

# ***EXHIBIT D***

COUNTY IMPLEMENTATION PLAN

*All correctional staff will receive training through staff briefings on any new requirements or procedures imposed by the Implementation plan, including training on use of sobering and safety cells. The CMFG Implementation plan is designed to be used in concert with the County's Implementation plan. To avoid unnecessary duplication, the County defers to CFMG's Implementation plan in the provision of medical and mental health care. If there are any inconsistencies between the plans, the inconsistencies between the plans shall be resolved through a meet and confer process which shall include a representative from CFMG, the Monterey County Office of the Sheriff, and the Monterey County Office of the Public Defender.*

*Counseling, training, or appropriate discipline may ensue from failure to comply with the implementation plan provisions. The offer of this implementation plan is contingent upon approval by the Monterey County Board of Supervisors. Unless otherwise specified, the County will begin adherence to the Implementation Plan upon its approval by the Court. Custody staff will be trained on the requirements of the Implementation Plan and the Settlement Agreement.*

*The Plan, combined with the settlement agreement, address all of the issues raised in the settlement agreement by Plaintiffs, as they relate to the policies, procedures, trainings, and physical changes within the Monterey County jail, pursuant to the Settlement Agreement. The County Implementation Plan and the Settlement Agreement represent the totality of the County's obligations to perform such changes.*

**I. Annual Review and Performance-Based Goals and Objectives**

*a. Purpose and Scope*

The Monterey County Sheriff's Office is dedicated to the concept of continuous improvement in the services provided on behalf of the public and in accordance with applicable laws, regulations and best practices in the operation of this facility. The Monterey County Sheriff's Office shall strive to continually improve the operation of its facilities to ensure they are safe, humane and protect inmates' constitutional and statutory rights. To this end the Sheriff's Office shall conduct an annual review to evaluate its progress in meeting stated goals and objectives.

*b. Annual Reviews*

The custody management team will conduct an annual management review of minimally the following:

1. Statutory, regulatory and other requirements applicable to the operation of the facility.
2. Lawsuits and/or court orders.
3. Office policies, procedures, directives and post orders that guide the operation of the facility.
4. Compliance with internal/external inspections of the facility.
5. Condition of the physical plant, infrastructure and maintenance efforts.
6. Cleanliness of the facility.
7. Inmate profiles and trends that measure:
  - a. Inmate population (Average Daily Population)
  - b. Inmate population by gender
  - c. Highest one-day count
  - d. Bookings/releases
  - e. Percentage of male inmates
  - f. Percentage of female inmates
  - g. Juveniles in custody
  - h. Felony inmates in custody
  - i. Misdemeanor inmates in custody
  - j. Pretrial population
  - k. Sentenced population
  - l. Meal counts (regular, medical, court meals)
  - m. Early releases
  - n. Alternative-to-incarceration participants
  - o. Special needs inmates
  - p. Classification issues
  - q. Inmate grievances (founded/denied)
  - r. Demographics (age, race, gang affiliation)
  - s. Court movement
8. Security issues that include:
  - a. Inmate-on-inmate assaults
  - b. Inmate-on-staff assaults
  - c. Major disturbances
  - d. Deaths in custody (natural/suicide/homicide/accidents)
  - e. Suicide attempts
9. Inmate programs including:
  - a. Education
  - b. Commissary
  - c. Drug and alcohol programs
  - d. Faith-based services

*c. Management Review Process*

The management team may employ several methods to assess performance, including the following:

1. Performance analysis - Performance analysis attempts to discover discrepancies between the expected and actual levels of performance. This analysis should focus on whether the practices in this facility are meeting the mission of the Office and whether office policies and procedures are in alignment with statutes, regulations and court orders.
2. One-to-one interviews - Scheduled interviews with custody staff, held in private to encourage candid responses, to help identify issues or conditions that should be targeted for review or correction.
3. Staff debriefing - Staff should be periodically debriefed, especially after an emergency operation or incident, to identify aspects of facility operations that may need to be addressed by the Chief Deputy or Captain of Corrections Bureau and supervisors.
4. Inspection findings - The Office is subject to a variety of administrative inspections (standard-setting authorities, command staff, grand jury, jail advocates). These annual inspections should be used to identify ongoing issues in the operation of this facility.

*d. Management Review Results*

A complete report of the review results should be submitted to the appropriate level in the chain of command for final approval. The results of management reviews should be used in the ongoing process of continuous improvement. They should be used to direct changes in the operation of this facility or to identify successful operations that might be replicated in other areas of the facility. They should not, however, include specific identifying information of incidents or involved individuals.

**II. Intake Screening**

Upon arrival at the Monterey County jail every inmate shall receive an Initial Health Assessment by the intake nurse to determine whether the inmate should be excluded from the facility on medical or mental health grounds. Upon acceptance into the jail, all inmates will be screened by the intake nurse for urgent medical, mental health and dental needs. The intake

nurse will have access to an inmate's medical records if the inmate has been previously incarcerated in the Monterey County jail.

Upon arrival at the Monterey County jail, all inmates shall be assessed by the intake nurse as to whether they require any assistive devices due to a physical or mental disability. Medical Treatment Orders outlining any required accommodations shall be generated at intake and entered into the County's TracNet system.

Upon intake, the intake nurse may issue such equipment as needed to accommodate an inmate's needs such as wheelchairs, canes, disability identifying vests, etc.

Upon intake, medical staff will consult with custody staff concerning classification in general, but also as to whether the inmate should be placed in a sobering cell or safety cell. Should there be a disagreement as to whether an inmate should be placed in a safety or sobering cell, the on-duty sergeant will be contacted in an attempt to reach an agreement. If a dispute still exists as to the placement of an inmate, an on-call commander will be contacted. The on-call commander will have final decision-making authority as to placement. However, any time there is a disagreement between medical and custody staff as to placement of an inmate in a safety or sobering cell, a report outlining the reasons for disagreement will be generated by the on-duty sergeant. These reports will be reviewed on a monthly basis by the Operations Commander, who will meet with the medical director when necessary to identify any systemic disagreements or issues. Custody staff will be briefed at staff briefings as to any changes which need to be made or issues that are identified as a result of the meeting between the Operations Commander and medical director.

Medical staff shall be promptly contacted and consulted at any time an inmate is placed in a safety or sobering cell. Withdrawal from alcohol or drugs can become a life-threatening condition requiring professional medical intervention. It is the policy of the Office of the Sheriff to provide proper medical care to inmates who suffer from drug or alcohol overdose or withdrawal. Staff shall respond promptly to medical symptoms presented by inmates to lessen the risk of a life-threatening medical emergency and to promote the safety and security of all persons in the facility. Custody staff should remain alert to signs of drug and alcohol overdose and withdrawal, which include, but are not limited to, sweating, nausea, abdominal cramps, anxiety, agitation, tremors, hallucinations, rapid breathing and generalized aches and pains. Any staff member who suspects that an inmate may be suffering from overdose or experiencing withdrawal symptoms shall promptly notify the appropriate medical staff.

### **III. Safety Cell and Sobering Cell Monitoring**

A safety check for inmates in safety and sobering cells, consisting of direct visual observation that is sufficient to assess the inmate's well-being and behavior, shall occur twice every 30 minutes. Each time a deputy or sergeant conducts a welfare check it shall be documented in the welfare check log. A sergeant shall verify whether deputies are completing

their checks, at least one time per shift. The sergeants will initial the welfare check logs to indicate that they have reviewed the welfare check log, at least one time per shift. Spot checks for compliance will be conducted by the Compliance Sergeant at least once per week. Once a month, the Compliance Sergeant will track his findings through a report which will be sent to the Jail Operations Commander. Any deputy or sergeant who demonstrates consistent difficulty in adhering to welfare check log requirements will be subject to additional training and/or disciplinary action at the discretion of their supervisor.

Unless contraindicated by security and safety needs, inmates who are in a safety cell for more than 14 hours will receive a mattress or safety sleeping bag between the hours of 11:00 p.m. and 7:00 a.m. The Operations Commander will ensure that a sufficient number of safety sleeping bags for use are available.

Inmates in sobering cells may have access to mattresses at the discretion of custody staff. Mattresses have been and will continue to be available in the intake and receiving area for this use. The Operations Commander will ensure that a sufficient number of mattresses for use are available.

#### **IV. Custody Staffing Plan**

There shall be, at all times, sufficient staff designated to remain in the facility for the supervision and welfare of inmates, to ensure the implementation and operation of all programs and activities as required by Title 15 CCR Minimum Jail Standards, to respond to emergencies when needed, and to comply with the County and CFMG's implementation plans, including any need to escort an inmate to a hospital, psychiatric facility or other health care provider. Such staff must not leave the facility while inmates are present and should not be assigned duties that could conflict with the supervision of inmates (15 CCR 1027).

The Sheriff or the authorized designee shall complete an annual comprehensive staffing analysis to evaluate personnel requirements and available staffing levels. The staffing analysis will be used to determine staffing needs and to develop staffing plans. The Chief Deputy or Captain of Corrections Bureau, in conjunction with the PREA coordinator, should ensure that staffing levels are sufficient to consistently and adequately fill essential positions, as determined by the staffing plan (28 CFR 115.13). Relief factors for each classification and position should be calculated into the staffing analysis to ensure staffing levels will consistently meet requirements. Staff should be deployed in an efficient and cost-effective manner that provides for the safety and security of the staff, inmates and the public.

The Custody Staffing Plan for the Monterey County Jail is attached hereto as Exhibit A. The parties agree that the positions and posts outlined in the custody staffing plan may upon exigent or unique circumstances be altered to address particular situations within the Monterey County jail. A report will be generated by the Jail Operations Commander each time there is a systemic

divergence from the attached staffing plan. Any systemic issues with staffing will be brought to the attention of the Chief Deputy of Corrections or Captain of Corrections Bureau.

## **V. Mental Health Care**

All correctional staff will receive training through staff briefings on any new requirements or procedures imposed by the Implementation plans. All new correctional staff will receive training on the requirements imposed by the Implementation plans.

### **a. Safety and Sobering Cells**

The policies addressing safety and sobering cells are attached hereto as Exhibit B. They are to be read in conjunction with the implementation plan enumerated herein. Placement of an inmate in a safety or sobering cell, whether it be from housing or upon intake, should be in concert with medical staff. A qualified medical professional will see an inmate within one hour of placement in a sobering cell. Inmates will be released from a sobering cell upon clearance by medical staff. Should there be a disagreement as to whether an inmate should be placed in a safety or sobering cell or released from a safety or sobering cell; the on-duty sergeant will be contacted in an attempt to reach an agreement. If a dispute still exists as to the placement of an inmate, an on-call commander will be contacted. The on-call commander will have final decision-making authority as to placement. However, any time there is a disagreement between medical and custody staff as to placement of an inmate in a safety or sobering cell, a report outlining the reasons for disagreement will be generated by the on-call sergeant. These reports will be reviewed on a monthly basis by the Operations Commander, who will meet with the medical director when necessary to identify any systemic disagreements or issues. Custody staff will be briefed at staff briefings as to any changes which need to be made or issues that are identified as a result of the meeting between the Operations Commander and medical director.

Medical staff shall be promptly contacted and consulted at any time an inmate is placed in a safety or sobering cell.

Safety cells shall be cleaned whenever there is a change in the inmate housed in the cell in addition to the regular cleaning schedule. Sobering cells shall be cleaned on a regular cleaning schedule. Custody staffing will be maintained to allow medical staff to enter the sobering cells to make vital checks.

CFMG is responsible for developing individual treatment plans for those inmates suffering from mental illnesses. In the case of an inmate who is placed in a safety cell because of risk of suicide, CFMG may make the medical decision to transfer that inmate to an appropriate in-patient mental health facility. Depending on CFMG's assessment of the level of suicide risk for an inmate, the inmate may also be placed in the OHU, a transition cell in administrative segregation, administrative segregation, or in general population. CFMG will make the decision to release an inmate from a safety cell when the inmate was originally placed in a safety cell

because of risk of suicide. CFMG will inform classification through medical treatment orders as to any classification issues an inmate has due to a mental illness. CFMG and custody will review the appropriateness of an inmate's placement in a safety cell because of risk of suicide at least once every twelve hours.

For any inmate who has been housed in a safety cell for 24 consecutive hours, custody shall promptly begin processing the inmate for transfer to either an appropriate in-patient mental health facility or the Natividad Medical Center emergency room for assessment. It is recognized that on occasion there may be exigent circumstances which prevent compliance with these requirements. If such circumstances occur, a memo detailing the circumstances shall be written and directed to the Custody Operations Commander or Captain of Corrections Bureau.

For any inmate who has been housed in a sobering cell for 24 consecutive hours, custody shall promptly begin processing the inmate for transfer to Natividad Medical Center emergency room for assessment. It is recognized that on occasion there may be exigent circumstances which prevent compliance with these requirements. If such circumstances occur, a memo detailing the circumstances shall be written and directed to the Custody Operations Commander or Captain of Corrections Bureau.

**b. *Restraint Chairs***

The policies addressing the use of restraint chairs are attached hereto as Exhibit C. Use of a restraint chair will be documented in an observation log which will be reviewed and signed by a supervisor. Inmates shall not be placed in a restraint chair for longer than six consecutive hours.

Deputies shall attempt to remove restraints at least once an hour to allow inmates to exercise their arms and hands in a range of motion exercise (to prevent circulatory problems). A shift supervisor and medical staff shall oversee the exercise. If unsuccessful in allowing inmates to exercise their arms and hands in a range of motion exercise, safety staff shall explain on the observation log why extremities could not be exercised and a shift supervisor shall be notified.

On a monthly basis, the compliance sergeant will audit one incident of use of a restraint chair, if any existed in that month, to determine if proper documentation has been maintained to show the policies attached as Exhibit C have been followed. The report will be sent to the Jail Op Commander. Consistent failure to adhere to the policies attached as Exhibit C may result in additional training and/or discipline.

**c. *Classification***

Inmates shall not be placed in administrative segregation solely because of having a mental illness. Classification is to assess a totality of factors when assigning inmates to administrative segregation units. The goal of the County is to limit the use of administrative segregation for inmates with mental illnesses.

All inmates arriving at the jail will be screened for mental illnesses and suicide risk by the intake nurse. Medical staff will inform classification through medical treatment orders as to any classification issues an inmate has due to a mental illness or any other medical issue. Medical staff will also convey any opinions they may have on the best housing for an inmate. Inmates being moved from general population to an administrative segregation cell will be screened for suicide risk within 24 hours of placement.

Classification shall review the placement of inmates in administrative segregation at least once a month and consult medical staff concerning each inmate's progress toward the goal of placing the inmate in general population.

**d. *Planned Use of Force***

Medical and mental health staff shall be consulted before any planned use of force on an inmate. Custody staff in concert with medical staff will develop the most effective and appropriate means of imposing compliance with rules and regulation, including attempts at de-escalation. It is understood that it is the goal of custody staff to use the least amount of force necessary to ensure compliance with rules and regulations. Planned use of force will only be used after verbal attempts to obtain compliance. Any use of force will be documented on a use of force form. The use of force policy for the Monterey County jail is attached hereto as Exhibit D.

**e. *Training***

In coordination with CFMG, all new deputies within one month of being stationed at the Monterey County jail will participate in an orientation training session with CFMG staff on how to recognize individuals who are in mental distress and/or suicidal.

All deputies, sergeants, and commanders will receive 24 hours of Standards and Training for Corrections ("STC") certified training per year. Every two years, all deputies, sergeants and commanders will receive eight hours of training regarding medical issues central to inmates, which will include identifying risk factors specific to inmates, identifying warning signs specific to inmates, and how to recognize individuals who are in mental distress and/or suicidal.

Once a year, custody staff will conduct a situational training such as a mock suicide attempt or a medical emergency. CFMG staff will also participate in the annual situational training. At the conclusion of the situational training, command staff will meet with CFMG to determine if any changes in policies or operations are warranted as a result of the exercise. Information obtained from this exercise will be considered in the Jail's annual staffing reviews and the command staff will determine whether any staffing changes are necessary in order to ensure adequate emergency response.

f. Mental Health Grants

Monterey County Office of the Sheriff will in good faith continue to pursue state funding for mental health and programming space at the jail. The Monterey County Public Defender will cooperate in those efforts.

g. Inmates Who Have Been Declared Incompetent to Stand Trial

The County and Plaintiffs recognize that there is often a waiting period from the time a Court has found an inmate to be incompetent to stand trial and when a State facility is able to receive the transfer of such inmate. The parties recognize that inmates can be particularly vulnerable during this time period. As such, within 24 hours of a Court determining that an inmate is mentally incompetent to stand trial, the inmate will be placed in an administrative segregation transition cell unless contraindicated by medical staff. Inmates in transition cells shall be seen by medical staff on a daily basis, who are trained in suicide risk assessment. The Monterey County Office of the Public Defender shall take all appropriate measures (including filing requests to the Monterey County Superior Court for orders to show cause to be directed the State of California) to expedite the transfer of inmates who have been determined to be incompetent to stand trial to an appropriate State facility.

h. Treatment Plans

CFMG will develop individual treatment plans for the treatment of inmates who are suffering from mental illnesses.

i. Consideration of Mental Illness in Inmate Discipline

Mental illness will be considered in administering any disciplinary measures against an inmate. Custody staff are encouraged to contact the appropriate qualified mental health care staff when evaluating the level of discipline for an inmate with mental illness.

**VI. SUICIDE PREVENTION PLAN**

a. *Reduction of "tie-off points"*

County will reduce tie-off points within administrative segregation cells through the following measures. Administrative segregation shall be defined as a classification or

program in which inmates are removed from the general population and confined in a separate unit to separate them from other prisoners. For the purposes of this plan, Administrative Segregation units are Pods A, B, R, and S, as well as all isolation cells and any single holding cell outside of the booking and receiving area.. Should there be a need to change the Administrative Segregation units during the time in which the settlement agreement between the parties remains in effect, the parties will meet and confer in an attempt to reach a resolution on the changes in designation.

On or before August 1, 2016, the vents in these administrative segregation cells will be altered to prevent tie-off points by replacing the vents with a suicide resistant screening, approved by a consultant from Kitchell/CEM, Inc.

On or before August 1, 2016, the shutters on the isolation cell doors shall be removed.

On or before August 1, 2016, the lights in these administrative segregation cells will be caulked using an epoxy sealant as illustrated in Exhibit E. The purpose of the sealant is to deter the use of the light fixtures as a tie-off point. Yearly examinations of the light fixtures within the administrative segregation cells will be conducted by maintenance crews to ensure the sealant is still in place. Deputies will also receive training to identify any problems with the sealant.

