

# JAIL REFORMS RECOMMENDATIONS MATRIX

May 7, 2024 BOARD OF SUPERVISORS

## Color Key:

Blue - Completed, audited, and presented to the Board.

Green - Covered by Consent Decree and subject to monitoring by federal court appointed experts.

Yellow - Not Covered by Consent Decree/Subject to Audit by OCLEM.

Master List Number	Master List Recommendation	Status
1	The Board of Supervisors should accept the report of Scott Emblidge and utilize its as major impetus for change in the operations of the jail.	Completed, audited, and presented to the Board on October 17, 2023.
2	Create an ombudsman position to complement the work of the Jail Observation Program as an interim or on-going measure until a more comprehensive structure is developed (such as an Independent Oversight Commission or a separate Department of Correction).	Not Covered by Consent Decree/Subject to Audit by OCLEM
3	The Board of Supervisors should take immediate steps to change the leadership of the operation of the jails.	Completed, audited, and presented to the Board on October 17, 2023.
4	The Board of Supervisors should refrain from appointing employees of County departments to serve on Commissions or Boards that are investigating those employees' County departments.	Completed, audited, and presented to the Board on June 7, 2022.
5	The Board of Supervisors and County Counsel must protect civilian members who volunteer for its Commissions and Boards from retaliation and harassment from County employees.	Completed, audited, and presented to the Board on October 17, 2023.
6	Upon finalization of recommendations to the Board from the BRC, form an interim committee to ensure the recommended changes to culture and practice are being implemented. Ideally this committee would consist of people with experience or knowledgeable in best practices for ushering in such changes, in addition to several current members of the BRC who represent the community, advocacy groups, mental health experts and the incarcerated. The committee should report to the Board of Directors until such a time as significant progress is being made on the established goals.	Completed, audited, and presented to the Board on October 17, 2023.
7	Clearly establish who is ultimately responsible and accountable for all aspects of jail operations, including the treatment of inmates and employees in the County jail. Examine other departmental Examine other departmental structures, including re-establishment of a separate, free-standing Department of Correction.	Completed, audited, and presented to the Board on October 17, 2023.

Note: The Master List of recommendations originally compiled in August 2016 contained a total of 655 recommendations. At or around the time of the September 30, 2016 Finance and Government Operations Committee meeting, 32 recommendations were removed from the list, though the remaining recommendations were not renumbered, so while there are now a total of 623 recommendations, those numbered 624 through 655 still exist.

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9	Conduct a study to ascertain the values and practices of the Sheriff's Office to understand and address the current work environment and how it impacts practices and behaviors of both employees and inmates.	Not Covered by Consent Decree/Subject to Audit by OCLEM
10	The Department should immediately place its Operations Manual for both the enforcement and custodial operations online so that it is available to the public.	Completed, audited, and presented to the Board on April 16, 2024.
11	Require Department of Correction to immediately implement a best practices Early Warning System.	Not Covered by Consent Decree/Subject to Audit by OCLEM
12	Provide a description of the Early Warning System to the Board of Supervisors and the public via the Department's website.	Not Covered by Consent Decree/Subject to Audit by OCLEM
13	Require the Early Warning System to be subject to oversight by an independent civilian oversight entity.	Not Covered by Consent Decree/Subject to Audit by OCLEM
14	Require the Department of Correction to submit annual reports with data on officer discipline, sanitized summaries of the incident that gave rise to the discipline to the Board of Supervisors and to the public via the Department's website.	Not Covered by Consent Decree/Subject to Audit by OCLEM
15	Provide to the independent oversight entity access to all of the Department's discipline data.	Not Covered by Consent Decree/Subject to Audit by OCLEM
16	Immediately re-institute roll call briefings.	Not Covered by Consent Decree/Subject to Audit by OCLEM
17	Update the Employee Discipline Policy 3.41.	Not Covered by Consent Decree/Subject to Audit by OCLEM

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18	Require jail staff to attend ethics classes every other year.	Not Covered by Consent Decree/Subject to Audit by OCLEM
19	Ensure that jail staff receive updated policies (and when possible, prior to their implementation), and receive training briefings on those updated policies.	Not Covered by Consent Decree/Subject to Audit by OCLEM
20	Institute Peace Office Bill of Rights training for line managers.	Not Covered by Consent Decree/Subject to Audit by OCLEM
21	All changes to discipline policies are to abide by Peace Office Bill of Rights and due process.	Not Covered by Consent Decree/Subject to Audit by OCLEM
23	Adopt recommendations in reports prepared by Aaron Zisser.	Not Covered by Consent Decree/Subject to Audit by OCLEM
24	Create the Office of the Inspector General of the Jails (OIGJ), with staff and budget, all of which are independent of the Sheriff's Department and the Department of Correction, and which office reports directly to the Board of Supervisors, to provide independent civilian oversight of jail operations, including the grievance/complaint process.	Not Covered by Consent Decree/Subject to Audit by OCLEM
25	Provide oversight of the process that determines which grievances/complaints should be pursued and which should be discarded to ensure that those decisions are made properly.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
27	Update the Inmate Grievance Process Policy 14.05.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
28	Grievance Boxes should be on each unit, in the chow hall at Main Jail South, and in the dayroom at Main Jail North.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
29	Require that supervisors approve all notes placed by correctional officers on inmates' doors that instruct other inmates not to talk to those inmates or give them anything.	Not Covered by Consent Decree/Subject to Audit by OCLEM

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30	Custody Health Services is to conduct a full-scope evaluation of the handling of medical and behavior health complaints.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
31	Custody Health Services is to ensure that all medical and behavioral health complaints are properly routed for timely responses.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
32	All staff are to provide meaningful assistance to inmates with behavioral health and other disabilities in utilizing the complaint/grievance process.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
33	Allow inmates the ability to file grievances/complaints on behalf of other inmates, and allow inmates to file group grievances or complaints.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
34	Collect forms at least once per shift at reasonable hours.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
35	Forms should be legal size with quadruplicate copies.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
36	Update the information on the forms and add optional demographic information.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
37	Tracking numbers should be printed on the forms.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
38	Include pre-printed checkboxes on the forms.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.



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39	There should be two management analysts and two lieutenants, to work at Elmwood and the Main Jail, to monitor, collect, and process the grievances and complaints.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
40	Staff should be trained about the grievance procedure changes before the changes are implemented.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
41	Provide training to correctional officers on the proper use of the Custody Input Report.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
42	Track the issuance of all Custody Input Report and permit review of that tracking data by the independent civilian oversight entity.	Not Covered by Consent Decree/Subject to Audit by OCLEM
43	Revise the Custody Input Report form.	Completed, audited, and presented to the Board on April 16, 2024.
44	Assure that the present changes in custody mental health at the jail are not limited to the main jail. There should be no delay in providing mental health evaluations and if prescribed, medications, becomes at Elmwood as well as the main jail.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
45	Improve timeliness, seamlessness, and continuity of "outpatient" behavioral health and medical care by, among other things, more timely response to requests for treatment, particularly emergencies; improved access to medications and other necessary care upon booking; and better follow-up care after inmates are treated at Valley Medical Center.	Completed, audited, and presented to the Board on June 7, 2022.
46	Upon release from jail, the Sheriff's department should facilitate access to an appropriate supply of medication as ordered in the discharge plan, a prescription, and a list of pharmacies accepting the issued prescription that are easily accessible to the person, rather than faxing all prescriptions to the Enborg Pharmacy which is far from the jail. Also, the mentally ill indigent offender should be transported to pick up those medications.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.

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47	Mental health staff should be available at jail-booking and at all times thereafter. Most specifically, mental health staff should be a part of any response team relating to behavior of the mentally ill person while in custody.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
48	Improve coordination of community- based and in-custody behavioral health services for people coming into, and being released from, the jail.	Completed, audited, and presented to the Board on June 7, 2022.
50	Offenders with mental illness who do not have federal and state benefits, or have lost them due to the length of their incarceration, should receive assistance from jail staff or in-reach care managers in preparing and submitting the necessary forms and documentation to obtain benefits immediately upon reentry into the community.	Completed, audited, and presented to the Board on June 7, 2022.
52	Mentally ill inmates should be evaluated promptly. They should not have to wait at Elmwood Processing for hours to be transferred to the Main Jail for evaluation after 11:00 p.m.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
53	Mental Health Treatment: There should be group therapy focused on substance abuse, Post Traumatic Stress Disorder and anger/stress management and predischarge planning/counseling for release to the community.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
54	Apply the same rigorous analysis and establishment of performance measures for Custody Health Services that is comparable to audits and evaluations of other departments and programs.	Completed, audited, and presented to the Board on April 16, 2024.
55	Provide regular preventative care for detainees who are housed for a year or longer in the facilities, such as dental cleanings and x-rays, physicals, immunizations and other standard care that would be received outside. To reduce the loss of teeth and the cost of trips to the emergency room, institute more preventative care for detainees and improve response to requests for care. Consult medical professionals for typical standards of recommended care.	Completed, audited, and presented to the Board on April 19, 2022.
56	Need computerized Tracking System and Dashboards to produce statistical data as to mentally ill offenders.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.

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57	The Board of Supervisors should immediately create and fully fund the Office of the Inspector General of the Jails to provide professional independent civilian oversight of the jail operations that reports directly to the Board of Supervisors. Please see a further description of the OIG office in my Recommendation #1 in the Grievance/Complaint Process category.	Completed, audited, and presented to the Board on June 7, 2022.
58	Create a committee of knowledgeable experts and community stake holders to study and recommend effective models of independent oversight of the DOC. Committee will report it's findings and recommendations to the Board of Supervisors , including time lines and responsible parties, and oversee it's implementation.	Completed, audited, and presented to the Board on October 17, 2023.
59	Create an Independent Oversight Commission to review and oversee the Office of the Sheriff and the Department of Correction.	Completed, audited, and presented to the Board on June 7, 2022.
61	Appoint an interim inspector general to oversee implementation of BRC recommendations that are adopted by the Board of Supervisors. Allot sufficient funds to support the work of this interim oversight position until a permanent oversight body is established.	Completed, audited, and presented to the Board on June 7, 2022.
62	Outside of the formal grievances process, create a venue for current detainees to present concerns related to the jails, conditions of confinement, or problems associated with incarceration within our county. Provide an opportunity for these concerns to be heard by a body that can mediate and respond, such as the an Ombudsman program and/or ongoing anonymous surveys. Seek best practice information for this need and examples of providing input for improvement from detainees used in other areas.	Completed, audited, and presented to the Board on April 16, 2024.
63	Beyond the grievance process, provide additional anonymous methods of surveying detainees regarding jail conditions and use that information to intervene where indicated. Consider adopting successful practices from other counties which were developed with best practices in mind (attached are examples from Ada county). Consider having this a function of an outside agency such as the JOP.	Completed, audited, and presented to the Board on April 16, 2024.
64	Create an Inmate Council which represents inmates in various buildings.	Completed, audited, and presented to the Board on April 16, 2024.

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65	Allow inmates to form Committees and designate inmate leaders/ representatives by Housing Units etc. The leader is voted in by peers and all leaders would come together for regular meetings by jail location to make REAL decisions and changes in all aspects of the jails. Guidance should be given by staff for logistics and direction until they are fully established. The reports from these bodies should go to the newly established Santa Clara County Jail Diversion and Behavioral Health Subcommittee (JDBHS).	Completed, audited, and presented to the Board on April 16, 2024.
66	Contract with an outside agency to rewrite the entire Inmate Rule Book so that it contains accurate information, larger font, is reader- friendly, and available in languages other than English. Do not finance this rewrite with Inmate Welfare Funds.	Completed, audited, and presented to the Board on April 16, 2024.
67	Inmate rule book should be revised with respect to structure, language, simplification, and should be aimed at a common reading level around 4th or 5th grade.	Completed, audited, and presented to the Board on April 16, 2024.
68	Ensure the "Inmate Orientation and Rulebook" grievance procedure forms and other important documents are available in English, Spanish, Vietnamese, and other languages. Also ensure the videos shown at inmate intake are available in multiple languages.	Completed, audited, and presented to the Board on April 16, 2024.
69	Revise and simplify the "Inmate Orientation and Rulebook."	Completed, audited, and presented to the Board on April 16, 2024.
70	Rule Book: Should be written in threshold languages. Chinese (Mandarin), Spanish, Vietnamese, Tagalog, etc., and there should be someone who can orient new inmates by explaining the main issues of the rule book. The Rule Book should be part of an in person orientation (to the facility) of new inmates.	Completed, audited, and presented to the Board on April 16, 2024.
71	Rewrite and reorganize the inmate rulebook. 2) Have the availability of a larger print (accommodation) and 3) be available in other forms of delivery such as audio and/or video.	Completed, audited, and presented to the Board on April 16, 2024.
72	Storage: Larger or more bins to store belongings such as books, legal papers, hygiene products, etc.	Completed, audited, and presented to the Board on April 16, 2024.
73	Commissary Prices - Prices for all commissary items should be reduced by 10 percent to 20 percent.	Completed, audited, and presented to the Board on April 16, 2024.

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74	Prices of goods sold to inmates should be monitored and updated.	Completed, audited, and presented to the Board on April 16, 2024.
75	Indigent fund: Indigent fund should have a budget figure. Currently there is a 0 budget proposed.	Not Covered by Consent Decree/Subject to Audit by OCLEM
76	Fees charged to deposit funds should be reassessed to see if they can be reduced or removed.	Not Covered by Consent Decree/Subject to Audit by OCLEM
77	The Board of Supervisors should re-constitute the membership of the IWFC to include two members from the Office of the Sheriff, one member from the Office of the Public Defender, and six community members (one with an accounting background, two behavioral health professionals, two with mental health experience (nonprofits, family members), and one former inmate; members are to be free from conflict of interest.	Completed, audited, and presented to the Board on October 17, 2023.
78	The Board of Supervisors should assign a staff person who will oversee a formal application process to re-constitute the IWFC and who will ensure that information about the application process is widely disseminated to the public.	Completed, audited, and presented to the Board on October 17, 2023.
79	The Board of Supervisors should set terms for service on the IWFC.	Completed, audited, and presented to the Board on October 17, 2023.
80	Notices of IWFC meetings should be distributed throughout the County to maximize attendance by the public; and meetings should be held on days and at times that maximize public attendance.	Completed, audited, and presented to the Board on October 17, 2023.
81	Require IWFC members to tour all jail facilities annually.	Completed, audited, and presented to the Board on October 17, 2023.
82	Require the IWFC to convene two public forums each year to present information about the programs and services provided to inmates, to present information about the vendors who provide those services and programs, and to receive community input about new and/or alternative programs and services for possible implementation. The forums should be held at dates and times to maximize public attendance.	Completed, audited, and presented to the Board on October 17, 2023.

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83	The IWFC should assess and verify all purchases, usage, and access provided by the fund.	Completed, audited, and presented to the Board on October 17, 2023.
84	The IWFC should review all commissary vendor contracts and recommend whether or not these contracts should be renewed.	Completed, audited, and presented to the Board on April 16, 2024.
85	The IWFC should review and monitor pricing of commissary items and recommend adjustments to those prices.	Completed, audited, and presented to the Board on April 16, 2024.
86	The IWFC should ensure that all mark- ups are reasonable and that markups are not disproportionately higher for female products than for male products.	Completed, audited, and presented to the Board on April 16, 2024.
87	The Board of Supervisors should evaluate the cost of having the commissary run in-house.	Completed, audited, and presented to the Board on April 16, 2024.
88	Inmates should be permitted to inspect purchased items from the commissary before signing off for those items.	Completed, audited, and presented to the Board on April 16, 2024.
89	The IWFC should review contents of the kits and ensure that all kits (hygiene, stationery) have adequate supplies, and recommend changes to the kits.	Completed, audited, and presented to the Board on October 17, 2023.
90	Replace incentive/beverage meal program with \$5 credit cards and use any remaining funds for programs and activities.	Not Covered by Consent Decree/Subject to Audit by OCLEM
91	The IWFC should be provided a full accounting of the incentive meal/beverage program (2010- 2016), how it has been administered at all jail facilities, including the profits (from mark-ups) to vendors.	Completed, audited, and presented to the Board on October 17, 2023.

