR OLES MONITORED CASE REQUEST FOR EXTENSION

**Agency Content**

In accordance with the OLES Investigation Process Guideline Threshold for Incidents all OLES monitored cases shall be completed within 120 days. If the assigned investigator is unable to complete the cases within the 120 day based on the below criteria then the Investigator shall complete the OLES Monitored Case Request of Extension.

Criteria that meets the OLES extension memo request:

- Witness unavailability
- Subject and Complainant unavailable
- Complex Investigation which requires additional investigative time

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- Reports from external sources being unavailable (Coroners report)
- Higher priority cases
- Labor or Legal Representatives unavailable for subject interviews\
- Travel due to patients who have been discharged or transferred to another facility

If the need arises to complete the OLES extension form it needs to be completed prior to the 120 day time requirement. This form will be completed by the assigned investigator with an anticipate completion date, as well as a justification for the the requested extension and submitted through the proper chain of command for review and approval, prior to submitting to the OLES monitor. After the extension request is submitted and approved the Supervising Special Investigator will hold a briefing with the OLES monitor to confirm delivery and approval. The approved extension form will be placed in the case file and a copy sent to the OLES monitor via Watchdox to OLES@chhs.ca.gov.

[See attachment: OLES Monitored Case Request for Extension - Form.pdf](#)

### 607.4 OLES OVERSIGHT AND ACCESS

#### Agency Content

OLES is legislatively mandated to conduct designated investigations and to provide independent monitoring of Priority 1 and Priority 2 investigations that are conducted by OPS. OLES staff shall be provided full access to all California Department of State Hospitals (DSH) facility areas and grounds in order to conduct investigations and provide oversight functions. In addition, OLES staff are to be provided full access to patient health information, facility personnel, and patients/clients for investigative and oversight activities.

#### 607.4.1 CONTEMPORANEOUS MONITORING BY OLES

##### Agency Content

When OLES determines it will assign a staff member to provide contemporaneous monitoring of an OPS investigation, the Hospital Police chief will receive a notice from OLES via email. When this occurs, in order to avoid any delays in the investigation, the assigned investigator shall draft an investigative plan to include clearly identifying the alleged law and/or policy violations. The investigative plan shall list the necessary interviews to be conducted along with the required documentation to be gathered. The assigned investigator should start gathering the documentation and be ready to review both the investigative plan and documents with the assigned monitor. The investigator shall be prepared to coordinate the scheduling of interviews with the monitor during the initial case conference.

In situations where interviews must be initiated immediately based upon the seriousness of the allegations, the investigator shall contact the assigned monitor prior to conducting the interviews. If the investigator has not been advised that OLES has decided it will assign a monitor, or does not know who will be monitoring the case, the investigator shall call the OLES hotline at (916) 651-7074 to give OLES the opportunity to have a monitor respond immediately.

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Additionally, upon completion of an investigation, the assigned investigator shall afford the assigned OLES monitor the opportunity to review a draft copy of the investigation and provide recommendations or feedback before the investigation is finalized.

## Attachments

**250613 OLES Notification  
Template Eff. July 1 2025.pdf**

## OLES Notification Template

Facility Name:		Facility Case #:	
Incident Location:		Date:	Time:
Discovered by (Staff)(First Last):	Title:	Date:	Time:
Reported to OPS by(First Last):	Title:	Date:	Time:
Method of Notification:			
Reported to OLES by(First Last):	Phone #:	Date:	Time:
Incident Disposition: <input type="checkbox"/> OSI		Opened at patrol level	Closed at patrol level

PRIORITY 1	PRIORITY 2	
Abuse - Physical	Absent Without Leave (AWOL)	Over-Familiarity
Assault with a Deadly Weapon (ADW) by a Non-Patient	Assault with GBI	Patient Arrest - Probable Cause
Broken Bone (Unknown)	Attempted Patient Suicide	Patient Arrest - Warrant
Deadly Force	Broken Bone (Known)	Peace Officer Misconduct
Death	Burn	Phones - Contraband 4350
Genital Injury (Unknown)	Child Sexual Abuse Material	Phones - Unauthorized (Staff)
Sexual Assault: Priority 1	Drugs	Pregnancy
	Genital Injury (Known)	Riot
	Head/Neck Injury	Sexual Assault: Priority 2
	Neglect	Use of Force

**P2 SIGNIFICANT INTEREST:** An incident of interest to the public which may draw media attention.  
Description:

**A. Victim/Involved** (First Last):  
 ID#: \_\_\_\_\_ Gender: \_\_\_\_\_ IQ: \_\_\_\_\_ Age: \_\_\_\_\_  
 Classification: \_\_\_\_\_ Commitment Type: \_\_\_\_\_  
 Transported for Treatment?  Yes  No If yes, where: \_\_\_\_\_

**B. Subject/Suspect** (First Last):  
 ID#: \_\_\_\_\_ Gender: \_\_\_\_\_ IQ: \_\_\_\_\_ Age: \_\_\_\_\_  
 Classification: \_\_\_\_\_ Commitment Type: \_\_\_\_\_  
 Redirected to/ATO?  Yes  No Arrested?  Yes  No If yes, arresting agency: \_\_\_\_\_

**C. Death** Cause: \_\_\_\_\_ Expected?  Yes  No  
 Cause of death provided by (First Last Title): \_\_\_\_\_ Was DNR in place?  Yes  No

**D. Sexual Assault** Was victim offered a SART? Yes No  
 If yes, offered by(First Last): \_\_\_\_\_ M F  
 Location: \_\_\_\_\_ Was the location away from other patients/staff?  Yes  No  
 If SART refused, reason provided: \_\_\_\_\_  
 Was the SART offer and refusal recorded?  Yes  No  
 If not recorded, witness present (First Last): \_\_\_\_\_ M F  
 Did SART examiner come to the facility? Yes No Victim transported? Yes No

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## OLES Notification Template

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**E. Recanted** Reason: Audio recorded?    Yes    No  
Witnessed by a third party?    Yes    No If yes, witness(First Last):

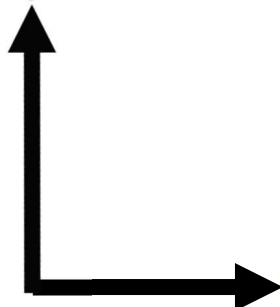
**F. Local Law** Incident reported to the jurisdictional law enforcement agency?    Yes    No  
**ENF RPTD** If yes, case #:

Agency Name:  
Contact Name (First Last): Rank: Phone #:

**G. Incident Summary** *List additional involved parties here.*

**250613 OLES Facility Reporting  
Guidelines Eff. July 1 2025.pdf**

# Office of Law Enforcement Support Facility Reporting Guidelines



Effective July 1, 2025

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## Introduction

This manual provides guidelines for reporting to the Office of Law Enforcement Support (OLES) all incidents meeting OLES criteria that occurred at Department of State Hospitals (DSH) and Department of Developmental Services (DDS) facilities.

California Welfare and Institutions Code section [4023.6](#) provides in pertinent part:

- (a) The Office of Law Enforcement Support within the California Health and Human Services Agency shall investigate both of the following:
  - (1) Any incident at a developmental center or state hospital that involves developmental center or state hospital law enforcement personnel and that meet the criteria in Section [4023](#) or [4427.5](#) or alleges serious misconduct by law enforcement personnel.
  - (2) Any incident at a developmental center or state hospital that the Chief of the Office of Law Enforcement Support, the Secretary of the California Health and Human Services Agency, or the Undersecretary of the California Health and Human Services Agency directs the office to investigate.
- (b) All incidents that meet the criteria of section [4023](#) or [4427.5](#) shall be reported immediately to the Chief of the Office of Law Enforcement Support by the Chief of the facility's Office of Protective Services or their designee..

In addition to the reporting requirements of sections WIC 4023 and 4427.5, DSH and DDS staff are required to report specific incidents listed in WIC 15630(b)(1)E (i-iii) to OPS and outside law enforcement. Also, the departments have mutually agreed with OLES to report other incidents outlined in this guide, even if they do not meet specific statutory requirements. Some incidents that are reportable pursuant to the OLES Facility Reporting Guidelines may not specifically be listed in the WIC, however, the departments must also make timely notifications to Office of Protective Services (OPS) for all incidents listed in the OLES Facility Reporting Guidelines.

## Discovery

To ensure thorough and effective timeliness evaluations, the "Discovered by" field in the OLES Notification Template should identify the first DDS or DSH employee who became aware of the incident. While family members, Patients' Rights advocates, vendors, or contractors may have initially reported the incident, their involvement should be documented in the narrative section. However, for OLES reporting purposes, only DDS or DSH employees must be listed in the "Discovered by" field. Please refer to the timeliness requirements outlined under Priority 1 and Priority 2 reporting below for the applicable timeframes.

## **OLES Incident Classifications and Reporting Requirements**

The DSH and the DDS must notify OLES of any incident identified in Welfare & Institutions Code Sections 4023 **and** 4427.5, regardless that the two sections are differentiated between DSH and DDS in the statute. OLES categorizes reportable incidents into two classifications: Priority 1 and Priority 2, as described below. For purposes of this document, DSH patients and DDS residents will be referred to as “patient(s).”

## Priority 1 Reporting Procedure

Priority 1 incidents must be reported via:

1. A phone call to the OLES AOD Hotline no later than two hours following the date and time the incident was reported to OPS **AND**,
2. A fully completed OLES Notification Template describing the incident must be emailed to OLES within 24 hours of the date and time the incident was reported to OPS.

If unable to reach the OLES AOD, leave a voicemail with the time and date of the call attempt and the details of the Priority 1 report. Provide the best phone number for the AOD to return the call. If the AOD does not return the call within 30 minutes, email OLES Director, Christine Allen, [Christine.Allen@chhs.ca.gov](mailto:Christine.Allen@chhs.ca.gov) to report the AOD was not able to be reached. Include in the email, the date and time of the call attempt and the details of the Priority I report.