Yearly examinations of the security caulking used to fill the gap between combi-units or furniture and the adjacent wall will be conducted by maintenance crews to ensure the caulking is still in place. Deputies will also receive training to identify any problems with the caulking around furniture and combi-units.

Kitchell/CEM, Inc. has conducted a tour of administrative segregation units to recommend appropriate changes in administrative segregation to reduce potential “tie-off points”. Attached as Exhibit F is a copy of Kitchell’s scope of work and their report recommending changes within the administrative segregation units. On or before August 1, 2016, each administrative segregation pod in Pods A, B, R, and S will have one cell with heightened safety features, as developed in consultation with Kitchell/CEM, Inc. per the report attached as Exhibit F. The location of these “heightened safety” cells will be in a location with the most visibility for direct supervision as determined by custody staff. These cells are A101, B106, S110, and R101. Inmates assigned to administrative segregation cells shall spend their first week (7 days) in the cell with heightened safety features before being transferred to a regular administrative segregation cell, unless contraindicated by medical staff. Inmates who are going back to administrative segregation cells from a safety cell, or an outside mental health facility, such as NMC, shall spend one week (7 days) in the cell with heightened safety features before being transferred to a regular administrative segregation cell, unless contraindicated by medical staff. The compliance Sergeant shall document any incident where custody was unable to meet the seven day goal for transition into administrative segregation cells. By September 1, 2016, the Chief Deputy of Corrections or Captain of Corrections Bureau will review the

occasions documented by the Compliance Sergeant in which the County was unable to meet the seven day goal for transition into administrative segregation cells; and determine whether additional transition cells need to be added. If so, those new transition cells will be completed by March 1, 2017. Inmates in transition cells shall be seen by medical staff on a daily basis, who are trained in suicide risk assessment.

A yearly examination of administrative segregation cells, including whether there are sufficient transition cells, will be conducted by the Operations Commander to review suicide prevention measures and to insure such measures have been maintained. A yearly examination of suicide resistant features and their maintenance will be conducted by the Operations Commander. Additionally, should a suicide take place in the jail, the Operations Commander will be tasked with reviewing the occurrence and examining whether additional measures need to be implemented.

Plastic bags and clothes lines shall be prohibited in administrative segregation cells. The County's inmate handbook enumerates more specific restrictions on items allowed to be kept by inmates within administrative segregation cells, with an emphasis on preventing items that can be used cumulatively to make hanging devices and promoting sanitary and healthy conditions. Deputies will be trained on the restrictions enumerated in the inmate handbook at the next scheduled staff briefing and periodically thereafter, with specific emphasis on restrictions within administrative segregation pods.

\$700,000 has been approved by the Monterey County Capital Improvement Committee to replace the camera surveillance system currently installed at the Monterey County Jail and to retain a consultant to recommend best practices in suicide prevention techniques and to recommend appropriate changes in the jail to reduce potential "tie-off points". Replacing the camera system will improve safety and security for both staff and inmates and will increase custody staff's ability to monitor sensitive need inmates. The new camera system will be installed by December 1, 2016.

b. *Custody Staff Monitoring*

Welfare checks will consist of direct visual observation that is sufficient to assess the inmate's well-being and behavior, Custody staff believes the best practice for welfare checks within the Administrative Segregation units would be to continue the hourly checks supplemented with random additional checks which when added together should achieve the every 30 minutes goal. This will be accomplished as follows:

Deputies shall continue to conduct hourly welfare checks, but will add an additional three checks per shift at random intervals, during the day and night shifts and an additional six checks per shift at random intervals during the midnight shift. Welfare checks shall include a visual observation of each inmate in the unit with verbal interaction if necessary. Deputies shall also conduct a welfare check of inmates whenever they enter an administrative segregation pod. For

example, if a deputy is going in to escort inmates to sick call he/she or their partner shall conduct a check prior to escorting the other inmates to sick call, yard, visit, etc. Each time a deputy or sergeant conducts a welfare check it shall be documented in the welfare check log. Additionally, the Main Jail floor deputies by February 1, 2016 will be stationed at desks in the corridors in front of the administrative segregation pods. This will increase monitoring abilities. The on duty sergeants will conduct a welfare check of each administrative segregation pod one time per shift. Each sergeant shall also verify whether deputies are completing their checks, at least one time per shift. The sergeants will initial the welfare check logs to indicate that they have reviewed the welfare check log, at least one time per shift.

Between December 11, 2015 and December 15, 2015, the County will conduct a pilot program of the welfare checks enumerated above to determine if they are able to maintain the goal of 30 minute welfare checks for administrative segregation cells, isolation cells, and single cell holding cells. The results of the pilot program will be shared with Plaintiffs' counsel by January 15, 2016. If the pilot program discovers significant gaps in coverage, the parties will meet and confer over possible solutions. Should no solutions be agreed upon by January 30, 2016, the issue shall be submitted to Judge Cousins for a final determination of the matter.

c. *Auditing*

All welfare checks shall be documented on a welfare check log. The logs will be reviewed and initialed by the on-duty sergeants at least one time per shift to insure compliance. Spot checks for compliance will be conducted by the Compliance Sergeant at least once per week. On a monthly basis, the Compliance Sergeant will randomly select five log entries and use the door entry logs to verify that the deputy entered the administrative segregation pod, to conduct a welfare check. The Compliance Sergeant will track all of his findings through reports which will be sent to the Jail Ops Commanders. Monthly audits of the Compliance Sergeant's reports will be conducted by the Jail Operations Commander. The Jail Operations Commander will generate a monthly report to document their audit findings. The report will be sent to the Chief Deputy of Corrections or Captain of Corrections Bureau. Any deputy or sergeant who demonstrates consistent difficulty in adhering to welfare check log requirements will be subject to additional training and/or disciplinary action at the discretion of their supervisor.

d. *Training*

In coordination with CFMG, all new deputies within one month of being stationed at the Monterey County jail will participate in an orientation training session with CFMG staff on how to recognize individuals who are in mental distress and/or suicidal.

All deputies, sergeants, and commanders will receive 24 hours of Standards and Training for Corrections ("STC") certified training per year. Every two years, all deputies, sergeants and commanders will receive eight hours of training regarding medical issues central to inmates,

which will include identifying risk factors specific to inmates, identifying warning signs specific to inmates, and how to recognize individuals who are in mental distress and/or suicidal.

Once a year, custody staff will conduct a situational training such as a mock suicide attempt or a medical emergency. CFMG staff will also participate in the annual situational training. At the conclusion of the situational training, command staff will meet with CFMG to determine if any changes in policies or operations are warranted as a result of the exercise.

e. Suicide Prevention Policy

Attached as Exhibit G are proposed policies related to suicide prevention at the County jail. These policies will be implemented no later than December 1, 2015.

f. Mental Health Grant

Additionally, the Monterey County Office of the Sheriff will continue to seek state funding for mental health and programming space at the jail. The Monterey Public Defender will cooperate in these efforts.

g. Increase in Time Outside of Cell and/or Increasing Programs

Unless exigent circumstances or safety and security concerns exist, each inmate in administrative segregation pods A, B, R, and S will be guaranteed the following weekly times out of their cell:

3 hours a week for exercise and socialization (exercise time will include exercise with one or more other inmates)

14 hours a week of "socialization time" where at least one other inmate is in the common area at the same time

2 hours a week of programming will be offered to each inmate (it is understood that inmates may refuse to participate in programs offered at the County jail)

Unless exigent circumstances or safety and security concerns exist, each inmate in isolation cells and single holding cells outside of the booking and receiving area will be guaranteed the following weekly times out of their cell:

3 hours of week for exercise

14 hours a week in the common area

2 hours a week of programming will be offered to each inmate (it is understood that inmates may refuse to participate in programs offered at the County jail)

Additionally, if approved by classification, inmates in administrative segregation will have access to the normal group programs provided at the County jail such as NA/AA, religious services, etc. The County is currently working with CFMG to provide group therapy within the administrative segregation units.

Once a month, classification will generate a report as to which inmates in segregation may participate in group programs offered at the jail, and, what, if any, restrictions apply to inmate participation. It is recognized by all parties that classification of inmates poses unique challenges within the jail. It is the goal of the County to have inmates in administrative segregation offered the same programs as inmates in general population. However, some inmates pose unique safety and security concerns. The Support Services Commander will review the monthly reports generated by classification to ensure that there are not systemic issues with access to inmate programs.

On a monthly basis, the compliance sergeant will randomly audit four inmates in administrative segregation to insure that the inmates in administrative segregation have been provided the allocated time outside of their cell for exercise and common area time. A report will be generated as part of the audit. If exigent circumstances exist which prevented an inmate in administrative segregation from receiving the allotted time outside of their cell, the compliance sergeant will review and document the circumstances preventing such time outside of the inmate's cell. On a quarterly basis an operations commander will review the audit reports to ensure compliance. The Jail Op Commander will generate a quarterly report to document their audit findings. The report will be sent to the Chief Deputy of Corrections or Captain of Corrections Bureau.

## **VI. Safety and Violence Reduction**

\$700,000 has been approved by the Monterey County Capital Improvement Committee to replace the camera surveillance system currently installed at the Monterey County Jail and to retain a consultant to recommend best practices in suicide prevention techniques and to recommend appropriate changes in the jail to reduce potential "tie-off points". Replacing the camera system will improve safety and security for both staff and inmates and will increase custody staff's ability to monitor sensitive need inmates. The new camera system will be installed by December 1, 2016.

At least once per quarter basis a dormitory or pod will be randomly selected for a search of contraband and weapons.

The County has purchased a body scanner which will used to reduce the instances of contraband being smuggled into the jail. The scanner will be used at the discretion of custody staff to deter the smuggling of contraband into the facility. All staff who use the scanner will be properly trained on its use.

The use of force policy for the Monterey County jail is attached hereto as Exhibit D.

Working with the Monterey County Probation Office and the Monterey County Superior Court, the Office of the Sheriff has and will continue to support evidence based programs such as the Work Alternative Program; Involuntary Home Detention; Pretrial Release through Probation; Own Recognizance; educational early release kickouts such as Choices/Liberty Pride; and Penal Code sections 4018.6 and 4024.1 kickouts.

Pursuant to Penal Code 1230, Monterey County established a local Community Corrections Partnership (CCP) to advise Probation in developing and implementing the community corrections program, and to recommend a local plan for approval by the Board of Supervisors. The "County of Monterey Public Safety Realignment & Post Release Community Supervision" plan creates a framework for partner agencies, to improve the collaboration among county and community agencies that work with the realigned populations of adult felony offenders. Partners in the CCP are called to actively participate in structuring strategies to maximize effective investment in evidence based correctional sanctions and programs. This process seeks to enhance and coordinate a continuum of supervision strategies, treatment, graduated sanctions and detention alternatives with the intent of: reducing recidivism; maintaining and improving public safety; and containing, or eventually reducing, the number of incarceration beds. The CCP meetings are *Brown Act* meetings open to the public and regularly attended by a representative of the Office of the Public Defender.

a. Contraband Control

All entry points to the secure perimeter of the facility shall be monitored and controlled continuously by Control staff. The entire perimeter shall be inspected, maintained, monitored and continuously assessed to ensure its physical integrity and prevent unauthorized entry, inmate escape and contraband from entering the facility. This facility shall be maintained as a secure area and no person shall enter any portion of the inner perimeter without specific authorization from the Chief Deputy, Captain of Corrections Bureau or the authorized designee. All visitors shall be required to provide satisfactory identification, such as a valid driver's license, valid passport or military identification. Visitors shall be required to sign in on the visitor log and state the reason for the visit. Visitors must wear a visitor's badge at all times and shall be escorted by one or more staff members at all times while they are in the secure areas of the facility.

Materials delivered to or transported from the facility's secure perimeter shall be inspected for contraband. Vendors making deliveries into the secure area of the facility will do so under the supervision of custody staff. Keys to the secure perimeter shall be easily identifiable and issued only in emergency situations or with the authorization of the Chief Deputy or Captain of Corrections Bureau. Weapons lockers are provided outside all secure perimeter entrances. All weapons must be secured prior to an individual being allowed to enter the facility. The sallyport and the secure garage are to be used for the transfer of inmates. Operation of the sallyport doors

will be done in such a manner as to effectively control movement into and out of the secure inner perimeter of this facility. Control staff are responsible for ensuring all perimeter surveillance equipment is in good working order and shall immediately report malfunctions or failures to the on-duty supervisor.

Inmates are provided with two mesh bags to hold personal property and/or commissary. The current limit for commissary is \$125. The Inmate Handbook provides for discipline of contraband and further enumerates prohibitions on inmate property.

b. Keys

Floor officers and other general staff will not carry keys to open control room doors unless exigent circumstances exist. Control room doors will be locked from the inside by control officers only and access granted only to those who have business within the control room. No large gatherings shall occur in the control rooms.

c. "Fail Safe Device"

"Fail safe devices" will be located within each control room.

d. Windows

Windows of control rooms shall not be covered with paper or other items that would impair the ability of control room officers to see activities within the jail dormitories.

e. Staffing Analysis

An analysis of staffing within the Sheriff's Office will be completed by December 1, 2016. The Chief Deputy of Corrections will review the analysis and, in his discretion, make any changes to staffing that he deems warranted. On an annual basis, thereafter, the Chief Deputy or Captain of Corrections Bureau will examine staffing within the jail, including overtime, relief factors, escort and transportation requirements, and organizational needs, to determine if any adjustments are needed.

f. Written Reports

Written reports are required in all of the following situations on the appropriate office-approved form unless otherwise approved by a supervisor (15 CCR 1044).

1) CRIMINAL ACTIVITY REPORTING

When an employee responds to an incident, or as a result of self-initiated activity, and becomes aware of any activity where a crime has occurred, the employee is required to document the activity. The fact that a victim is not desirous of prosecution is not an exception to documentation.

## 2) INCIDENT REPORTING

Incident reports generally serve as an in-house notation of occurrences in the facility and to initiate, document and support the inmate disciplinary process. The Office shall establish a filing system that differentiates between incident reports, crime reports and disciplinary actions. This policy does not require the duplication of information on two different forms. Where both exist, crossreferencing facilitates retrieval of one or both.

Incidents that shall be documented using the appropriate approved report include (15 CCR 1044):

- (a) Non-criminal incidents of rule violations by inmates.
- (b) Attempted suicide or suicidal ideation on the part of an inmate, if known.
- (c) Non-criminal breaches of security or evidence of an escape attempt.
- (d) Non-criminal security threats, including intelligence related to jail activities.
- (e) Significant incidents related to medical issues, health or safety in the jail.
- (f) Discovery of contraband in the possession of inmates or their housing areas.
- (g) Risk management incidents to include injuries to inmates and lost or damaged property.
- (h) Accidental injuries of staff, inmates or the general public.

## 3) DEATHS

All deaths shall be investigated and a report completed by a qualified investigating officer to determine the manner of death and to gather information, including statements of inmates and staff who were in the area at the time the death occurred.

## 4) INJURY OR DAMAGE BY OFFICE PERSONNEL

Reports shall be taken if an injury occurs that is a result of an act of an employee. Reports shall be taken involving damage to property or equipment.

## 5) USE OF FORCE

Reports related to the use of force shall be made in accordance with the Use of Force Policy.(Attached as Exhibit D).

g) GENERAL POLICY OF EXPEDITIOUS REPORTING

In general, all employees and supervisors shall act with promptness and efficiency in the preparation and processing of all reports. An incomplete report, unorganized reports or reports delayed without supervisory approval are not acceptable. Reports shall be processed according to established priorities or according to special priority necessary under exceptional circumstances.

h) RESPONSE TO DISTURBANCES

The staff should attempt to minimize the disruption to normal facility operations caused by a disturbance by attempting to isolate the disturbance to the extent possible. The staff should immediately notify the Shift Commander, Captain of Corrections Bureau or the Chief Deputy of the incident. The Shift Commander, Captain of Corrections Bureau or Chief Deputy may direct additional staff as needed to resolve the disturbance (15 CCR 1029(7))

1) NOTIFICATIONS

The Shift Commander should notify the Chief Deputy or Captain of Corrections Bureau of the disturbance as soon as practicable. Based on the seriousness of the event, the Chief Deputy or Captain of Corrections Bureau should notify the Sheriff.

2) NOTIFICATION OF QUALIFIED HEALTH CARE PROFESSIONALS

The Chief Deputy, Captain of Corrections Bureau or the authorized designee should notify the appropriate qualified health care professionals in order to review, coordinate and document medical actions based upon protocols and/or at the direction of the Responsible Physician.

3) REPORTING

The Shift Commander, Captain of Corrections Bureau or Chief Deputy should direct that an incident report to be completed containing the details of the disturbance no later than the end of the shift. If appropriate, a crime report shall be initiated and prosecution sought.

i) Annual Review

The custody management team will conduct an annual management review of minimally the following:

1. Inmate-on-inmate assaults
2. Inmate-on-staff assaults
3. Major disturbances
4. Deaths in custody (natural/suicide/homicide/accidents)

## 5. Suicide attempts

As part of the management teams' analysis, any patterns in incident locations; times of incident (including as they relate to custody staffing shifts); weapons used; whether the inmates involved had mental health, medical issues, or disability issues; known or suspected gang involvement; classification issues; or staffing issues will be evaluated and any appropriate changes to operations made.

## V. ADA

All aspects of the "COUNTY IMPLEMENTATION PLAN For Elements of the Order Granting Motion for Preliminary Injunction " are incorporated herein.

The Monterey County Sheriff's Office prohibits discrimination of persons with disabilities. The Monterey County Sheriff's Office adheres to the ADA and all other applicable federal and state laws, regulations and guidelines in providing reasonable accommodations to ensure that the facility is reasonably accessible to inmates.

A disability is any physical or mental impairment that substantially limits one or more major life activities. These include, but are not limited to, any disability that would substantially limit the mobility of an individual or an impairment of vision and/or hearing, speaking or performing manual tasks that require some level of dexterity. Additionally, disability includes a physical or mental impairment that would inhibit a person's ability to meet the rules and regulations of the facility.

By January 30, 2016, the Chief Deputy or Captain of Corrections Bureau will appoint a staff member to serve as the ADA Coordinator, whose responsibilities include, but are not limited to, coordinating compliance with ADA requirements, including compliance review of vendors providing sign language services. The ADA Coordinator should work with the Training Sergeant as appropriate, developing training regarding issues specifically related, but not limited to:

- (a) The requirements of Section 504 of the Rehabilitation Act, 29 USC § 794.
- (b) Office policies and procedures relating to ADA requirements.