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92	Review and evaluate whether the following positions should be mandated: classification staff, assignment officer, information services support, and warehouse operations staff.	Not Covered by Consent Decree/Subject to Audit by OCLEM
93	Fund salaries and benefits of peer advocates, mentors, and others who work in the jails who directly support inmates in receiving services.	Completed, audited, and presented to the Board on April 16, 2024.
94	Include an increase in funding for programs and services for inmates with mental health disabilities and developmental disabilities.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
95	Diversify IWF revenue beyond commissions collected from phones and the commissary to increase revenue to the recommended level of 8.3 percent.	Completed, audited, and presented to the Board on October 17, 2023.
96	Create a grant program to pursue funding.	Completed, audited, and presented to the Board on October 17, 2023.
97	Conduct a comprehensive review of the sources and uses of the inmate welfare fund, to be conducted by an independent auditor as requested by the IWFC at least every other year.	Completed, audited, and presented to the Board on October 17, 2023.
98	Report on the status of the Harvey M. Rose audit recommendations and set a date for completion of recommendations not yet implemented.	Completed, audited, and presented to the Board on April 16, 2024.
99	The IWFC is to conduct a feasibility study as to whether or not inmates could have one free phone call per week to family and friends.	Completed, audited, and presented to the Board on May 2, 2023.
100	Restructure the operation of the current acute “inpatient” psychiatric unit of the jail (Unit 8A) to ensure that it operates as a therapeutic environment that supports inmate recovery and wellness. This would include ending restrictive housing on 8A and ensuring sufficient program and out-of-cell time per day for each inmate; increasing the number of therapeutic and recreational individual and group program offerings on the unit; and ensuring compliance with state standards for operation of a licensed Correctional Treatment Center.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.

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101	The Women's Facility needs to establish a mental health unit to provide adequate care for the female mentally ill inmates. Female mentally ill inmates should not be transferred to module 8A.	Completed, audited, and presented to the Board on October 17, 2023.
102	Develop an assessment process at booking of mentally ill offenders by utilizing a mental health needs and risk assessment for all inmates to assure that the mentally ill, and in particular the indigent, are evaluated and placed in treatment immediately. Further that discharge planning, including possible diversion, start at booking. Each mentally ill offender should have a discharge plan that is modified as more information is gathered.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
103	Ensure co-equal leadership and decision-making between the Sheriff's Office and Custody Health around the needs of inmates with behavioral health disabilities. This should include increased collaboration around housing, classification, safety, and behavioral health treatment access for inmates with behavioral health needs; co- review of use of force incidents involving inmates with behavioral health disabilities; joint responsibility for correctional officer training on behavioral health needs; and joint problem solving with respect to individual inmate behavioral health needs.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
104	The Department needs to reopen an "Assessment and Observation" unit. This is an important unit to house inmates in the first 24 hours after arrest. During the first 24 hours, the module officer will monitor inmates' behavior and can render medical or mental health services promptly.	Completed, audited, and presented to the Board on October 17, 2023.
105	Peer support services, through an in- reach process, should be offered to offenders in jail with mental illness while incarcerated and upon release to help ensure successful community reentry.	Not Covered by Consent Decree/Subject to Audit by OCLEM
106	Create in reach for all County and Community providers working with mentally ill offenders to assure that when the inmate is discharged, he or she will not end up in the streets. Make it possible for interviews and assessments to take place in the jail in a confidential setting.	Not Covered by Consent Decree/Subject to Audit by OCLEM
107	Using memorandum or directives should be a short term solution. Department needs to get more funding and staff to make it a priority to update policies and procedures.	Completed, audited, and presented to the Board on April 16, 2024.



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108	The jails should have sufficient resources and staff to ensure access to mental health treatment services, discharge planning, etc.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
109	Updated policies and procedures should accompany with training to ensure staff understand the changes and expectations.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
110	A formal jail liaison should be designated by Behavioral Health and programs and local to improve communication and coordination between the jail and agencies involved in the discharge planning and pre and post adjudication services for offenders with mental illness.	Completed, audited, and presented to the Board on April 16, 2024.
111	Need a records and information system that ties custody health to County Mental Health and Community Mental health to allow for linkages and connections when mentally ill offenders are released. The system must allow input from all health programs involved in providing care to the individual.	Completed, audited, and presented to the Board on April 16, 2024.
112	Physical Health Treatment: Treatment should be a timely with a compulsory minimum wait time to be seen after a request has been made. Also, Optometry should be included in physical health treatment to examine inmates perhaps during "orientation" for possible eyeglasses.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
113	Full time, benefitted/coded Substance Abuse positions added to the staffing throughout the entire jail system.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
114	Continue to set higher standards and effective options for improving the Jail Diversion Program by incorporating innovative programs and "best practices."	Not Covered by Consent Decree/Subject to Audit by OCLEM
115	Expand government grant funding to enhance workforce development and employment readiness and options for inmates through the re-entry center.	Completed, audited, and presented to the Board on May 2, 2023.

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116	New groups and programs need to be developed for the mentally ill. Examples are living with mental illness, coping skills and strategies, family dynamics, exercise groups.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
117	Increase staffing to enable expansion of programs, visitation and non- structured time while providing for the safety of detainees and staff. Investigate staffing levels and provide funds for adequate staffing.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
118	Review and revise jail programming policies and practices to ensure intentional planning and development of program opportunities; quality management review of program offerings; and equitable distribution of programming opportunities for inmates across jail facilities, housing units, and classifications.	Not Covered by Consent Decree/Subject to Audit by OCLEM
119	Establish a plan to increase jail program offerings, with an emphasis on increasing opportunities geared toward successful re-entry and behavioral health recovery, and opportunities for inmates with higher level classifications. In addition, focus on bringing civilian and community-based services into the jail.	Completed, audited, and presented to the Board on April 16, 2024.
120	Perform full scale assessment and plan for of needs of long-term inmates that ensures breadth and infrastructure for services, including programming, medical care, and behavioral health care that is geared toward long term incarceration.	Completed, audited, and presented to the Board on April 16, 2024.
121	Expand and offer evidenced based programming opportunities to all detainees interested in participating, regardless of classification or housing assignment. Program options to consider can include but not be limited to life skills, parenting, meditation, recovery, basic literacy skills, GED, college programs, enrichment opportunities, religious study, job preparation, ESL instruction , AA/NA, mental health and wellness and self improvement. Detainees housed in areas where group instruction is difficult should be offered options via remote teaching on TV's or tablets. Establish a timeline for implementation.	Completed, audited, and presented to the Board on April 16, 2024.
122	Increase outreach to the community with volunteer opportunities to provide enrichment programs within all areas of the facilities. Provide expansion through existing systems such as the Chaplains office and other community based or advocacy agencies. Streamline the process for vetting, training and providing clearance for volunteers and advocacy groups to offer programs and services.	Completed, audited, and presented to the Board on April 16, 2024.

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123	Create inmate suicide awareness and prevention program and a post- venation program for surviving inmates. Designate specific staff to address these issues.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
124	The DOC should give advanced notice of the offender's release date and time from jail to the offender's community treatment coordinator as specified in the discharge plan as well as to members of his or her family, as appropriate, and others in his or her support system.	Not Covered by Consent Decree/Subject to Audit by OCLEM
125	When an inmate is ordered released by the Court to a treatment program, eliminate the present use of a process that involves putting the inmate in the street and calling a taxi. Rather, have the person delivered by the Sheriff's Department to the program and accompanied in a welcoming way into the program. This was the prior system years ago and was far more effective and personal than the present taxi system that results in immediate walk aways from treatment far more frequently.	Not Covered by Consent Decree/Subject to Audit by OCLEM
126	Utilize tablets or other available technology for educational materials for programs, so that all inmates who are eligible and who would like to participate, may participate in these programs.	Completed, audited, and presented to the Board on April 16, 2024.
127	Ensure that inmates who want to participate in programs and are eligible, have the opportunity to participate in programs.	Completed, audited, and presented to the Board on April 16, 2024.
128	Review information on the Department of Labor website and utilize some of the resources being offered there in relationship to Apprenticeship. The County could leverage resources of DOL and our local Employment Partners to build into the Jails a quality training/employment path that assists individuals returning to the Community.	Completed, audited, and presented to the Board on May 2, 2023.
129	That this Commission recommend to the Board of Supervisors that the first priority in change should be to create more treatment capacity and alternatives for mentally ill and substance abusing defendants in custody who are held in custody solely because there is no appropriate treatment presently available for them in the community, and that the County place its primary focus on finding alternatives to incarceration of mentally ill offenders, including diversion and appropriate pretrial release, and develop prevention strategies to reduce recidivism and return to custody of mentally ill offenders.	Completed, audited, and presented to the Board on June 7, 2022.

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130	Create a new Classification System that provides equal access to Mentally Ill offenders.	Completed, audited, and presented to the Board on September 28, 2021.
131	Development of an evidence-based, best practices approach for classification that eliminates subjectivity and the misuse of classification decisions as punishment or retaliation.	Completed, audited, and presented to the Board on September 28, 2021.
132	Replace current classification system with a statistically valid, reliable, evidenced based instrument.	Completed, audited, and presented to the Board on September 28, 2021.
133	Establish a time line for implementation for training of staff and reclassification of detainees, and report progress to Board of Supervisors regularly upon implementation.	Completed, audited, and presented to the Board on April 16, 2024.
134	Allow detainees access to their files to determine accuracy of contents and challenge any discrepancies.	Completed, audited, and presented to the Board on September 28, 2021.
135	Completely and thoroughly examine the Classification System for inmates and make immediate improvements to ensure appropriate access to services and housing. Create a process for appealing housing classifications.	Completed, audited, and presented to the Board on September 28, 2021.
136	Create a systematic review of post CIT training behaviors of all employees to ensure the benefits of the training are clearly demonstrated in all interactions with the inmates. Identify a specific date by which all training and a follow-up plan for all employees is achieved.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
137	Review training curriculum, hiring and promotional practices for correction staff with experts knowledgeable in the field. Training for issues of mental health, behavioral needs and mediation techniques should be specific to the work situation inside facilities, which differs from the circumstances faced by patrolling officers.	Completed, audited, and presented to the Board on April 16, 2024.
138	Specialized training needs to be developed for all staff working with the Mentally Ill. This training must be different from that given to first responders because staff in the jail work with the mentally ill on an ongoing basis rather than responding to an individual incident.	Completed, audited, and presented to the Board on April 16, 2024.

# JAIL REFORMS RECOMMENDATIONS MATRIX

May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
139	Develop and implement specialized behavioral health and crisis training for correctional officers and other jail staff (including behavioral health staff) that is based upon consultation with outside experts regarding best practices, is tailored to the custodial setting and includes the following topics: A. Eliminating stigma around behavioral health disabilities; B. Appropriate response to inmates experiencing behavioral health symptoms or crisis; C. Understanding the rights of inmates with behavioral health disabilities, including the right to reasonable accommodations; D. De-escalation techniques and trauma-informed care; and E. Connecting inmates with appropriate jail services and resources.	Completed, audited, and presented to the Board on April 16, 2024.
140	Staff should be allowed to attend 24 hours update training away from their work area in order to achieve effectiveness of the training. Staff should not sit at the floor station (work area) while performing their duties and taking classes on the computer.	Completed, audited, and presented to the Board on April 16, 2024.
141	Department needs to bring back the Interpersonal Communication Skills class.	Completed, audited, and presented to the Board on April 16, 2024.
142	All custody staff should be trained in CIT or at minimum a similar type of training that is Evidenced based.	Completed, audited, and presented to the Board on April 16, 2024.
143	All CIT trained individuals should be mandated to take a CIT refresher course every 3 or 5 years.	Completed, audited, and presented to the Board on April 16, 2024.
144	The entire CIT Course used to train officers needs to be evaluated by an outside entity to assess whether or not there is material in the course that may be deemed racist, culturally inappropriate, stigmatizing, and/ or discriminatory. This needs to include every aspect of the course like outside Presenters, material pulled from the internet and used in the training, etc.	Completed, audited, and presented to the Board on April 16, 2024.
145	Training in the areas of cultural competency, implicit bias, and procedural justice be brought to current correctional deputies and the Academy.	Completed, audited, and presented to the Board on April 16, 2024.

# JAIL REFORMS RECOMMENDATIONS MATRIX

May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
146	Increase staffing and resources for the Jail Observer Program, and provide seamless communication regarding standards and practices between the JOP and the DOC for the benefit of the detained, families and staff when investigating concerns. Provide JOP information to detainees, families and staff in a clear and easily accessible manner.	Not Covered by Consent Decree/Subject to Audit by OCLEM
147	Significantly expand the successful but understaffed JOP program, with specific Jail Observers assigned to each facility, housing section.	Not Covered by Consent Decree/Subject to Audit by OCLEM
148	Convert the Jail Observer Program (JOP) to an organizational ombudsman's office, structured according to the best practice standards of the International Ombudsman Association (IOA) and modeled after the Juvenile Welfare Office of the Ombuds which operates on the basis of an Interagency Agreement between the Office of the County Executive and the Social Services Agency.	Not Covered by Consent Decree/Subject to Audit by OCLEM
149	Update the Department of Corrections handbook to include reference to, and support of the jail ombuds program.	Not Covered by Consent Decree/Subject to Audit by OCLEM
150	Establish a Memorandum of Understanding (MOU) between the Office of Human Relations (County Executive's Office) and both Custodial and Behavioral Health Care Services.	Not Covered by Consent Decree/Subject to Audit by OCLEM
151	Establish clear parameters for the operation of the jail ombudsman with respect to grievance intake and management.	Not Covered by Consent Decree/Subject to Audit by OCLEM
152	Improve sanitation and health for detainees and staff by: 1. Provide more frequent complete changes of clothing, extra towels and linens. 2. Provide easy access to cleaning supplies. 3. Provide easy access to hygiene items such as soap, deodorant, shampoo, and feminine hygiene needs.	Completed, audited, and presented to the Board on April 16, 2024.
153	Inmate Barber Equipment and Hair-Cutting Services: My recommendation is each module should have their own barber kit and hair-cutting services should be available when inmates are out for dayroom time or at least once per week, not once per month.	Completed, audited, and presented to the Board on April 16, 2024.
154	Razors: I recommend the Department to purchase enough electric razors for inmates who are housed in a special management dorm.	Completed, audited, and presented to the Board on April 16, 2024.

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Master List Number	Master List Recommendation	Status
155	Department should conduct a study on staff and inmate ratio of supervision in order to provide safety and secure for both staff and inmates.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
156	Department should conduct a study on staff and supervisor ratio.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
157	It is important for officers to work in a safe environment by having adequate staffing. Department should implement minimum staffing requirements. Supervisors should conduct projections and ensure proper staffing is assigned to each unit.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
158	Assign Rover Officer to each floor at the present time, each unit at the Main Jail is assigned an officer. However, there is no rover or relieve officer assigned to the floor. Consequently, the module officer must lockdown the unit for breaks or escort inmates out of the module for transfer or rehousal. Module officers are expected to perform additional duties such as delivering legal mail to different areas, participate in on-duty training, and relieve officer at the floor station post or lockdown unit.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
159	Provide a quiet staff break room. Corrections work is one of the most stressful in law enforcement. Staff need a place to go to escape the hustle and bustle of the workplace. The ambiance of the break room can impact morale and motivation. Department should provide a clean, quiet break room for officers to unwind and rejuvenate to help them reduce stress in order to be an effective officer, especially if they are working in a high stressful area such as acute psych area (8A), Intake Booking, Medical Infirmary, etc.	Completed, audited, and presented to the Board on April 16, 2024.
160	The Sheriff's Department or other entity that may be in charge of jail operations, in collaboration with community stakeholders, should develop a best-practices protocol for the operation of the cameras installed in the jails, which protocol should be made available to the public via the Department's website. The protocol must include procedures for storage of the footage and for access to the footage by non- Department members.	Completed, audited, and presented to the Board on May 2, 2023.
161	Place cameras in all elevators.	Completed, audited, and presented to the Board on May 2, 2023.