### OLES Contact Information

- OLES 24-Hour AOD Hotline: (916) 651-7074
- OLES Email: oles@chhs.ca.gov
- OLES Confidential Fax: (916) 654-9831

PRIORITY 1 INCIDENT TYPES	
1.	<b>Abuse - Physical</b> - Any report of physical abuse of a patient implicating staff.
2.	<b>Assault with a Deadly Weapon by a Non-Patient</b> - Any assault with a deadly weapon (ADW) against a patient by a non-patient. A non-patient is any person who is not a patient or resident living in the DSH or DDS facilities. This can be a staff member, hospital police officer, peace officer, visitor, custodian or contracted employee.
3.	<b>Broken Bone (Unknown)</b> - A broken bone of a patient when the cause of the break is undetermined and was not witnessed by staff.
4.	<b>Deadly Force</b> - Any use of deadly force by staff on patient, including any intentional or unintentional strike to the head/neck.
5.	<b>Death</b> - Any death of a patient, including a patient that is officially declared brain dead by a physician or other authorized medical professional, or a death that occurs up to 30 days from patient discharge from DSH/DDS facility.
6.	<b>Genital Injury (Unknown)</b> - An injury to the genitals of a patient when the cause of injury is undetermined and was not witnessed by staff.
7.	<b>Sexual Assault: Priority 1</b> – Any allegation of sexual assault of a patient by staff or unidentified person(s).

## Priority 2 Reporting Procedure

Priority 2 incidents must be reported through submission of a fully completed notification template, emailed to OLES within 24 hours of the date and time the incident was reported to OPS.

- If at any time during an investigation into a priority 2 incident, it is determined a priority 1 incident may have also occurred, the newly identified priority 1 incident must be reported in line with the priority 1 procedures and timelines.
- For incidents of known origin, the name and classification of the staff member who witnessed the incident or made the medical determination for the cause must be provided in the summary section of the template.

PRIORITY 2 INCIDENT TYPES	
1.	<p><b>Absent Without Leave (AWOL)</b> - Reportable when law enforcement is involved. When reporting an AWOL, the template must address the following questions in the summary section:</p> <ul style="list-style-type: none"> <li>• Was the patient forensic or non-forensic? This applies only to DSH, all DDS patients are forensic.</li> <li>• Did the patient remain inside the secure treatment area?</li> <li>• Include a description of the duration and locations of the patient while AWOL.</li> </ul> <p>Describe any treatment the patient needed beyond first aid.</p>
2.	<p><b>Assault with GBI</b> - A patient on patient assault with force likely to produce great bodily injury (GBI), including but not limited to, loss of consciousness, concussion, bone fracture, protracted loss of impairment of function of any bodily member or organ; a wound requiring suturing or serious disfigurement.</p>
3.	<p><b>Attempted Patient Suicide</b> – Requires treatment beyond first aid.</p>
4.	<p><b>Broken Bone (Known)</b> - A broken bone of a patient when the cause of the break is <u>known</u> by a doctor or witnessed by staff.</p>
5.	<p><b>Burn</b> - Any burn of a patient. This does not include sunburns or mouth burns caused by consuming hot food or liquid unless blistering occurs.</p>
6.	<p><b>Child Sexual Abuse Material</b> – Discovered in any facility.</p>
7.	<p><b>Contraband: Phones</b> – Unauthorized and contraband.</p>
8.	<p><b>Drugs</b> – Includes allegations of use, trafficking or smuggling by patients, staff or visitors. When reporting recovered drugs or patient use, a field presumptive positive or lab positive test is required.</p>
9.	<p><b>Genital Injury (Known)</b> - An injury to the genitals of a patient when the cause of injury is <u>known</u> by a doctor or witnessed by staff.</p>

10.	<p><b>Head/Neck Injury</b> - Any injury to the head or neck of a patient requiring treatment beyond first aid that is not caused by staff or law enforcement, regardless of whether the patient refuses treatment. This includes physical trauma resulting in an altered level of consciousness (ALOC) or loss of consciousness (LOC). Any tooth injury, including but not limited to, chipped, cracked, broken, loosened or displaced teeth that resulted from a forceful impact, regardless of treatment. Treatment beyond first aid includes the use of skin adhesive such as DERMABOND®, staples or sutures.</p> <p><b>Note:</b> For ALOC or LOC, a clinician's statement confirming the patient's condition based on the totality of the circumstances is required. Include clinician's name and title when reporting. A patient's statement is not sufficient.</p>
11.	<p><b>Neglect</b> - Any staff action or inaction that resulted in, or reasonably could have resulted in a patient death, or injury requiring treatment beyond first aid.</p>
12.	<p><b>Over-Familiarity</b> - Conduct between a staff member and patient that extends beyond authorized treatment or is contrary to the treatment plan and treatment success of the patient.</p>
13.	<p><b>Patient Arrest</b> - Any patient arrest by warrant or probable cause. The initial charges must be included.</p>
14.	<p><b>Peace Officer Misconduct</b> - Any allegations of peace officer misconduct, whether on or off-duty. This does not include routine traffic infractions outside of the peace officer's official duties. Allegations against a peace officer that include a priority one incident type must be reported in accordance with the priority one reporting requirements.</p>
15.	<p><b>Pregnancy</b> - A patient pregnancy.</p>
16.	<p><b>Riot</b> – For the purposes of reporting to OLES, a riot disrupts normal operations; has the potential of expansion and requires a response outside normal resources.</p>
17.	<p><b>Sexual Assault: Priority 2</b> - Any allegation of sexual assault between two patients.</p>
18.	<p><b>Use of Force</b> - Any OPS staff member within DSH or DDS that uses any physical force, or physical technique, or an approved weapon to overcome resistance, gain control/compliance, or effect an arrest of a patient, regardless of whether an allegation of excessive force or injury exists. Exceptions to this may include compliant handcuffing or searches of a patient if no resistance is offered by the patient to the officer or officers.</p> <p><b>Note:</b> When reporting use of force, facilities should list in the summary section of the template, to the best of their knowledge, at the time of template submission, all individuals involved in the incident, including the full name and classification of witnesses both sworn and non-sworn.</p>
19.	<p><b>Significant Interest</b> - An incident of significant interest to the public, including but not limited to commission of serious crimes by patient(s) or staff, or any incident which may potentially draw media attention.</p>

## Priority 1 Pocket Card

PRIORITY 1 INCIDENT TYPES	
1.	<b>Abuse - Physical</b> - Staff or LEO on a patient
2.	<b>ADW by a Non-Patient</b> – Assault with a deadly weapon, PC 245 of a patient by a non-patient
3.	<b>Broken Bone (Unknown)</b> - Any patient broken bone - cause undetermined
4.	<b>Deadly Force</b> - Any use of deadly force by staff, including any intentional or unintentional strike to the head/neck
5.	<b>Death</b> - Any patient death
6.	<b>Genital Injury (Unknown)</b> - Any patient genital injury - cause undetermined
7.	<b>Sexual Assault: Priority 1</b> - Any allegation of sexual assault of a patient against staff or unidentified person(s)

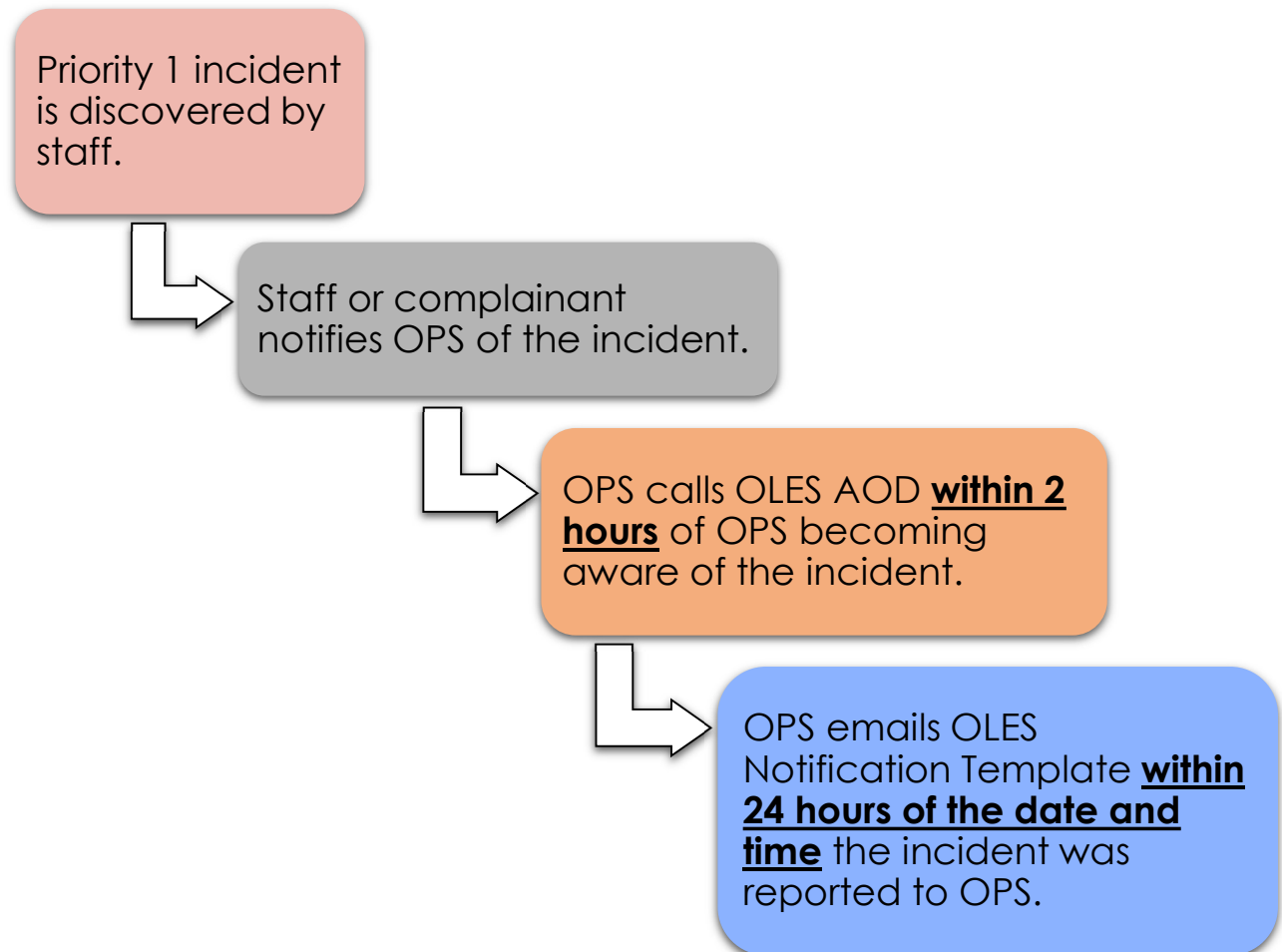
**Report to OLES within 2 hours of OPS discovery of the incident, followed by template within 24 hours**