## II. ADA Compliance Plan

### a. Physical Accessibility

Dorms A, B and Q will be used to house inmates with physical disabilities (other than hearing) until such time as the jail expansion is complete. Upon completion of the jail expansion, inmates with physical disabilities may also be housed in the expanded facilities which will be fully compliant with all federal, state, and local laws.

By March 1, 2016, contractors will be retained and/or a maintenance plan in place to make revisions to Dorms A, B, and Q of the County jail, as follows:

A seat will be removed from one telephone within each of these dorms (A, B, and Q) to allow wheelchair access. Volume controls will also be provided on at least one telephone to assist inmates with hearing impairment. One lavatory within each of these dorms will be modified to allow for required knee and toe space. One toilet within each of these dorms will be modified to provide the centerline of the toilet between 17 inches to 18 inches from the adjacent wall. One shower stall within each of these dorms will have ADA compliant controls and grab bars. Additionally shower chairs will be provided to those inmates who require them.

In the common area of each of these dormitories, seats surrounding the common area tables shall be modified to allow for 5% of seating to be accessible by inmates who use wheelchairs.

CFMG will have an examination bed that is ADA accessible.

No inmates with ambulatory disabilities will be permanently housed in the intake area, and the County will ensure all inmates, regardless of the need for an accommodation, shall have equal access to intake procedures and activities.

By May 1, 2016 the County will have a counter in the jail visitation room which allows for wheelchair users to maneuver their wheelchairs under the counter and a lowered telephone handset which is accessible to inmates who are wheelchair bound.

By May 1, 2016, an ADA compliant table will be installed in one of the attorney visitation rooms.

b. Tracking and Identification

At the time of an inmate's intake, the intake nurse will identify any conditions of the inmate requiring an accommodation and generate a medical treatment order which will serve as the basis for all custody and medical staff to identify and track the required accommodations. Custody staff will receive training on the use of TracNet and Medical Treatment Orders in identifying people who require accommodations. The intake nurse will have access through TracNet of any prior accommodations made for the inmate. Any information received by CDCR on an inmates' need for an accommodation will also be entered in TracNet. During intake, the intake nurse will provide items immediately needed by the inmate for accommodation, such as canes, wheelchairs, etc. At the time of intake, inmates with hearing impairments will be provided a special vest to wear during their incarceration. The vest will identify the inmate as hearing impaired so that custody staff will be aware that the inmate may not be able to follow auditory orders. The medical treatment orders generated will also identify housing accommodations needed, such as a lower bunk, access to accessible bathroom facilities, etc.

Medical treatment orders will be entered into TracNet and are accessible to all deputies working within the Monterey County jail. Any information received by the California Department of Corrections concerning an inmate's accommodation needs will be entered into TracNet. Medical treatment orders will include the identification of individuals who are provided with hearing impaired vests. TracNet will also be utilized to identify the preferred communication method of an inmate with hearing impairments, communication impairments, vision impairments, speech disabilities, and learning disabilities. With the permission of the effected inmate, the Ombudsman will be responsible for assisting any inmates with vision, learning or other information processing disabilities in understanding and completing forms used for medical, classification, due process and other programs.

Inmates who, after intake, develop a need for an accommodation will similarly be identified through medical treatment orders. Similarly, when an accommodation is identified by medical staff, medical staff will provide the inmates with any immediate needs, such as canes, crutches, vests, etc.

Inmates who feel that their disabilities have not received the proper accommodation, including communication devices, or have been denied a particular accommodation for safety or security reasons shall have access to the Monterey County Jail's grievance process as outlined in the inmate handbook. The Monterey County Jail Ombudsman is responsible for tracking and reviewing inmate grievances and ensuring that they have received a response, including any grievances related to communication services. Pursuant to the inmate handbook, an inmate may appeal a grievance to the Jail Operations Commander.

Inmates who require maintenance of an assistive device, such as a hearing aid or cane, may schedule an appointment with the jail's medical provider who will assist them in obtaining the required maintenance.

As part of the County's compliance programs, no later than March 1, 2016, all inmates will receive an assigned bunk. This will ensure that inmates assigned to lower bunks as a form of accommodation are not displaced. Inmates may use the grievance process, including contacting the ombudsman or a floor deputy, for any housing issues.

On a monthly basis, the compliance sergeant will conduct a random audit of two inmates requiring some form of accommodation, to ensure that the inmates are receiving accommodations, including the proper housing assignment and bunk assignment and the proper communication devices. An audit report will be generated as a result. On a quarterly basis, an operations commander will review the monthly audit reports to ensure compliance. The Jail Operations Commander will generate a quarterly report to document their audit findings. The report will be sent to the Chief Deputy of Corrections or Captain of Corrections Bureau.

CFMG staff will use Spanish-speaking medical staff for any inmate requiring a Spanish interpreter for discussion of medical conditions or treatment thereof, including intake

health evaluation. For any other interpretive needs, CFMG will use an appropriate interpretive service. Custody staff will use either Spanish speaking officers or an appropriate interpretive service for inmates during any procedure having due process implications, such as disciplinary hearings and inmate interviews for classification purposes. For those inmates who are hearing impaired, custody staff will work with that inmate to ascertain that inmate's desire as far as communication (i.e. whether the inmate prefers a sign language interpreter, writing, typing, etc.) The inmates' individual preference for method of communication will be given preference whenever possible.

c. Programs and Activities

All inmates, regardless of the need for an accommodation, shall have equal access to all programs and activities offered at the jail. No inmate will be required, however, to participate in a voluntary program or activity. All current jail programs are offered on the ground level, such that use of stairways is not an issue. Ground floor exercise yards are available for any inmates with mobility impairments. Hearing impaired inmates will participate in programs through either a sign language interpreter or equivalent program on a tablet (i.e. I-pad). If a program is held in an upstairs location, it will be moved to a downstairs location if necessary to ensure equal access.

The County jail's Program Director will be responsible for tracking and documenting that inmates requiring accommodations have been offered participation in all programs and activities normally available to inmates in the County jail. The compliance sergeant will audit these reports on a monthly basis and a Support Services Commander will audit these reports on a quarterly basis. The Support Services Commander will generate a quarterly report to document their audit findings. The report will be sent to the Chief Deputy of Corrections or Captain of Corrections Bureau.

Women who require ambulation assistance, have difficulty ambulating, or are confined to the use of a wheelchair, cane, walker, or crutches will have exercise time available in the yard outside of Q-pod and will have programming downstairs in V-pod.

Men who require ambulation assistance, have difficulty ambulating, or are confined to the use of a wheelchair, cane, walker, or crutches will have exercise time available in the yard outside of E dorm.

d. Policies

Attached as Exhibit H are the proposed policies and procedures related to the ADA and the County's contract with sign language interpreter services.

# ***EXHIBIT A***

CUSTODY OPERATIONS BUREAU - 2015

	TEAM	1 <sup>st</sup> Watch	2 <sup>nd</sup> Watch	3 <sup>rd</sup> Watch
1	SGT.	Sgt. C. DeLaRosa	Sgt. V. Olguin	Sgt. C. White
2	SGT.	Sgt. E. Kaye	Sgt. D. Cooper	Sgt. P. Ferrari
3	SGT.	Sgt. W. Olaveson	Sgt. P. Sanchez	Sgt. S. Anadon
4	SGT.	Vacant Sergeant		Sgt. F. Hernandez
1	DEPUTY	Smith, R.	Gordano, Reb.	Garcia, M.
2	DEPUTY	Fulkerson, B.	Shaffer, C.	Thomas, D.
3	DEPUTY	Munoz, J.	McGrew, C.	Dorgan, Cy.
4	DEPUTY	Gutierrez, S.	Martinez B.	Lilga, R.
5	DEPUTY	Quintero, N. 3/17/16	Mendoza, J.	Bossuot, M.
6	DEPUTY		Kimble, M. 3/17/16	McLeod, K. 11/1/16
7	DEPUTY	Lopez, J.	Ramon, D.	Mora, C.
8	DEPUTY	Hija, W.	Hampson, M.	Guevara, R.
9	DEPUTY	Roman, V.	Allred, D.	Holloway, J.
10	DEPUTY	Scariot, A.	Byrom, E.	Mueller, K.
11	DEPUTY	Garcia, J.	Collins, T.	Wilson, S.
12	DEPUTY	Richardson, Z.	Wong, W.	Collazo, P.
13	DEPUTY	Jones, G.	Pomales, P.	Newton, C.
14	DEPUTY	Canchola, R.	Gerard, E.	Gustus, J.
15	DEPUTY	Tamondong, M.	Campos, E.	Munoz, D.
16	DEPUTY	Munoz, A.	Cantu, R.	VonDollen, C.
17	DEPUTY	Espinoza, S.	Raarup, D.	St. Clair, C.
18	DEPUTY	Contreras, E.	Guerrero, O.	Bossuot, S.
19	DEPUTY	Gonzalez, D.	Johnson, A.	Gross, K.
20	DEPUTY	Sullivan, J.	Whaley, B.	Councilman, B.
21	DEPUTY	Costa, M.	McCaw, S.	Brown, C.
22	DEPUTY	Miranda, A.	Reyes, N.	Avery, T.
23	DEPUTY	Benfield, E.	Condon, C.	Crowell, M.
24	DEPUTY	Tsuchiura, M.	Lopez, N.	Madarus, N.
25	DEPUTY	Villegas, M.	Lopez, D.	Najem, A.
26	DEPUTY	Romero, L.	Lopez, R.	Whipple, A.
27	DEPUTY	Nisse, B.	Day, J.	Vargas, D.
28	DEPUTY	Navarro, D. 3/17/16	Yonge, K.	Swift, Z.
29	DEPUTY	Starick, D. 11/1/16	Postadan, B.	Ayala, J.P.
30	DEPUTY		Colon, J.	Ward, J.
31	DEPUTY		Fisher, R.	Gordano, Ra.
32	DEPUTY		Menezes, T.	Knutsen, J.
33	DEPUTY		Stewart, J.	Hopkins, D. 8/16/16
34	DEPUTY		Baugh, B.	Torrise, S. 3/17/16
35	DEPUTY		Caggiano	Ramirez, J. 11/1/16
36	DEPUTY		Andoy, K. 11/1/16	

**CUSTODY OPERATIONS BUREAU - 2015**

37	DEPUTY		Fessler, M. 11/1/16	
38	DEPUTY		Gavina, A. 3/17/16	
39	DEPUTY		Valle, L. 3/17/16	
40	DEPUTY		Serrano, L. 3/17/16	
41	CCS	Silva, R.	Elson, J.	Villegas, S.
42	CCS	Cazola, W.	Tabayoyon, D.	Pereira, L.
43	CCS	Rocha, A.	Ramirez, G.	DeLaCruz, A.
44	CCS	Mattke, J. 5/16	Middleton, J.	Prieto, S.
45	CCS	Flower, D. 9/7/16	Pantoja, J. 3/17/16	Marquez, M. 8/1/16
46	CCS	Bradford, M. 1/13/16	Vacant Probation	Vacant Probation
47	CCS	Anguiano, J. 10/1/16	Vacant Probation	Vacant Probation
48	CCS	Vacant Probation	Vacant Probation	Vacant Probation
	TOTAL- 120/127	35/36	45/48	40/43

# ***EXHIBIT B***

## **Safety and Sobering Cells**

### **518.1 PURPOSE AND SCOPE**

This policy establishes the requirement for placing inmates into and the continued placement of inmates in safety cells or sobering cells.

#### **518.1.1 DEFINITIONS**

Definitions related to this policy include:

**Safety cell** - An enhanced protective housing designed to minimize the risk of injury or destruction of property used for inmates who display behavior that reveals intent to cause physical harm to themselves or others or to destroy property, or who are in need of a separate cell for any reason, until suitable housing is available.

**Sobering cell** - A holding cell designed to minimize the risk of injury by falling or dangerous behavior. It is used as an initial sobering place for arrestees or inmates who are a threat to their own safety or the safety of others as a result of being intoxicated from any substance, and who require a protected environment to prevent injury or victimization by other inmates.

### **518.2 POLICY**

This facility will employ the use of safety and sobering cells to protect inmates from injury or to prevent the destruction of property by an inmate in accordance with applicable law. A sobering or safety cell shall not be used as punishment or as a substitute for treatment. The Chief Deputy or the authorized designee shall review this policy annually with the Monterey County jail medical provider. Placement of an inmate in a safety or sobering cell, whether it be from housing or upon intake, should be in concert with medical staff. Medical staff shall be promptly contacted and consulted at any time an inmate is placed in a safety or sobering cell.

### **518.3 SAFETY CELL PROCEDURES**

The following guidelines apply when placing any inmate in a safety cell:

- (a) Placement of an inmate into a safety cell requires approval of the Shift Sergeant or the medical provider.
- (b) A safety cell log shall be initiated every time an inmate is placed into the safety cell and should be maintained for the entire time the inmate is housed in the cell. Cell logs will be retained in accordance with established office retention schedules.
- (c) A safety check consisting of direct visual observation that is sufficient to assess the inmate's well-being and behavior shall occur twice every 30 minutes. Each safety check of the inmate shall be documented. Supervisors shall inspect the logs for completeness every two hours and document this action on the safety cell log.

(d) Inmates should be permitted to remain normally clothed or should be provided a safety suit, except in cases where the inmate has demonstrated that clothing articles may pose a risk to the inmate's safety or the facility. In these cases, the reasons for not providing clothing shall be documented on the safety cell log.

(e) Inmates in safety cells shall be given the opportunity to have fluids (water, juices) at least hourly. Deputies shall provide the fluids in paper cups. The inmates shall be given sufficient time to drink the fluids prior to the cup being removed. Each time an inmate is provided the opportunity to drink fluids will be documented on the safety cell log.

(f) Inmates will be provided meals during each meal period. Meals will be served on paper plates or in other safe containers and the inmates will be monitored while eating the meals. Inmates shall be given ample time to complete their meals prior to the plate or container being removed. All meals provided to inmates in safety cells will be documented on the safety cell log.

(g) The Shift Sergeant shall review the appropriateness for continued retention in the safety cell at least every eight hours. The reason for continued retention or removal from the safety cell shall be documented on the safety cell log.

(h) A medical assessment of the inmate in the safety cell shall occur within 12 hours of placement or at the next daily sick call, whichever is earliest. Medical assessments shall be documented. The medical provider will make the decision to release an inmate from a safety cell when the inmate was originally placed in a safety cell because of risk of suicide.

(i) Unless contraindicated by security and safety needs, inmates who are in a safety cell for more than 14 hours will receive a mattress or safety sleeping bag between the hours of 11:00 p.m. and 7:00 a.m. The Operations Commander will ensure that a sufficient number of safety sleeping bags for use are available.

(j) For any inmate who has been housed in a safety cell for 24 consecutive hours, custody shall promptly begin processing the inmate for transfer to either an appropriate in-patient mental health facility or the Natividad Medical Center emergency room for assessment. It is recognized that on occasion there may be exigent circumstances which prevent compliance with the requirements of 518.3(j). If such circumstances occur, a memo detailing the circumstances shall be written directed to the Custody Operations Commander or Captain. Counseling, training, or appropriate discipline may ensue from failure to comply with this policy provision.

(k) Safety cells shall be cleaned whenever there is a change in the inmate housed in the cell in addition to the regular cleaning schedule.

#### **518.4 SOBERING CELL PROCEDURES**

The following guidelines apply when placing any inmate in a sobering cell:

- (a) A sobering cell log shall be initiated every time an inmate is placed into a sobering cell. The log shall be maintained for the entire time the inmate is housed in the cell. Cell logs will be retained in accordance with established office retention schedules.
- (b) A safety check consisting of direct visual observation that is sufficient to assess the inmate's well-being and behavior shall occur at least twice every 30 minutes. Each visual observation of the inmate by staff shall be documented. Supervisors shall check the logs for completeness every two hours and document this action on the sobering cell log.
- (c) Qualified health care professionals shall assess the medical condition of the inmate in the sobering cell at least every six hours in accordance with the office Detoxification and Withdrawal Policy. Only inmates who continue to need the protective housing of a sobering cell will continue to be detained in such housing. A qualified medical professional will see an inmate within one hour of placement in a sobering cell.
- (d) Inmates will be removed from the sobering cell when they no longer pose a threat to their own safety and the safety of others and are able to continue the booking process. Inmates will be released from a sobering cell upon clearance by medical staff. Should there be a disagreement as to whether an inmate should be placed in a safety or sobering cell or released from a safety or sobering cell; the on-duty sergeant will be contacted in an attempt to reach an agreement. If a dispute still exists as to the placement of an inmate, an on-call commander will be contacted. The on-call commander will have final decision-making authority as to placement. However, any time there is a disagreement between medical and custody staff as to placement of an inmate in a safety or sobering cell, a report outlining the reasons for disagreement will be generated by the on-call sergeant. These reports will be reviewed on a monthly basis by the Operations Commander, who will meet with the medical director when necessary to identify any systemic disagreements or issues. Custody staff will be briefed at staff briefings as to any changes which need to be made or issues that are identified as a result of the meeting between the Operations Commander and medical director.
- (e) Females and males will be detained in separate sobering cells.
- (f) Inmates in sobering cells may have access to mattresses at the discretion of custody staff. Mattresses have been and will continue to be available in the intake and receiving area for this use. The Operations Commander will ensure that a sufficient number of mattresses for use are available.
- (g) For any inmate who has been housed in a sobering cell for 24 consecutive hours, custody shall promptly begin processing the inmate for transfer to Natividad Medical Center emergency room for assessment. It is recognized that on occasion there may be exigent circumstances which prevent compliance with the requirements of 518.4(g). If such circumstances occur, a memo detailing the circumstances shall be written directed to the Custody Operations Commander or Captain. Counseling, training, or appropriate discipline may ensue from failure to comply with this policy provision.
- (h) Sobering cells shall be cleaned on a regular cleaning schedule.

(i) Custody staffing will be maintained to allow medical staff to enter the sobering cells to make vital checks.

# ***EXHIBIT C***

## Use of Restraints

### 512.1 PURPOSE AND SCOPE

This policy establishes guidelines for the application, supervisory oversight and restrictions on the use of restraints on persons incarcerated in this facility.

This policy shall apply to the use of specific types of restraints, such as four/five-point restraints, restraint chairs, ambulatory restraints and similar restraint systems, as well as all other restraints, including handcuffs, waist chains and leg irons when such restraints are used to restrain any inmate for prolonged periods.

#### 512.1.1 DEFINITIONS

Definitions related to this policy include:

**Clinical restraints** - Restraints applied when an inmate's disruptive, assaultive and/or self-injurious behavior is related to a medical or mental illness. Clinical restraints can include leather, rubber or canvas hand and leg restraints with contact points on a specialized bed (four/five-point restraints) or a portable restraint chair.