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Master List Number	Master List Recommendation	Status
162	Address delays in receiving and forwarding mail to the Courts by assuring. including grievance by prompt receipt and delivery.	Completed, audited, and presented to the Board on April 16, 2024.
163	Assure that Court orders that require the inmate to make a phone call for treatment assessments are immediately complied with and do not require a written request or grievance by the inmate. Provide this access for all inmates regardless of classification during regular work hours.	Completed, audited, and presented to the Board on May 2, 2023.
164	Install more inmate phones in housing areas.	Completed, audited, and presented to the Board on May 2, 2023.
165	Outside of the formal grievances process, create a venue for families, friends of detainees, and advocacy groups to present concerns related to the jails, conditions of confinement, or problems associated with incarceration within our county. Provide an opportunity for these concerns to be heard by a body that can mediate and respond, such as the Board of Supervisors, or Human Relations Commission. Seek examples of mediation and community building groups from other counties.	Completed, audited, and presented to the Board on April 16, 2024.
166	Increase the amount of visitation available for families and friends to visit with detainees while they are in custody. Include some evening visitation opportunities at those facilities where they currently don't have them. Expand the hours the visitation desk is open for the public to make appointments and register to visit.	Not Covered by Consent Decree/Subject to Audit by OCLEM
167	Visitor Lobby - Visitors who are preregistered and sign up on-line should check in 15 to 30 minutes prior to their scheduled visit (current requirement is 45 minutes to one hour). Visit cancellations should be immediately updated for the public via the Internet and the visiting phone line voicemail.	Completed, audited, and presented to the Board on April 16, 2024.
168	Visitor Lobby: Visitors should be allowed to visit their inmate even though they arrive after the 60- minute rule that they must be present at least 60 minutes before the appointment. Many families travel great distances. Perhaps within the 60 to 30 minute limit should be allowed.	Completed, audited, and presented to the Board on April 16, 2024.
169	Re-evaluate the visiting rules and requirements with the goal of "assisting" families and loved ones to visit the incarcerated.	Completed, audited, and presented to the Board on April 16, 2024.



# JAIL REFORMS RECOMMENDATIONS MATRIX

May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
170	Develop a written report about the status of all of the recommendations of the Santa Clara County Commission on the Status of Women: Report by Jail Monitors: Female Inmates in Santa Clara County and the Need for a Gender Responsive Protocol (2015). Create an action plan addressing the recommendations of the report.	Not Covered by Consent Decree/Subject to Audit by OCLEM
171	Ensure that men and women receive an equal opportunity to participate in direct-service programs funded by the IWF, including educational and vocational opportunities.	Completed, audited, and presented to the Board on October 17, 2023.
172	Ensure that pregnant inmates are provided enough food as needed between regularly scheduled meals, whether or not she has money to pay for commissary items.	Not Covered by Consent Decree/Subject to Audit by OCLEM
173	Feminine products should be made available to women as needed, including showers.	Completed, audited, and presented to the Board on April 16, 2024.
174	The County should review its current model of providing commissary to inmates with a view toward providing a variety of products at prices that are reasonable and fair to family and friends who pay into the commissary system, and ensuring that any profit made is funneled back into the IWF, rather than to a third-party vendor. This review should re-examine the outsourcing of the commissary system to third party for-profit vendors and identify a variety of models of "in house," jail- administered commissary systems that can be administered efficiently while providing reasonable prices to inmates and families.	Completed, audited, and presented to the Board on April 16, 2024.
175	Create a separate system for 18 - 24 year olds that includes a focus on rehabilitation, wrap-around services, segregation from the adult inmate population and a young adult court.	Not Covered by Consent Decree/Subject to Audit by OCLEM
176	Create developmentally responsive policies and practices to address the unique needs of transitional age youth and young adult inmates (18 to 27 years old) through correctional officer and other jail staff training, tailored programming offerings, and appropriate classification/housing decisions to lead to longer-term rehabilitation for those incarcerated in the jail system.	Not Covered by Consent Decree/Subject to Audit by OCLEM

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May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
177	Explore the feasibility of staffing the women's section as an autonomous facility.	Completed, audited, and presented to the Board on April 16, 2024.
178	Develop and implement a department- wide gender-responsive protocol.	Not Covered by Consent Decree/Subject to Audit by OCLEM
179	Gender-responsive training for all staff beginning at the Academy level	Not Covered by Consent Decree/Subject to Audit by OCLEM
180	Gender-responsive, trauma-informed, recovery-oriented, culturally appropriate programming and services for inmates.	Completed, audited, and presented to the Board on April 16, 2024.
181	Implement a classification system validated by gender.	Completed, audited, and presented to the Board on September 28, 2021.
182	Ensure that all inmates leave the facility with an exit plan that includes preparation and orientation about support programs for re-entry.	Not Covered by Consent Decree/Subject to Audit by OCLEM
183	Continue to reduce the amount of restrictive housing and increase the amount of structured and unstructured time out of cells.	Completed, audited, and presented to the Board on September 28, 2021.
184	Continue revising the classification system and deploy it with adequate resources as soon as possible.	Completed, audited, and presented to the Board on September 28, 2021.
185	Create well thought out, well written and reliable policy that guides employees. Help them understand the reason for the policy decisions to develop the culture of a learning organization.	Completed, audited, and presented to the Board on April 16, 2024.

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May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
186	Bring sergeants together in an environment that is safe to share thoughts, ideas and concerns about employee expectations, development and leadership. One of the best ways to instill culture is to develop it through peer association and support.	Not Covered by Consent Decree/Subject to Audit by OCLEM
187	Conduct at least a simple job task analysis to determine the current responsibilities of a housing sergeant. The results should be evaluated to ensure there is adequate time for sergeants to provide direction, mentorship and correction to employees.	Not Covered by Consent Decree/Subject to Audit by OCLEM
188	Develop an objective and thorough promotional process that assesses a candidate's job knowledge, communication skills and ability to apply good supervision practices with employees and inmates.	Not Covered by Consent Decree/Subject to Audit by OCLEM
189	Use a strategic planning process to establish and communicate the most significant outcomes, goals and expected activities for matters that face the jail, then use it to communicate to employees and the community. Ideally, this would include the next three years, but even a process that looks forward one year would be of great help to share throughout the agency.	Not Covered by Consent Decree/Subject to Audit by OCLEM
190	Use the data reports as organizational report cards and moreover, use them to create conversations that reinforce desired trends or create strategies to address undesired trends.	Completed, audited, and presented to the Board on April 16, 2024.
191	Consider using data from inmate surveys as a tool to assess operations and understand inmate perceptions.	Completed, audited, and presented to the Board on April 16, 2024.
192	Include staff in decision making when practical, especially when changes will affect the operational level of the organization.	Completed, audited, and presented to the Board on April 16, 2024.
193	As new information systems and applications are adopted, the SCCS should ensure there has been proper thought and analysis into the desired operational and management data needed for success. Jail systems should create efficiency and provide important management data through regular reporting.	Completed, audited, and presented to the Board on April 16, 2024.

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Master List Number	Master List Recommendation	Status
194	They will also need training on effective coaching and appraisal skills, should the SCCS adopt a true performance appraisal system (discussed later).	Completed, audited, and presented to the Board on April 16, 2024.
195	Update, educate and train on a new use of force policy as soon as possible.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
196	SCCS leadership should clearly identify the knowledge, skills and abilities needed to be an effective supervisor and create a professional development program for supervisors based on adult learning principles. Curriculum should include an understanding of laws, standards and rules, including inmate rights, and basic operational concepts for the jail. Most importantly, it should include skill development on effectively communicating to employees the positive messages of desired behavior and coaching on how to address undesired behavior. We have found the course of study Crucial Conversations to be helpful to some, in both their personal and professional lives.	Not Covered by Consent Decree/Subject to Audit by OCLEM
197	Create incentives for prosocial inmate behavior.	Completed, audited, and presented to the Board on April 16, 2024.
198	Inventory and assess current equipment needs into sets of priorities, so when resources become available purchases can be made quickly, but wisely.	Completed, audited, and presented to the Board on April 16, 2024.
199	Two staffing studies have recently been completed for the SCCS. The Sheriff and county supervisors should carefully review them to determine if one or both are valid. If not, consider using NIC resources for educational materials or technical assistance for a third study. The Sheriff and supervisors should not discount the studies based solely on an inability to fund them. Staffing studies are often ideal situations, but they can help prioritize resources to be funded at partial levels.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.

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May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
200	As part of the existing or future staffing studies, jail practices should be evaluated to determine minimal staffing levels that will reasonably provide a safe environment for staff and inmates. We suspect that some areas are understaffed, but some practices could be modified to reduce personnel time required on a task.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
201	Research best practices in correctional learning and develop a new academy and jail training officer program that relies upon adult learning principles.	Completed, audited, and presented to the Board on April 16, 2024.
202	Establish clear policies as to when deputies, who are still in training, can be in solo assignments and for how long.	Completed, audited, and presented to the Board on April 16, 2024.
203	Develop at least a two-year in-service training calendar that not only covers the necessary skills like firearms qualification, but also classes on communication, inmate rights and legal processes like the Prison Rape Elimination Act, inmate discipline rights and grievance processes.	Completed, audited, and presented to the Board on April 16, 2024.
204	Training officers and first line supervisors are the most important people in an organization. Training officers set the work ethic and expectations, and supervisors continue to instill it throughout the rest of an employee's career. SCCS supervisors, current and future, should be given the proper education and training they need to be more effective. While this will include task level operations, the best return will come from investing in their professional development and helping them recognize and deal with minor misconduct early on.	Not Covered by Consent Decree/Subject to Audit by OCLEM
205	Current and future jail leadership should immediately engage in opportunities to learn the current best practices of jail operations through educational seminars and information sharing like NIC's Large Jail Network and the American Jail Association conferences. A wealth of educational information is online at NIC's website <a href="http://www.nicic.gov">www.nicic.gov</a> .	Completed, audited, and presented to the Board on April 16, 2024.
206	Decision makers should tour model facilities and develop ongoing learning relationships with them. The NIC, the state sheriff's association or state jail association would be good resources to find jails that are well ran and of similar complexity to Santa Clara's.	Completed, audited, and presented to the Board on April 16, 2024.
217	DOC should disband its Death Review Committee and instead utilize and attend the SCVHHS-run Death Review Committee.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.

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May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
218	The multidisciplinary Suicide Prevention Committee should act as the continuous quality improvement arm within DOC for suicide prevention and should be charged with developing a corrective action plan to implement the recommendations made by Mr. Hayes, as well as monitoring implementation of any recommendations made by the Death Review Committee. DOC and SCVHHS executive leadership should attend at least the first meeting.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
219	The multidisciplinary Suicide Prevention Committee should be reconstituted with a different operational mission. Instead of reviewing demographic data on suicide attempts and completed suicides, the Committee should act as the continuous quality improvement arm within the DOC for suicide prevention.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
220	Intake screening for suicide risk must take place immediately upon confinement and prior to housing assignment.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
221	This process may be contained within the medical screening form or as a separate form, and must include inquiry regarding: past suicidal ideation and/or attempts; current ideation, threat, plan; prior mental health treatment/hospitalization; recent significant loss (job, relationship, death of family member/close friend, etc.); history of suicidal behavior by family member/close friend; suicide risk during prior confinement; transporting officer(s) believes inmate is currently at risk.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
222	The intake screening process should include procedures for referral to mental health and/or medical personnel.	Completed, audited, and presented to the Board on October 17, 2023.
223	Any inmate assigned to a special housing unit should receive a written assessment for suicide risk by mental health staff upon admission.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
224	SCVHHS should revise the current suicide risk inquiry contained on the current "Medical Clearance" form embedded in the Electronic Medical Record to include the following questions about the inmates' suicide risk: 1) Have you ever attempted suicide? 2) Have you ever considered suicide? 3) Are you now or have you ever been treated for mental health or emotional problems? 4) Have you recently experienced a significant loss (relationship, death of family member/close friend, job, etc.)? 5) Has a family member/close friend ever attempted or committed suicide? 6) Do you feel there is nothing to look forward to in the immediate future (inmate expressing helplessness and/or hopelessness)? 7) Are you thinking of hurting and/or killing yourself?	Covered by Consent Decree and subject to monitoring by federal court appointed experts.

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May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
225	SCVHHS officials should initiate a continuous quality assurance plan to periodically audit the intake screening process to ensure that nursing staff are asking all questions to newly admitted detainees as required.	Completed, audited, and presented to the Board on October 17, 2023.
226	DOC and SCVHHS should always initiate a mental health referral if there is documentation reflecting possible mental illness and/or suicidal behavior during an inmate's prior confinement within the DOC.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
227	SCVHHS officials should develop a triage system for mental health referrals based upon acuity of behavior, including emergent, urgent, and routine. Any inmate expressing current suicidal ideation and/or current suicidal/self-injurious behavior should result in an emergent mental health referral.	Completed, audited, and presented to the Board on October 17, 2023.
228	SCVHHS should conduct a continuous quality improvement audit to determine whether the 12 current criminal offenses that automatically result in a "charge-based mental health referral" are effective in preventing suicides.	Completed, audited, and presented to the Board on October 17, 2023.
229	Procedures that enhance communication at three levels: 1) between the sending institution/arresting-transporting officer(s) and correctional staff; 2) between and among staff (including medical and mental health personnel); and 3) between staff and the suicidal inmate.	Completed, audited, and presented to the Board on October 17, 2023.
230	Isolation should be avoided. Whenever possible, house in general population, mental health unit, or medical infirmary, located in close proximity to staff.	Completed, audited, and presented to the Board on October 17, 2023.
231	Removal of an inmate's clothing (excluding belts and shoelaces), as well as use of physical restraints (e.g. restraint chairs/boards, straitjackets, leather straps, etc.) and cancellation of routine privileges (showers, visits, telephone calls, recreation, etc.), should be avoided whenever possible, and only utilized as a last resort for periods in which the inmate is physically engaging in self-destructive behavior.	Completed, audited, and presented to the Board on October 17, 2023.
232	SCVHHS safety smocks should be implemented only by medical and/or mental health staff and only when a clinician believes that the inmate is at high risk for suicide by hanging, not as a default or behavior management plan.	Completed, audited, and presented to the Board on October 17, 2023.
233	SCVHHS should develop suicide prevention policies to address procedures for deciding which possessions and privileges are provided to inmates on suicide precautions.	Completed, audited, and presented to the Board on October 17, 2023.

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Master List Number	Master List Recommendation	Status
234	Two levels of supervision are generally recommended for suicidal inmates- <i>close observation</i> and <i>constant observation</i> . <i>Close observation</i> is reserved for the inmate who is not actively suicidal, but expresses suicidal ideation or does not threaten suicide, but demonstrates other concerning behavior (through actions, current circumstances, or recent history) indicating the potential for self-injury, should be placed under close observation. This inmate should be observed by staff at staggered intervals not to exceed every 10 minutes. <i>Constant Observation</i> is reserved for the inmate who is actively suicidal, either by threatening or engaging in self-injury. This inmate should be observed by a staff member on a continuous, uninterrupted basis. Other supervision aids (e.g., closed circuit television, inmate companions/watchers, etc.) can be utilized as a supplement to, but never as a substitute for, these observation levels. Inmates on suicide precautions should be reassessed on a daily basis.	Completed, audited, and presented to the Board on October 17, 2023.
235	SCCSO and SCHHS suicide prevention policies should include two levels of observation (close observation and constant observation) that describe with specificity the behavior warranting each level of observation.	Completed, audited, and presented to the Board on October 17, 2023.
236	SCVHHS should eliminate the minimum and maximum length of stay on suicide precautions for inmates identified as suicidal and instead use clinical judgement on a case-by-case basis to determine the length of stay.	Completed, audited, and presented to the Board on October 17, 2023.
237	SCVHHS should revise any suicide prevention policy to permit both custody and medical staff to initiate suicide precautions and require that only mental health staff can discontinue suicide precautions after a comprehensive suicide risk assessment.	Completed, audited, and presented to the Board on October 17, 2023.
238	SCVHHS's <i>draft</i> Suicide Risk Assessment form should be finalized and implemented as soon as possible. The current draft should be revised to include a disposition section (e.g., initiate, continue, or discharge suicide precautions; specified level of observation; etc.), as well as a treatment or safety plan section that requires the clinician to specify strategies to reduce future suicidal ideation.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
239	All SCVHHS clinicians (including psychiatrists and other qualified mental health professionals) should complete the Suicide Risk Assessment form whenever an inmate is identified and referred for possible suicidal behavior. The Suicide Risk Assessment form should be utilized at least twice, i.e., for initiation of suicide precautions, as well as justification for discharging the inmate from suicide precautions.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
240	The Suicide Risk Assessment form should be completed in a private setting and not cell-side unless the inmate-patient refuses a private interview. Refusal of a private interview should be documented in the electronic medical record (EMR).	Covered by Consent Decree and subject to monitoring by federal court appointed experts.