## Priority 2 Pocket Card

PRIORITY 2 INCIDENT TYPES	
1.	<b>Absent Without Leave (AWOL)</b> – When law enforcement is involved
2.	<b>Assault with GBI</b> - Any patient-on-patient assault with force likely to produce GBI – LOC, concussion, bone fracture, loss of impairment of function of any bodily member or organ, wound requiring suturing, or serious disfigurement
3.	<b>Attempted Patient Suicide</b> – Requires treatment beyond first aid
4.	<b>Broken Bone (Known)</b> – When known or witnessed by staff
5.	<b>Burn</b> - Except sunburns or mouth burns unless blisters occur
6.	<b>Child Sexual Abuse Material</b> – Discovered in any facility
7.	<b>Contraband - Phones</b> – Unauthorized and contraband
8.	<b>Drugs</b> – Allegations of use, trafficking or smuggling. Positive test is required for use or recovered drugs
9.	<b>Genital Injury (Known)</b> – Cause is known or witnessed by staff
10.	<b>Head/Neck Injury</b> – Injuries to the head or neck requiring treatment beyond first aid. Treatment beyond first aid includes physical trauma resulting in an altered level of consciousness or loss of consciousness, or the use of skin adhesive such as DERMABOND®, staples or sutures. All chipped, broken or loosened teeth, cause by trauma is reportable
11.	<b>Neglect</b> - Staff action/inaction resulting in patient death or injury requiring treatment beyond first aid
12.	<b>Over-Familiarity</b> - Conduct between staff and patient that extends beyond authorized treatment
13.	<b>Patient Arrest</b> - Any patient arrest
14.	<b>Peace Officer Misconduct</b> – Any allegations of peace officer misconduct, whether on or off-duty. Allegations against a peace officer that include a Priority 1 incident type must follow Priority 1 reporting requirements
15.	<b>Pregnancy</b> - Any patient pregnancy
16.	<b>Riot</b> - A riot that disrupts normal operations, has the potential of expansion and requires a response outside normal resources
17.	<b>Sexual Assault: Priority 2</b> - Any allegation of sexual assault between patients
18.	<b>Use of Force</b> - Any OPS staff member within DSH or DDS who uses any physical force or physical technique on a patient
19.	<b>Significant Interest</b> - An incident of significant interest to the public
<b>TEMPLATE – Emailed to OLES within 24 hours of the time and date of OPS discovery of the incident.</b>	

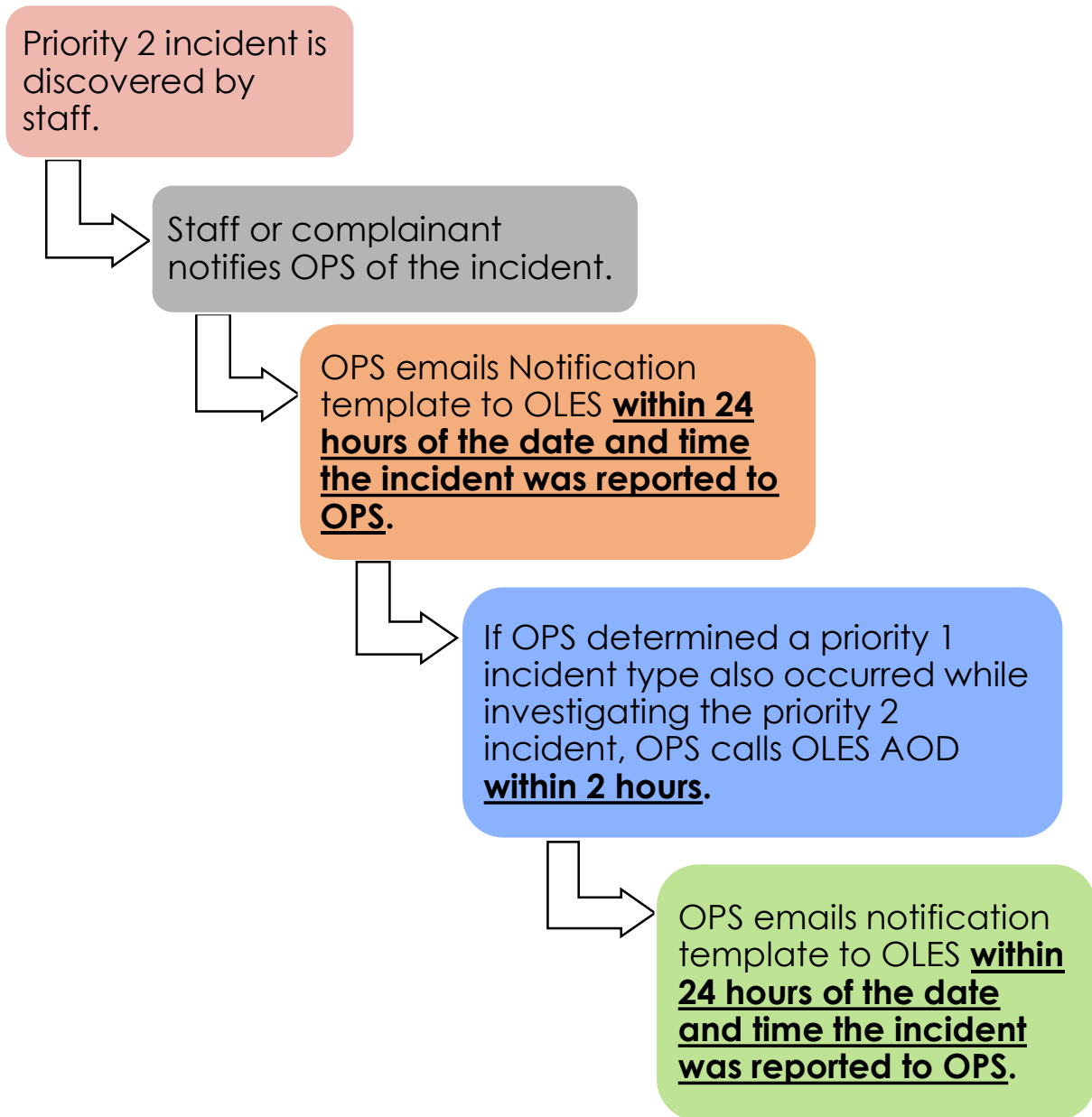
## Priority 1 Notification Process

When a Priority 1 incident type is reported to the OPS, the following process should occur:



## Priority 2 Notification Process

When a Priority 2 incident is reported to the OPS, the following process should occur:



## Definitions

The definitions in this guide are specific to the interactions between the Department of Developmental Services (DDS), the Department of State Hospitals (DSH) and the Office of Law Enforcement Support (OLES).

<p><b>Absent Without Leave – AWOL</b></p>	<p>AWOL – A patient is AWOL when they have left an assigned area, or the supervision of assigned staff without staff permission, resulting in police intervention to recover the patient.</p> <p><i>For OLES reporting purposes, it is not necessary to report a patient who is out of their assigned area (“out of bounds”), when the patient responds to staff verbal commands to return to their assigned area without need for police intervention.</i></p> <p>Escapes – For patients residing in a secure treatment area, escape occurs when the chain of custody is broken, and the individual is outside the secure treatment area.</p> <p>Walk-away – Occurs when a patient leaves the hospital grounds without permission.</p>
<p><b>Assault with a Deadly Weapon – ADW</b></p>	<p>Assault with a deadly Weapon (ADW) or force likely to produce great bodily injury (GBI), as defined in Section 245 of the California Penal Code (see CA Code Section Reference).</p>
<p><b>Broken Bone</b></p>	<p>Any broken bone of a patient.</p>
<p><b>Burn</b></p>	<p>Any burn of a patient. This does not include sunburns and mouth burns caused by consuming hot food or liquid unless blistering occurs.</p>
<p><b>Complainant</b></p>	<p>The first person that received the complaint by either witnessing or hearing about the incident. The complainant may include, but is not limited to, a family member of the patient, facility staff or any other mandated reporters as defined in Welfare and Institutions Code 15630. If the patient directly reported the incident to OPS, please list the patient as the complainant.</p>
<p><b>Contraband</b></p>	<p>Contraband as defined in CCR, Title 9, Section 4350.</p>
<p><b>Daily Log</b></p>	<p>A daily log consists of the following: a DSH Daily Activity Log, DSH Daily OLES Reportable Incidents Log, DDS-Canyon Springs Daily Personnel Log and DDS-Porterville's Daily Disposition Report or similar facility log.</p>
<p><b>Discovery Date and Time</b></p>	<p>The date and time the incident is discovered by any DSH or DDS staff.</p>
<p><b>Deadly Force</b></p>	<p>Deadly Force is defined as any force used, which is likely to cause death or serious bodily injury. This includes any intentional or unintentional strike to the head/neck.</p>