**Custody restraints** - Includes steel handcuffs and leg restraints, polyurethane or nylon soft restraints, waist restraints and chair restraints that are applied to control an inmate who is assaultive, engaging in self-injurious behavior or attempting to damage property.

**Therapeutic seclusion** - Isolation of an agitated, vulnerable and/or severely anxious inmate with a serious mental illness as part of his/her treatment when clinically indicated for preventive therapeutic purposes.

### 512.2 POLICY

It is the policy of this office that restraints shall be used only to prevent self-injury, injury to others or property damage. Restraints may also be applied according to inmate classification, such as maximum security, to control the behavior of a high-risk inmate while he/she is being moved outside the cell or housing unit.

Restraints shall never be used for retaliation or as punishment. Restraints shall not be applied for more time than is necessary to control the inmate. Restraints are to be applied only when less restrictive methods of controlling the dangerous behavior of an inmate have failed or appear likely to fail (15 CCR 1029(a)(4)); 15 CCR 1058). Each incident where restraints are used shall be documented by the handling staff member and placed in the appropriate file prior to the end of the staff member's shift.

This policy does not apply to the temporary use of restraints, such as handcuffing or the use of leg irons to control an inmate during movement and transportation inside or outside the facility.

*Use of Restraints*

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**512.3 USE OF RESTRAINTS - CONTROL**

Supervisors shall proactively oversee the use of restraints on any inmate. Whenever feasible the use of restraints other than routine use during transfer, shall require the approval of a Shift Commander prior to application. In instances where prior approval is not feasible, the Shift Commander shall be apprised of the use of restraints as soon as practicable.

Restraint devices, such as restraint chairs, shall only be used on an inmate when it reasonably appears necessary to overcome resistance, prevent escape or bring an incident under control, thereby preventing injury to the inmate or others, or eliminating the possibility of property damage. Restraints shall not be applied for more time than is reasonably necessary to achieve the above goals.

Excluding short-term use to gain immediate control, placing an inmate in a restraint chair or other restraints for extended periods requires approval from the Chief Deputy or the authorized designee prior to taking action. A qualified health care professional shall be called to observe the application of the restraints, when feasible prior to the application or as soon as practicable after the application, and to check the inmate for adequate circulation.

The use of restraints for purposes other than for the controlled movement or transportation of an inmate shall be documented on appropriate logs to include, at minimum, the type of restraint used, when it was applied, a detailed description of why the restraint was needed and when it was removed (15 CCR 1058).

The following provisions shall be followed when utilizing restraints to control an inmate:

- (a) Restraints shall not be used as punishment, placed around a person's neck or applied in a way that is likely to cause undue physical discomfort or restrict blood flow or breathing (e.g., hog-tying).
- (b) Restrained inmates shall not be placed face down or in a position that inhibits breathing.
- (c) Restraints shall not be used to secure a person to a fixed object except as a temporary emergency measure. A person who is being transported shall not be locked in any manner to any part of the transporting vehicle except for items installed for passenger safety, such as seat belts.
- (d) Inmates in restraints shall be housed either alone or in an area designated for restrained inmates.
- (e) Restraints shall be applied for no longer than is reasonably necessary to protect the inmate or others from harm.
- (f) Staff members shall conduct direct face-to-face observation at least twice every 30 minutes to check the inmate's physical well-being and behavior. Restraints shall be checked to verify correct application and to ensure they do not compromise circulation. All checks shall be documented, with the actual time recorded by the person doing the observation, along with a description of the inmate's behavior. Any actions taken should also be noted in the log.

# Monterey County Sheriff's Office

## Custody Services Manual

### *Use of Restraints*

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- (g) The specific reasons for the continued need for restraints shall be reviewed, documented and approved by the Chief Deputy or Shift Commander at least every two hours.
- (h) As soon as possible, but within four hours of placement in restraints, the inmate shall be medically assessed to determine whether he/she has a serious medical condition that is being masked by the aggressive behavior. The medical assessment shall be a face-to-face evaluation by a qualified health care professional and shall recur once every six hours of continued restraint thereafter.
- (i) As soon as possible, but within eight hours of placement in restraints, the inmate must be evaluated by a mental health professional to assess whether the inmate needs immediate and/or long-term mental health treatment.

#### **512.4 RANGE OF MOTION**

Inmates placed in restraints for longer than two hours should receive a range-of-motion procedure that will allow for the movement of the extremities. Range-of-motion exercise will consist of alternate movement of the extremities (i.e., right arm and left leg) for a minimum of 10 minutes every two hours.

#### **512.5 FOOD AND HYDRATION**

Inmates who are confined in restraints shall be given food and fluids. Provisions shall be made to accommodate any toileting needs at least once every two hours. Food shall be provided during normal meal periods. Hydration (water or juices) will be provided no less than once every two hours or when requested by the inmate.

Offering food and hydration to inmates will be documented to include the time, the name of the person offering the food or water/juices, and the inmate's response (receptive, rejected). Inmates shall be provided the opportunity to clean themselves or their clothing while they are in restraints.

#### **512.6 AVAILABILITY OF CARDIOPULMONARY RESUSCITATION EQUIPMENT**

Cardiopulmonary resuscitation (CPR) equipment, such as barrier masks, shall be provided by the facility and carried by every deputy or located in close proximity to the location where inmates in restraints are held.

#### **512.7 RESTRAINED INMATE HOLDING**

Restrained inmates should be protected from abuse by other inmates. Under no circumstances will restrained inmates be housed with inmates who are not in restraints. In most instances, restrained inmates are housed alone or in an area designated for restrained inmates (15 CCR 1058).

#### **512.8 PREGNANT INMATES**

Restraints will not be used on inmates who are known to be pregnant unless based on an individualized determination that restraints are reasonably necessary for the legitimate safety and

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*Use of Restraints*

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security needs of the inmate, the staff or the public. Should restraints be necessary, the restraints shall be the least restrictive available and the most reasonable under the circumstances.

In no event will an inmate who is known to be pregnant be restrained by the use of leg restraints/irons, waist restraints/chains, or handcuffs behind the body (Penal Code § 3407).

**512.8.1 INMATES IN LABOR**

No inmate in labor, delivery or recovery shall be restrained by the use of leg restraints/irons, waist restraints/chains, or handcuffs behind the body (Penal Code § 3407).

No inmate who is in labor, delivery or recovery from a birth shall be otherwise restrained except when all of the following exist (Penal Code § 3407):

- (a) There is a substantial flight risk or some other extraordinary medical or security circumstance that dictates restraints be used to ensure the safety and security of the inmate, the staff of this or the medical facility, other inmates or the public.
- (b) A supervisor has made an individualized determination that such restraints are necessary to prevent escape or injury.
- (c) There is no objection from the treating medical care provider.
- (d) The restraints used are the least restrictive type and are used in the least restrictive manner.

Restraints shall be removed when medical staff responsible for the medical care of the pregnant inmate determines that the removal of restraints is medically necessary (Penal Code § 3407).

The supervisor should, within 10 days, make written findings specifically describing the type of restraints used, the justification and the underlying extraordinary circumstances.

# ***EXHIBIT D***

## Use of Force

### 511.1 PURPOSE AND SCOPE

The purpose of this policy is to establish guidelines governing application of force, limitations on the use of force, supervisor's responsibilities and reporting requirements for incidents involving the application of force.

#### 511.1.1 DEFINITIONS

Definitions related to this policy include:

**Deadly force** - Any application of force that is reasonably anticipated and intended to create a substantial likelihood of death or very serious injury.

**Excessive force** - The use of more force than is objectively reasonable under the circumstances to accomplish a lawful purpose.

**Use of force** - Any application of physical techniques or tactics, chemical agents or weapons to another person. It is not a use of force when the inmate allows him/herself to be searched, escorted, handcuffed or restrained.

**Use of force team technique** - The use of force team technique ordinarily involves trained staff clothed in protective gear, who enter the inmate's area in tandem, each with a specific task, to achieve immediate control of the inmate.

### 511.2 POLICY

It is the policy of this office to accomplish the department functions with minimal reliance on the use of force and generally as the last alternative.

### 511.3 USE OF FORCE

Employees may use force as reasonably appears necessary in the performance of their duties, but excessive force shall not be used. Deputies must use only that amount of force that appears reasonably necessary under the circumstances in order to gain control of the inmate, to protect and ensure the safety of inmates, staff and others, to prevent serious property damage, prevent escape, obtain compliance with facility rules and staff orders and to ensure the institution's security and good order or for other lawful purposes (15 CCR 1029(a)(3)).

The Office has provided a number of tools, weapons and training on techniques to use when responding to resistance and violent encounters. While various degrees of force exist, each deputy is expected to use only that degree of force that is reasonable under the circumstances to successfully accomplish the legitimate and lawful purpose in accordance with this policy.

It is recognized, however, that circumstances may arise in which staff may reasonably believe it would be impractical or ineffective to use any of the standard tools, weapons or methods provided by the Office. Staff members may find it more effective or practical to improvise their response to rapidly unfolding conditions they are confronting. In such circumstances, the use of any improvised

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device or method must nonetheless be objectively reasonable and utilized only to the degree reasonably necessary to accomplish a legitimate penological purpose.

In any review of an incident to determine whether a particular use of force conforms to this policy, the Office will evaluate the apparent need for an application of force, the relationship between that need and the amount of force used, the threat reasonably perceived, any efforts made to temper the severity of a forceful response and the extent of any injury to the inmate.

Prior to resorting to the use of force, staff should, when practicable, attempt verbal persuasion, orders or other tactics to avoid or mitigate the need for forceful action.

Force shall never be used as punishment or retaliation.

Medical checks will be performed on all inmates who have been subjected to force as soon as practicable, regardless of apparent injury.

Nothing in this policy is intended to require that force options be used in a particular order. However, the force option used must be objectively reasonable under the circumstances to accomplish a lawful objective.

#### 511.3.1 FACTORS USED TO DETERMINE THE REASONABLENESS OF FORCE

When determining whether to apply force and evaluating whether a deputy has used reasonable force, a number of factors should be taken into consideration, as time and circumstances permit. These factors include, but are not limited to:

- (a) Immediacy and severity of the threat to deputies or others.
- (b) The conduct of the individual being confronted, as reasonably perceived by the deputy at the time.
- (c) Deputy/inmate factors (age, size, relative strength, skill level, injuries sustained, level of exhaustion or fatigue, the number of deputies available vs. inmates).
- (d) The effects of drugs or alcohol.
- (e) Inmate's mental state or capacity.
- (f) Proximity of weapons or dangerous improvised devices.
- (g) The degree to which the inmate has been effectively restrained and his/her ability to resist despite being restrained.
- (h) The availability of other options and their possible effectiveness.
- (i) The seriousness of the suspected offense or reason for contact with the inmate.
- (j) Training and experience of the deputy.
- (k) Potential for injury to deputies, inmates and others.
- (l) Whether the inmate appears to be resisting or is attacking the deputy.
- (m) The risk and reasonably foreseeable consequences of escape.

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- (n) The apparent need for immediate control of the inmate or a prompt resolution of the situation to maintain or restore order.
- (o) Whether the conduct of the inmate being confronted no longer reasonably appears to pose an imminent threat to the deputy or others.
- (p) Awareness of the inmate's propensity for violence.
- (q) Any other exigent circumstances.

**511.3.2 DUTY TO INTERCEDE**

Any deputy present and observing another staff member using force that is clearly not within this policy is expected, when reasonable to do so, to intercede to prevent the use of such force and in all cases report the use promptly to a supervisor.

**511.4 USE OF OTHER WEAPONS, TOOLS AND CHEMICAL AGENTS**

**511.4.1 NOISE/FLASH DISTRACTION DEVICES**

Noise/flash distraction devices, sting grenades, chemical grenades and similar devices shall be used only at the direction of a supervisor and only by staff who have been trained in and are qualified for the use of the devices.

**511.4.2 ELECTRONIC CONTROL DEVICES**

The use of TASER® devices shall be in accordance with the office Conducted Energy Device Policy.

Other electronic control devices, such as stun cuffs and stun belts, shall only be used when it appears reasonably necessary to control an inmate who poses a serious threat to safety or security, and only with the approval of a supervisor. These devices shall not be used to punish or torment. Only office-trained personnel authorized by the Chief Deputy shall deploy and use these devices.

Prior judicial approval should be obtained for any use of stun belts in court holding facilities if the device will be worn in the courtroom or will be visible to a jury.

**511.4.3 CHEMICAL AGENTS**

Chemical agents shall only be used in the facility as authorized by the Chief Deputy or the authorized designee. Oleoresin capsicum (OC) spray should not be used in the medical unit or other designated areas where inmates are assigned to respiratory isolation or on any inmate who is under control with or without restraints.

Office-approved OC spray or foam may be possessed and used only by staff members who have received office-authorized training in its use.

Inmates who have been affected by the use of chemical agents shall be promptly provided with the proper solution to decontaminate the affected areas. Those inmates who complain of severe effects shall be examined by a qualified health care professional.

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If the inmate refuses to decontaminate, such a refusal shall be documented. If an inmate has been exposed in a cell and not removed from the cell where the exposure occurred, in-cell decontamination shall be afforded to the inmate, including:

- (a) Health-trained custody staff advising the inmate how to decontaminate in the cell.
- (b) Clean clothing if the inmate's clothing was contaminated.
- (c) Monitoring of the in-cell inmate at least every 15 minutes, for a period of not less than 45 minutes, by health-trained custody staff.

#### 511.4.4 PROJECTILE CHEMICAL AGENTS

Pepper projectile systems are plastic spheres filled with a derivative of OC powder. A compressed gas launcher delivers the projectiles with enough force to burst the projectiles on impact, releasing the OC powder. Although classified as a non-lethal weapon, the potential exists for the projectiles to inflict injury if they strike the head, neck, spine or groin. Therefore, personnel deploying the pepper projectile system should not intentionally target those areas except when the deputy reasonably believes the inmate may cause serious bodily injury or death to the deputy or others. The use of the pepper projectile system is subject to the following requirements:

- (a) Deputies encountering a situation that requires the use of the pepper projectile system shall notify a supervisor as soon as practicable. The supervisor shall respond to all such deployments. The supervisor shall ensure that all notifications and reports are completed as required by the Use of Force Policy.
- (b) Each deployment of a pepper projectile system shall be documented and, if reasonably practicable, recorded on video. This includes situations where the launcher was directed toward the inmate, regardless of whether the launcher was used. Only non-incident deployments are exempt from the reporting requirement (e.g., training, product demonstrations).

#### 511.4.5 IMPACT WEAPONS

The need to immediately incapacitate the inmate must be weighed against the risk of causing serious injury or death. The head and neck should not be intentionally targeted with an impact weapon, except when the deputy reasonably believes the inmate may cause serious bodily injury or death to the deputy or others.

#### 511.4.6 KINETIC ENERGY PROJECTILES

Kinetic energy projectiles, when used properly, are less likely to result in death or serious physical injury and can be used by a trained and qualified member in an attempt to de-escalate a potentially deadly situation.

### 511.5 IMMEDIATE AND CALCULATED USE OF FORCE

An immediate use of force occurs when force is used to respond without delay to a situation or circumstance that constitutes an imminent threat to security or safety. For example, the immediate

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or unplanned use of force by staff to stop an inmate from inflicting life-threatening injuries to him/herself or to stop an assault on any other person, including other inmates.

The destruction of government property may require the immediate use of force by staff in some circumstances. A verbal warning should be given before an immediate use of force unless the circumstances preclude it.

If there is no need for immediate action, staff should attempt to resolve the situation through voluntary compliance or, if it reasonably appears necessary, the calculated use of force. A calculated use of force is called for when an inmate's presence or conduct poses a threat to safety or security and the inmate is located in an area that can be controlled or isolated, or when time and circumstances permit advance planning, staffing and organization.

The assistance of non-custody staff (e.g., psychologists, counselors) should be considered when attempting to resolve a situation without confrontation.

A supervisor shall be present in any situation involving the calculated use of force. The supervisor shall notify the Shift Commander for approval and consultation prior to any calculated use of force action.

#### 511.5.1 CONFRONTATION AVOIDANCE PROCEDURES

Prior to any calculated use of force, the supervisor shall confer with the appropriate persons to gather pertinent information about the inmate and the immediate situation. Based on the supervisor's assessment of the available information, he/she should direct staff to attempt to obtain the inmate's voluntary cooperation and consider other available options before determining whether force is necessary.

The supervisor should consider including the following persons and resources in the process:

- (a) Mental health specialist
- (b) Qualified health care professional
- (c) Chaplain
- (d) Office Records Division
- (e) Any other relevant resources

Regardless of whether discussions with any of the above resources are accomplished by telephone or in person, the purpose is to gather information to assist in developing a plan of action, such as the inmate's medical/mental history (e.g., hypoglycemia, diabetes), any recent incident reports or situations that may be contributing to the inmate's present condition (e.g., pending criminal prosecution or sentencing, recent death of a loved one, divorce). The assessment should include discussions with staff members who are familiar with the inmate's background or present status. This may provide insight into the cause of the inmate's immediate agitation. It also may identify other staff who have a rapport with the inmate and could possibly resolve the incident peacefully, without the use of force.

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If force is determined necessary and other means of gaining control of an inmate are deemed inappropriate or ineffective, then the use of force team technique should be used to control the inmate and to apply restraints, if required.

Consideration should also be given to preventing exposure to communicable diseases in calculated use of force situations and to ensuring that medical services personnel are available.

**511.6 REPORTING THE USE OF FORCE**

Every staff use of force is an incident that shall be reported on the appropriate report form. Any staff member who uses force and any staff directly observing the incident shall make a verbal report to a supervisor as soon as practicable and shall submit the appropriate documentation prior to going off-duty, unless directed otherwise by a supervisor.

The documentation will reflect the actions and responses of each staff member participating in the incident, as witnessed by the reporting staff member.

The report should include:

- (a) A clear, detailed description of the incident, including any application of weapons or restraints.
- (b) The identity of all involved in the incident (e.g. inmates, staff and others).
- (c) The specific reasons for the application of force.
- (d) The threat as perceived by the staff involved.
- (e) Efforts were made to temper the severity of a forceful response, and if there were none, the reasons why.
- (f) Description of any injuries to anyone involved in the incident, including the result of any medical checks that show the presence or absence of injury.

A video recording is required for all calculated use of force incidents and should include the introduction of all staff participating in the process. The recording and documentation will be part of the investigation package. The supervisor should ensure the recording is properly processed for retention and a copy is forwarded with the report to the Chief Deputy within three working days.

The supervisor responsible for gathering the reports may allow a reasonable delay in preparation of a report in consideration of immediate psychological and/or physical condition of the involved deputy.