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Master List Number	Master List Recommendation	Status
241	SCVHHS mental health clinicians should develop treatment plans for inmates discharged from suicide precautions. Those plans should describe signs, symptoms, and the circumstances in which the risk for suicide is likely to recur; how recurrence of suicidal thoughts can be avoided; and actions the patient or staff can take if suicidal thoughts occur.	Completed, audited, and presented to the Board on October 17, 2023.
242	SCVHHS should ensure that all inmates discharged from suicide precautions remain on mental health caseloads and receive regularly scheduled follow-up assessments by mental health staff until their release from custody, in order to safeguard the continuity of care for suicidal inmates.	Completed, audited, and presented to the Board on October 17, 2023.
244	A facility's policy regarding intervention should be threefold: 1) all staff who come into contact with inmates should be trained in standard first aid and cardiopulmonary resuscitation (CPR); 2) any staff member who discovers an inmate attempting suicide should immediately respond, survey the scene to ensure the emergency is genuine, alert other staff to call for medical personnel, and begin standard first aid and/or CPR; and 3) staff should never presume that the inmate is dead, but rather initiate and continue appropriate life-saving measures until relieved by arriving medical personnel.	Completed, audited, and presented to the Board on October 17, 2023.
245	In addition, all housing units should contain a first aid kit, pocket mask or mouth shield, Ambu bag, and rescue tool (to quickly cut through fibrous material). All staff should be trained in the use of the emergency equipment. Finally, in an effort to ensure an efficient emergency response to suicide attempts, "mock drills" should be incorporated into both initial and refresher training for all staff.	Completed, audited, and presented to the Board on October 17, 2023.
246	DOC should ensure that the compliance rate of CPR/AED training for custody personnel (excluding those who might be out on disability or other leave) be maintained at a minimum of 90 percent.	Completed, audited, and presented to the Board on October 17, 2023.
247	Every completed suicide, as well as serious suicide attempt (i.e., requiring hospitalization), should be examined by a morbidity- mortality review. (If resources permit, clinical review through a psychological autopsy is also recommended.)	Covered by Consent Decree and subject to monitoring by federal court appointed experts.

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Master List Number	Master List Recommendation	Status
248	The review, separate and apart from other formal investigations that may be required to determine the cause of death, should include: 1) review of the circumstances surrounding the incident; 2) review of procedures relevant to the incident; 3) review of all relevant training received by involved staff; 4) review of pertinent medical and mental health services/reports involving the victim; 5) review of any possible precipitating factors that may have caused the victim to commit suicide or suffer a serious suicide attempt; and 6) recommendations, if any, for changes in policy, training, physical plant, medical or mental health services, and operational procedures.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
249	Further, all staff involved in the incident should be offered critical incident stress debriefing.	Completed, audited, and presented to the Board on October 17, 2023.
250	SCVHHS should revise an existing policy or create a new policy that sets forth appropriate procedures for conducting the Death Review Committee.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
251	DOC representatives to the Death Review Committee should become active participants and partners on the SCVHHS-run Death Review Committee.	Completed, audited, and presented to the Board on October 17, 2023.
252	All SCVHHS mental health personnel (including psychiatrists) should receive additional training on: 1) how to complete the Suicide Risk Assessment form, which should include examples of adequate and inadequate assessments; and 2) how to complete a reasonable treatment plan that contains specific strategies for reducing future suicidal ideation, which should include examples of adequate and inadequate treatment plans.	Completed, audited, and presented to the Board on October 17, 2023.
253	Cell doors- large vision panels that are never covered	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
254	Cell doors-interiors devoid of handles/knobs	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
255	Cell doors- Food pass via recessed door pulls that can close and lock	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
256	Cell doors- interior hinges bevel down.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.

**JAIL REFORMS RECOMMENDATIONS MATRIX**

May 7, 2024 BOARD OF SUPERVISORS

<b>Master List Number</b>	<b>Master List Recommendation</b>	<b>Status</b>
257	<b>Cell doors- door frame rounded with smooth top edges.</b>	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
258	<b>Cell doors- grouted with minimal exposed edges.</b>	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
259	<b>Cell doors- paneling or security screening installed inside cell doors with steel bars.</b>	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
260	<b>Cell doors- Solid cell fronts modified with vision panel or small mesh.</b>	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
261	<b>Vents, ducts, grills, lights- protrusion free and covered with screening, tamper proof.</b>	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
262	<b>Drains- holes 1/8 in wide and no more than 3/16 in wide or 16 mesh per square inch.</b>	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
263	<b>Telephone Cords- no wall mounted cords placed inside cells.</b>	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
264	<b>Clothing hooks- none.</b>	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
265	<b>Toilet-sink- concealed plumbing with outside control valve.</b>	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
266	<b>Toilet-sink- no anti-squite slit, toothbrush holder, toilet paper rod, towel bar.</b>	Covered by Consent Decree and subject to monitoring by federal court appointed experts.

JAIL REFORMS RECOMMENDATIONS MATRIX  
May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
267	<b>Beds- heavy molded plastic or concrete slab with rounded corners.</b>	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
268	<b>Bunks- bolted flush to the wall.</b>	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
269	<b>Bunks- holes covered.</b>	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
270	<b>Bunks- ladders removed.</b>	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
271	<b>Bunks- covered underneath.</b>	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
272	<b>Electricity- turned off from wall outlets outside of cell.</b>	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
273	<b>Lighting- Ample light for reading.</b>	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
274	<b>Lighting- Low wattage night light bulbs.</b>	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
275	<b>Infrared filter over the ceiling lights.</b>	Covered by Consent Decree and subject to monitoring by federal court appointed experts.

JAIL REFORMS RECOMMENDATIONS MATRIX  
May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
276	<b>CCTV monitoring- identifies a suicide attempt in progress.</b>	Completed, audited, and presented to the Board on April 16, 2024.
277	<b>CCTV monitoring- Camera should be enclosed in a tamper-proof box and does not contain anchoring points</b>	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
278	<b>CCTV monitoring- Cells with monitors should be painted in pastel.</b>	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
279	<b>CCTV monitoring- Cameras should have clear view of all four corners and day and night capabilities.</b>	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
280	<b>Smoke detectors- mounted flush in the ceiling.</b>	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
281	<b>Smoke detectors- audible alarm at control desk.</b>	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
282	<b>Smoke detectors- protective coverings high enough to be outside the reach of an inmate.</b>	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
283	<b>Smoke detectors- far enough away from the toilet to not be used as a ladder.</b>	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
284	<b>Smoke detectors- 10 ft ceiling height.</b>	Covered by Consent Decree and subject to monitoring by federal court appointed experts.

JAIL REFORMS RECOMMENDATIONS MATRIX  
May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
285	Install v- mesh covering not large enough to thread a noose through.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
286	Water sprinklers- head should not be exposed.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
287	Audio monitoring intercom- turned up high to hear calls for distress or movement.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
288	Location of suicide precaution cells- as close to the control desk as possible.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
289	Modesty walls/ shields- triangular, rounded or sloping tops to prevent anchoring.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
290	Modesty walls/ shields- both head and feet visible.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
291	Desks, benches, tables, stools or pull- out seats- extend bed slab for use as a seat.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
292	Desks, benches, tables, stools or pull- out seats-cylinder-shaped concrete seat anchored to the floor with rounded edges.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
293	Desks, benches, tables, stools or pull- out seats- triangular corner desktop anchored to the two walls.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
294	Desks, benches, tables, stools or pull- out seats- rectangular desk top with triangular end plates anchored to the wall.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.

JAIL REFORMS RECOMMENDATIONS MATRIX  
May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
295	Desks, benches, tables, stools or pull- out seats- towel racks should be removed from any desk area.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
296	Shelf tops and exposed hinges- solid, triangular end-plates.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
297	Security windows- outside view to identify day via sunlight.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
298	Security windows- covered with Lexan paneling to prevent access to bars.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
299	Security windows- if screening or grating is used, cover holes.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
300	DOC Officials should look at options for better ensuring reasonable sound privacy at the booking counter when multiple nurses are conducting intake screening.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
301	SCVHHS mental health staff should conduct screening and/or crisis assessments in an area the provides reasonable privacy and confidentiality.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
302	Inmates should be housed in suicide- resistant, protrusion free cells.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
303	SXXSO officials should designate specific cells within DOC that will be utilized to house suicidal inmates, and then embark upon an inspection program to ensure that inmates on suicide precautions are housed in "suicide-resistant" cells. Specific recommendations regarding the removal of obvious protrusions in cells can be found in the "Checklist for the Suicide-Resistant" Design of Correctional Facilities."	Covered by Consent Decree and subject to monitoring by federal court appointed experts.

JAIL REFORMS RECOMMENDATIONS MATRIX  
May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
304	All correctional, medical, and mental health staff should receive 8 hours of initial suicide prevention training, followed by 2 hours of annual training.	Completed, audited, and presented to the Board on October 17, 2023.
305	At a minimum training should include avoiding negative attitudes to suicide prevention, inmate suicide research, why correctional environments are conducive to suicidal behavior, potential predisposing factors to suicide, high- risk suicide periods, warning signs and symptoms, identifying suicidal inmates despite the denial of risk, components of the agency's suicide prevention policy, and liability issues associated with inmate suicide.	Completed, audited, and presented to the Board on October 17, 2023.
306	DOC and SCVHHS should only utilize classroom-instructed suicide prevention training.	Completed, audited, and presented to the Board on October 17, 2023.
307	DOC and SCVHHS should collaborate on the development of a new 4 to 8 hr pre-service suicide prevention curriculum for new employees.	Completed, audited, and presented to the Board on October 17, 2023.
308	DOC and SCVHHS should collaborate on the development of a two-hour annual suicide prevention curriculum for all custody, medical and mental health staff.	Completed, audited, and presented to the Board on October 17, 2023.
309	SCVHHS mental health personnel (including psychiatrists) should receive additional training on comprehensive suicide risk assessments and how to develop a reasonable treatment plan that contains specific strategies for reducing future suicidal ideation.	Completed, audited, and presented to the Board on October 17, 2023.
310	Implement a classification system that conforms to best practices for housing different categories of inmates, including male and female, juvenile and adult, pretrial and convicted, mentally ill, physically ill, disabled, etc.	Completed, audited, and presented to the Board on September 28, 2021.
311	Ensure that a new inmate classification system is based on best practices that clearly conform to inmates' charges, behavior, and mental and physical abilities.	Completed, audited, and presented to the Board on September 28, 2021.
312	Expand the current MOU for the Jail Observer Program to include up to 5 OHR staff members who will have security clearance and the ability to act in an ombudsman role with inmates, their families and county staff.	Not Covered by Consent Decree/Subject to Audit by OCLEM



# JAIL REFORMS RECOMMENDATIONS MATRIX

May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
313	Provide for the hiring of 2-3 more JOP lawyers/paralegals with a background in mediation and ombudsman practices who will join the OHR staff. The current JOP program is understaffed, and the County can clearly benefit from additional staff to act as a neutral, outside resource for all those interested in the well-being and efficiency of the SCC corrections system.	Not Covered by Consent Decree/Subject to Audit by OCLEM
314	Expand the current MOU to include additional signatories, or create two additional MOUs related to JOP oversight with county medical and behavioral health entities, to facilitate ongoing improvements and best practices in inmate health care.	Not Covered by Consent Decree/Subject to Audit by OCLEM
315	The second is that we urge for new leadership in Custody Operations. The JRC has heard testimony recommending that the Sheriff's office be removed from administering the jails. In research we have done, it is clear that the DOC and the Sheriff's office have both operated the jails in prior decades. And it is common for a county Sheriff to be responsible for Custody Operations. But we feel that trust in leadership is a key mandate for this role and that trust has been grievously eroded. The community, staff, inmates and family and friends of inmates all attest to this to the HRC, JRC and to the Blue Ribbon Commission. We feel this trust has eroded to such a degree that we cannot move forward in making necessary changes under the current leadership. In setting up new leadership for Custody Operations, clear lines of authority and accountability need to be established. Currently, it seems to be an ineffective relationship and operation between the DOC.	Completed, audited, and presented to the Board on October 17, 2023.
316	This may also take a committee to work on to reach significant reform. However, reform cannot occur with the current leadership in place.	Completed, audited, and presented to the Board on October 17, 2023.
317	Ensure that a positive and safe working and custodial environment and culture is established and maintained for staff and inmates.	Not Covered by Consent Decree/Subject to Audit by OCLEM
318	Ensure that the supervision of staff is appropriate, with clear and consistent policies and procedures that reflect Constitutional law, applicable regulations, and human rights standards. Ensure that staff incentives support this same culture and practices.	Completed, audited, and presented to the Board on April 16, 2024.
319	Ensure adequate documentation and accessibility of DOC policies and procedures.	Completed, audited, and presented to the Board on April 16, 2024.

# JAIL REFORMS RECOMMENDATIONS MATRIX

May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
320	Establish effective shift change communication procedures and staffing levels.	Completed, audited, and presented to the Board on April 16, 2024.
321	Any inclinations to intimidate or retaliate against an officer or inmate are swiftly and effectively responded to in a manner based on zero tolerance.	Not Covered by Consent Decree/Subject to Audit by OCLEM
322	Ensure that staffing levels meet best practice standards, effectively support safety and programming, facilitate the delivery of all services, ensure timely transportation of inmates within jail facilities and to necessary service locations, and improve the culture of DOC operations.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
323	Ensure HD digital cameras are placed throughout the facility and operated legally and consistently with best practices: Cameras in jail visiting areas; Complete ("blanket") coverage of jail facilities, no blind spots; Complete ("blanket") coverage of jail facilities, no blind spots; Footage stored for 24 months.	Completed, audited, and presented to the Board on May 2, 2023.
324	Implement cameras with a policy of "write, review, amend," whereby correctional officers can view footage <i>after</i> they write up standard reports and can amend their reports if they see something they missed. However, review of footage would be halted during any use of force investigation, and footage would only be made available to the investigator.	Completed, audited, and presented to the Board on May 2, 2023.
325	Implement an upgrade of computers, software, and security technology to meet best practices and standards for county jails.	Not Covered by Consent Decree/Subject to Audit by OCLEM
326	Ensure that officer recruitment, selection, retention, and progressive discipline are based on best practices, the DOC's mission, and effective training.	Completed, audited, and presented to the Board on April 16, 2024.
327	Ensure that inmates are familiar with and have access to grievance and complaint processes, including the Jail Observer Program (JOP), and that inmates are guaranteed confidentiality, consistent application, and timely, impartial responses when accessing these processes.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.

JAIL REFORMS RECOMMENDATIONS MATRIX  
May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
328	Ensure the development and use of humane inmate discipline practices, based on clearly documented and communicated policies, procedures, and training of officers.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
329	Ensure that medical & behavioral health care needs of inmates, as reported by inmates and in court orders are responded to timely fashion based on medical and behavioral health best practices.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
330	Ensure that medical care and behavioral health care delivery systems have adequate space for in- facility urgent care, and ensure that prescribed equipment is on hand to avoid delays in accommodating temporarily or permanently physically disabled inmates.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
331	Ensure that inmates' access to and provision of preventative and urgent medical and behavioral health care are based on best practices for short- term and long-term needs.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
332	The first is that Santa Clara County create an independent oversight agency that will regularly audit Santa Clara County Custody Division. This agency would also administer an officer and inmate grievance process as an independent entity from the custody system. The County would need to decide on the type of agency that would best serve the community (such as a Solicitor General, Independent Auditor, Community Commission, Federal Oversight or any combination of the above).	Completed, audited, and presented to the Board on June 7, 2022.
333	We recommend that a small committee work on the agency designation. The committee should be made up of representatives from the County Administration, JOP, JRC, and potentially members of the BRC, Silicon Valley Debug, and PACT.	Completed, audited, and presented to the Board on October 17, 2023.
334	Ensure that visitation accommodations for inmates, legal counsel, and family and friends are established, including: Sufficient space for the volume of visits, based on the inmate population; Accommodations that are supportive of all parties' interest in establishing and maintaining the human dignity of inmates and families; and an easily accessible visitation appointment and cancellation system.	Completed, audited, and presented to the Board on April 16, 2024.