<b>Expected Death</b>	The patient's death was anticipated due to a known illness or apparent injury in which death was anticipated.
<b>Facility</b>	A facility is defined as any location under the control of the Department of State Hospitals or Department of Developmental Services.
<b>First Aid</b>	<p>The OLES considers first aid, to be the same as Occupation Safety and Health Administration (OSHA) definition: "First aid refers to medical attention that is usually administered immediately after the injury occurs and at the location where it occurred. It often consists of a one-time, short-term treatment and requires little technology or training to administer. First aid can include cleaning minor cuts, scrapes, or scratches; treating a minor burn; applying bandages and dressings or <i>Steri-Strip™</i>; the use of non-prescription medicine; draining blisters; removing debris from the eyes; massage; and drinking fluids to relieve heat stress."</p> <p><i>For OLES reporting purposes, treatment beyond first aid includes the use of skin adhesive such as DERMABOND®, sutures, or staples. Physical trauma resulting in an Altered Level of Consciousness (ALOC), or Loss of Consciousness (LOC) requires treatment beyond first aid.</i></p>
<b>Genital Injury</b>	An injury to the sexual organ, anus, groin, or buttocks of any person, and breast of a female.
<b>Great Bodily Injury (GBI)</b>	Great bodily injury means a significant or substantial physical injury, including but not limited to, loss of consciousness; concussion; bone fracture; protracted loss of impairment of function of any bodily member or organ; a wound requiring suturing; or serious disfigurement.
<b>Head/Neck Injury</b>	<p>Any injury to the head or neck of a patient which required treatment beyond first aid that is not caused by staff or law enforcement. This includes physical trauma resulting in an altered level of consciousness (ALOC) or loss of consciousness (LOC). Any tooth injuries, including but not limited to, chipped, cracked, broken, loosened or displaced tooth that resulted from forceful impact, regardless of treatment. Treatment beyond first aid includes the use of skin adhesive such as DERMABOND®, sutures or staples.</p> <p><i>For OLES reporting purposes, head or neck injuries that did not result in the patient receiving treatment beyond first aid are not reportable (e.g., a medical evaluation of a patient's head or neck at an outside hospital which did not require treatment beyond first aid). Transportation alone, to an outside facility, is not considered treatment beyond first aid.</i></p>

<b>Incident Date and Time</b>	The known or best estimate of the date and time of the incident, based on initial report.
<b>Intimate Part</b>	Intimate part means the sexual organ, anus, groin, or buttocks of any person, and breasts of a female.
<b>Known</b>	To have knowledge or clear and certain perception, as fact.  <i>For OLES reporting purposes, an injury of "Known" origin would be an incident witnessed by a staff member or law enforcement personnel. An injury would also be considered "known" if the cause of the injury was determined by a medical professional. The name and classification of the person who witnessed the incident or made the medical determination must be provided in the summary section of the template.</i>
<b>Law Enforcement Officer (LEO) Misconduct</b>	Any allegation of LEO (i.e., peace officer, hospital police officer) misconduct whether on-duty or off-duty.  <i>For OLES reporting purposes, this does not include moving traffic violations (e.g., speeding or running a red light or a stop sign).</i>
<b>Local Law Enforcement Agency</b> (see CA Code Reference)	Local law enforcement agency is defined as the agency (i.e., a police department or sheriff's office) having jurisdiction surrounding the area where the state hospital, developmental center or STAR facility is located as defined in 15610.45 Welfare and Institutions Code.  <i>For OLES reporting purposes, OPS is not considered a local (or outside) law enforcement agency, as they are assigned to the hospital/DDS facility.</i>
<b>Neglect</b>	Any staff action or inaction that resulted in, or reasonably could have resulted in a patient's death or injury requiring treatment beyond first aid.  <i>For OLES reporting purposes, if there was no patient death or injury requiring treatment beyond first aid, the report must include a description of the potential for injury or death because of the staff neglect.</i>
<b>Non-Patient</b>	A non-patient is any person who is not a patient or resident living in the DSH or DDS facilities. This can be a staff member, hospital police officer, peace officer, visitor, custodian, or contracted employee.

<b>OPS Use of Force</b>	<p>Any OPS staff member within DSH or DDS that uses any physical force, or physical technique, or an approved weapon to overcome resistance, gain control/compliance, or effect an arrest of a patient shall be considered a reportable use of force incident regardless of whether an allegation of excessive force or injury exists. Exceptions to this may include compliant handcuffing or searches of a patient if no resistance is offered by patient to the officer or officers.</p> <p>A use of force report documents an operational incident and does not necessarily indicate misconduct or excessive force by an officer.</p>
<b>Over-Familiarity</b>	<p>Conduct between a staff member and patient that extends beyond authorized treatment or is contrary to the treatment plan and treatment success of the patient. This may include, but is not limited to, providing special treatment, gifts, or favors not offered all patients, discussions of sex or flirtation behavior, or any other activity intended to instill intimacy or emotional attachment. Over-familiarity brings the likelihood for patient harm, negative impact on the patients' treatment plan and disruption to facility operations. These types of illicit relationships have the real potential to evolve into scenarios that include sexual activity, sexual abuse, trafficking of contraband and physical harm at the expense of patient care.</p>
<b>Patient</b>	<p>In this manual, "patient" is a general term, which includes DDS residents and DSH patients.</p>
<b>Peace Officer</b> (see CA Code Section Reference)	<p>Peace Officer (<i>i.e., chief, deputy chief, and supervising investigators, and investigators of the Office of Protective Services</i>) as defined in section 830.3(v) of the California Penal Code.</p> <p>Peace Officer (<i>DSH and DDS officers</i>) are also defined in section 830.38(a) of the California Penal Code.</p>
<b>Phones</b>	<p>Contraband phones discovered in patient areas and unauthorized phones discovered under employee control.</p>
<b>Physical Abuse (ADW, GBI, and Sexual Assault)</b>	<p>Any staff including law enforcement (peace officer/hospital police officer), who is alleged to have physically abused a patient. "Physical abuse" includes assault, battery, assault with a deadly weapon or force likely to produce great bodily injury, unreasonable physical constraint, sexual assault, or use of physical or chemical restraint or psychotropic medication for punishment, for a period beyond physician's orders, or for any purpose not authorized by the physician and surgeon. Physical abuse is defined in 15610.63 of the California Welfare and Institutions' Code (see CA Code Section Reference).</p>

<b>Pregnancy</b>	A patient pregnancy that occurred at a facility.
<b>Reported to OLES Date and Time</b>	The date and time the incident is reported to OLES.
<b>Reported to OPS Date and Time</b>	The date and time the incident is reported to OPS.
<b>Riot</b>	Riot is defined in section 404 of the California Penal Code.  <i>For the purposes of reporting to the OLES, a riot disrupts normal operations; has the potential of expansion and requires a response outside normal resources.</i>
<b>Serious Crimes</b>	Serious crimes consist of felonies as enumerated in California Penal Codes 1192.7(c) and 1192.8(a) (e.g., murder or voluntary manslaughter, rape; mayhem, and so on).
<b>Serious Bodily Injury</b>	A serious impairment of physical condition, including, but not limited to, loss of consciousness; concussion; bone fracture; protracted loss or impairment of the function of any bodily member or organ; a wound requiring suturing; and serious disfigurement.  Serious bodily injury is defined in section 243(f)(4) of the California Penal Code (see CA Code Section Reference).
<b>Sexual Assault / Battery</b>	Sexual assault as defined in Welfare and Institutions Code section 15610.63 (see CA Code Section Reference).  <i>For purposes of reporting to the OLES, all alleged sexual assaults are to be reported, including instances when the patient recants.</i>
<b>Significant Interest</b>	An incident of significant interest to the public, including but not limited to commission of serious crimes by patient(s) or staff, or any incident which may potentially draw media attention.
<b>Staff</b>	A staff member is defined as a person hired by and currently employed by the California Health and Human Services, Department of Developmental Services or Department of State Hospitals, who are responsible for patients.

<b>Suicide Attempt</b>	<p>A suicide attempt is defined as an act in which a patient intentionally inflicts self-harm or ingests foreign objects or potentially toxic substances with the intent to die or with a potentially lethal outcome.</p> <p><i>For OLES reporting purposes, a suicide attempt that did not result in the patient receiving treatment beyond first aid are not reportable (e.g., a medical evaluation of a patient at an outside hospital which did not require treatment beyond first aid). Transportation alone, to an outside facility, is not considered treatment beyond first aid.</i></p>
<b>Template</b>	<p>A template refers to the official OLES Notification Template used by facilities to report Priority 1 and Priority 2 incidents. This template is completed to provide pertinent information on what occurred during the alleged incident.</p> <p><i>OLES Notification templates which have been modified or templates which have been created by facility staff will not be accepted by OLES.</i></p>
<b>Touches</b>	<p>Touches (as used in <b>Sexual Assault/Battery</b>) means physical contact with the skin of another person whether accomplished directly or through the clothing of the person committing the offense.</p>
<b>Undetermined</b>	<p>Undetermined (as used when reporting <b>Genital Injury or Broken Bone</b>) means the mechanism of injury or break or the events surrounding the injury or break are not definitively known.</p>
<b>Unexpected (or Suspicious) Death</b>	<p>Unexpected death means facility staff did not anticipate the patient's death as there were no known terminal illness, injuries, or the patient's death occurred in a manner which generates suspicion.</p>

## California Statute Section References

The California Welfare and Institutions Code (W&I) and Penal Code (PC) sections in this guide pertain to reporting requirements under W&I 4023 and W&I 4427.5. **Language pertaining to sentencing guidelines, and, seldom used sections in reporting to OLES have been omitted for brevity.** Law enforcement personnel should refer to the most recent California Codes, before taking enforcement actions, as laws are subject to change.

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### Great Bodily Injury (GBI)

Great bodily injury (GBI) is defined in section 12022.7 of the California Penal Code as follows:

- (a) Any person who personally inflicts great bodily injury on any person other than an accomplice in the commission of a felony or attempted felony shall be punished by an additional and consecutive term of imprisonment in the state prison for three years.
- (b) Any person who personally inflicts great bodily injury on any person other than an accomplice in the commission of a felony or attempted felony which causes the victim to become comatose due to brain injury or suffer paralysis of a permanent nature shall be punished by an additional and consecutive term of imprisonment in the state prison for five years. As used in this subdivision, "paralysis" means a major or complete loss of motor function resulting from injury to the nervous system or to a muscular mechanism.
- (c) Any person who personally inflicts great bodily injury on a person who is 70 years of age or older, other than an accomplice, in the commission of a felony or attempted felony shall be punished by an additional and consecutive term of imprisonment in the state prison for five years.
- (d) Any person who personally inflicts great bodily injury on a child under the age of five years in the commission of a felony or attempted felony shall be punished by an additional and consecutive term of imprisonment in the state prison for four, five, or six years.
- (e) Any person who personally inflicts great bodily injury under circumstances involving domestic violence in the commission of a felony shall be punished by an additional and consecutive term of imprisonment in the state prison for three, four, or five years. As used in this subdivision, "domestic violence" has the meaning provided in subdivision (b) of Section 13700.
- (f) As used in the section, "great bodily injury" means a significant or substantial physical injury.
- (g) This section shall not apply to murder or manslaughter or violation of Section 451 or 452. Subdivisions (a), (b), (c), and (d) shall not apply if infliction of great bodily injury is an element of the offense.
- (h) The court shall impose the additional terms of imprisonment under either subdivision (a), (b), (c), or (d), but may not impose more than one of those terms for the same offense.