**511.7 SUPERVISOR RESPONSIBILITY**

When a supervisor is able to respond to an incident in which there has been a reported use of force, the supervisor is expected to:

- (a) Obtain the basic facts from the involved deputies. Absent an allegation of misconduct or excessive force, this will be considered a routine contact in the normal course of duties.

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- (b) In cases involving the use of deadly force or when serious injury has resulted, obtain an oral statement from the employee. The statement should be restricted to concerns of anything that may present an ongoing threat to the security of the facility or public safety.
- (c) Take appropriate measures to address public safety concerns, document the essence of the oral statements in writing and submit it to the Shift Commander.
- (d) Ensure that the appropriate investigation authority is notified, if needed.
- (e) Ensure that any parties involved in a use of force situation are examined by medical staff, regardless of whether any injuries are reported or detectable, and afforded medical treatment as appropriate.
- (f) Separately obtain a recorded interview with all inmates upon whom force was used. If this interview is conducted without the person having voluntarily waived his/her *Miranda* rights, the supervisor should ensure the following in the event a report is submitted to a prosecuting authority:
  - 1. The fact that a recorded interview was conducted by a supervisor and retained for the use of force review should be clearly documented.
  - 2. The content of the interview should not be summarized or included in any related reports submitted to the prosecuting authority.
- (g) The recording of the interview should be distinctly marked for retention until all potential for civil litigation has expired.
- (h) Once any initial medical assessment or first aid has been completed, ensure that photographs have been taken of any areas involving visible injury or complaint of pain as well as overall photographs of uninjured areas. These photographs should be retained until all potential civil litigation has expired.
- (i) Identify any witnesses not already included in related reports.
- (j) Review and approve all related reports.

If the supervisor determines that any application of force was not within policy, he/she should detail those findings in a separate report. If there is an injury or complaint of an injury, the supervisor should also prepare a risk management report and should submit all reports to the Shift Commander.

In the event that the supervisor believes the incident may give rise to civil litigation, a separate claim form should be completed and routed to the appropriate channels.

In the event that a supervisor is unable to respond to the scene of an incident involving a reported application of force, the supervisor is still expected to complete as many of the above items as circumstances permit.

If an inmate has made an allegation of an unnecessary or excessive use of force, the interview should be video-recorded and shall be documented on the appropriate report form.

## Use of Force

### **511.8 USE OF DEADLY FORCE**

Use of deadly force is justified in the following circumstances:

- (a) A deputy may use deadly force to protect him/herself or others from what he/she reasonably believes would be an imminent threat of death or serious bodily injury.
- (b) A deputy may use deadly force to stop an escaping inmate when the deputy has probable cause to believe that the inmate has committed, or intends to commit, a felony involving the infliction or threatened infliction of serious bodily injury or death, and the deputy reasonably believes that there is an imminent or future potential risk of serious bodily injury or death to any other person if the inmate is not immediately apprehended. Under such circumstances, a verbal warning should precede the use of deadly force, where feasible.

Imminent does not mean immediate or instantaneous. An imminent danger may exist even if the inmate is not at that very moment pointing a weapon at someone. For example, an imminent danger may exist if a deputy reasonably believes any of the following:

- 1. The inmate has a weapon or is attempting to access one and it is reasonable to believe the inmate intends to use it against the deputy or another.
- 2. The inmate is capable of causing serious bodily injury or death without a weapon and it is reasonable to believe the inmate intends to do so.

#### **511.8.1 USE OF DEADLY FORCE-REPORTING**

An employee, who intentionally or accidentally uses deadly force, whether on- or off-duty, shall ensure that a supervisor is notified of the incident without delay.

The supervisor shall ensure that the chain of command is notified and all necessary health and safety, medical and security measures are initiated.

The Shift Commander shall promptly notify the Chief Deputy of any incident involving a staff member employing deadly force, or any incident where a death or serious bodily injury may have been caused by a staff member.

#### **511.9 USE OF FORCE REVIEW**

The Shift Commander shall review all related reports of use of force incidents occurring on his/her command. The review is to determine whether the use of force was in compliance with policy, procedure and applicable law, and to determine if follow-up action or investigation is necessary. The Shift Commander should also ensure that a review packet containing a copy of all pertinent reports and materials is prepared and forwarded to the Use of Force Review Committee.

#### **511.10 TRAINING**

The Chief Deputy shall work with the Training Sergeant to ensure legal and facility training mandates are met. This training shall include the following:

- (a) Self-defense
- (b) Use of force to control inmates

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- (c) Weapons training
- (d) Confrontation avoidance procedures:
  - 1. Communication techniques
  - 2. Cultural diversity
  - 3. Dealing with the mentally ill
  - 4. Application of restraints
  - 5. Reporting procedures
- (e) Forced cell extraction techniques
- (f) Use of force team techniques
- (g) General restraint training (soft and hard restraints)

**511.10.1 TRAINING FOR CONTROL DEVICES**

The Training Sergeant shall ensure that all personnel who are authorized to carry a control device have been properly trained and certified to carry the specific control device and are retrained or recertified as necessary.

- (a) Proficiency training shall be monitored and documented by a certified, control-device weapons or tactics instructor.
- (b) All training and proficiency for control devices will be documented in the deputy's training file.
- (c) Deputies who fail to demonstrate proficiency with the control device or knowledge of this office's Use of Force Policy will be restricted from carrying the control device until demonstrating proficiency. If a deputy cannot demonstrate proficiency with a control device or knowledge of this office's Use of Force Policy after remedial training, the deputy may be subject to discipline.

**511.10.2 PERIODIC TRAINING**

Supervisors should conduct and document regular periodic briefings concerning this policy and the storage and use of weapons and control devices. Any test sheets or documentation of performance should be forwarded to the Training Sergeant to be included in the employee's training record.

# ***EXHIBIT E***

3ND = 3M112  
PAGES = 028

# ***EXHIBIT F***

# EXHIBIT A - SCOPE OF SERVICES/PAYMENT PROVISIONS

To Agreement by and between  
County of Monterey, hereinafter referred to as "County"  
and  
KITCHELL/CEM, INC., hereinafter referred to as "CONTRACTOR"

## A. SCOPE OF SERVICES

CONTRACTOR shall provide services and staff, and otherwise do all things necessary for or incidental to the performance of work for the project described as Jail Security Improvements

### 1.0 KICKOFF MEETING AND SITE WALKTHROUGH

1.1 CONTRACTOR shall meet with County staff to review and discuss the Sheriff's security needs, the scope of work, and the delivery schedule for two stand alone reports. Budget 1 hour for meeting.

1.2 Immediately following the kickoff meeting, CONTRACTOR shall inspect and document the site conditions throughout the detention facility. Budget 5 hours for walkthrough.

### 2.0 VULNERABILITY ASSESSMENT SINGLE, DOUBLE OCCUPANT CELLS

PURPOSE: Report findings and recommendations that reduce risk and occurrence of detainee suicide in single- and double-occupant cells in ten housing 'pods' of the Men's and Women's Detention Facility.

2.1 CONTRACTOR shall review the site conditions in the identified housing areas, existing reports and drawings for the housing areas to develop a vulnerability assessment.

2.2 CONTRACTOR shall prepare plan view drawings to illustrate the vulnerable areas, features and blind spots in the housing that create an opportunity for an inmate to commit suicide; and to illustrate the Contractor's recommendations to reduce, limit or remove those features and blind spots.

2.3 Meetings: it is anticipated that one meeting will be required to finalize the stand-alone vulnerability assessment

2.4 Revisions: Based on feedback from County staff, CONTRACTOR shall revise the report for County's final approval.

Estimated duration: 4 weeks from Notice to Proceed

## EXHIBIT A - SCOPE OF SERVICES/PAYMENT PROVISIONS

### 3.0 VIDEO SURVEILLANCE SYSTEM ASSESSMENT

**PURPOSE:** Evaluate the existing video surveillance system throughout the detention facility and make recommendations and specifications for upgrades and expansion.

- 3.1 Reviewing data, photographs, drawings and reports provided in TASKS 1 and 2, CONTRACTOR develop a video surveillance system assessment. Assessment shall address existing hardware, servers, display capability, storage capability, capacity for expansion,
- 3.2 For all replacement and expansion cameras, CONTRACTOR shall provide camera make and model as a basis for design specifications for a future expansion of the system. For storage, display, recording hardware provide make and model. Recommend software and number of user licenses.
- 3.3 CONTRACTOR shall provide detailed cost estimate for all recommended upgrades, including procurement and installation.
- 3.4 Meetings: it is anticipated that 1 meeting will be required to finalize the stand-alone video surveillance system assessment.
- 3.5 Revisions: Based on feedback from County staff, CONTRACTOR shall revise the report for County's final approval.

Estimated duration: 4 weeks from Notice to Proceed

### 4.0 SCOPING DOCUMENTS

- 4.1 The CONTRACTOR shall prepare scoping documents based on the approved video surveillance system package, including written specifications and equipment schedules that establish, in detail, the quality levels of materials and systems required for the project
- 4.2 Specifications: CONTRACTOR shall produce drawings and schedules identifying materials, systems and establish a basis for design
- 4.3 At 75% completion, the CONTRACTOR shall meet with County staff to review the work and will submit documents for review and comment by each party.
- 4.4 Upon review and completion of any necessary changes, the CONTRACTOR shall be authorized to submit for permitting.
- 4.5 Plan Check/ Building Permit – If Plan Check is required, the CONTRACTOR shall work with the County's Building Department and California Board of State and Community Corrections to obtain the permits required for construction based on meeting the requirements of appropriate codes and regulations.

Estimated duration: 12 weeks from County approval of VSS Assessment

## EXHIBIT A - SCOPE OF SERVICES/PAYMENT PROVISIONS

### 5.0 CONTRACTOR SCOPING ASSISTANCE

- 5.1 Attend a job scoping meeting with County and pre-selected construction general contractor and provide responses to RFI's for the County to distribute to the construction general contractor. Budget 2 hours onsite for the job scoping meeting.

Estimated duration: 4 weeks from acceptance of 100% Construction Documents

### 6.0 CONSTRUCTION ADMINISTRATION

- 6.1 CONTRACTOR's responsibility to provide Basic Services for the Construction Administration Phase begins with the issuance of a contract between County and construction general contractor and terminates at the issuance to the Owner of the Certificate of Occupancy. The anticipated length of construction is estimated to be 16 weeks.
- 6.2 The CONTRACTOR shall be a representative of, and will advise and consult with, County staff during construction.
- 6.3 CONTRACTOR shall make 3 visits to the project at appropriate intervals during construction to become generally familiar with the progress and quality of the contracts' work and to determine if the work is proceeding in general accordance with the Contract Documents. CONTRACTOR shall provide written field observation reports for all site visits. Budget 1.5 hours on site for each visit.
- 6.4 The CONTRACTOR shall provide written answers to contractor's RFI's within 2 days after receipt.
- 6.5 The CONTRACTOR shall review the Construction general contractor's submittals for design compliance. The CONTRACTOR shall review construction general contractor submittals pertaining to items such as shop drawings, product data, samples, and other data for the limited purpose of checking for general conformance with the design concept and the information expressed in the Contract Documents. The CONTRACTOR's review shall be conducted within 3 days.
- 6.6 CONTRACTOR shall provide clarification of the documents, respond to County and construction general contractor inquiries, document any revisions and prepare Architect's Supplemental Instructions.

## EXHIBIT A - SCOPE OF SERVICES/PAYMENT PROVISIONS

- 6.7 CONTRACTOR shall provide a substantial completion punch list for County and construction general contractor to review and execute. Once the conditions for the substantial completion punch list are met, perform a final punch list walk.

Estimated duration: 16 weeks from the issuance of construction notice to proceed

### 7.0 Reimbursable Expenses (Allowance)

Per fee schedule in On-call Services Agreement

#### Excluded services:

Hazardous Materials testing & mitigation  
Special Inspections  
Lifecycle analysis  
LEED certification

## B. PAYMENT PROVISIONS

### B.1 COMPENSATION/ PAYMENT

County shall pay an amount not to exceed \$ for the performance of all things necessary for or incidental to the performance of work as set forth in the Scope of Services. CONTRACTOR'S compensation for services rendered shall be based on the following rates or in accordance with the following terms:

**Kickoff Meeting and Site Walkthrough: \$**  
**Vulnerability Assessment \$**  
**Video Surveillance System Assessment \$**  
**Scoping Documents: \$**  
**Contractor Scoping Assistance: \$**  
**Construction Administration: \$**  
**Reimbursable Expenses Allowance: \$**

There shall be no travel reimbursement allowed during this Agreement, except for mileage.

CONTRACTOR warrants that the cost charged for services under the terms of this Agreement are not in excess of those charged any other client for the same services performed by the same individuals.

**B.2 CONTRACTOR'S BILLING PROCEDURES**

CONTRACTOR shall submit invoices monthly for the services completed during the previous month. County will make progress payments in accordance with Section 5 of the Agreement.

County may, in its sole discretion, terminate the Agreement or withhold payments claimed by CONTRACTOR for services rendered if CONTRACTOR fails to satisfactorily comply with any term or condition of this Agreement.

No payments in advance or in anticipation of services or supplies to be provided under this Agreement shall be made by County.

County shall not pay any claims for payment for services submitted more than twelve (12) months after the calendar month in which the services were completed.

DISALLOWED COSTS: CONTRACTOR is responsible for any audit exceptions or disallowed costs incurred by its own organization or that of its subcontractors.

# Facility Physical Safety Assessment Report

## Monterey County Main Jail Salinas, CA



*Prepared by Kitchell*

*For*

County of Monterey,  
California



December 18, 2015  
Job No. 6019A3



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## Executive Summary

On October 21, 2015, Kitchell and R&N Systems Design conducted a detailed Security Assessment of the County of Monterey Adult Jail Facility on Natividad Road in Salinas, California. The goal of the assessment was to document current physical conditions of the Main Jail facility and provide recommendations that reduce the opportunity for detainee self-harm in cells and units used for inmates that exhibit violent or disruptive behavior. These inmates are kept in designated administrative segregation units or isolation units depending on severity of their offenses.

We were not asked to evaluate County policy, assessment or classification practices, or operational guidelines. These elements of the system have distinct and relevant impact on detainee safety. There are several publications that have addressed evidence based best practices for detainee safety that are available upon request.

## Conclusion

### A. Physical Safety Elements

1. When changing physical elements to promote safety, the County should evaluate impacts upon the technical functionality and durability of the chosen solutions against the proposed safety enhancement.
2. Physical conditions in the Jail combined with the harmful creativity of detainees in a suicidal state of mind provides an opportunity to complete the task.
  - a. As found in many detention facilities across the nation, the combination plumbing fixture (combi-unit) provides a step up below an air duct grille mounted on the wall or ceiling above. The main jail incorporates two types of wall grilles that provides ligature opportunities.
    - 1) Surface mounted detention grade grilles composed of a 1/2" square grid of 3/8" metal fins.
    - 2) Back-mounted detention-grade grilles composed of heavy woven wire mesh with wires spaced approximately 3/4" on center.
  - b. The main jail incorporates three types of smoke detector covers.
    - 1) A detention grade metal wire cage that provides ligature opportunities.
    - 2) A detention grade plastic cage that may break away when too much weight is applied. While it may be considered a ligature prevention methodology, the plastic cage also provides a durability and weapon stock challenge for the institution
  - c. The stair and mezzanine rails are in supervised areas, but with their horizontal rail design it provides ligature or jumping opportunities should the right combination of opportunity and desire be combined.
  - d. The security sealant to fill the gap between combi-units or furniture and the adjacent wall is missing or in need of replacement at several cells observed. Exposed corners behind combi-units might provide a ligature opportunity.
  - e. The design of the drinking fountain head on several of the combi-units observed provides a ligature opportunity.



## **Introduction**

The County of Monterey Main Jail Facility is located at 1410 Natividad Road, Salinas, California. The facility is composed of four basic conglomerated buildings built in different decades constructed within the perimeter security fence. The oldest portion of the Jail Facility is the Rehabilitation Facility built in 1971. A connector was built from this building to a purpose built Detention Facility about 1976 comprising of Men's and Women's Housing, and central support which is now the Infirmary and Visitation building. About 1986, the K-Pod dormitory building was built, and in 1996 additional Dormitory units, new Intake Center and central Kitchen were constructed. The assessment team reviewed these buildings, including the recreation yards of each building and the current video surveillance system for inmate safety. The parking lots and ancillary buildings outside the secure fence area were not assessed.

All of the inmate housing reviewed employs an indirect supervision model by which security staff are not present inside the unit while the space is occupied with detainees. This places a greater reliance on remote monitoring from the unit access corridors, or housing control room if present in the building, and use of remote video surveillance at a centralized location. The Men's and Women's Housing presents a unique challenge for the staff due to the small housing units of cells dispersed between the ground and tier levels and lack of a centralized control room in the Men's Housing for physical oversight into the units.

The physical environment plays a role in creating opportunities for self-harm by detainees. Overhanging elements and fixtures on the wall such as mechanical air grilles presents a risk. These elements can provide a means of attachment of bedding and clothing materials available to detainees for self-strangulation.

This study is a review of physical elements that present a risk of self-harm in administrative segregation and isolation housing units in the Men's, Women's Housing and Intake buildings. Each building is broken out with respective observations within and followed with recommendations.

The methodology used in this study included:

- Review of the available construction drawings.
- Visual non-destructive inspection of the building using industry best-practices.
- Interview of custody and maintenance staff.