JAIL REFORMS RECOMMENDATIONS MATRIX  
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Master List Number	Master List Recommendation	Status
335	Ensure that prices of phone calls by inmates to their families, legal counsel, chaplains, advocates, and friends facilitate effective communication and expeditious processing of cases, and are based on legitimate costs that prevent vendor profiteering.	Completed, audited, and presented to the Board on May 2, 2023.
336	Ensure that inmates receive clear, easily accessible, and language appropriate information about the inmate classification system and inmates' rights and responsibilities.	Completed, audited, and presented to the Board on April 16, 2024.
337	Direct FAF to immediately resolve poor plumbing, water temperature, heating, lighting, and access to water for showers and consumption. Inmates should not have to wait for a new building to be constructed to resolve this human rights concern.	Completed, audited, and presented to the Board on April 16, 2024.
338	Ensure that inmates are allocated sufficient and effective cleaning supplies to maintain the hygiene and safety of their cells and dorms.	Completed, audited, and presented to the Board on April 16, 2024.
339	Establish and develop inmate programming for both pretrial detainees and inmates convicted and serving sentences.	Completed, audited, and presented to the Board on April 16, 2024.
340	Programming should increase inmates' capacity to return to the community, participate effectively in family life and work environments, and curtail recidivism.	Not Covered by Consent Decree/Subject to Audit by OCLEM
341	Programming should accommodate inmates' capacity for learning, linguistic needs, and ADA requirements, and should provide certification(s) of completion.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
342	Ensure that office hours for pretrial detainees and their families are easily accessible and staffed to facilitate timely responses to questions about the inmates' stay in the jail facilities, navigation of the criminal justice system, and access to court appointed attorneys, advocates, or an ombudsman.	Not Covered by Consent Decree/Subject to Audit by OCLEM

JAIL REFORMS RECOMMENDATIONS MATRIX  
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Master List Number	Master List Recommendation	Status
343	Ensure that staff are adequately trained in, understand, and consistently apply the Prison Rape Elimination Act (PREA) legal requirements.	Completed, audited, and presented to the Board on April 16, 2024.
344	Ensure that the provision of staff training is appropriate, timely, and sufficient to meet staffing needs and to improve and maintain jail security and officer and inmate safety.	Completed, audited, and presented to the Board on April 16, 2024.
345	Staff training should promote the rehabilitation of inmates and contribute to reducing recidivism.	Completed, audited, and presented to the Board on April 16, 2024.
346	A special emphasis on appropriate use of force should be included in policies, procedures, and the training of staff.	Completed, audited, and presented to the Board on April 16, 2024.
347	Implement an improved objective Jail Classification System.	Completed, audited, and presented to the Board on September 28, 2021.
348	Classification will adopt a nationally recognized and validated assessment tool from the U. S. Department of Justice, National Institute of Corrections (NIC). This plan will be presented to the Board of Supervisors by May 2016.	Completed, audited, and presented to the Board on September 28, 2021.
349	Prior to housing, all inmates will be classified using the initial classification form within six to eight hours of arrival at the facility and prior to housing. The initial form is intended to identify an inmate who presents a serious risk to the safety, security, and orderly operation of the facility.	Completed, audited, and presented to the Board on September 28, 2021.
350	Once the initial custody designation has been completed, the inmate will be further interviewed/screened by the Classification Deputy to verify the accuracy of the objective classification data. The Classification Deputy will determine the need for mental health housing, Medical Housing (ADA), Protective Custody, Administrative Segregation housing and/or possible program needs.	Completed, audited, and presented to the Board on September 28, 2021.

**JAIL REFORMS RECOMMENDATIONS MATRIX**

**May 7, 2024 BOARD OF SUPERVISORS**

<b>Master List Number</b>	<b>Master List Recommendation</b>	<b>Status</b>
351	Inmates needing mobility accommodations, (i.e., walkers, canes, braces, prosthetics, wheel chairs, etc.) will be assigned to various housing areas based on their Classification, thus allowing full accesses to educational/re-entry programs, services and activities.	Completed, audited, and presented to the Board on September 28, 2021.
352	Provide inmates with an acknowledgment form of their initial Classification custody level.	Completed, audited, and presented to the Board on September 28, 2021.
353	Classification will be implementing a new form for all inmates at their initial classification. This acknowledgement form will include the inmates first and last name, booking number, PFN (personal file number), security level and a narrative explaining how to appeal their classification level if they wish to do so. Classification will utilize this notification to provide the inmate a clear comprehension of his/her security level and provide an opportunity for questions/ interpretations.	Completed, audited, and presented to the Board on September 28, 2021.
354	Institute an appeal process for inmates who are initially classified at a high security level.	Completed, audited, and presented to the Board on September 28, 2021.
355	Following placement into temporary Administrative Segregation, a supervisor (sergeant) from Classification will provide the inmate with a notification form of temporary segregation and an appeal of segregation form within 48 hours of placement. If the inmate wishes to appeal his/her placement they must complete the form and return it to classification within 7 days.	Completed, audited, and presented to the Board on September 28, 2021.
356	After receipt of the form a classification supervisor (sergeant) will hold a hearing within 72 hours with the inmate. The inmate will be made aware of the decision within 48 hours. Appropriate action (placement) will be taken immediately after the appeal has been heard/authorized by a Classification Lieutenant and/or Captain. If an inmate's appeal is denied, and Administrative Segregation placement has proceeded, Classification shall review the inmates file every 60 days thereafter.	Completed, audited, and presented to the Board on September 28, 2021.
357	Expand structured and unstructured out time for all inmates within their security level.	Completed, audited, and presented to the Board on September 28, 2021.

JAIL REFORMS RECOMMENDATIONS MATRIX  
May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
358	Move low security level, pre-trial inmates to the Elmwood Facility and create a minimum camp for protective custody inmates.	Completed, audited, and presented to the Board on October 17, 2023.
359	Evaluate where protective custody inmates can be assigned to a secure area on the minimum camp. If feasibility is determined, the planning and construction will be in collaboration with the County's Facilities and Fleet Department.	Completed, audited, and presented to the Board on October 17, 2023.
361	Review and implement recommendations provided by the U.S. Department of Justice's National Institute of Corrections (NIC). One of the major focuses of the NIC review is to examine organizational culture.	Completed, audited, and presented to the Board on April 16, 2024.
362	To shift the organizational philosophy toward correctional best practices, including the manner in which correctional staff interacts with the changing inmate population.	Completed, audited, and presented to the Board on April 16, 2024.
363	Revise all Custody and Custody Health policies, procedures, practices, forms and inmate handbook to ensure compliance with current ADA mandates.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
364	Increase and modernize the video camera surveillance system throughout custody facilities.	Completed, audited, and presented to the Board on May 2, 2023.
365	Implementing an "early warning" software system that will allow supervisors to track grievance trends including units/pods, facilities and custody staff. This data will be utilized to allow for timely intervention, additional training and/or policy changes to attempt to decrease grievances. The Internal Affairs unit will begin training on the "early warning" system on March 16, 2016.	Not Covered by Consent Decree/Subject to Audit by OCLEM
366	Complete the implementation of an early warning system that will quantify the number of use of force incidents by employee, identify grievances and internal affairs complaints and identify patterns and trends for further analysis. The system is designed to provide the identification of problems in order to intervene and prevent.	Not Covered by Consent Decree/Subject to Audit by OCLEM

JAIL REFORMS RECOMMENDATIONS MATRIX  
May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
367	Increase transparency on disciplinary actions taken against employees.	Not Covered by Consent Decree/Subject to Audit by OCLEM
368	Publish and post online a quarterly report of all disciplinary actions taken involving staff. Information would include a summary of the incident and the level of disciplinary action taken. Employee identification will be redacted to comply with all employee privacy laws and collective bargaining agreements.	Not Covered by Consent Decree/Subject to Audit by OCLEM
369	Publish and post online a discipline matrix so employees know what the level of discipline may be for specific policy violations.	Not Covered by Consent Decree/Subject to Audit by OCLEM
370	Strengthen and provide a more thorough review, screening and timely investigation of complaints received by Internal Affairs.	Not Covered by Consent Decree/Subject to Audit by OCLEM
371	Assign all complaints to the IA Unit for investigation and eliminate review by front-line staff.	Not Covered by Consent Decree/Subject to Audit by OCLEM
375	Implement a software solution that provides an early risk assessment (ERA) of employee conduct to proactively identify trends, such as the number of force incidents, inmate grievances, allegations of misconduct and policy violations. The solution will provide data and analytical reports to increase accountability and monitoring of employee behavior. Having a system to identify trends will potentially reduce the incidence of misconduct.	Not Covered by Consent Decree/Subject to Audit by OCLEM
376	Implement a plan to reduce the number of inmates in custody with mental health issues.	Completed, audited, and presented to the Board on June 7, 2022.
377	Increase the number of mental health treatment opportunities for those scheduled for release from custody.	Completed, audited, and presented to the Board on June 7, 2022.



JAIL REFORMS RECOMMENDATIONS MATRIX  
May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
378	Continue to work with County Behavioral Health on the concept of mobile crisis response teams to potentially reduce the numbers of arrests where treatment is more appropriate.	Completed, audited, and presented to the Board on June 7, 2022.
379	The inmate grievance forms will include "Retaliation" and "Harassment" as specific categories of "Grievances Against Staff" for inmates to specify.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
380	Install grievance lock boxes to ensure that inmates have a confidential and secure method to file a grievance. Grievance Intake Forms and instructions on how to fill out those forms would be located adjacent to the lock boxes.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
381	Implement a grievance tracking system to document receipt of grievance, assign grievance to appropriate unit, and monitor progress on resolution of grievance.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
382	Share collected data during the squad meetings to identify areas for improvement.	Completed, audited, and presented to the Board on April 16, 2024.
383	Create an electronic grievance form that inmates can utilize to file grievances on-line while utilizing the new tablets procured for inmate use at custody facilities.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
384	Create a voice only grievance form that inmates can use to file grievances that utilizes voice prompts. This will assist inmates who may be not be able to read or for other reasons are unable to fill out a written form.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
385	Publicly post a quarterly report detailing the number of grievances by category, status of grievances and disposition of grievances resolved. Personal information of all custody staff and inmates will be redacted to ensure privacy rights and laws are adhered to. In the instance of any criminal investigation stemming from a grievance, that information will not be included in these quarterly reports so as not to influence or compromise the investigation.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.

# JAIL REFORMS RECOMMENDATIONS MATRIX

May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
386	The data culled from this automated tracking system will be utilized to allow for timely intervention, additional training and/or policy changes, or additional inmate education on rules while in custody to attempt to decrease inmate infractions.	Not Covered by Consent Decree/Subject to Audit by OCLEM
389	Conduct a comprehensive clinical review of our custody healthcare program to determine what gaps, if any, exist in our custody healthcare delivery system.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
390	Upon completion of the clinical gap analysis, finish implementation of the recommended changes that will improve access to competent healthcare in a cost effective and efficient manner.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
391	Add minimum performance standards for Custody Health clinical positions.	Completed, audited, and presented to the Board on April 16, 2024.
392	Accelerated the implementation of cutting edge electronic medical record technology.	Completed, audited, and presented to the Board on April 16, 2024.
393	Evaluate administrative oversight of Custody Health to achieve greater accountability and oversight.	Not Covered by Consent Decree/Subject to Audit by OCLEM
394	Develop a mental health pilot program for seriously mentally ill inmates housed in our custodial facilities that increases clinical staffing, increases individual/group therapy, increases out of cell recreation opportunities, develops a resilient reentry process to ensure continuity of care in the community. This program will explore alternative structured and supervised environments in the community for the seriously mentally ill that reduces returns to custody for behaviors that are an affect of their mental illnesses without jeopardizing public safety.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
395	Analyze clinical outcomes for pilot project quarterly and make appropriate adjustments, if any, in clinical treatment programs to improve outcomes in a cost effective manner.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
396	Review best practices for suicide prevention for custodial facilities.	Completed, audited, and presented to the Board on October 17, 2023.

JAIL REFORMS RECOMMENDATIONS MATRIX  
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Master List Number	Master List Recommendation	Status
397	Develop a plan for consistent and reliable transportation from jail to the designated treatment center.	Not Covered by Consent Decree/Subject to Audit by OCLEM
398	Raise the current minimum educational qualifications for Sheriffs' Custody Deputy. Additional consideration should be given applicants with a college degree, mental health college courses, criminal justice courses, or behavioral science course work or pertinent work experience in areas of mental health, behavioral science, or criminal justice system. There needs to be further study to determine the appropriate level of college required.	Completed, audited, and presented to the Board on April 16, 2024.
399	Coordinate with the County Employee Services Agency the modification of the current minimum qualifications for Sheriff's Custody Deputy job specification.	Completed, audited, and presented to the Board on April 16, 2024.
400	Increase staffing in the Background and Recruiting Unit to provide additional time per individual applicant background process and to recruit greater numbers of highly qualified candidates in order to reduce staffing vacancies.	Completed, audited, and presented to the Board on April 16, 2024.
401	Hire and train an in-house polygrapher and double the amount of polygraph examinations required of applicants.	Completed, audited, and presented to the Board on April 16, 2024.
402	Establish a nine-member Custody Operations Independent Civilian Oversight Commission comprised of community volunteers. The Commission will consist of nine members, five appointed by the Board of Supervisors (One commissioner per each Supervisorial district). Those five commissioners will then select the remaining four public board members.	Completed, audited, and presented to the Board on June 7, 2022.
403	Establish scope of commission, establish commissioner roles and responsibilities, establish conflict of interest requirements and establish appropriate support staff.	Completed, audited, and presented to the Board on June 7, 2022.

# JAIL REFORMS RECOMMENDATIONS MATRIX

May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
404	Create an Office of Inspector General (IG) that serves the civilian oversight commission and is directed by the commission to provide monitoring of custody operations and facilities (including medical and mental health services) and provide recommendations for improvement. The IG shall focus on matters relevant to department-wide policies, procedures and protocols and review use of force patterns, trends and statistics. The IG will review Internal Affairs investigations, allegations of misconduct and employee discipline. The IG shall make policy and practice recommendations to the Independent Civilian Oversight Committee.	Completed, audited, and presented to the Board on June 7, 2022.
405	The Independent Civilian Oversight Committee will publish an annual report on the status of custody operations, use of force statistics, and the resolution of inmate and citizen complaints. The commission may also publish other reports it commissions its IG to conduct.	Completed, audited, and presented to the Board on June 7, 2022.
406	Circulate an RFP for a tablet device capable of allowing inmates to electronically file grievances, request forms, and request medical, psychiatric and dental services.	Completed, audited, and presented to the Board on April 16, 2024.
407	Develop multi-lingual written educational materials to inform inmates of their rights while in custody, the grievance process and how to file a grievance. These materials would be distributed to those in custody during the intake process.	Completed, audited, and presented to the Board on April 16, 2024.
408	Create an easy to understand, multi-lingual, Grievance Intake Form with simple directions on how to fill out the form.	Completed, audited, and presented to the Board on April 16, 2024.
409	Create a multi-lingual inmate training video describing the grievance process. It will be presented to inmates upon intake into custody facilities.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
410	Create multi-lingual written materials that detail in-custody rules, expected inmate behavior and consequences of rule violations (infractions). These materials would be distributed and explained to each inmate upon intake into custody facilities.	Completed, audited, and presented to the Board on April 16, 2024.
411	Create multi-lingual videos to be shown to each inmate upon intake into custody facilities that detail in-custody rules, expected inmate behavior and consequences of rule violations (infractions).	Not Covered by Consent Decree/Subject to Audit by OCLEM

JAIL REFORMS RECOMMENDATIONS MATRIX  
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Master List Number	Master List Recommendation	Status
412	Assign custody staff to reinforce, re-educate, and remind inmates of their expected behavior while in custody. Continuous education is intended to reduce the number of infractions issued and create a more cohesive custody environment.	Completed, audited, and presented to the Board on April 16, 2024.
413	Revise Inmate Handbook and Orientation process to ensure inmates clearly understand how to access timely healthcare and to file healthcare grievances.	Completed, audited, and presented to the Board on April 16, 2024.
414	Update and eliminate existing structural access barriers in aging jail facilities to comply with the American's with Disabilities Act Title II ADAAG specifications.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
415	Develop and implement structural modification plans to remove barriers to access in the Main Jail and Elmwood Correctional Facilities.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
416	Design the proposed Main Jail East Facility to maximize structural and program access for inmates with disabilities.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
417	Purchase ADA tracking software program to ensure: 1) inmates with disabilities are identified and tracked, 2) inmates with disabilities receive reasonable accommodations, 3) inmates have appropriate housing for their respective disabilities, 4) inmates have equal program access, and 5) inmates have their ADA grievances tracked and resolved in a timely fashion.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
418	Have ADA experts monitor compliance with current ADA mandates and facility modifications on an ongoing basis and prepare a corrective action plan every quarter in areas that are noncompliant.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
419	Replace aging Main Jail South with a quality facility that will provide additional bed space, increased programming and expanded medical and mental health treatment options for inmates.	Not Covered by Consent Decree/Subject to Audit by OCLEM

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May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
420	Implement Americans with Disabilities Act (ADA) repairs to custody facilities to ensure the appropriate accommodation is provided for all inmates.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
421	Secure additional funding to begin work on additional ADA repairs and improvements.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
422	Complete structural modifications in the Main Jail North Booking Area to allow medical and mental health staff to screen inmates for sensitive health care information in a confidential setting to comply with federal HIPPA requirements.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
423	Expand the number of medical beds at Elmwood Correctional Facility.	Completed, audited, and presented to the Board on April 16, 2024.
424	Begin the necessary repairs and physical improvements to Elmwood's M1 building that will result in the addition of 80 more medical beds. Funding has been allocated and construction has commenced.	Completed, audited, and presented to the Board on April 16, 2024.
425	Establish dedicated FAF maintenance and repair crews to work directly with custody personnel. This will allow FAF to quickly identify, prioritize and complete maintenance, repair, and improvement projects of custody facilities.	Completed, audited, and presented to the Board on April 16, 2024.
426	Complete identified improvement and modernization projects at Main Jail and Elmwood.	Completed, audited, and presented to the Board on October 17, 2023.
427	Expand structured and unstructured "out time" for inmates by making improvements to housing units that have been closed due to age or physical conditions.	Completed, audited, and presented to the Board on April 16, 2024.
428	Request immediate funding for facility improvements at Elmwood to move low-level, pre-trial inmates to Elmwood and create a minimum camp for Protective Custody inmates.	Completed, audited, and presented to the Board on October 17, 2023.
429	Implement an automated tracking system that documents inmate infractions, custody staff involved, infraction type, and consequences for an infraction.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.