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**Local Law Enforcement Agency (Outside Law Enforcement Agency)**

Local Law Enforcement Agency is defined in section 15610.45 of the California Welfare and Institutions Code as follows:

Local law enforcement agency means a city police or county sheriff's department, or a county probation department, except persons who do not work directly with elders or dependent adults as part of their official duties, including members of support staff and maintenance staff.

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**Peace Officer**

Peace Officer is defined in section 830.3(v) of the California Penal Code, as follows:

The Chief, Deputy Chief, supervising investigators, and investigators of the Office of Protective Services of the State Department of Developmental Services, the Office of Protective Services of the State Department of State Hospitals, and the Office of Law Enforcement Support of the California Health and Human Services Agency, provided that the primary duty of each of those persons shall be the enforcement of the law relating to the duties of his or her department or office.

Peace Officer is also defined in section 830.38(a) of the California Penal Code, as follows:

The officers of a state hospital under the jurisdiction of the state Department of State Hospitals or the State Department of Developmental Services appointed pursuant to Section 4313 or 4493 of the Welfare and Institutions Code, are peace officers whose authority extends to any place in the state for the purpose of performing their primary duty or when making an arrest pursuant to Section 836 as to any public offense with respect to which there is immediate danger to person or property, or of the escape of the perpetrator of that offense, or pursuant to section 8537 or 8598 of the Government Code provided that the primary duty of the peace officers shall be the enforcement of the law as set forth in Sections 4311, 4313, 4491, and 4493 of the Welfare and Institutions Code. Those peace officers may carry firearms only if authorized and under terms and conditions specified by their employing agency.

*For clarity, the Department of State Hospitals refers to their Peace Officers as "Hospital Police officers" or "HPO's". The Department of Development Services refers to their Peace Officers as "Police Officer 1's" or "PO1's".*

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**Physical Abuse (Statute Includes ADW, GBI, and Sexual Assault)**

Physical abuse is defined in 15610.63 of the California Welfare and Institutions Code, as follows:

- (a) **Assault**, as defined in Section 240 of the Penal Code.
- (b) **Battery**, as defined in Section 242 of the Penal Code.

A battery is any willful and unlawful use of force or violence upon the person of another.

- (c) **Assault with a deadly weapon or force likely to produce great bodily injury**, as defined in Section of the Penal Code.

*Penal Code Section 245 provides in pertinent part:*

*(a)(1) Any person who commits an assault upon the person of another with deadly weapon or instrument other than a firearm...[omitted].*

*(2) Any person who commits an assault upon the person of another with a firearm...[omitted].*

*(3) Any person who commits an assault upon the person of another with a machinegun, as defined in Section 16880, or an assault weapon, as defined in Section 30510 or 30515, or a .50 BMG rifle, as defined in Section 30530...[omitted].*

*(4) Any person who commits an assault upon the person of another by any means of force likely to produce great bodily injury...[omitted].*

*(b) Any person who commits an assault upon the person of another with a semiautomatic firearm...[omitted].*

*(c) Any person who commits an assault with a deadly weapon or instrument, other than a firearm, or by any means likely to produce great bodily injury upon the person of a peace officer or firefighter, and who knows or reasonably should know that the victim is a peace officer or firefighter engaged in the performance of his or her duties, when the peace officer or firefighter is engaged in the performance of his or her duties...[omitted].*

*(d) (1) Any person who commits an assault with a firearm upon the person of a peace officer or firefighter, and who knows or reasonably should know that the victim is a peace officer or firefighter engaged in the performance of his or her duties, when the peace officer or firefighter is engaged in the performance of his or her duties...[omitted].*

*(2) Any person who commits an assault upon the person of a peace officer or firefighter with a semiautomatic firearm and who knows or reasonably should know that the victim is a peace officer or firefighter engaged in the performance of his or her duties, when the peace officer or firefighter is engaged in the performance of his or her duties...[omitted].*

*(3) Any person who commits an assault with a machinegun, as defined in Section 16880, or an assault weapon, as defined in Section 30510 or 30515, or a .50 BMG rifle, as defined in Section 30530, upon the person of a peace officer or firefighter, and who knows or reasonably should know that the victim is a peace officer or firefighter engaged in the performance of his or her duties...[omitted].*

*(e) [omitted].*

*(f) As used in this section, "**peace officer**" refers to any person designated as a peace officer in Chapter 4.5 (commencing with Section 830) of Title 3 of Part 2.*

- (d) **Unreasonable physical constraint, or prolonged or continual deprivation of food or water.**

- (e) **Sexual assault, that means any of the following:**

(1) **Sexual battery**, as defined in Section 243.4 of the Penal Code.

(a) Any person who touches an intimate part of another person while that person is unlawfully restrained by the accused or an accomplice, and if the touching is against the will of the person touched and is for the purpose of sexual arousal, sexual gratification, or sexual abuse, is guilty of sexual battery...[omitted].

(b) Any person who touches an intimate part of another person who is institutionalized for medical treatment and who is seriously disabled or medically incapacitated, if the touching is against the will of the person touched, and if the touching is for the purpose of sexual arousal, sexual gratification, or sexual abuse, is guilty of sexual battery...[omitted].

(c) Any person who touches an intimate part of another person for the purpose of sexual arousal, sexual gratification, or sexual abuse, and the victim is at the time unconscious of the nature of the act because the perpetrator fraudulently represented that the touching served a professional purpose, is guilty of sexual battery...[omitted].

(d) Any person who, for the purpose of sexual arousal, sexual gratification, or sexual abuse, causes another, against that person's will while that person is unlawfully restrained either by the accused or an accomplice, or is institutionalized for medical treatment and is seriously disabled or medically incapacitated, to masturbate or touch an intimate part of either of those persons or a third person, is guilty of sexual battery...[omitted].

(e) (1) Any person who touches an intimate part of another person, if the touching is against the will of the person touched, and is for the specific purpose of sexual arousal, sexual gratification, or sexual abuse, is guilty of misdemeanor sexual battery...[omitted].

(2) As used in this subdivision, "**touches**" means physical contact with another person, whether accomplished directly, through the clothing of the person committing the offense, or through the clothing of the victim.

(f) As used in subdivisions (a), (b), (c), and (d), "touches" means physical contact with the skin of another person whether accomplished directly or through the clothing of the person committing the offense.

(g) As used in this section, the following terms have the following meanings:

(1) "**Intimate part**" means the sexual organ, anus, groin, or buttocks of any person, and the breast of a female.

(2) "**Sexual battery**" does not include the crimes defined in Section 261 or 289.

(3) "**Seriously disabled**" means a person with severe physical or sensory disabilities.

(4) "**Medically incapacitated**" means a person who is incapacitated as a result of prescribed sedatives, anesthesia, or other medication.

(5) "**Institutionalized**" means a person who is located voluntarily or involuntarily in a hospital, medical treatment facility, nursing home, acute care facility, or mental hospital.

(6) "**Minor**" means a person under 18 years of age.

(h) [omitted].

(i) [omitted].

(j) [omitted].

(2) **Rape**, as defined in Section 261 of the Penal Code.

(a) Rape is an act of sexual intercourse accomplished with a person not the spouse of the perpetrator, under any of the following circumstances:

(1) Where a person is incapable, because of a mental disorder or developmental or physical disability, of giving legal consent, and this is known or reasonably should be known to the person committing the act...[omitted].

(2) Where it is accomplished against a person's will by means of force, violence, duress, menace, or fear of immediate and unlawful bodily injury on the person or another.

(3) Where a person is prevented from resisting by any intoxicating or anesthetic substance, or any controlled substance, and this condition was known, or reasonably should have been known by the accused.

(4) Where a person is at the time unconscious of the nature of the act, and this is known to the accused. As used in this paragraph, "**unconscious of the nature of the act**" means incapable of resisting because the victim meets any one of the following conditions:

(A) Was unconscious or asleep.

(B) Was not aware, knowing, perceiving, or cognizant that the act occurred.

(C) Was not aware, knowing, perceiving, or cognizant of the essential characteristics of the act due to the perpetrator's fraud in fact.

(D) Was not aware, knowing, perceiving, or cognizant of the essential characteristics of the act due to the perpetrator's fraudulent representation that the sexual penetration served a professional purpose when it served no professional purpose.

(5) Where a person submits under the belief that the person committing the act is someone known to the victim other than the accused, and this belief is induced by any artifice, pretense, or concealment practiced by the accused, with intent to induce the belief.

(6) Where the act is accomplished against the victim's will by threatening to retaliate in the future against the victim or any

other person, and there is a reasonable possibility that the perpetrator will execute the threat. As used in this paragraph, "**threatening to retaliate**" means a threat to kidnap or falsely imprison, or to inflict extreme pain, serious bodily injury, or death.

(7) Where the act is accomplished against the victim's will by threatening to use the authority of a public official to incarcerate, arrest, or deport the victim or another, and the victim has a reasonable belief that the perpetrator is a public official. As used in this paragraph, "**public official**" means a person employed by a governmental agency who has the authority, as part of that position, to incarcerate, arrest, or deport another. The perpetrator does not actually have to be a public official.

(b) As used in this section, "**duress**" means a direct or implied threat of force, violence, danger, or retribution sufficient to coerce a reasonable person of ordinary susceptibilities to perform an act which otherwise would not have been performed or performed or acquiesce in an act to which one otherwise would not have submitted. The total circumstances, including the age of the victim, and his or her relationship to the defendant, are factors to consider in appraising the existence of duress.

(c) As used in this section, "**menace**" means any threat, declaration, or act which shows an intention to inflict an injury upon another.

(3) **Rape in concert**, as described in Section 264.1 of the Penal Code [omitted].

(4) **Spousal rape**, as described in Section 262 of the Penal Code [omitted].

(5) **Incest**, as defined in Section 285 of the Penal Code [omitted].

(6) **Sodomy**, as defined in Section 286 of the Penal Code.