**I. Mens Building A and B Pods****A. Physical Safety Elements**

1. The building is used for male detainees and has ten units, of which eight are cell units and two are dormitory units. The cell units for use as administrative segregation housing are designated A and B Pods. Each cell Pod has a dayroom with sixteen single bunk cells, of which eight cells are on the lower level and eight cells on the upper (tier) level. Due to the size of the building, there is no centralized point which direct observation can be made on more than two units.
2. Cells are furnished with a combi-unit and single fixed bed. Ceiling height is approximately 8' high on the lower level and 9' high on the upper level. Exterior window in cell is covered with a perforated steel plate that was added inside the cell in response to escapes and glazing breakage. The cell front to the dayroom has a fixed window as well as glazing in the door. From dayroom, the combi-unit in the cell is not visible.
3. The perforated steel plate over the windows is sealed to the glazing with security sealant and does not present any means of attachment. In one cell observed, the perforated plate was covered with a metal pan so no glazing was visible.
4. A gap is present between the bunk bed pan and the wall. The top edge of the bed can provide ligature opportunities for a person under the bed.
5. The perimeter of the combination unit is not sealed at the wall and can be used as point of attachment, as is the gap between the table and the wall which can catch fabrics. The gap can also be used for concealment of contraband.
6. In the cell, on the wall above the combination unit, is the return air grille. The supply air grill is on the wall above the cell door. Both of the mechanical openings are secured with woven wire mesh, with wires spaced 3/4" on center, each way. Wire used on the return air opening is heavier than that on the supply air so the opening size is smaller. County has noted to the review team that the mesh has been used as a point of attachment by detainees standing unobserved on the combination unit and have succeeded in committing suicide. As the return grill is in an unobservable area and the supply in front of the door is observable, there is a propensity that the return grill will be used as a point of attachment. The return air grill in one cell was observed to be covered with a steel pan with the opening on the bottom in response to suicide attempts.
7. A shower curtain hanging from a rod in the inmate shower could be used as a means of attachment. The curtain closes the entire shower stall opening so no direct observation can be made of inmates inside the stall.
8. The elevated walkway serving the upper level cells in the cell dayrooms has a guard rail with four horizontal rails that is scalable and be used for as means of attachment or jumping attempts off the walkway.
9. Recommendations:
  - a. Seal the gap between the bed and the wall with security sealant or use in combination with steel angles welded to the bed pan edge if the gap is too large for sealant alone.
  - b. Provide security sealant around combi-unit to the wall.
  - c. In A and B Pods, provide security diffuser with perforated security diffuser of hole openings not greater than 3/16" per BSCC standards in place of all supply and return air grilles in cells. Remove existing mesh from within the chase side of the wall or cut grill clear of opening on room side. After installation of new diffusers, perform mechanical air balance in pod for proper air flow within cells and dayrooms. Priority should be given to the return air grill in the cells and both the supply and return air grill in the holding cells.



- d. Provide shower curtain with breakaway Velcro hangers and mesh openings above chest height and below the knee of inmates for observation. Curtain rod should be replaced with sliding track mounted to the ceiling or underside of shower stall opening.
- e. Install woven wire mesh security wall at the tier level walkway of A and B pod to address jumping by higher risk population.

## II. Womens Building R, S, and V Pods

### A. Physical Safety Elements

1. The building is used for female detainees and has an elevated centralized housing control room for direct line of sight into four cell units and one dormitory unit that was converted from a dayroom for the building. The cell units in use for administrative segregation are designated as R and S Pods. Each cell pod has 8 cells on the ground level and 8 cells on the tier (mezzanine) level, all with single beds. Line of sight from the control room to the cell front in each pod is good. Most of the sixth pod, V Pod, is used for inmate programs with remainder for Holding Cells accessed from the main corridor.
2. Cells are furnished with a combination plumbing fixture and a fixed bed. Ceiling height is approximately 8' high on the lower level and 9' high on the upper level. Exterior window in cell is covered with a perforated steel plate that was added inside the cell in response to escapes and glazing breakage. The cell front to the dayroom has a fixed window as well as glazing in the door. From dayroom and housing control, the combination fixture in the cell is not visible.
3. The perforated steel plate over the windows is sealed to the glazing with security sealant and does not present any means of attachment.
4. A gap is present between the bunk bed pan and the wall. The top edge of the bed can provide ligature opportunities for a person under the bed.
5. The perimeter of the combination unit is not sealed at the wall and can be used as point of attachment, as is the gap between the table and the wall which can catch fabrics. The gap can also be used for concealment of contraband.
6. In the cell, on the wall above the combination unit is the return air grille. The supply air grill is on the wall above the cell door. Both of the mechanical openings are secured with woven wire mesh, with wires spaced 3/4" on center, each way. Wire used on the return air opening is heavier than that on the supply air so the opening size is smaller. County has noted to the review team that the mesh has been used as a point of attachment by detainees standing unobserved on the combination unit and have succeeded in committing suicide. As the return grill is in an unobservable area and the supply in front of the door is observable, there is a propensity that the return grill will be used as a point of attachment.
7. A shower curtain hanging from a rod in the inmate shower could be used as a means of attachment. The curtain closes the entire shower stall opening so no direct observation can be made of inmates inside the stall.
8. The elevated walkway serving the upper level cells in the cell dayrooms has a guard rail with four horizontal rails that is scalable and be used for jumping attempts off the walkway.
9. Part of the V Pod at ground level is used for Holding Cells. Accessed from a single loaded corridor connected to the main corridor, these cells cannot be seen from the housing control room and do not have any staff stations nearby for monitoring. Due to remoteness, there is a greater chance of self-harm in the holding cells than in the housing cells.
10. The Holding Cells fixtures are similar to the housing cells noted above with exception that a surface mounted paging speaker with cast metal grill with large square openings is mounted on the ceiling. It is evident that the speaker is in reach range as it is stuffed with paper by inmates and can provide a means of attachment.



11. Recommendations:

- a. Seal the gap between the bed and the wall with security sealant or use in combination with steel angles welded to the bed pan edge if the gap is too large for sealant alone.
- b. Provide security sealant around combi-unit to the wall.
- c. In R and S Pods, and holding in V Pod, provide security diffuser with perforated security diffuser of hole openings not greater than 3/16" per BSCC standards in place of all supply and return air grilles in cells. Remove existing mesh from within the chase side of the wall or cut grill clear of opening on room side. After installation of new diffusers, perform mechanical air balance in pod for proper air flow within cells and dayrooms. Priority should be given to the return air grill in the housing cells and both the supply and return air grill in the holding cells.
- d. Provide shower curtain with breakaway Velcro hangers and mesh openings above chest height and below the knee of inmates for observation. Curtain rod should be replaced with sliding track mounted to the ceiling or underside of shower stall opening.
- e. Install woven wire mesh security wall at the tier level walkway of R and S Pods to address jumping by higher risk population.
- f. Provide paging speaker with a perforated metal cover in the Holding Cells.

**III. Intake Center Building Isolation**

**A. Physical Safety Elements**

1. The Intake Center was constructed with several distinct uses – Vehicle Sallyport, Intake, Isolation Unit, and a Work Furlough Unit constructed as a dormitory unit. All these spaces are on one level.
2. The Isolation Unit was initially designed for female intake but the six holding cells were converted to single bed isolation cells served by a corridor. The cells are provided with wall mount table and floor mount stool with wall brace, and pedestal mounted fixed bunk bed. A combi-unit with masonry privacy wall is also present. All of the mechanical and low voltage electrical fixtures mounted on the ceiling of the cells are not appropriate for a housing cell.
  - a. The Isolation cells cannot be observed from a central point as it was not designed as a housing unit.
  - b. Wall brace of stool can be used as point of attachment, as is the gap between the table and the wall which can catch fabrics.
  - c. A gap is present between the bunk bed pan and the wall. The top edge of the bed can hold a knotted noose of a person under the bed.
  - d. Mechanical diffusers in isolation cells for supply and return have square perforated openings in excess of current BSCC standards. The return air grill is located above the combination unit and can be used as a point of attachment for detainees standing unobserved on the combination unit. The supply is located over the bed area but visible from the cell windows. There are gaps between the grilles and the ceiling.
  - e. Ceiling mount smoke detector in isolation cell has plastic dome cover to prevent tampering of the detector. The dome is subject to vandalism and parts may be used for self or staff harm.
  - f. The ceiling mount speaker cover is made of plastic and is not vandal proof.
  - g. Lighting fixtures are appropriate for the location. There is a night light covered with paper in the cell that will require further site review.
  - h. The staff has a concern with the masonry privacy wall at the combination unit of the isolation cells due to impaired views into the cell.
  - i. Condition of the shower stall used by inmates kept under Isolation will require further site review.



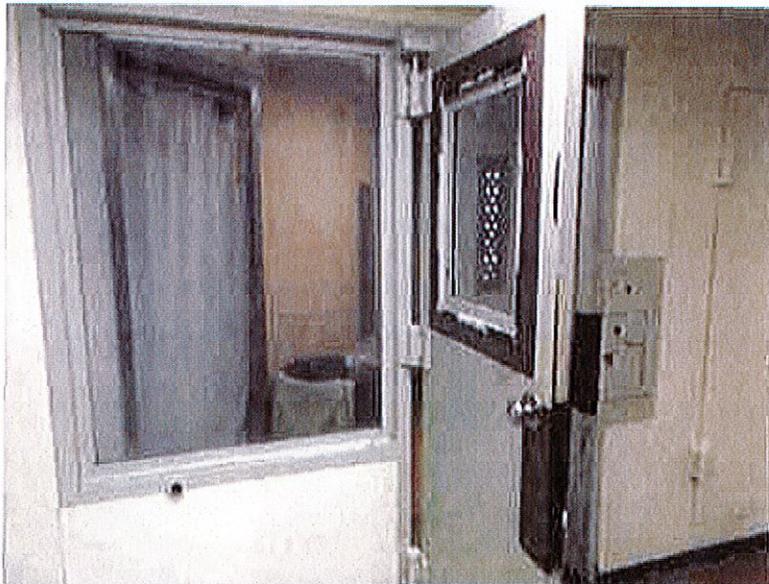
3. Recommendations:
  - a. In isolation cells, remove the wall brace from stool and seal the perimeter of the table to the wall to prevent means of attachment.
  - b. Seal the gap between the bed and the wall with security sealant or use in combination with steel angles welded to the bed pan edge if the gap is too large for sealant alone.
  - c. In all cells, provide security diffuser with perforated security diffuser of hole openings not greater than 3/16" per BSCC standards, in place of all supply and return air grilles in cells. After installation of new diffusers, perform mechanical air balance in pod for proper air flow within cells and dayrooms. Priority should be given to the return air grill in the cells. Gaps between the grill and ceiling should be sealed with a flexible security sealant that permits removal of the grill for maintenance reasons.
  - d. Relocate smoke detectors to the return air duct to avoid tampering with device, or cover device with perforated metal cage.
  - e. Provide detention grade perforated metal grill for the ceiling mounted speaker.
  - f. In isolation cells, the privacy wall at the combination plumbing fixture mounted on the front chases may be removed to improve views into the cell. Two cells with the combination fixture mounted at the back of the cell should retain the privacy wall to meet BSCC requirements.



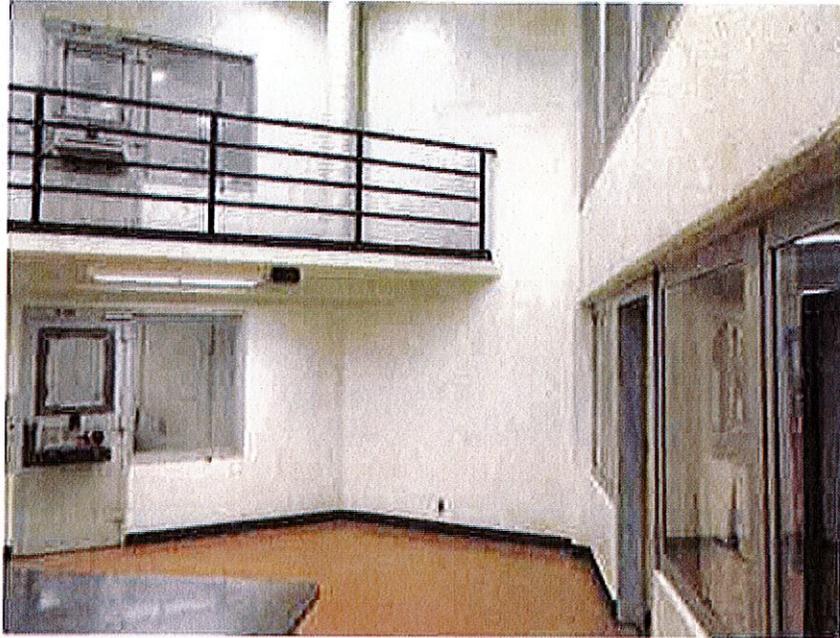
**Appendix A – Photos**



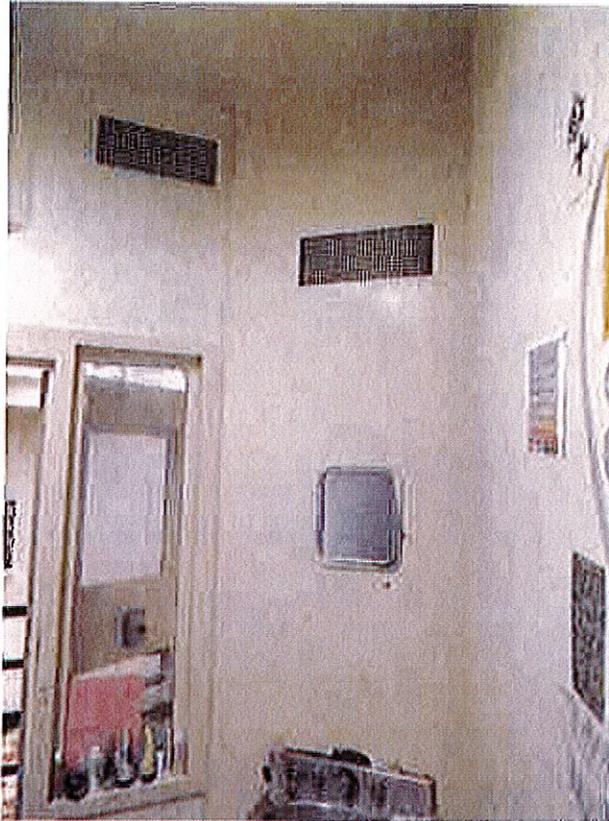
**Men's Housing A and B Pod – Mechanical grills in cells have excessive openings. Return air grill is on the right in photograph.**



**Men's Housing A and B Pod – Shower curtain provides opportunities for strangulation.**



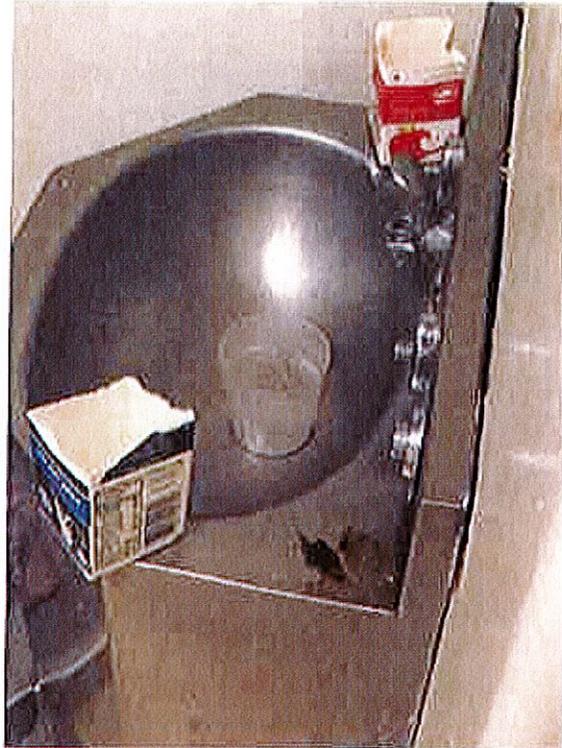
Men's Housing A and B Pod – Railing on upper level can be scaled or tied off.



**Women's Housing R and S Pod – Upper level cell mechanical grills in cells have excessive openings.**



**Women's Housing V Pod – Holding cells cannot be observed from a central location.**



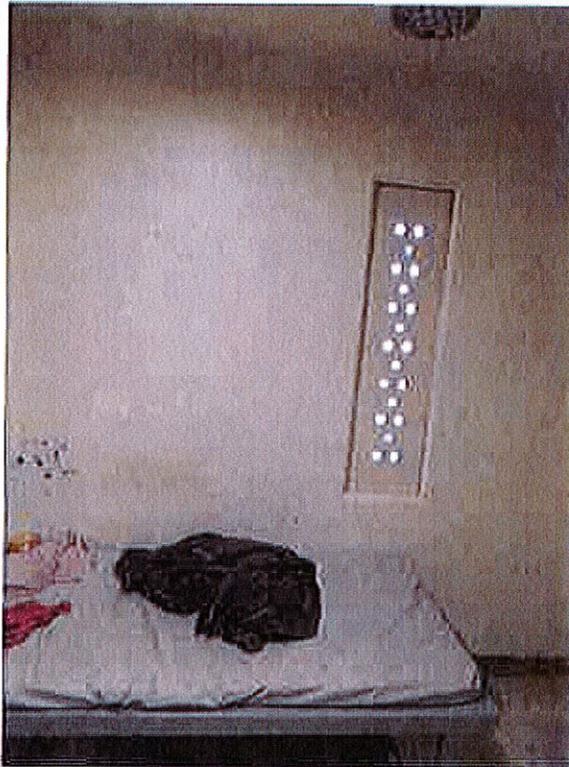
Women's Housing R and S Pod – Gap present between Combination Plumbing Fixture and wall.



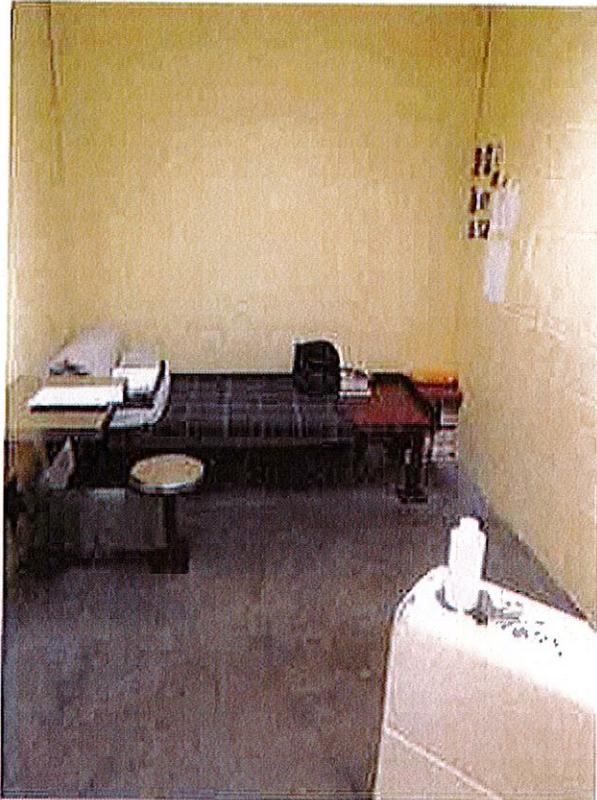
Women's Housing R and S Pod - Railing on upper level can be scaled or tied off.



Women's Housing V Pod - View of underside of cell bed in Holding cell showing gap between bed and wall, and inmate graffiti.