JAIL REFORMS RECOMMENDATIONS MATRIX  
May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
432	Explore viability of establishing apprenticeship programs with local trade unions to assist inmates in gaining marketable trade skills and job experience.	Completed, audited, and presented to the Board on May 2, 2023.
433	Increase the overall participation in educational, comprehensive programs by expanding programs.	Completed, audited, and presented to the Board on April 16, 2024.
434	Improve the quality and increase the number of classes offered within the comprehensive programs and to increase services offered to inmates.	Completed, audited, and presented to the Board on April 16, 2024.
435	To increase and improve collaboration with community agencies to enhance transitional opportunities for inmates.	Completed, audited, and presented to the Board on May 2, 2023.
436	Creating the Triple P – Parenting Class: with a community agency to for parents with children under the age of 5.	Not Covered by Consent Decree/Subject to Audit by OCLEM
437	Implementing a Continuing Education Class with San Jose State University and Stanford University to create advanced education classes.	Completed, audited, and presented to the Board on May 2, 2023.
438	Creating a Job Development Class for female inmates. Additionally, the Sheriff's Office is working with Milpitas Adult Education program to implement a job development program for both male and female inmates.	Completed, audited, and presented to the Board on May 2, 2023.
439	Working with a community organization to implement additional Alcoholics Anonymous and Narcotics Anonymous meetings in the jail.	Completed, audited, and presented to the Board on April 16, 2024.

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May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
440	Add three additional investigators to the IA Unit to increase the screening, timely investigation and final resolution of complaints. These positions have been requested as part of the Fiscal Year 2016/2017 Sheriff's Office budget proposal.	Not Covered by Consent Decree/Subject to Audit by OCLEM
441	Add an analyst position for data input and program monitoring of behavior trends. This position was requested as part of the Fiscal Year 2016/2017 Sheriff's Office budget proposal.	Not Covered by Consent Decree/Subject to Audit by OCLEM
442	Add an analyst for each custody facility to collect and process grievances from lock boxes and enter grievances into the new grievance tracking system. Analysts will be required to immediately notify custody supervisors of any basic needs grievances so that they may be resolved as soon as possible. All other grievances will be routed to the appropriate unit for expeditious action. The analyst positions are included in the Sheriff's Office Fiscal Year 2016-2017 budget request.	Completed, audited, and presented to the Board on April 16, 2024.
443	Add a Lieutenant at each facility who will ensure a proper and timely resolution of grievances. The Lieutenant will be empowered to immediately resolve all "basic needs" grievances. The Lieutenant positions are included in the Sheriff's Office Fiscal Year 2016/2017 budget request.	Completed, audited, and presented to the Board on April 16, 2024.
444	Add a specially trained correctional deputy to each facility who will conduct interactive, instructional classes for inmates in all housing units on expected behavior in custody.	Completed, audited, and presented to the Board on April 16, 2024.
445	Add dedicated custody support staff to multi-disciplinary healthcare teams to ensure timely access to medical, dental, and mental health treatment.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
446	Establish a team to respond to crisis situations and/or tactical situations involving those with mental health or other special needs.	Completed, audited, and presented to the Board on April 16, 2024.
450	Provide comprehensive eight hour ADA training for all Custody and Custody Health staff.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.



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Master List Number	Master List Recommendation	Status
451	Complete initial comprehensive ADA training by May 2016.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
452	Train appropriate staff on ADA tracking system beginning July 2016.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
453	Once policies, procedures, practices, forms, and inmate handbook are revised and adopted, train all staff on the revisions.	Completed, audited, and presented to the Board on April 16, 2024.
454	Develop training module for all custody staff to educate them on the purpose of a grievance, the grievance process, and regarding the expectation that they resolve basic needs grievances (blankets, items of clothing, hygiene products, etc.) as soon as possible in an objective and fair manner. All other grievances will be routed to the appropriate unit for expeditious action.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
455	Implement the training module and ensure all custody staff completes the training module.	Completed, audited, and presented to the Board on April 16, 2024.
456	Train all Custody Healthcare staff on mandates of the Americans with Disabilities Act.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
457	Ensure custody staff are equipped to manage inmates exhibiting or diagnosed with mental health issues.	Completed, audited, and presented to the Board on April 16, 2024.
458	Implement a “train-the-trainer” program to provide for jail-specific mental health training needs. Such a program would allow for qualified trainers to provide mental health training to correctional staff, re-fresher trainings, and ensure that the training principals are being implemented throughout the custody facilities.	Completed, audited, and presented to the Board on April 16, 2024.

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Master List Number	Master List Recommendation	Status
459	Implement training courses specific to identified needs of inmates to ensure that the needs of all inmates are understood and managed appropriately.	Completed, audited, and presented to the Board on April 16, 2024.
460	An additional four hour of Gender Response training is proposed for staff assigned to custodial facilities.	Not Covered by Consent Decree/Subject to Audit by OCLEM
461	Provide PREA (Prison Rape Elimination Act) training to all correctional deputies that have not yet received it.	Completed, audited, and presented to the Board on April 16, 2024.
462	Implement training modules for existing staff and academy recruits to ensure compliance with the revised use of force policy.	Completed, audited, and presented to the Board on April 16, 2024.
463	To reinforce training on how to recognize mental illness and developmental disabilities, along with a directed focus on if, how and when to deploy de-escalation techniques and use of force.	Completed, audited, and presented to the Board on April 16, 2024.
465	Develop an eight-hour training curriculum for all staff to ensure a proper understanding and application of the department's updated Use of Force policy.	Completed, audited, and presented to the Board on April 16, 2024.
466	The use of force policy for custodial staffing is being updated. Once a final policy is adopted, an eight-hour training course will be constructed to ensure that management, supervisors, and all staff possesses a clear understanding of the policy and its practical application.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
467	Implement a revised use of force policy that includes specific information on force prevention, and de-escalation techniques in order to decrease the number of incidents requiring the use of force. The policy will include investigative independence, principals, safety, prevention, accountability, reporting obligations, responsibilities, review requirements, analysis and audits.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
468	Finalize revised use of force policy to include specific information on force prevention and de-escalation techniques in order to decrease the number of incidents requiring the use of force.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.

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May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
469	Create levels of use of force categories in order to determine the magnitude of investigative response and notification. These categories will encompass a wide range of levels from minor restraints to any force resulting in injury.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
470	Increase investigation, specialized response, oversight, review and evaluation, compliance and analysis of use of force incidents.	Completed, audited, and presented to the Board on September 28, 2021.
471	In addition to the standard use of force investigation, a specialized on-call team will be created to respond to categories of use of force incidents to ensure the immediate and specialized investigation of significant incidents. This team will have the authority to take control and assume full responsibility for the investigation.	Completed, audited, and presented to the Board on September 28, 2021.
472	Establish a custody review committee that will evaluate the force applied within custody facilities, the quality of the investigation and the effectiveness of the supervision.	Completed, audited, and presented to the Board on October 17, 2023.
473	Members of the panel shall include command level personnel, representatives from medical and/or mental health (when applicable), a member of the independent Civilian Oversight Commission and additional support personnel.	Completed, audited, and presented to the Board on October 17, 2023.
474	The supervisor completing the standard investigation and the approving watch commander will be required to attend to answer questions and justify their recommendations regarding the incident.	Completed, audited, and presented to the Board on April 16, 2024.
475	The committee will review the force incident including the events that precipitated, any prevention or de-escalation efforts as well as the quality of the force review.	Completed, audited, and presented to the Board on October 17, 2023.

# JAIL REFORMS RECOMMENDATIONS MATRIX

May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
476	A report will be generated that includes their findings and recommendations. If the findings include any policy or other violations, it will be referred for further follow-up. Exemplary performance or conduct shall also be noted.	Completed, audited, and presented to the Board on October 17, 2023.
477	In instances of use of force there will be an evaluation of an individual's performance that includes the strategies or tactics used leading up to, during and following a use of force incident. The evaluation will be a review of the performance to standards associated with the actions.	Completed, audited, and presented to the Board on October 17, 2023.
478	A compliance system will be implemented that tracks the status of all investigations, reviews and evaluates all use of force incidents and allegations of force to ensure that investigations and reviews are completed appropriately and timely.	Completed, audited, and presented to the Board on September 28, 2021.
479	An electronic tracking system will be implemented to aid in timely completion of all stages of the process.	Completed, audited, and presented to the Board on September 28, 2021.
480	All significant use of force incidents will be reviewed by the Jail Crimes Unit to determine if the force used was lawful.	Completed, audited, and presented to the Board on September 28, 2021.
481	Ensure a documented medical assessment of each inmate upon who force is used is completed as soon as practical after the force was utilized.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
482	Develop a policy for a team consisting of members with specialized skills and training. This team will respond and attempt to resolve the matter when the interaction involves an inmate with mental health issues. This team will maintain confidentiality and work in conjunction with medical and mental health professionals to potentially defuse the incident prior to any action.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
483	Increase transparency of the Use of Force policy.	Completed, audited, and presented to the Board on April 16, 2024.
484	Publish finalized revised use of force policy to ensure the public has access to the standards and procedures for the use of force in custody facilities.	Completed, audited, and presented to the Board on April 16, 2024.

JAIL REFORMS RECOMMENDATIONS MATRIX  
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Master List Number	Master List Recommendation	Status
487	Create levels of use of force categories in order to determine the magnitude of investigative response and notification. These categories will encompass a wide range of levels from minor restraints to any force resulting in injury.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
488	The critical distinction between the two basic types of grievances should guide the Jail's approach at every stage, as well as the scope of independent oversight.	Completed, audited, and presented to the Board on April 16, 2024.
489	Staff and inmates should be trained on the distinction, and policy should clarify the distinction, though inmates should be able to submit complaints through the grievance process.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
490	Grievance procedures must be viewed as a means of oversight of inmates' rights and of Jail and staff accountability.	Completed, audited, and presented to the Board on April 16, 2024.
491	The Jail should make complete and accurate information readily available and should routinely update such information.	Completed, audited, and presented to the Board on April 16, 2024.
492	The Jail should revise and update the orientation video, rule book, and many of the posting to ensure accuracy and completeness. The rule book should address information in a number of areas that is currently omitted.	Not Covered by Consent Decree/Subject to Audit by OCLEM
493	Postings should be complete, accurate, organized, properly located, and difficult to tear or remove. PREA information should address both abuse and harassment and should be contained in easy-to-identify and attractively designed posters. The Jail should post information regarding IAU and JOP.	Completed, audited, and presented to the Board on September 28, 2021.
494	The Jail should screen the orientation and PREA videos free from distraction and should provide an opportunity for inmates to direct questions to staff.	Completed, audited, and presented to the Board on September 28, 2021.
495	Inmates should have ready access to confidential means of submitting grievances and complaints.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.

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May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
496	The Jail should develop clear plans for the placement of boxes and other filing methods; inmates should participate in the planning process.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
497	The Jail should clarify – in staff training, inmate education, and policy – that inmates may submit grievances to any staff member.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
498	The Jail should make grievance forms available in medical units and any other areas where inmates may be.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
499	Responses to grievances should be appropriate, complete, and timely. Accused staff should not handle the grievance, and staff should receive training on handling misconduct grievances as complaints that should be directed, through supervisors, to IAU.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
500	Custody Health should be held accountable for late responses, the Jail should notify inmates if the response is going to be delayed beyond the deadline, and the Jail should shorten the deadline for responses to PREA grievances.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
501	When officers make inappropriate responses to grievances, supervisors should address this error on the grievance form so that the inmate understands that the Jail does not tolerate such responses. The Jail should discipline officers for intimidating or accusatory responses and should consider referring such responses for investigation of possible retaliation.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
502	The Jail should automatically refer to IAU and the Jail Crimes Unit (i) every allegation of unnecessary or excessive use of force, sexual harassment (defined broadly), or sexual abuse, (ii) every use of force that qualifies under strict criteria, and (iii) failures to report a use of force. A Grievance Coordinator with appropriate seniority and training can play a role in this review process.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
503	Jail staff and leadership should receive training on what types of conduct constitute prohibited conduct under PREA	Completed, audited, and presented to the Board on April 16, 2024.