(a) Sodomy is sexual conduct consisting of contact between the penis of one person and the anus of another person. Any sexual penetration, however slight, is sufficient to complete the crime of sodomy.

(b) (1) Except as provided in Section 288, any person who participates in an act of sodomy with another person who is under 18 years of age...[omitted].

(2) Except as provided in Section 288, any person over 21 years of age who participates in an act of sodomy with another person who is under 16 years of age ...[omitted].

(c) (1) Any person who participates in an act of sodomy with another person who is under 14 years of age and more than 10 years younger than he or she...[omitted].

(2) (A) Any person who commits an act of sodomy when the act is accomplished against the victim's will by means of force, violence, duress, menace, or fear of immediate and unlawful bodily injury on the victim or another person...[omitted].

(B) Any person who commits an act of sodomy with another person who is under 14 years of age when the act is accomplished against the victim's will by means of force, violence, duress, menace, or fear of immediate and unlawful bodily injury on the victim or another person...[omitted].

(C) Any person who commits an act of sodomy with another person who is a minor 14 years of age or older when the act is accomplished against the victim's will by means of force, violence, duress, menace, or fear of immediate and unlawful bodily injury on the victim or another person...[omitted].

(D) This paragraph does not preclude prosecution under Section 269, Section 288.7, or any other provision of law.

(3) Any person who commits an act of sodomy where the act is accomplished against the victim's will by threatening to retaliate in the future against the victim or any other person, and there is a reasonable possibility that the perpetrator will execute the threat...[omitted].

(d) (1) Any person who, while voluntarily acting in concert with another person, either personally or aiding and abetting that other person, commits an act of sodomy when the act is accomplished against the victim's will by means of force or fear of immediate and unlawful bodily injury on the victim or another person or where the act is accomplished against the victim's will by threatening to retaliate in the future against the victim or any other person, and there is a reasonable possibility that the perpetrator will execute the threat...[omitted].

(2) Any person who, while voluntarily acting in concert with another person, either personally or aiding and abetting that other person, commits an act of sodomy upon a victim who is under 14 years of age, when the act is accomplished against the victim's will by means of force or fear of immediate and unlawful bodily injury on the victim or another person...[omitted].

(3) Any person who, while voluntarily acting in concert with another person, either personally or aiding and abetting that other person, commits an act of sodomy upon a victim who is a minor 14 years of age or older, when the act is accomplished against the victim's will by means of force or fear of immediate and unlawful bodily injury on the victim or another person...[omitted].

(4) This subdivision does not preclude prosecution under Section 269, Section 288.7, or any other provision of law.

(e) Any person who participates in an act of sodomy with any person of any age while confined in any state prison, as defined in Section 4504, or in any local detention facility, as defined in Section 6031.4...[omitted].

(f) Any person who commits an act of sodomy, and the victim is at the time unconscious of the nature of the act and this is known to the person committing the act...[omitted]. As used in this

subdivision, "**unconscious of the nature of the act**" means incapable of resisting because the victim meets one of the following conditions:

(1) Was unconscious or asleep.

(2) Was not aware, knowing, perceiving, or cognizant that the act occurred.

(3) Was not aware, knowing, perceiving, or cognizant of the essential characteristics of the act due to the perpetrator's fraud in fact.

(4) Was not aware, knowing, perceiving, or cognizant of the essential characteristics of the act due to the perpetrator's fraudulent representation that the sexual penetration served a professional purpose when it served no professional purpose.

(g) Except as provided in subdivision (h), a person who commits an act of sodomy, and the victim is at the time incapable, because of a mental disorder or developmental or physical disability, of giving legal consent, and this is known or reasonably should be known to the person committing the act, shall be punished by imprisonment in the state prison for three, six, or eight years. Notwithstanding the existence of a conservatorship pursuant to the Lanterman-Petris-Short Act (Part 1 (commencing with Section 5000) of Division 5 of the Welfare and Institutions Code), the prosecuting attorney shall prove, as an element of the crime, that a mental disorder or developmental or physical disability rendered the alleged victim incapable of giving consent.

(h) Any person who commits an act of sodomy, and the victim is at the time incapable, because of a mental disorder or developmental or physical disability, of giving legal consent, and this is known or reasonably should be known to the person committing the act, and both the defendant and the victim are at the time confined in a state hospital for the care and treatment of the mentally disordered or in any other public or private facility for the care and treatment of the mentally disordered approved by a county mental health director...[omitted]. Notwithstanding the existence of a conservatorship pursuant to the Lanterman-Petris-Short Act (Part 1 (commencing with Section 5000) of Division 5 of the Welfare and Institutions Code), the prosecuting attorney shall prove, as an element of the crime, that a mental disorder or developmental or physical disability rendered the alleged victim incapable of giving legal consent.

(i) Any person who commits an act of sodomy, where the victim is prevented from resisting by an intoxicating or anesthetic substance, or any controlled substance, and this condition was known, or reasonably should have been known by the accused...[omitted].

(j) Any person who commits an act of sodomy, where the victim submits under the belief that the person committing the act is someone known to the victim other than the accused, and this belief is induced by any artifice, pretense, or concealment practiced by the accused, with intent to induce the belief...[omitted].

(k) Any person who commits an act of sodomy, where the act is accomplished against the victim's will by threatening to use the authority of a public official to incarcerate, arrest, or deport the victim or another, and the victim has a reasonable belief that the perpetrator is a public official...[omitted].

As used in this subdivision, "**public official**" means a person employed by a governmental agency who has the authority, as part of that position, to incarcerate, arrest, or deport another. The perpetrator does not actually have to be a public official.

(l) As used in subdivisions (c) and (d), "**threatening to retaliate**" means a threat to kidnap or falsely imprison, or inflict extreme pain, serious bodily injury, or death.

(m) [omitted].

(7) **Oral copulation**, as defined in Section 287 or former Section 288a of the Penal Code.

(a) Except as provided in subdivision (i), a person who willfully and lewdly commits any lewd or lascivious act, including any of the acts constituting other crimes provided for in Part 1, upon or with the body, or any part or member thereof, of a child who is under the age of 14 years, with the intent of arousing, appealing to, or gratifying the lust, passions, or sexual desires of that person or the child...[omitted].

(b) (1) A person who commits an act described in subdivision (a) by use of force, violence, duress, menace, or fear of immediate and unlawful bodily injury on the victim or another person...[omitted].

(2) A person who is a caretaker and commits an act described in subdivision (a) upon a dependent person by use of force, violence, duress, menace, or fear of immediate and unlawful bodily injury on the victim or another person, with the intent described in subdivision (a)...[omitted].

(c) (1) A person who commits an act described in subdivision (a) with the intent described in that subdivision, and the victim is a child of 14 or 15 years, and that person is at least 10 years older than the child...[omitted]. In determining whether the person is at least 10 years older than the child, the difference in age shall be measured from the birth date of the person to the birth date of the child.

(2) A person who is a caretaker and commits an act described in subdivision (a) upon a dependent person, with the intent described in subdivision (a)...[omitted].

(d) [omitted].

(e) (1) [omitted].

(2) [omitted].

(f) For purposes of paragraph (2) of subdivision (b) and paragraph (2) of subdivision (c), the following definitions apply:

(1) **"Caretaker"** means an owner, operator, administrator, employee, independent contractor, agent, or volunteer of any of the following public or private facilities when the facilities provide care for elder or dependent persons:

(A) Twenty-four hour health facilities, as defined in Sections 1250, 1250.2, and 1250.3 of the Health and Safety Code.

(B) Clinics.

(C) Home health agencies.

(D) Adult day health care centers.

(E) Secondary schools that serve dependent persons and postsecondary educational institutions that serve dependent persons or elders.

(F) Sheltered workshops.

(G) Camps.

(H) Community care facilities, as defined by Section 1402 of the Health and Safety Code, and residential care facilities for the elderly, as defined in Section 1569.2 of the Health and Safety Code.

(I) Respite care facilities.

(J) Foster homes.

(K) **Regional centers for persons with developmental disabilities.**

(L) A home health agency licensed in accordance with Chapter 8 (commencing with Section 1725) of Division 2 of the Health and Safety Code.

(M) An agency that supplies in-home supportive services.

(N) Board and care facilities.

(O) **Any other protective or public assistance agency that provides health services or social services to elder or dependent persons, including, but not limited to, in-home supportive services, as defined in Section 14005.14 of the Welfare and Institutions Code.**

(P) Private residences.

(2) "Board and care facilities" means licensed or unlicensed facilities that provide assistance with one or more of the following activities:

(A) Bathing.

(B) Dressing.

(C) Grooming.

(D) Medication storage.

(E) Medical dispensation.

(F) Money management.

(3) **"Dependent person"** means a person, regardless of whether the person lives independently, who has a physical or mental

impairment that substantially restricts his or her ability to carry out normal activities or to protect his or her rights, including, but not limited to, persons who have physical or developmental disabilities or whose physical or mental abilities have significantly diminished because of age. "Dependent person" includes a person who is admitted as an inpatient to a 24-hour health facility, as defined in Sections 1250, 1250.2, and 1250.3 of the Health and Safety Code.

(g) Paragraph (2) of subdivision (b) and paragraph (2) of subdivision (c) apply to the owners, operators, administrators, employees, independent contractors, agents, or volunteers working at these public or private facilities and only to the extent that the individuals personally commit, conspire, aid, abet, or facilitate any act prohibited by paragraph (2) of subdivision (b) and paragraph (2) of subdivision (c).

(h) [omitted].

(i) [omitted].

(2) [omitted].

(3) As used in this subdivision, "**bodily harm**" means any substantial physical injury resulting from the use of force that is more than the force necessary to commit the offense.

(8) **Sexual penetration**, as defined in Section 289 of the Penal Code.

(a) (1) (A) Any person who commits an act of sexual penetration when the act is accomplished against the victim's will by means of force, violence, duress, menace, or fear of immediate and unlawful bodily injury on the victim or another person...[omitted].

(B) Any person who commits an act of sexual penetration upon a child who is under 14 years of age, when the act is accomplished against the victim's will by means of force, violence, duress, menace, or fear of immediate and unlawful bodily injury on the victim or another person...[omitted].

(C) Any person who commits an act of sexual penetration upon a minor who is 14 years of age or older, when the act is accomplished against the victim's will by means of force, violence, duress, menace, or fear of immediate and unlawful bodily injury on the victim or another person...[omitted].