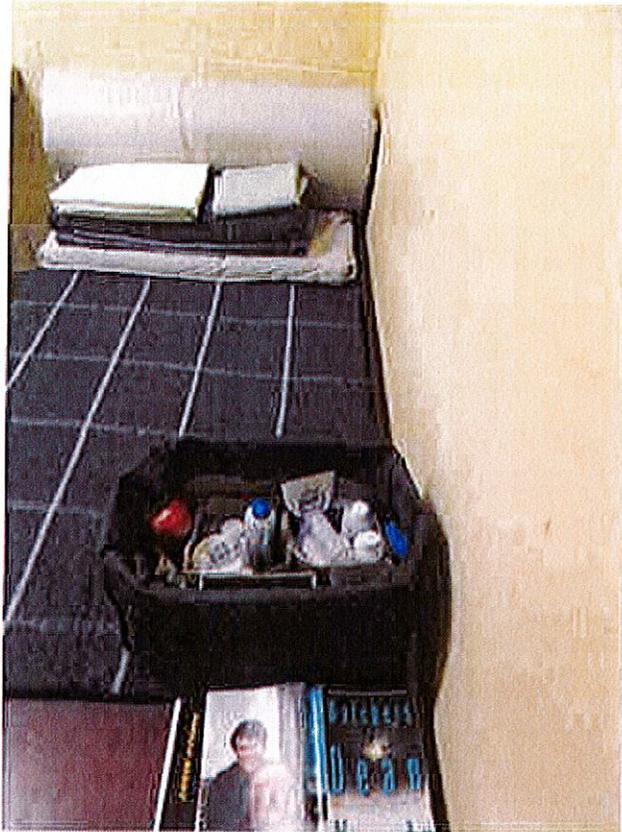
Women's Housing V Pod – View inside Holding cell with window cover and paging speaker visible.



**Intake Center Isolation - Cells have furniture that provides means of attachment.**



**Intake Center Isolation - Cell ceilings have fixtures that have means of attachment.**

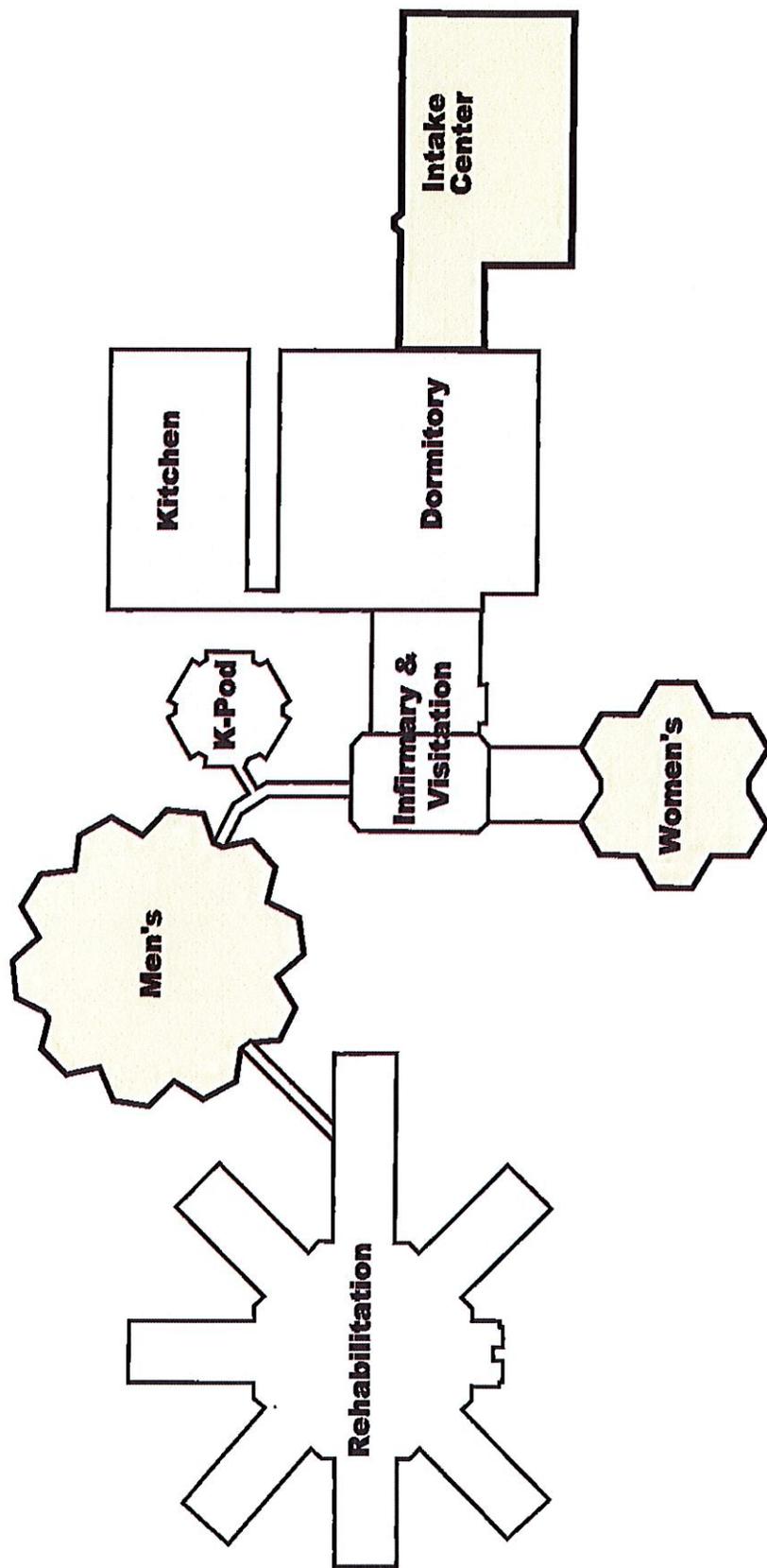


Intake Center Isolation – Gap present between bed and wall in Isolation Cell.



**Appendix B – Drawings**

See following sheets for Facility Physical Safety Assessment Building Plans.



← NORTH

**Sheet  
A1**

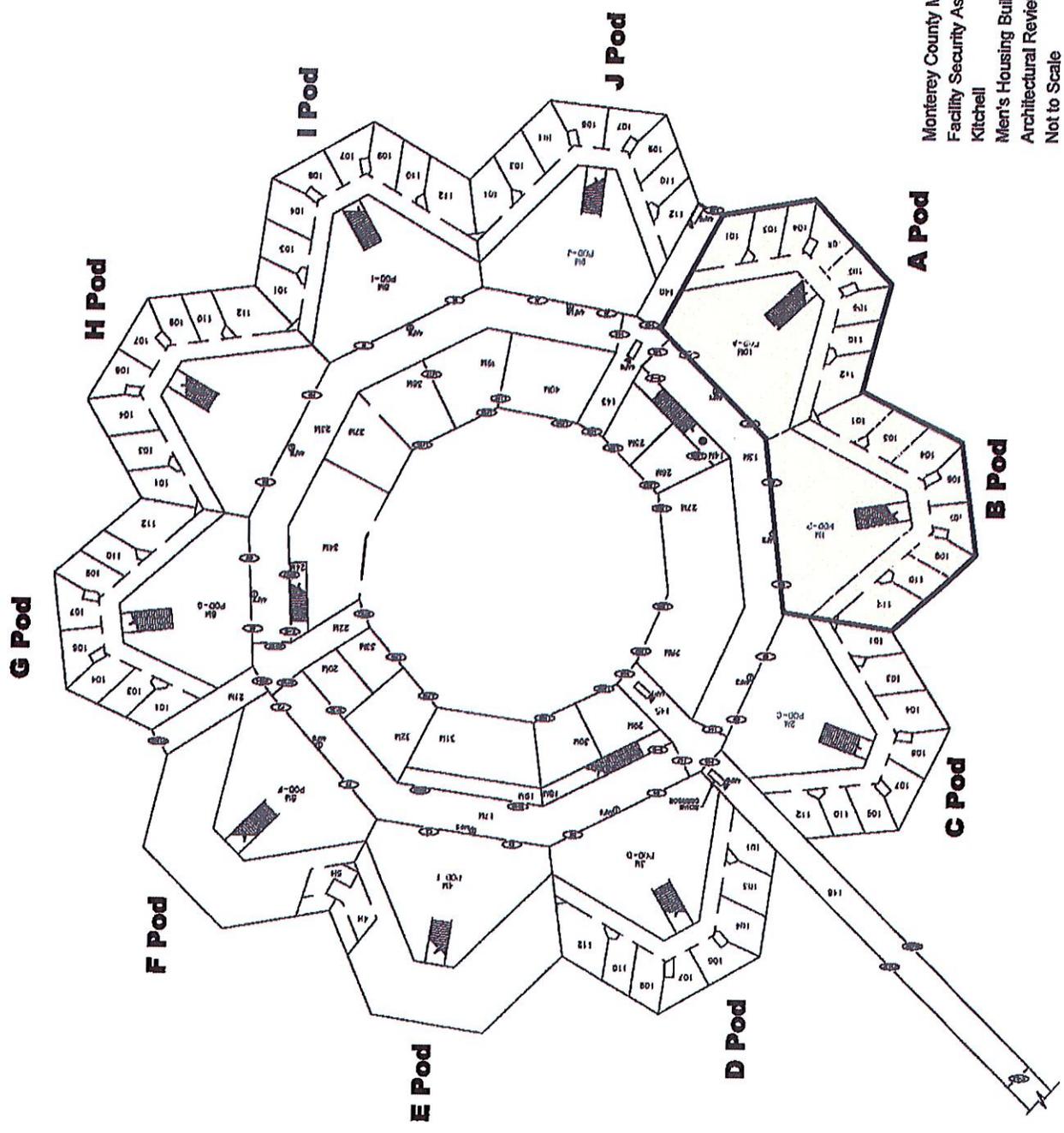
Monterey County Main Jail on Natividad  
Facility Security Assessment  
Kitchell  
Overall Jail Facility Plan  
Architectural Review  
Not to Scale

NORTH  
←

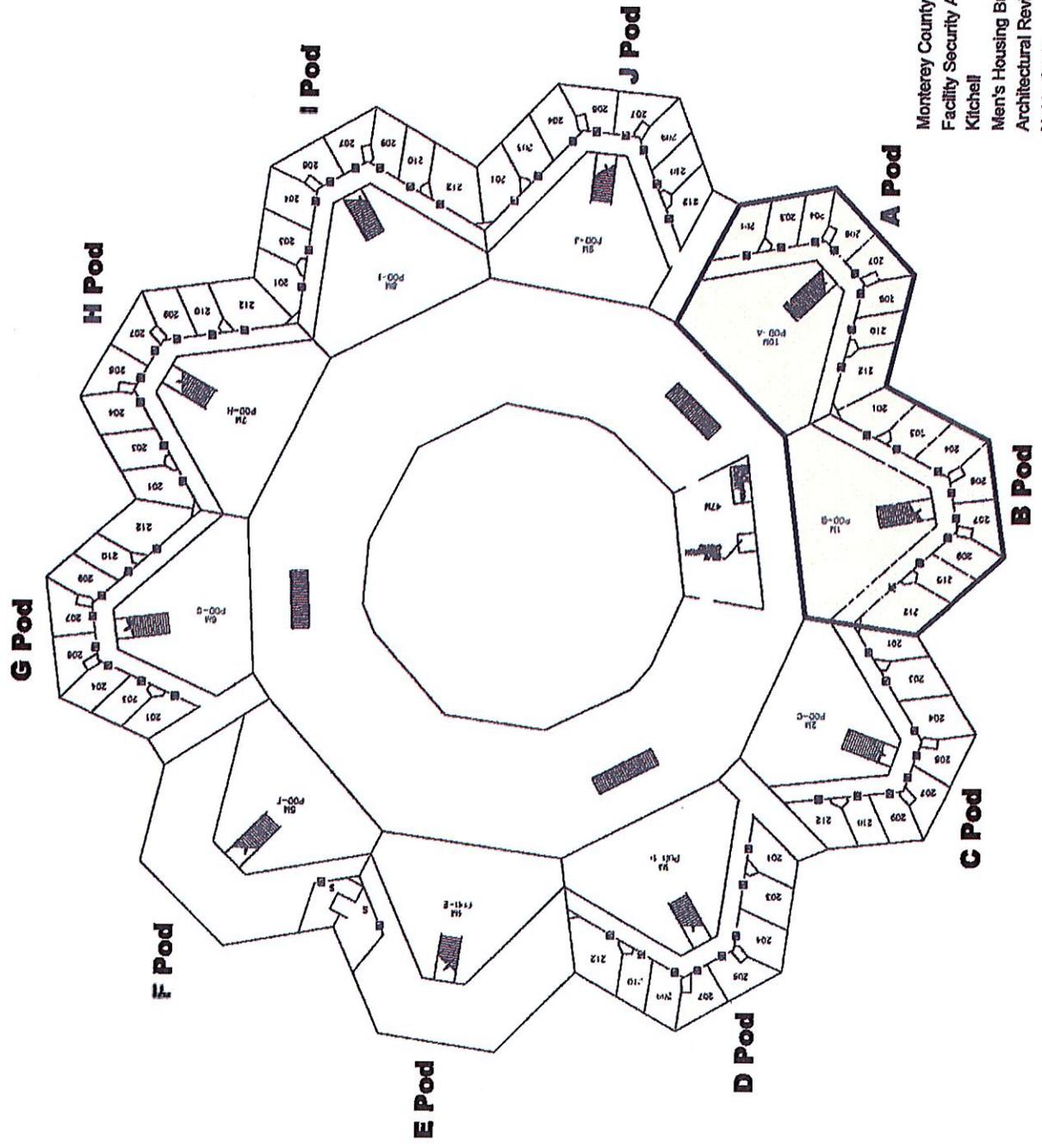
Sheet  
**A2**

Page 17 of 21

Monterey County Main Jail on Natividad  
Facility Security Assessment  
Kitchell  
Men's Housing Building Lower Floor Plan  
Architectural Review  
Not to Scale



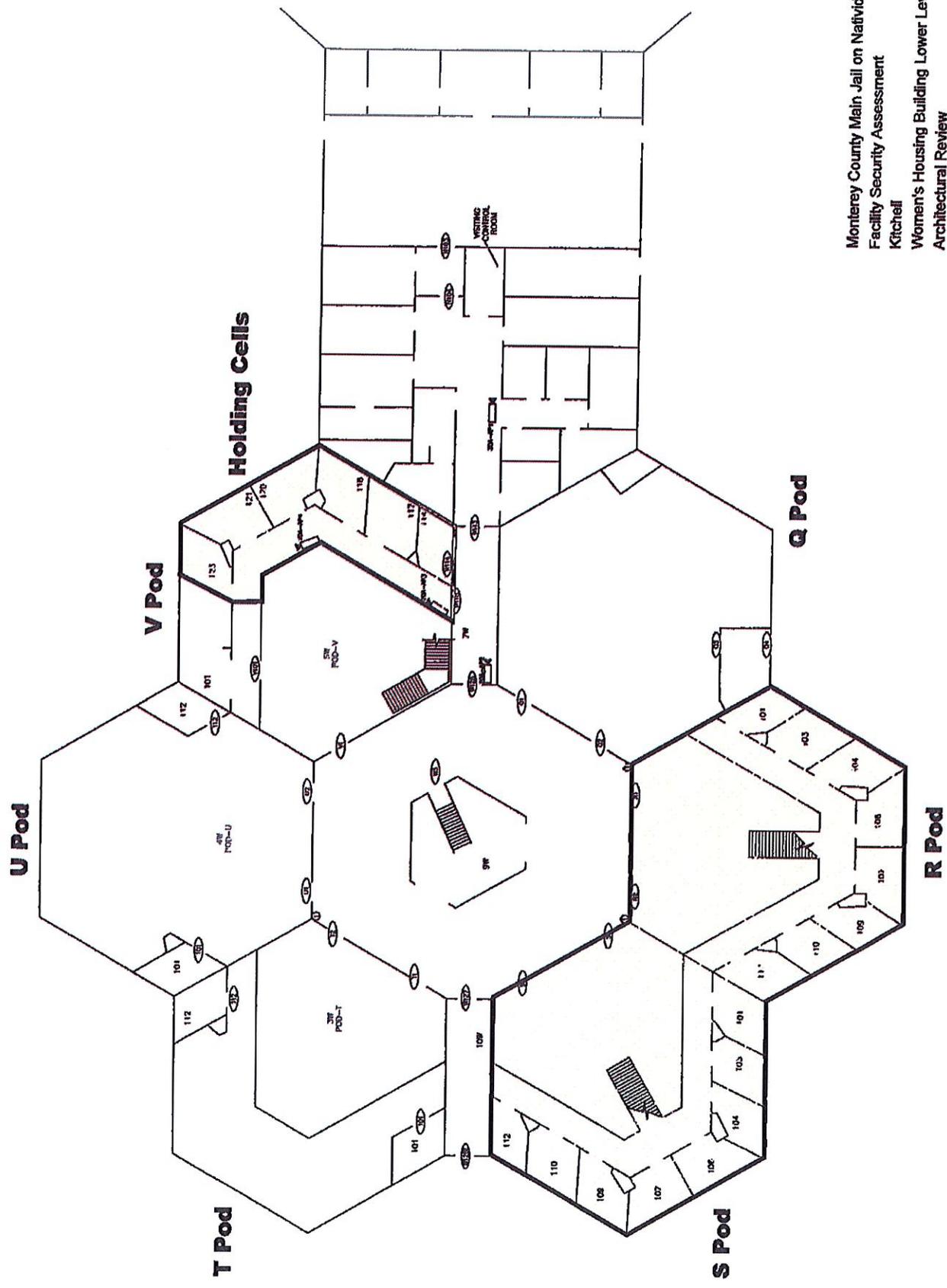
Monterey County Main Jail on Natividad  
Facility Security Assessment  
Kitchell  
Men's Housing Building Upper Floor Plan  
Architectural Review  
Not to Scale