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May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
504	IAU should be notified of every referral to Jail Crimes where the referral involves potential staff misconduct. IAU investigators should receive training on conducting investigations of alleged sexual misconduct.	Not Covered by Consent Decree/Subject to Audit by OCLEM
505	Inmate allegations of serious misconduct, including excessive or unnecessary use of force, sexual harassment, and sexual abuse, should receive full investigations. Investigations should include identifying and promptly interviewing all witnesses and reviewing prior complaints or incidents, and investigators should be provided with written guidance regarding these expectations.	Not Covered by Consent Decree/Subject to Audit by OCLEM
506	DOC should review and enhance IAU's staffing levels.	Not Covered by Consent Decree/Subject to Audit by OCLEM
507	IAU should become familiar with PREA.	Not Covered by Consent Decree/Subject to Audit by OCLEM
508	DOC should develop and implement a conflict-of-interest policy to prevent IAU investigators from inappropriately investigating former colleagues.	Not Covered by Consent Decree/Subject to Audit by OCLEM
509	The Jail should significantly strengthen its internal oversight system. The Internal Audit Unit should receive significant additional staffing.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
510	The Jail must update its data systems with 21st-century technology.	Completed, audited, and presented to the Board on October 17, 2023.
511	The Jail should track and report on the timeliness and outcomes of grievances, as well as other required information; the Jail should ensure that staff input incident data accurately. Grievance Coordinators should have appropriate seniority and expertise to properly categorize and route grievances. The Jail should consider consolidation of some of the grievance categories and adding more specific categories.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
512	The Internal Audit Unit should create a clear schedule for review of policies and compliance and should prioritize policies regarding review and investigation of serious incidents and allegations.	Not Covered by Consent Decree/Subject to Audit by OCLEM

# JAIL REFORMS RECOMMENDATIONS MATRIX

May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
513	The Jail should review and revise its procedures for review of IAU decisions to conduct a preliminary inquiry rather than a full investigation and to close a matter at intake rather than conduct a preliminary inquiry.	Not Covered by Consent Decree/Subject to Audit by OCLEM
514	Custody Health should enter grievance information into its database and periodically review the data for, among other issues, timeliness of responses and types of grievances.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
515	The Jail should prioritize addressing other areas of serious concern, including the overreliance on restrictive housing, crowding and conditions in Main Jail South, understaffing, and PREA compliance.	Completed, audited, and presented to the Board on April 16, 2024.
516	Internal and external oversight should specifically prioritize these issues, in addition to serious incidents and allegations of staff misconduct.	Completed, audited, and presented to the Board on October 17, 2023.
517	The Jail should disclose Sabot's activities and recommendations regarding, among other things, use of force, mental health and medical treatment, staffing, security and safety, modification to policies and procedures (including use of force, discipline, and housing) for inmates with mental disabilities, and restrictive housing. It should ensure full review of each of these issues, as well as seek involvement and input of key community stakeholders.	Completed, audited, and presented to the Board on October 17, 2023.
518	The Jail should not subject inmates with psychiatric disabilities to prolonged placement in restrictive housing, ensure in policy and practice that inmates with psychiatric disabilities are not subjected to any period of restrictive housing as a disciplinary measure in response to behaviors associated with their disability, and ensure an appropriate balance of structured and unstructured out-of-cell time for such inmates. The Jail should review its restrictive housing practices regarding other inmates, expand step-down planning and opportunities, and abandon any use of highly subjective custody input forms as part of its classification procedures. The Jail should implement the DOJ's recent guidance on jails' use of restrictive housing and seek technical assistance from DOJ's Bureau of Justice Assistance and/or the Vera Institute of Justice's Segregation Reduction Project.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
519	The Jail should, among other things, ensure that it has a PREA manager assigned to each facility devoting a meaningful (and PREA-compliant) amount of time to PREA related duties; train staff on and monitor compliance with staff's obligation to announce the presence on a housing unit of an opposite-sex individual and on interacting with LGBT inmates; clarify its policy regarding protective custody; conduct critical incident reviews and coordinated responses; and revise its zero-tolerance policy to address harassment.	Not Covered by Consent Decree/Subject to Audit by OCLEM



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May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
520	The Jail should take immediate measures to meaningfully improve conditions, enhance supervision, and alleviate crowding in Main Jail South.	Completed, audited, and presented to the Board on October 17, 2023.
521	The County should establish an independent oversight entity that has (i) broad scope of authority regarding inmates' rights; (ii) with the cooperation of the Sheriff, full access to Jail facilities, data, records, staff, and administrators; and (iii) full independence, reporting directly to the Board of Supervisors and engaging in outreach to the public.	Completed, audited, and presented to the Board on October 17, 2023.
522	JOP should receive additional resources, and the Jail should have in place a schedule for regular meetings with JOP.	Not Covered by Consent Decree/Subject to Audit by OCLEM
523	The Jail should establish an inmate committee to provide ongoing input regarding the grievance and complaint process and other issues.	Completed, audited, and presented to the Board on April 16, 2024.
524	The Jail should immediately publish its PREA audit and PREA data and engage outside assistance in responding to the PREA audits and ensuring PREA compliance.	Completed, audited, and presented to the Board on October 17, 2023.
525	The Jail should abandon its practice of locking inmates down during visits by outside entities.	Completed, audited, and presented to the Board on April 16, 2024.
526	The Jail and the County should immediately, urgently, and thoughtfully work to implement the Blue Ribbon Commission's recommendations.	Completed, audited, and presented to the Board on October 17, 2023.
527	The Jail should work with outside assistance to ensure proper planning and prioritization for implementation of the Commission's recommendations.	Completed, audited, and presented to the Board on October 17, 2023.

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Master List Number	Master List Recommendation	Status
528	Implementation should involve consistent input from inmates, including inmates with disabilities and LGBT inmates, and a diverse group of key community stakeholders.	Completed, audited, and presented to the Board on April 16, 2024.
529	The Office of the Sheriff should assign personnel whose sole responsibility is to update and maintain all Custody Bureau policies and procedures with priority given to the Medical and Health Care Services chapter and the Security and Control Chapter.	Not Covered by Consent Decree/Subject to Audit by OCLEM
530	The Office of the Sheriff should use a document control method to ensure any interim changes to existing policies and procedures are explicitly tied to the policies and procedures they affect.	Completed, audited, and presented to the Board on May 2, 2023.
531	The Office of the Sheriff should increase staffing levels so that at least two correctional deputies are assigned to each housing unit on all shifts to manage the workload, reduce stress, increase security and safety, and allow correctional deputies more flexibility in dealing with the behavior and needs of all inmates, including those with mental health issues.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
532	The Office of the Sheriff should increase the number of sergeants on each shift to one sergeant per housing floor in Main Jail and comparable supervision levels at the Elmwood facilities. The Office of the Sheriff should have a watch commander (lieutenant or above) at both Main Jail and Elmwood at all times.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
533	The Santa Clara Valley Health & Hospital System should increase clinician staffing levels in the jails to improve the level of support counseling, therapy, and advocacy for mentally ill inmates.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
534	The Santa Clara County Board of Supervisors should commission a thorough independent audit of the Custody Health Services organization to ensure best management practices are identified and employed.	Completed, audited, and presented to the Board on October 17, 2023.
535	Custody Health Services should develop a process to ensure discharge planning begins upon incarceration and leads to a "warm handoff" to community support services at time of release.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.

# JAIL REFORMS RECOMMENDATIONS MATRIX

May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
537	The Office of the Sheriff should increase the use of scripted scenarios and role-playing in Custody Academy courses on mental health to develop and practice de-escalation and critical thinking skills. The Office of the Sheriff should have mental health classes at the Custody Academy audited for effectiveness annually by subject matter experts and teaching professionals.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
538	The Office of the Sheriff should develop or select a custody-centric Crisis Intervention Team training program for the Custody Bureau by December 31, 2016, for immediate implementation.	Completed, audited, and presented to the Board on April 16, 2024.
539	The Office of the Sheriff should add content on dealing with mentally ill inmates to the Probationary On-the- Job Training manual. Evaluation criteria should include interaction with mentally ill inmates and those with developmental disabilities, de-escalation techniques, and appropriate use of force.	Completed, audited, and presented to the Board on April 16, 2024.
540	The Office of the Sheriff should continue training of custody staff to implement trauma-informed strategies.	Completed, audited, and presented to the Board on April 16, 2024.
541	The Office of the Sheriff should report on the status of training and outcomes of training for a more gender responsive jail.	Not Covered by Consent Decree/Subject to Audit by OCLEM
542	Gender-responsive training should be given to all staff, including custody, contract, medical, and facility staff, starting at the academy.	Not Covered by Consent Decree/Subject to Audit by OCLEM
543	The Office of the Sheriff should develop posters to highlight the risk involved in cleaning hazardous materials, including providing free gloves to individuals who choose to clean while they wait for hazardous materials staff to arrive. This information should also be included in the inmate handbook.	Completed, audited, and presented to the Board on April 16, 2024.
544	The Office of the Sheriff should develop a policy to include gender- specific information in data collection in their classification system and include the Commission on the Status of Women in that decision-making process.	Completed, audited, and presented to the Board on September 28, 2021.

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Master List Number	Master List Recommendation	Status
545	The Office of the Sheriff should work closer with the Custody Health department to best address health- related issues.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
546	The Office of the Sheriff should continue to work to extend the Memorandum of Understanding (MOU) between the Commission on the Status of Women, the Office of the Sheriff, and the Office of Women's Policy.	Not Covered by Consent Decree/Subject to Audit by OCLEM
547	The Office of the Sheriff should retain an experienced correctional health care administrator to monitor the provision of health services and coordinate the interaction between health care and custody.	Completed, audited, and presented to the Board on October 17, 2023.
548	The scope of services should be broadened for longer-term inmates and be based on the dental priority codes used by CDCR which categorize treatment needs as Urgent Care, Interceptive Care, Routine Rehabilitative Care, No Dental Care Needed, and Special Needs Care.	Completed, audited, and presented to the Board on April 19, 2022.
549	Urgent Care should be sub-divided based on a condition's acuity. Conditions characterized with sudden onset and severe pain should be treated within 24 hours. Urgent Care should be made available to all inmates.	Completed, audited, and presented to the Board on April 19, 2022.
550	Inmates requiring Interceptive Care should be treated within 120 days. Interceptive Care should be available to inmates who have six months or longer left in their sentences or inmates who are no adjudicated but who are likely to be in custody for at least six months.	Completed, audited, and presented to the Board on April 19, 2022.
551	Routine Care should be provided to inmates within 12 months. It should be available to inmates who have 12 months or longer left in their sentences or those who are not adjudicated but likely to be in custody for at least 12 months.	Completed, audited, and presented to the Board on April 19, 2022.
552	The Dental Program Director should spend a full 1.0 FTE at the Jail. An additional 1.5 dentist and dental assistant FTEs will be needed for Urgent Care waiting times to reach a steady state goal of three days for three months. Once the Urgent Care steady state has been achieved, it is recommended that sufficient staff should be hired to provide Interceptive Care to inmates with at least six months left on their sentence or those who are not adjudicated but are expected to be incarcerated at least six months. Once the Interceptive Care steady state has been achieved, it is recommended that sufficient staff be hired to provide Routine Rehabilitative Care to inmates.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.

# JAIL REFORMS RECOMMENDATIONS MATRIX

May 7, 2024 BOARD OF SUPERVISORS

Master List Number	Master List Recommendation	Status
553	Dental policies and procedures should be rewritten to address a wider scope of services (e.g., oral self-care, periodontal diagnosis and non- surgical treatment, denture fabrication and repair, restorations, and routine care), and clinical administrative procedures (e.g., record keeping and workload reporting). The Policies and Procedures should be modeled on those used by CDCR, especially with respect to the DPC system.	Completed, audited, and presented to the Board on April 19, 2022.
554	The policy regarding prescribing inmates dental prosthesis should be rewritten.	Completed, audited, and presented to the Board on April 19, 2022.
555	The Refusal of Care Form should be rewritten to fit the educational level of the typical inmate and should describe the specific treatment that has been recommended and is being refused, as well as the specific consequences of declining the treatment.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
556	A policy should be developed to address dental floss and other interdental cleaning devices. The policy should also address the circumstances when use of such devices will be denied for security reasons.	Completed, audited, and presented to the Board on April 19, 2022.
557	A policy should be developed to treat inmates who have fixed orthodontic appliances.	Completed, audited, and presented to the Board on April 19, 2022.
558	The policy on the Security of Dental Instruments should be revised to specify a role for custody.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
559	A policy should be developed that specifies treatment timelines.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
560	A policy should be developed to address when inmates who are expected to remain in custody for six months or more will be provided dentures. The policy should also address when soft diets will be prescribed to inmates who experience chewing difficulty due substantial tooth loss.	Completed, audited, and presented to the Board on April 19, 2022.
561	A study should be developed to identify underlying reasons for the high dental-appointment refusal rate and explore methods to reduce it.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.

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Master List Number	Master List Recommendation	Status
562	A study should be developed to assess whether inmates who admit to dental problems at intake receive appropriate referral. Dr. Shulman also recommends that patient encounters, the number of dental sick call visits, wait times to see the dentist, and workload data be collected from the dental clinics and reported.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
563	Neither of the clinics have a panoramic radiograph device. Inmates deemed to need a panoramic radiograph are sent to a County health clinic off-site. In preparation for the Interceptive Care Phase (Phase 2), Dr. Shulman highly recommends taking panoramic x-rays of long-term inmates who request a dental examination. Consequently, he recommends that a panoramic device, which he estimates costs \$25,000, be available to inmates at Elmwood and at Main Jail as well as trained dental assistants, which is not a fulltime position, to operate them.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
564	The DOC should consider the feasibility of expanding one of the clinics at Elmwood or identifying space for a larger clinic due to Dr. Shulman's proposal to increase staffing and clinic hours.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
565	As Interceptive and Routine Rehabilitative Care are introduced, Dr. Shulman notes that there will be a need to make study models and do minor denture repairs and adjustments. He recommends identifying a dedicated space for a small laboratory that is outside the patient treatment area.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
566	The construction plan for the new jail should be evaluated to make sure that there is sufficient space for clinical operations as well as for inmate holding. In addition, he suggests that the clinic contain adequate counter space for proper instrument cleaning and disinfection, adequate wheelchair access, sufficient storage space for supplies, and at least two dental operatories. Moreover, the clinic should contain a small dental lab for minor denture repairs and pouring and trimming study models.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
567	Dr. Shulman recommends that dental treatment provided to inmates be recorded using the American Dental Association's Code on Dental Procedures and Nomenclature. Dental progress notes are currently maintained in a paper chart, while other data entered by dentists, such as medication orders, are entered in the electronic medical record. Dr. Shulman recommends that the tooth diagram currently used on the paper chart be changed, but noted that this issue may become moot if an electronic dental record (EDR) is purchased. Dr. Shulman also recommends that the dental component not be part of a commercial EDR (which generally does not serve the unique needs of dentistry) but rather an off-the-shelf dental system that can interface with the EDR.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.

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Master List Number	Master List Recommendation	Status
568	Dr. Shulman recommends that the principal evaluation metric for the dental program be changed from the number of patient encounters to the number of procedures (using CDT codes) that dentists do on a daily basis. Consequently, it is critical that any EDR be designed with the capability to produce management and productivity reports using CDT codes. In addition, the EDR should be sufficiently flexible to track DPC codes. Dr. Shulman notes that this can be done initially using a manual (paper) system that is completed after each appointment and totaled at the end of the day. This system can be migrated to Microsoft Excel, and later be produced by the EDR.	Completed, audited, and presented to the Board on April 19, 2022.
569	Dr. Shulman recommends that the number of Custody Officers be increased to facilitate inmate transport to the dental clinic. Currently, only one dentist is present in the Elmwood clinics, which have two chairs. If increasing treatment requires these clinics to be staffed by two dentists (or a dentist and a dental hygienist), Dr. Shulman notes that holding cell capacity will have to be increased; or alternatively, the frequency of inmate transport will have to be increased to ensure that inmates with incompatible custody levels are not scheduled for the same clinic period. Dr. Shulman notes that the frequency of transport may also reduce refusals. Dr. Shulman also recommends that Custody Officers be given responsibility to dental tool control in the dental clinics for security reasons.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
570	Dr. Shulman recommends that after the final steady state is reached as referred to above, the DOC develop a monitoring plan to ensure that the changed dental program is truly stable and maintains the minimum standard of care. A critical first step will be developing an Audit Tool and developing the process for collecting the data necessary for the audit. Dr. Shulman also recommends that the DOC develop a disinterested monitor.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
571	The County should choose one medical information system and insist that all information about health care reside in that singular system.	Completed, audited, and presented to the Board on April 16, 2024.
572	The EPIC target system implementation should be expedited as much as possible.	Completed, audited, and presented to the Board on April 16, 2024.
573	The intake facility would benefit from a redesign of the physical plant. At a minimum, the nursing interview stations where the intake assessments are done need to be modeled after traditional health care design. This would eliminate the standup desk in favor of sit-down stations that guarantee privacy and enable the nurse to have full observation of the patient as well as access to the patient to conduct a proper physical examination.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.

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Master List Number	Master List Recommendation	Status
574	Nurses who perform the intake assessment should be adequately and specifically trained to do intake screenings and the training should be updated yearly.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
575	Nurses should complete all five vital signs as well as height and weight measurements on every patient.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
576	Additional room functionalities need to be added to the intake area to enable staff to isolate and to separate patients when appropriate. These room functionalities should include isolation cells, padded cells, biohazard cells, and an area where a more extensive physical exam could be conducted if necessary.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
577	From an operational perspective, unifying the intake process for male and female prisoners would open up a significant amount of physical plant space to provide for these options and it would greatly reduce the duplication of staff necessary to run two separate parallel tracks.	Completed, audited, and presented to the Board on April 16, 2024.
578	The intake facility should redesign the alcohol, opiate, and benzodiazepine withdrawal assessment and treatment protocols to conform to contemporary standards.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
579	The intake facility should change the management techniques for seriously mentally ill, acutely intoxicated, and behaviorally challenged patients to a methodology of separation and isolation during the booking process as opposed to restraints in the lobby area.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
580	The intake facility should enhance staffing for medication verification and continuity-of-care process to account for the large volume of prisoners booked into the jail.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
581	The intake facility should implement a comprehensive tracking methodology for all requests for outside medical records, reconcile requests against what has been received, and document follow-up requests when the information has not been received.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.