(D) This paragraph does not preclude prosecution under Section 269, Section 288.7, or any other provision of law.

(2) Any person who commits an act of sexual penetration when the act is accomplished against the victim's will by threatening to retaliate in the future against the victim or any other person, and there is a reasonable possibility that the perpetrator will execute the threat...[omitted].

(b) Except as provided in subdivision (c), any person who commits an act of sexual penetration, and the victim is at the time incapable, because of a mental disorder or developmental or physical disability, of giving legal consent, and this is known or reasonably should be known to the person committing the act or

causing the act to be committed, shall be punished by imprisonment in the state prison for three, six, or eight years. Notwithstanding the appointment of a conservator with respect to the victim pursuant to the provisions of the Lanterman-Petris-Short Act (Part 1 (commencing with Section 5000) of Division 5 of the Welfare and Institutions Code), the prosecuting attorney shall prove, as an element of the crime, that a mental disorder or developmental or physical disability rendered the alleged victim incapable of giving legal consent.

(c) Any person who commits an act of sexual penetration, and the victim is at the time incapable, because of a mental disorder or developmental or physical disability, of giving legal consent, and this is known or reasonably should be known to the person committing the act or causing the act to be committed and both the defendant and the victim are at the time confined in a state hospital for the care and treatment of the mentally disordered or in any other public or private facility for the care and treatment of the mentally disordered approved by a county mental health director, shall be punished by imprisonment in the state prison, or in a county jail for a period of not more than one year. Notwithstanding the existence of a conservatorship pursuant to the provisions of the Lanterman-Petris-Short Act (Part 1 (commencing with Section 5000) of Division 5 of the Welfare and Institutions Code), the prosecuting attorney shall prove, as an element of the crime, that a mental disorder or developmental or physical disability rendered the alleged victim incapable of giving legal consent.

(d) Any person who commits an act of sexual penetration, and the victim is at the time unconscious of the nature of the act and this is known to the person committing the act or causing the act to be committed...[omitted]. As used in this subdivision, **"unconscious of the nature of the act"** means incapable of resisting because the victim meets one of the following conditions:

- (1) Was unconscious or asleep.
- (2) Was not aware, knowing, perceiving, or cognizant that the act occurred.
- (3) Was not aware, knowing, perceiving, or cognizant of the essential characteristics of the act due to the perpetrator's fraud in fact.
- (4) Was not aware, knowing, perceiving, or cognizant of the essential characteristics of the act due to the perpetrator's fraudulent representation that the sexual penetration served a professional purpose when it served no professional purpose.

(e) Any person who commits an act of sexual penetration when the victim is prevented from resisting by any intoxicating or anesthetic substance, or any controlled substance, and this

condition was known, or reasonably should have been known by the accused...[omitted].

(f) Any person who commits an act of sexual penetration when the victim submits under the belief that the person committing the act or causing the act to be committed is someone known to the victim other than the accused, and this belief is induced by any artifice, pretense, or concealment practiced by the accused, with intent to induce the belief...[omitted].

(g) Any person who commits an act of sexual penetration when the act is accomplished against the victim's will by threatening to use the authority of a public official to incarcerate, arrest, or deport the victim or another, and the victim has a reasonable belief that the perpetrator is a public official... [omitted].

As used in this subdivision, "public official" means a person employed by a governmental agency who has the authority, as part of that position, to incarcerate, arrest, or deport another. The perpetrator does not actually have to be a public official.

(h) Except as provided in Section 288, any person who participates in an act of sexual penetration with another person who is under 18 years of age shall be punished by imprisonment... [omitted].

(i) Except as provided in Section 288, any person over 21 years of age who participates in an act of sexual penetration with another person who is under 16 years of age shall be guilty of a felony.

(j) Any person who participates in an act of sexual penetration with another person who is under 14 years of age and who is more than 10 years younger than he or she shall be punished... [omitted].

(k) As used in this section:

(1) "**Sexual penetration**" is the act of causing the penetration, however slight, of the genital or anal opening of any person or causing another person to so penetrate the defendant's or another person's genital or anal opening for the purpose of sexual arousal, gratification, or abuse by any foreign object, substance, instrument, or device, or by any unknown object.

(2) "**Foreign object, substance, instrument, or device**" shall include any part of the body, except a sexual organ.

(3) "**Unknown object**" shall include any foreign object, substance, instrument, or device, or any part of the body, including a penis, when it is not known whether penetration was by a penis or by a foreign object, substance, instrument, or device, or by any other part of the body.

(l) As used in subdivision (a), "**threatening to retaliate**" means a threat to kidnap or falsely imprison, or inflict extreme pain, serious bodily injury or death.

(m) As used in this section, "**victim**" includes any person who the defendant causes to penetrate the genital or anal opening of

the defendant or another person or whose genital or anal opening is caused to be penetrated by the defendant or another person and who otherwise qualifies as a victim under the requirements of this section.

(9) **Lewd or lascivious acts** as defined in paragraph (2) of subdivision (b) of Section 288 of the Penal Code.

(a) Except as provided in subdivision (i), a person who willfully and lewdly commits any lewd or lascivious act, including any of the acts constituting other crimes provided for in Part 1, upon or with the body, or any part or member thereof, of a child who is under the age of 14 years, with the intent of arousing, appealing to, or gratifying the lust, passions, or sexual desires of that person or the child... [omitted].

(b) (1) [omitted].

(2) A person who is a caretaker and commits an act described in subdivision (a) upon a dependent person by use of force, violence, duress, menace, or fear of immediate and unlawful bodily injury on the victim or another person, with the intent described in subdivision (a), is guilty of a felony... [omitted].

(c) [omitted].

(2) A person who is a caretaker and commits an act described in subdivision (a) upon a dependent person, with the intent described in subdivision (a), is guilty of a public offense... [omitted].

(d) [omitted].

(e) (1) [omitted].

(2) [omitted].

(f) For purposes of paragraph (2) of subdivision (b) and paragraph (2) of subdivision (c), the following definitions apply:

(1) "**Caretaker**" means an owner, operator, administrator, employee, independent contractor, agent, or volunteer of any of the following public or private facilities when the facilities provide care for elder or dependent persons:

(A) Twenty-four hour health facilities, as defined in Sections 1250, 1250.2, and 1250.3 of the Health and Safety Code.

(B) Clinics.

(C) Home health agencies.

(D) Adult day health care centers.

(E) Secondary schools that serve dependent persons and postsecondary educational institutions that serve dependent persons or elders.

(F) Sheltered workshops.

(G) Camps.

(H) Community care facilities, as defined by Section 1402 of the Health and Safety Code, and residential care facilities for the elderly, as defined in Section 1569.2 of the Health and Safety Code.

(I) Respite care facilities.

(J) Foster homes.

**(K) Regional centers for persons with developmental disabilities.**

(L) A home health agency licensed in accordance with Chapter 8 (commencing with Section 1725) of Division 2 of the Health and Safety Code.

(M) An agency that supplies in-home supportive services.

(N) Board and care facilities.

**(O) Any other protective or public assistance agency that provides health services or social services to elder or dependent persons, including, but not limited to, in-home supportive services, as defined in Section 14005.14 of the Welfare and Institutions Code.**

(P) Private residences.

(2) "Board and care facilities" means licensed or unlicensed facilities that provide assistance with one or more of the following activities:

(A) Bathing.

(B) Dressing.

(C) Grooming.

(D) Medication storage.

(E) Medical dispensation.

(F) Money management.

(3) "**Dependent person**" means a person, regardless of whether the person lives independently, who has a physical or mental impairment that substantially restricts his or her ability to carry out normal activities or to protect his or her rights, including, but not limited to, persons who have physical or developmental disabilities or whose physical or mental abilities have significantly diminished because of age. "Dependent person" includes a person who is admitted as an inpatient to a 24-hour health facility, as defined in Sections 1250, 1250.2, and 1250.3 of the Health and Safety Code.

(g) Paragraph (2) of subdivision (b) and paragraph (2) of subdivision (c) apply to the owners, operators, administrators, employees, independent contractors, agents, or volunteers working at these public or private facilities and only to the extent that the individuals personally commit, conspire, aid, abet, or facilitate any act prohibited by paragraph (2) of subdivision (b) and paragraph (2) of subdivision (c).

(h) Paragraph (2) of subdivision (b) and paragraph (2) of subdivision (c) do not apply to a caretaker who is a spouse of, or who is in an equivalent domestic relationship with, the dependent person under care.

(i) (1) [omitted].

(2) [omitted].

(3) [omitted].

**(f) Use of a physical or chemical restraint or psychotropic medication under any of the following conditions:**

- (1) For punishment.
- (2) For a period beyond that for which the medication was ordered pursuant to the instructions of a physician and surgeon licensed in the State of California, who is providing medical care to the elder or dependent adult at the time the instructions are given.
- (3) For any purpose not authorized by the physician and surgeon.

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## Riot

Riot is defined in section 404 of the California Penal Code, as follows:

- (a) Any use of force or violence, disturbing the public peace, or any threat use force or violence, if accompanied by immediate power of execution, by two or more persons acting together, and without authority of law, is a riot.
- (b) As used in this section, disturbing the public pace may occur in any pace of confinement. Place of confinement means any state prison, county jail, industrial farm, or road camp, or any city jail, industrial farm, or road camp, or any juvenile hall, juvenile camp, juvenile ranch, or juvenile forestry camp.

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## Serious Crimes

Serious crimes consist of felonies as enumerated in California Penal Codes 1192.7 © and 1192.8 (a) California Penal Code 1192.7, as follows:

- (a)(1)[omitted].
- (2) [omitted].
- (3) [omitted].
- (b) [omitted].
- (c) As used in this section, "**serious felony**" means any of the following:
  - (1) Murder or voluntary manslaughter; (2) mayhem; (3) rape; (4) sodomy by force, violence, duress, menace, threat of great bodily injury, or fear of immediate and unlawful bodily injury on the victim or another person; (5) oral copulation by force, violence, duress, menace, threat of great bodily injury, or fear of immediate and unlawful bodily injury on the victim or another person; (6) lewd or lascivious act on a child under 14 years of age; (7) any felony punishable by death or imprisonment in the state prison for life; (8) any felony in which the defendant personally inflicts great bodily injury on any person, other than an accomplice, or any felony in which the defendant personally uses a firearm; (9) attempted murder; (10) assault with intent to commit rape or robbery...[omitted].