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Master List Number	Master List Recommendation	Status
582	The intake facility should investigate whether additional consent is necessary from prisoners in order to obtain their health care records in a way that is compliant with HIPAA standards.	Completed, audited, and presented to the Board on April 16, 2024.
583	The DOC should create an operational process whereby white cards are readily available from officers and nurses.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
584	The DOC should create a process so that completed white cards can be submitted at any time to a locked mailbox that is accessed only by health care staff.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
585	The DOC should conduct formal training for the nurses on appropriate triage techniques and decision- making.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
586	The DOC should create an actual triage function that is staffed by a dedicated nurse who is properly trained and does triage as the primary responsibility on the shift.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
587	The DOC should redesign the sick-call process to include a triage encounter with a brief face-to-face visit with a nurse including a full set of vital signs within 24 hours of submission of the health services request.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
588	The DOC should assign a triage score at the time of face-to-face triage to schedule patients with providers according to priority.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
589	The DOC should redesign the white card form to provide more information to prisoners.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
590	The DOC should inform all prisoners submitting white cards what their triage grade is and what that means for when the prisoner will be seen.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.

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Master List Number	Master List Recommendation	Status
591	The DOC should implement an aging report as part of the health services administrative dashboard to monitor backlogs and care for medical, mental health, and dental appointments.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
592	Adult Custody Health Services should redesign nursing protocols into assessment protocols as opposed to treatment protocols.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
593	Adult Custody Health Services should schedule patients who need prescriptive care with a medical provider to assess the patient and order the appropriate care.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
594	The DOC should establish a methodology whereby the in-house clinicians for medical and mental health are available to the institution 24 hours a day, seven days a week.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
595	The DOC should encourage officer involvement in ensuring that blank white cards are available in the housing units.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
596	The DOC should require nursing staff to collect the health services requests from a request box.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
597	The DOC should monitor the availability of blank white cards in all units as part of the unit daily management log.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
598	The DOC should require that all health care staff who interact with patients wear a standardized uniform with respect to color and presentation.	Completed, audited, and presented to the Board on October 17, 2023.
599	The DOC should require that the health care staff uniforms be embroidered in a standardized location with the staff member's first name, last initial and job title within the institution.	Completed, audited, and presented to the Board on October 17, 2023.

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Master List Number	Master List Recommendation	Status
600	The DOC should implement educational programs, staff support, and administrative practices that encourage the nurses to be patient advocates.	Not Covered by Consent Decree/Subject to Audit by OCLEM
601	The County needs multiple individuals overseeing quality of care in all of the jails. There should be regular meetings that include representatives from all levels of the organization, from all facilities, and from custody regarding quality improvement.	Completed, audited, and presented to the Board on October 17, 2023.
602	Quality-improvement studies should be routinely conducted and analyzed; and recommendations should be published to all staff.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
603	Areas where change is identified should be scheduled for a follow-up study to ensure that the changes have actually occurred.	Completed, audited, and presented to the Board on April 16, 2024.
604	With the launch of EPIC, the DOC should create a system where patients can be tracked by diagnosis, and reports can be generated to identify high-risk patients who need to be seen.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
605	The DOC should create dedicated disease based chronic care clinics that are staffed by an appropriate provider who is knowledgeable in the management of that specific disease process.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
606	The DOC should conduct continuous quality improvement studies targeting the adequate delivery of chronic care services to the patients who qualify as chronic care patients.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
607	The DOC should implement additional techniques for managing patients who require insulin and create a comprehensive diabetic management protocol for the institution.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
608	The DOC should devise a methodology whereby patients can be discharged from jail and receive a set number of days of their medication to ease their transition back into the community. This program should pertain to all prescription medications with the exception of controlled substances, injectables, and PRN (as needed) medications.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.

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Master List Number	Master List Recommendation	Status
609	The DOC should devise a methodology whereby patients are given information about health care appointments at the hospital that are scheduled for them in the future.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
610	The DOC should provide patients with a discharge summary of their care that details their current medications, their allergies, their current diagnoses, and important diagnostic information.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
611	The County should investigate the possibility of deploying a KOP medication process within the Santa Clara County Jail System and possible nursing staff savings associated with this process.	Completed, audited, and presented to the Board on April 16, 2024.
612	The DOC should modify the facility schedules to serve meals at normal times of day that conform to normal circadian rhythms.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
613	White cards should be readily available in the units, from officers, and from nurses; and there should be a methodology for submitting them into a locked mailbox in each unit for medical staff to access and then assess. In units where prisoners are not allowed out because of security or behavioral issues, some methodology for submitting white cards must be devised so that access to care is not impeded.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
614	Dr. Gage recommended the creation of a position for a Director of Mental Health. This position would oversee all aspects of mental health services in the jail, including psychiatric prescribers and psychiatric nurses.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
615	Dr. Gage recommended that the Director of Mental Health should have a doctoral degree in a mental health field with clinical experience, a robust clinical administration background, and correctional (or at least institutional) experience.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
616	Dr. Gage recommended a complete redesign of the intake screening form for nurses. The content must identify the most acute and risk-laden mental health conditions to allow rapid identification of these conditions by the nurse and the mental health clinician reviewing the form. Inmates should then be prioritized for assessment based on their acuity and risk. Inmates who have emergent needs should be seen within four hours, those with urgent needs within 72 hours, and those with routine needs within 10 working days. Medications for inmates identified as being on medications in the community should be ordered on the day of admission, but at least within 72 hours.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.

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Master List Number	Master List Recommendation	Status
617	Dr. Gage recommends that DOC follow through with the plan to get expert consultation regarding the classification system.	Completed, audited, and presented to the Board on April 16, 2024.
618	Dr. Gage recommended requiring more uniform conditions that are policy driven throughout the jail for each security level. It is important to provide for regular, random cell searches of mental health Special Management Units (and perhaps for all units) at an established frequency that is not discretionary. This should specifically include attention to hoarding and potentially dangerous contraband.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
619	Dr. Gage recommended that the County carefully review its options for involuntary medications under both emergent and non- emergent situations, which should include the jails as well as those committed under LPS.	Completed, audited, and presented to the Board on April 16, 2024.
620	Dr. Gage also recommended review of the limited use of temporary and permanent conservators, which he opined were likely underutilized. Related to this is a need for thorough examination of policies and practices related to the evaluation of competency and securing informed consent. This should include examination of the current practice of permitting incompetent patients to refuse any health treatment including medical, dental, and mental health treatment.	Completed, audited, and presented to the Board on October 17, 2023.
621	Dr. Gage recommended development of the Prison Rape Elimination Act policies and procedures for mental health clinicians.	Not Covered by Consent Decree/Subject to Audit by OCLEM
622	Dr. Gage found that there was no unitary medical record system. The records were accordingly fragmented. Dr. Gage recommended that the medical records system be completely revamped, and noted that there are plans to do so.	Completed, audited, and presented to the Board on April 16, 2024.
623	Dr. Gage recommended that inmates admitted to restrictive housing be promptly screened. It is reasonable for nursing staff to conduct the initial screening, but mental health staff should screen new arrivals by the next working day. Mental health staff should also do at least weekly rounds in restrictive settings.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
624	Dr. Gage recommended adequate monitoring of prescribed antipsychotics. He stated that drug levels and laboratories for mood stabilizers, baseline studies before initiating treatment, and electrocardiograms for certain medications need to be done routinely.	Completed, audited, and presented to the Board on April 16, 2024.

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Master List Number	Master List Recommendation	Status
625	Dr. Gage recommended that medication administration by nursing staff be standardized and include appropriate identification checks. Further, mouth checks for establishing adherence should be done by clinical staff, but custody can also perform mouth checks for safety and security reasons.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
626	Dr. Gage recommended the following for reentry services for the seriously mentally ill: <ul style="list-style-type: none"> <li>• Assure medication continuity until community services take over (in all cases). This will almost certainly require that medications be given to releasing inmates who do not have their own supply of medications in the community.</li> <li>• Assure that a mental health appointment is in place within a period of time that will allow medications not to lapse (those incarcerated for more than two weeks).</li> <li>• Assist in applying for or restoring medical insurance and benefits (those incarcerated for more than one month).</li> <li>• Assist in securing housing (those incarcerated for more than two months).</li> </ul>	Completed, audited, and presented to the Board on June 7, 2022.
627	Dr. Gage recommended that inmates in restraints, whether in the restraint chair for behavioral reasons or clinical restraints on 8A, should be on constant watch rather than periodic checks (or constant video monitoring with direct visualization every 15 minutes). Nurses must check inmates in restraints at least every two hours for vital signs (the current policy specifies hourly), neurovascular assessment (under current policy only vascular assessment is specified and the frequency is not specified), and limb range of motion and movement, including the legs (which custody can do).	Completed, audited, and presented to the Board on April 19, 2022.
628	Dr. Gage further recommended that the County modify its policy on prone restraint, which should be avoided absent clear evidence that prone restraint is indicated for certain medical conditions.	Completed, audited, and presented to the Board on April 19, 2022.
629	Dr. Gage also recommended that restraint chairs be utilized for no more than four hours. Additional restraint should involve mental health assessment and include consideration for placement in a mental health setting. Similarly, clinical restraint should be ordered every four hours for the first twelve hours. The current limitation of 24 hours is reasonable. Exceptions for longer restraint may be necessary in some cases but this should require special oversight and in-person evaluation by the ordering clinician and authorization by a supervisor.	Completed, audited, and presented to the Board on April 19, 2022.
630	Dr. Gage recommended that the type of clothing afforded inmates in restraint and seclusion be individualized and based on an assessment of risk. As those in restricted settings improve, it is important to restore items noted to be potentially risky to ascertain their readiness to manage themselves in less restrictive settings.	Completed, audited, and presented to the Board on April 19, 2022.

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Master List Number	Master List Recommendation	Status
631	Dr. Gage recommended that confidentiality be provided in all settings to the maximum degree possible. All written documents, including personal health information should be processed by health care staff, including administrative staff (sealed or otherwise protected materials can be handled by any staff, e.g., for the purposes of transport) or custody staff who are bound by the same confidentiality strictures.	Completed, audited, and presented to the Board on April 16, 2024.
632	Dr. Gage recommended that staff on 8A, at a minimum, and preferably on all mental health Special Management Units, receive more detailed training about serious mental illness, providing relevant observations, special medico-legal considerations, and specialized management techniques.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
633	Dr. Gage recommended that all custody staff receive more extensive training on the nature of mental illness, including identification of markers for potentially serious problems in addition to suicidality such as psychosis, depression, mania, delirium, catatonia, cognitive disorders, and serious adverse medication reactions.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
634	Custody staff should also have specific training in the differences between personality disorders and mental illness with an emphasis on Cluster B personality disorders and psychopathy. Training in behavior management plans and the basic behavioral principles that underlie them is also critical.	Covered by Consent Decree and subject to monitoring by federal court appointed experts.
635	Dr. Gage recommended the dedication of more resources to QA/QI, including staff resources, IT support, and analytic support. He further recommended that the QA/QI programs include formal provision for clinical supervision and/or peer review.	Completed, audited, and presented to the Board on April 16, 2024.
636	Dr. Gage also recommended a more robust review of sentinel events, including near miss events, serious self-harm, assaults involving injury in mental health Special Management Units and LPS-certified units, injuries during episodes of restraint, and emergent use of force involving the mentally ill (controlled use of force should be reviewed through standard processes for use of force review).	Completed, audited, and presented to the Board on April 16, 2024.
637	The County should conduct a structured reclassification assessment for all inmates every 60 days. That re-classification assessment should place greater emphasis on the inmate's conduct as opposed to the inmate's criminal record and current charge(s).	Completed, audited, and presented to the Board on September 28, 2021.
638	The current security rating assessment methods should be replaced by the pilot tested initial and reclassification instruments which will increase the number of Minimum custody inmates and reduce the number of Medium custody inmates. These changes would take into account the over-rides recommended by the classification staff.	Completed, audited, and presented to the Board on September 28, 2021.

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Master List Number	Master List Recommendation	Status
639	An essential part of the NIC system is the reclassification process which requires a formal re-assessment of all inmates every 60 days. Such a re- assessment also entails a formal confidential interview with the inmate and a full explanation of the basis for his or her classification rating.	Completed, audited, and presented to the Board on September 28, 2021.
640	In order to implement the new system, sufficient staff will be required to properly conduct the reclassification interviews. While it is the strong recommendation that all inmates be interviewed, it would be acceptable to only interview inmates who are current assigned to Maximum and Medium custody.	Completed, audited, and presented to the Board on April 16, 2024.
641	It is also recommended that the process of reclassifying Level 3/4 inmates every 30 days be discontinued unless there are special circumstances warranting such an early review.	Completed, audited, and presented to the Board on September 28, 2021.
642	The new classification scoring system will need to be fully automated. The Custody Bureau has already begun the process of modifying the current data base to meet this need.	Completed, audited, and presented to the Board on September 28, 2021.
643	Given the importance of the classification process, it is also recommended that a Captain position be created whose sole duty is to manage the classification system. Currently, the Captain now assigned to classification has too many other important duties that do not allow her to focus on managing the classification system.	Completed, audited, and presented to the Board on April 16, 2024.
644	The use of “known management problem” and “gang member” over- rides will need to be re-evaluated for inmates who are not demonstrating any negative behavior or conduct. There must be some evidences that such inmates pose a threat to other inmates and staff.	Completed, audited, and presented to the Board on April 16, 2024.
645	The scale for the reclassification instrument should be modified so that inmates scoring 4 points or less are designated for Minimum custody.	Completed, audited, and presented to the Board on April 16, 2024.
646	It is recommended that there is no need to create a separate instrument for the female inmates. The proposed system uses objective factors that apply equally to male and female inmates.	Completed, audited, and presented to the Board on April 16, 2024.



JAIL REFORMS RECOMMENDATIONS MATRIX  
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Master List Number	Master List Recommendation	Status
647	BHSD to develop and implement a standardized, validated screening tool and assessment process with public safety partners. The goal is to divert individuals from jail into community services when appropriate.	Completed, audited, and presented to the Board on June 7, 2022.
648	Expand post-custody mental health and/or co-occurring outpatient services by 40 slots to address a service gap for clients. BHSD currently offers 180 outpatient slots for post-custody clients; however, there is an ongoing wait list for these services.	Completed, audited, and presented to the Board on June 7, 2022.
649	Increase the Criminal Justice (CJ) FSP capacity by 20 slots. The JAC list demand is largely for FSP slots, which are currently full due to the limited number of outpatient slots. Some of these individuals cannot be released from jail until stable housing is available, based on their charges.	Completed, audited, and presented to the Board on June 7, 2022.
650	Expand the 90-day Intensive Outpatient Service Team by 50 additional post-custody client slots. This service will support clients as they leave custody, linking them to housing, BHSD services, primary care services and benefit assistance, as well as addressing any other needs. In addition, the team will employ Peer Mentors in order to connect clients to the appropriate BHSD services upon release.	Completed, audited, and presented to the Board on June 7, 2022.
651	Develop one Behavioral Health Urgent Care Center in East San Jose as a drop-in center for law enforcement. The JDBHS suggests that such a Center could be modelled after "Restoration Centers" that exist in Bexar County, Texas. The goal is that the Urgent Care Center would offer voluntary services 24/7/365 and provide a community drop-off site for law enforcement that would divert individuals to treatment, rather than jail or Emergency Psychiatric Services (EPS). Individuals served in an Urgent Care Center would be assessed for treatment needs and referred to the appropriate level of care in the community.	Completed, audited, and presented to the Board on June 7, 2022.
652	Add flex funds for CJ FSP to provide housing for 50 clients referred into treatment services. Flex Fund expenditures will be utilized for individuals after it is established that there are insufficient funds available for the client's housing subsidies. These funds will assist clients in successfully meeting their housing goals on their Personal Service Plans related to the Treatment plans listed above.	Completed, audited, and presented to the Board on June 7, 2022.
653	Establish a Permanent Supportive Housing (PSH) program.	Completed, audited, and presented to the Board on June 7, 2022.

JAIL REFORMS RECOMMENDATIONS MATRIX  
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Master List Number	Master List Recommendation	Status
654	Enhance an existing Pretrial Mental Health Supervision Program with Superior Court and integrate the program with future Behavioral Health Services Court and Transitions Team by adding a Pretrial Service Officer.	Completed, audited, and presented to the Board on June 7, 2022.
655	Add a Health Care Program Manager at Behavioral Health Services Department to assign Jail Diversion referrals to Clinical Social Worker/Marriage and Family Therapists for screening, referral, and treatment placements of clients.	Completed, audited, and presented to the Board on June 7, 2022.