California Penal Code 1192.8 (a), as follows:

- (a) For purposes of subdivision (c) of Section 1192.7, "**serious felony**" also means any violation of Section 191.5, paragraph (1) of subdivision (c) of Section 192, subdivision (a), (b), or (c) of Section 192.5 of this code, or Section 2800.3, subdivision (b) of Section 23104, or Section 23153 of the Vehicle Code, when any of these offenses involve the personal infliction of great bodily injury on any person other than an accomplice, or the personal use of a dangerous or deadly weapon, within the meaning of paragraph (8) or (23) of subdivision (c) of Section 1192.7.

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**Serious Bodily Injury**

Serious bodily injury is defined in section 243 (f)(4) of the California Penal Code, as follows:

A serious impairment of physical condition, including, but not limited to, the following: loss of consciousness; concussion; bone fracture; protracted loss or impairment of function of any bodily member or organ; a wound requiring suturing; and serious disfigurement.

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# OLES Notification Template

The following graphic provides a visual of the OLES notification template. Please use the official OLES Notification Template form when notifying OLES of Priority 1 or 2 incidents.

## OLES Notification Template

Facility Name:		Facility Case #:	
Incident Location:		Date:	Time:
Discovered by (Staff) (First Last):	Title:	Date:	Time:
Reported to OPS by (First Last):	Title:	Date:	Time:
Method of Notification:			
Reported to OLES by (First Last):	Phone #:	Date:	Time:
Incident Disposition: <input type="checkbox"/> OSI <input type="checkbox"/> Opened at patrol level <input type="checkbox"/> Closed at patrol level			

PRIORITY 1	PRIORITY 2	
<input type="checkbox"/> Abuse - Physical	<input type="checkbox"/> Absent Without Leave (AWOL)	<input type="checkbox"/> Over-Familiarity
<input type="checkbox"/> Assault with a Deadly Weapon (ADW) by a Non-Patient	<input type="checkbox"/> Assault with GBI	<input type="checkbox"/> Patient Arrest - Probable Cause
<input type="checkbox"/> Broken Bone (Unknown)	<input type="checkbox"/> Attempted Patient Suicide	<input type="checkbox"/> Patient Arrest - Warrant
<input type="checkbox"/> Deadly Force	<input type="checkbox"/> Broken Bone (Known)	<input type="checkbox"/> Peace Officer Misconduct
<input type="checkbox"/> Death	<input type="checkbox"/> Burn	<input type="checkbox"/> Phones - Contraband 4350
<input type="checkbox"/> Genital Injury (Unknown)	<input type="checkbox"/> Child Sexual Abuse Material	<input type="checkbox"/> Phones - Unauthorized (Staff)
<input type="checkbox"/> Sexual Assault: Priority 1	<input type="checkbox"/> Drugs	<input type="checkbox"/> Pregnancy
	<input type="checkbox"/> Genital Injury (Known)	<input type="checkbox"/> Riot
	<input type="checkbox"/> Head/Neck Injury	<input type="checkbox"/> Sexual Assault: Priority 2
	<input type="checkbox"/> Neglect	<input type="checkbox"/> Use of Force
<b>P2 SIGNIFICANT INTEREST:</b> An incident of interest to the public which may draw media attention.		
Description:		

<b>A. Victim/Involved</b> (First Last):			
ID#:	Gender:	IQ:	Age:
Classification:		Commitment Type:	
Transported for Treatment? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, where:			

<b>B. Subject/Suspect</b> (First Last):			
ID#:	Gender:	IQ:	Age:
Classification:		Commitment Type:	
Redirected to/ATO? <input type="checkbox"/> Yes <input type="checkbox"/> No Arrested? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, arresting agency:			

<b>C. Death</b> Cause:	Expected? <input type="checkbox"/> Yes <input type="checkbox"/> No
Cause of death provided by (First Last Title):	Was DNR in place? <input type="checkbox"/> Yes <input type="checkbox"/> No

<b>D. Sexual Assault</b> Was victim offered a SART? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, offered by (First Last):	<input type="checkbox"/> M <input type="checkbox"/> F
Location:	Was the location away from other patients/staff? <input type="checkbox"/> Yes <input type="checkbox"/> No
If SART refused, reason provided:	
Was the SART offer and refusal recorded? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If not recorded, witness present (First Last):	<input type="checkbox"/> M <input type="checkbox"/> F
Did SART examiner come to the facility? <input type="checkbox"/> Yes <input type="checkbox"/> No	Victim transported? <input type="checkbox"/> Yes <input type="checkbox"/> No

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**OLES Notification Template**

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<b>E. Recanted</b>	Reason:	Audio recorded? <input type="checkbox"/> Yes <input type="checkbox"/> No
Witnessed by a third party? <input type="checkbox"/> Yes <input type="checkbox"/> No If yes, witness(First Last):		

<b>F. Local Law ENF RPTD</b>	Incident reported to the jurisdictional law enforcement agency? <input type="checkbox"/> Yes <input type="checkbox"/> No	
If yes, case #:		
Agency Name:		
Contact Name (First Last):	Rank:	Phone #:

<b>G. Incident Summary</b>	<i>List additional involved parties here.</i>

## Authorizing Signatures

The authorities within the Department of Developmental Services and Department of State Hospitals reviewed and concurred with the content of this manual.

\_\_\_\_\_  
Christine Allen  
Director  
Office of Law Enforcement Support  
Health and Human Services Agency

\_\_\_\_\_  
Date

### Reviewed and Concur:

\_\_\_\_\_  
Brandon Straw  
Chief  
Office of Protective Services  
Department of Developmental Services

\_\_\_\_\_  
Date

\_\_\_\_\_  
Jack Carter  
Chief  
Office of Protective Services  
Department of State Hospitals

\_\_\_\_\_  
Date

# **OLES Investigation Process Guideline Threshold Incidents.pdf**

## Investigation Process Guideline Threshold Incidents

	2 Days	120 Days		45 Days				60 Days				30 Days			
<p>Department notifies OLES of an incident that meets threshold requirement</p>	<p>OLEs reviews initial case summary and determines OLES involvement</p> <p><i>*Should OLES conduct Full Analysis of incident, the DSH investigative timeline shall be tolled until such time as OLES completes Full Analysis</i></p>	<p>OLEs AIM meets with OPS investigator and identifies critical junctures</p>	<p>OPS or OLES completes investigation and submits final report recommendations, through channels to the OLES</p> <p><i>*The OLES AIM will return the draft investigative report to the assigned investigator within 5 days of the report being submitted for review</i></p>	<p><u>10 Days</u></p> <p>Investigation Analysis Unit completes review of investigation and forwards to AIM for consultation; Report delivered to ED</p>	<p><u>10 Days</u></p> <p>AIM attends disposition conference; discusses case and analysis with the Executive Department</p>	<p><u>15 Days</u></p> <p>Department Attorney receives report and makes penalty recommendation if case warrants discipline</p>	<p><u>10 Days</u></p> <p>AIM meets with ED and Department Attorney to finalize disciplinary determinations</p>	<p><u>30 Days</u></p> <p>1. Hospital will prepare a draft NOAA</p>	<p><u>5 Days</u></p> <p>2. The Department Attorney will review the draft NOAA and make suggested edits</p>	<p><u>5 days</u></p> <p>3. The Hospital will make suggested edits to the draft NOAA</p>	<p><u>5 Days</u></p> <p>4. The Department Attorney will review a draft of the NOAA</p>	<p>Skelly Process is conducted by an uninvolved supervisor with AIM present</p>	<p>AIM is notified of the proposed final action, including any pre-settlement discussions or appeals (AIM monitors process)</p>	<p>Dept. Attorney notifies AIM of any SPB hearing dates as soon as known (AIM present at all hearings)</p>	<p>Dept. Attorney notifies and consults with AIM prior to any settlement to a disciplinary action</p>
<p>OLEs AIM provides oversight of Investigations requiring an immediate response</p>	<p><b>Critical Junctures</b></p> <ol style="list-style-type: none"> <li>1. Site Visit</li> <li>2. Initial case conference                             <ol style="list-style-type: none"> <li>a. Develop Investigation Plan</li> <li>b. Determine statute of Limitations</li> </ol> </li> <li>3. Critical witness interviews</li> <li>4. Investigation draft approval</li> </ol>		<p>Additional Investigation may be requested</p>				<p>Executive Review</p>				<p>AIM notes quality of prosecution and final disposition</p>				

## **OLES Monitored Case Request for Extension - Form.pdf**

# OLES MONITORED CASE REQUEST FOR EXTENSION

OLES CASE NUMBER

AIM NAME

FACILITY NAME

CASE NUMBER

SUBJECT NAME

CASE DUE DATE

CASE SYNOPSIS:

REASON FOR EXCEEDING TIMEFRAME:

EXPECTED COMPLETION DATE: \_\_\_\_\_  
DATE

ASSIGNED INVESTIGATOR: \_\_\_\_\_  
SIGNATURE DATE

SUPERVISING INVESTIGATOR REVIEW AND APPROVAL: \_\_\_\_\_  
SIGNATURE DATE

CHIEF OF POLICE REVIEW AND APPROVAL: \_\_\_\_\_  
SIGNATURE DATE

DATE BRIEFED WITH OLES MONITOR: \_\_\_\_\_  
DATE

CONFIRMATION RECEIPT OF FORM: \_\_\_\_\_  
WATCHDOX VERBAL DATE

**WRITTEN JUSTIFICATION IS REQUIRED FOR ANY CASE EXCEEDING THE 120 BUSINESS DAY TIMEFRAME. JUSTIFICATION IS TO BE SUBMITTED TO THE SUPERVISING INVESTIGATOR AND CHIEF OF POLICE FOR REVIEW AND APPROVAL PRIOR TO THE EXPIRATION OF THE TIMEFRAME.**

**OLES WILL EVALUATE THE JUSTIFICATION ON THIS FORM INDEPENDENTLY TO DETERMINE TIMELINESS.**

**PLACE IN THE CASE FILE**