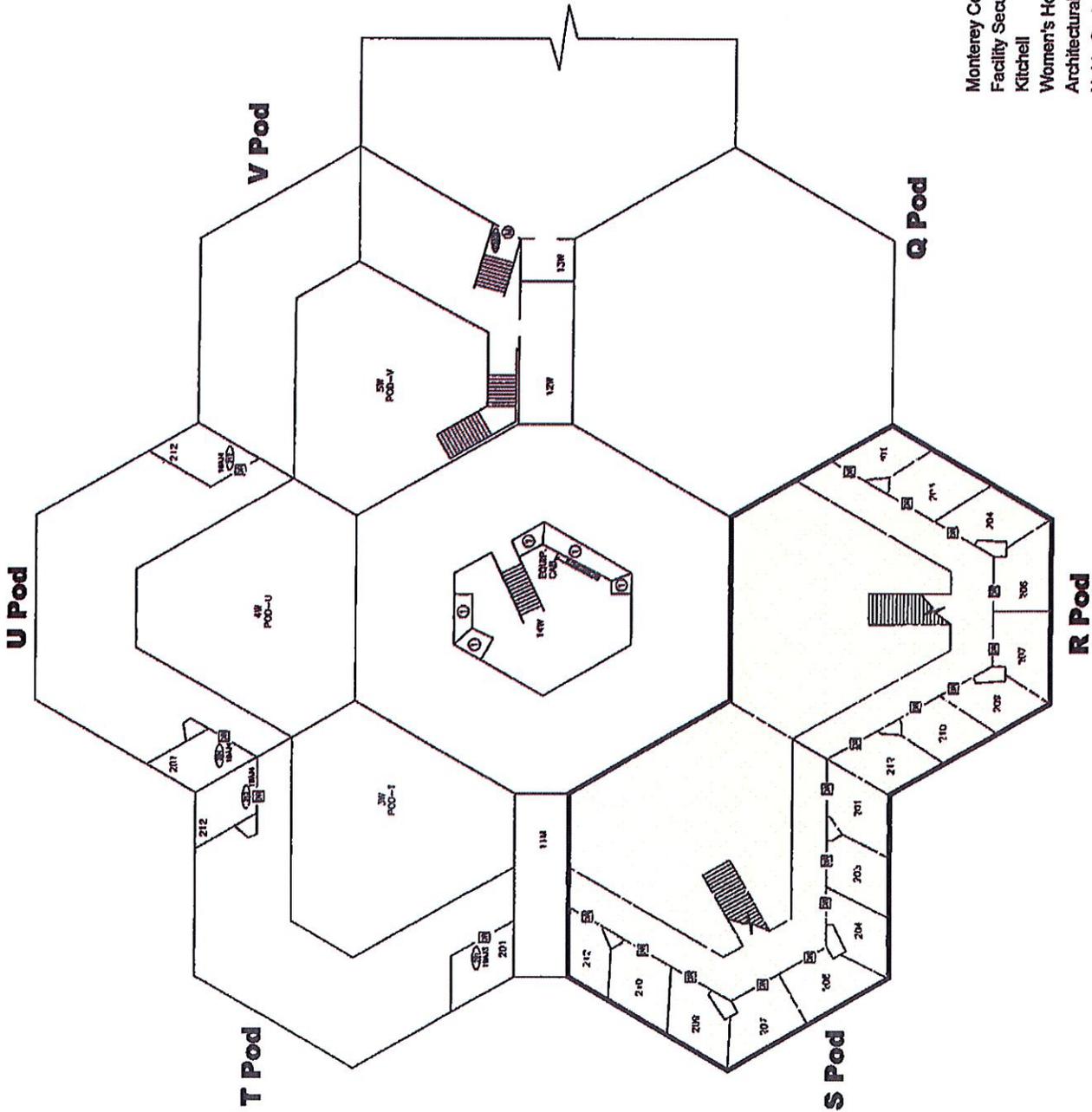


NORTH

# Sheet A4

Monterey County Main Jail on Nativity  
Facility Security Assessment  
Kitchell  
Women's Housing Building Lower Level  
Architectural Review  
Not to Scale





**Sheet  
A5**

Monterey County Main Jail on Natividad  
 Facility Security Assessment  
 Kitchell  
 Women's Housing Building Upper Level  
 Architectural Review  
 Not to Scale



# ***EXHIBIT G***

# Monterey County Sheriff's Office

Custody Services Manual

## *Special Management Inmates*

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### **505.6 MAINTENANCE OF PRIVILEGES**

Administrative segregation and protective custody shall consist of separate and secure housing but shall not involve any deprivation of privileges other than what is necessary to protect the inmates or staff (15 CCR 1053).

Inmates who are classified for housing in administrative segregation or protective custody shall, at a minimum, be allowed access to programs and services including, but not limited to, the following:

- Inmate telephones
- Family visitation
- Educational programming appropriate to the inmate classification
- Access to commissary services
- Library and law library services
- Social services
- Faith-based guidance, counseling and religious services
- Recreation activities and exercise
- Social and professional visits

Nothing in this policy prohibits changing the delivery of programs or services to segregated inmates in order to provide for the safety and security of other inmates and staff.

### **505.7 REVIEW OF STATUS**

The Classification Unit shall review the status of all inmates who are housed in segregation units and designated for administrative segregation or protective custody. This review shall occur every 30 days. The review should include information about these inmates to determine whether their status in administrative segregation and protective custody is still warranted.

If other reasonable housing options exist that will provide for the safety of the inmate, the inmate should be moved out of segregation. In reviewing an alternative housing decision, the safety of the inmate shall receive the utmost consideration.

# Monterey County Sheriff's Office

Custody Services Manual

## Special Management Inmates

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### **505.8 HEALTH EVALUATION REQUIREMENTS**

After notification from staff that an inmate is being placed in segregation, medical staff shall ensure that the following occurs:

- (a) A qualified health care professional shall review the inmate's health record to determine whether existing medical, dental or mental health needs contraindicate the placement or require special accommodations.
- (b) If contraindications or special accommodations are noted, the qualified health care professional shall inform the Classification Unit and coordinate the appropriate plan for the inmate based on the safety needs of the facility and the medical needs of the inmate.

#### **505.8.1 HEALTH CONSIDERATIONS**

Due to the possibility of self-inflicted injury and depression during periods of segregation, health evaluations should include notations of any bruises and other trauma markings and the qualified health care professional's comments regarding the inmate's attitude and outlook.

- (a) A medical assessment should be documented in the inmate's medical file.
- (b) A qualified health care professional shall also conduct weekly rounds for a mental health evaluation.

When an inmate is classified as a special management inmate due to the presence of a serious mental illness and is placed in a segregation setting, the staff shall document this in the inmate's file and notify the qualified health care professional.

Where reasonably practicable, a qualified health care professional should provide screening for suicide risk during the three days following admission to the segregation unit.

### **505.9 SAFETY CHECKS**

A staff member shall conduct a face-to-face safety check of all special management inmates, including those housed in administrative segregation or protective custody, at least every 60 minutes on an irregular schedule. Inmates placed in a Safety Cell who are violent, have mental health problems or who demonstrate behavior that is easily identified as out of the ordinary or bizarre in nature or who are at risk of suicide should be personally observed by the staff every 15 minutes on an irregular schedule. Subsequent supervision routines should be in accordance with orders provided by the qualified health care professional.

# Monterey County Sheriff's Office

Custody Services Manual

## Special Management Inmates

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### **505.10 LOG PROCEDURES**

Handwritten logs should be completed in ink. Once an entry is made it should not be modified. If corrections or changes are needed they should be done by way of a supplemental entry. Electronically captured logs will be maintained in a way that prevents entries from being deleted or modified once they are entered. Corrections or changes must be done by way of supplemental entries. At a minimum the log will contain the following:

- Inmate name
- Inmate identification number
- Housing location

Log entries should be legible, entered promptly and provide sufficient detail to adequately reflect the events of the day for future reference.

The date and time of the observation or incident and the name and identification number of the staff member making the log entry shall be included on each entry.

Supervisors should review the logs frequently during the shift and enter comments as appropriate. At minimum, supervisors should enter the date and time of each review and initial the log.

All safety checks will be documented in detail and should include the exact time of the safety check and the initials of the employee conducting the check. All documentation will be gathered and provided to the Facility Commander at midnight each day.

#### **505.10.1 LOG INSPECTION AND ARCHIVAL OF LOGS**

The Shift Commander shall review and evaluate the logs and pass any significant incidents via the chain of command to the Facility Commander or Chief Deputy for review.

The logs will be retained by the Office in accordance with established records retention schedules, but in no case less than one year.

# ***EXHIBIT H***

## **Inmates with Disabilities**

### **602.1 PURPOSE AND SCOPE**

This policy provides guidelines for addressing the needs and rights of inmates detained by this office, in accordance with the Americans with Disabilities Act (ADA).

#### **602.1.1 DEFINITIONS**

Definitions related to this policy include:

**Disability** - The ADA defines a disability as a physical or mental impairment that limits one or more major life activities. These include, but are not limited to, any disability that would substantially limit the mobility of an individual or an impairment of vision and/or hearing, speaking or performing manual tasks that require some level of dexterity.

### **602.2 POLICY**

This office will take all reasonable steps to accommodate inmates with disabilities while they are in custody and will comply with the ADA and any related state laws. Discrimination on the basis of disability is prohibited.

#### **602.2.1 DEPUTIES RESPONSIBILITIES**

Deputies should work with health care providers to aid in making accommodations for those with physical disabilities. Deputies who manage the classification process should be aware of inmates with disabilities before making housing decisions, as often persons with mobility issues will require a lower bunk and accessible toilet and shower facilities. In addition, some inmates may require ongoing assistance to manage their activities of daily living. Trained staff must be available to aid these inmates. One inmate shall not be placed in the role of assisting or managing another inmate's activities of daily living.

When necessary or required, the supervisor or classification deputy should consult with the jail health nurse or the responsible physician regarding housing location.

Inmates with prosthetics or other adaptive devices shall be allowed to keep the devices provided the safe and secure operation of the facility is not compromised. The supervisor or jail health nurse will verify the medical necessity of the device with the inmate's medical provider.

The inmate may be administratively segregated from the general population when:

He/she cannot reasonably function without the device.

No other reasonable alternatives are available.

The device poses a threat to the safety of staff, inmates, visitors or the physical plant.

#### **602.2.2 CHIEF DEPUTY RESPONSIBILITIES**

The Chief Deputy or their designee, in coordination with the health care authority, will establish procedures to assess and reasonably accommodate the disabilities of inmates. The procedures will include, but not be limited to:

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## Custody Services Manual

### *Inmates with Disabilities*

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- Establishing housing areas that are equipped to meet the physical needs of inmates, thereby providing for their safety, security, personal care and hygiene in a reasonably private environment, while affording integration with other inmates.
- Establishing classification criteria to make housing assignments for inmates with disabilities.
- Establishing transportation procedures for transporting inmates with limited mobility.
- Establishing guidelines for the provision of services, programs and activities to the disabled.

#### **602.3 CHIEF DEPUTY RESPONSIBILITIES**

The Chief Deputy, or their designee, will establish written procedures to assess and reasonably accommodate disabilities of inmates. The procedures will include, but not be limited to:

- Establishing housing areas that are equipped to meet the physical needs of disabled inmates, including areas that allow for personal care and hygiene in a reasonably private setting and for reasonable interaction with inmates.
- Establishing classification criteria to make housing assignments to inmates with disabilities.
- Assigning individuals with adequate training to assist disabled inmates with basic life functions as needed. Inmates should not provide this assistance except as allowed in the Inmate Assistants Policy.
- Establishing transportation procedures for moving inmates with limited mobility.
- Establishing guidelines for services, programs and activities for the disabled and ensuring that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the facility's efforts to prevent, detect and respond to sexual abuse and sexual harassment (28 CFR 115.16)..
- Establishing procedures for the request and review of accommodations.
- Establishing guidelines for the accommodation of individuals who are deaf or hard of hearing, have common disabilities such as sight and mobility impairments, developmental disabilities and common medical issues, such as epilepsy.
- Identification and evaluation of all developmentally disabled inmates, including contacting the regional center for the developmentally disabled to assist with diagnosis and/or treatment within 24 hours of identification, excluding holidays and weekends (15 CCR 1057).

The Chief Deputy is responsible for ensuring the Monterey County Sheriff's Office jail is designed or adapted to reasonably accommodate inmates with disabilities. At a minimum this includes:

- Access to telephones equipped with a telecommunications device for the deaf (TDD) for inmates who are deaf, hard of hearing or speech-impaired.
- If orientation videos are used to explain facility rules to newly admitted inmates, subtitles may be displayed on the video presentation to assist inmates who have impaired hearing.

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## Inmates with Disabilities

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- Some cells and dormitories should be equipped with wheelchair accessible toilet and shower facilities. Inmates with physical disabilities should be allowed to perform personal care in a reasonably private environment.
- Tables designed for eating should be accessible to those in wheelchairs.

### **602.4 DEPUTIES RESPONSIBILITIES**

Deputies should work with qualified health care professionals to aid in making accommodations for those with physical disabilities.

Deputies who work in the classification process should be aware of inmates with disabilities before making housing decisions. For example, persons with mobility issues may require a lower bunk and accessible toilet and shower facilities. When necessary or required, a supervisor of classification deputy should consult with the qualified health care professional or the Responsible Physician regarding housing location.

Deputies should assist an inmate with a disability by accommodating the inmate consistent with any guidelines related to the inmate's disability. If there are no current guidelines in place, deputies receiving an inmate request for accommodation of a disability should direct the inmate to provide the request in writing or assist the inmate in doing so, as needed. The written request should be brought to the on-duty supervisor as soon as practicable but during the deputy's current shift. Generally, requests should be accommodated upon request if the accommodation would not raise a safety concern or affect the orderly function of the jail. The formal written request should still be submitted to the on-duty supervisor.

Requests that are minor and do not reasonably appear related to a significant or ongoing need may be addressed informally, such as providing extra tissue to an inmate with a cold. Such requests need not be made in writing.

### **602.5 ACCOMMODATION REQUESTS**

Inmates shall be asked to reveal any accommodation requests during the intake medical process. Any such request will be addressed according to the medical process.

Requests for accommodation after initial entry into the facility should be made through the standard facility request process and should be reviewed by a supervisor within 24 hours of the request being made. The reviewing supervisor should evaluate the request and, if approved, notify the Chief Deputy and any other staff as necessary to meet the accommodation. The supervisor should make a record of the accommodation in the inmate's file.

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### *Inmates with Disabilities*

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A supervisor who does not grant the accommodation, either in part or in full, should forward the request to the Chief Deputy within 48 hours of the request being made. The Chief Deputy, with the assistance of legal counsel, should make a determination regarding the request within five days of the request being made.

#### **602.6 TRAINING**

The Training Sergeant should provide periodic training on such topics as:

- (a) Policies, procedures, forms and available resources for disabled inmates.
- (b) Working effectively with interpreters, telephone interpretive services and related equipment.
- (c) Training for management staff, even if they may not interact regularly with disabled individuals, so that they remain fully aware of and understand this policy and can reinforce its importance and ensure its implementation.

## DEAF AND HARD OF HEARING SERVICE CENTER, INC.

### AGREEMENT FOR PROVISION OF INTERPRETING/ TRANSLITERATING SERVICES

This agreement is made and entered into, by and between Deaf and Hard of Hearing Service Center (hereinafter referred to as DHHSC), a non-profit agency and Monterey County Sheriff's Department.

#### PURPOSE:

DHHSC is a non-profit agency that provides comprehensive services to the deaf and hard of hearing community. As such, DHHSC is in a position to provide effective services that address the unique needs of that community.

#### GENERAL PROVISIONS:

1. The term "interpreter" as used in this agreement refers to a person trained, skilled, qualified and/or certified in facilitating the transfer of information and messages between deaf and hard of hearing individuals and others. The term "client" refers to the person(s) or agency requesting the service. Additionally, the term "consumer" refers to the deaf or hard of hearing individual. Therefore, it is possible to be both the client and the consumer of services.
2. Some interpreting requests will be filled by DHHSC's staff interpreter(s), and others by freelance interpreters functioning as independent subcontractors and not as employees or agents of DHHSC.
3. This agreement is for the provision of interpreting/transliterating services only and does not indicate any assurance by DHHSC that the internal policies and/or guidelines of the client regarding the provision of services comply with applicable laws.
4. This agreement will not prevent DHHSC from advocating for and providing additional services to the deaf and hard of hearing or other clients.

#### DHHSC AGREES TO:

1. Provide Sign Language interpreting services based on the availability of qualified and/or certified staff or freelance subcontractors who best suit the language mode of the consumer and the subject matter of the client.
2. Confirm with the contact person at Monterey County Sheriff's Department when an interpreter has been assigned or is not available.
3. Maintain confidentiality of all information interpreted to the fullest extent permitted by law.
4. Upon receiving notification of cancellation of an appointment for which an interpreter has been confirmed, make a good faith effort to cancel the assignment without cost to Monterey County Sheriff's Department
5. DHHSC realizes that personnel under this agreement are subject to and must comply with the rules, regulations, and policies of Monterey County Sheriff's Department
6. DHHSC agrees to take out and keep in force, at DHHSC's expense, public liability insurance with a reputable company.

#### Monterey County Sheriff's Department AGREES:

1. To contact DHHSC at least two weeks in advance (whenever possible) when requesting service. This request should include:
  - Agency name/name of individual requesting service and phone number
  - Name and phone number of contact person
  - Date and time of assignment
  - Address and location of assignment
  - Consumer's name
  - Type of assignment (medical appointment, surgery, training, consultation, job interview, etc.)
  - Additional billing information needed to process the invoice, which may require inclusion of the following: case number, patient ID number, cost center number, date of birth, social security number, purchase order number, authorization number, or agreement number
2. To provide a twenty-four (24) hour cancellation/change of appointment notice to avoid incurring charges.

Initial

3. To pay DHHSC in full for interpreting services and related charges upon receipt of invoice for services. Bills not paid within sixty days of receipt of invoice will incur a five percent surcharge.

4. That its billing address is (check preference):

the same as the address in the signature block at the end of this agreement

or:

Company Name: \_\_\_\_\_

Attn: (optional) \_\_\_\_\_

Street Address: \_\_\_\_\_

City, State, Zip Code: \_\_\_\_\_

or:

Email: \_\_\_\_\_

or:

Fax Number & Attn of: \_\_\_\_\_

**DHHSC AND Monterey County Sheriff's Department AGREE AS FOLLOWS:**

- DHHSC will provide interpreting/transliterating services to Monterey County Sheriff's Department at the rate of \$80.00 per hour during the day (8:00 AM to 5:00 PM) or \$90.00 per hour after regular business hours (5:00 PM to 8:00 AM). There is a two-hour minimum for these services. After the first two hours, time is billed in half hour increments. Mileage is billed at a rate of \$0.50 per mile round trip. These rates are valid for services rendered in the following counties: San Benito and Monterey.
- DHHSC will provide interpreting/transliterating services to Monterey County Sheriff's Department based on the availability of an interpreter at the rate of \$90 per hour on Saturdays, Sundays, and holidays.
- DHHSC will provide interpreting/transliterating services to Monterey County Sheriff's Department on an emergency basis (less than 24 hour notice) at double the above rates.
- "No-shows" (interpreter attends but consumer does not) will be billed as completed assignments.
- Monterey County Sheriff's Department will provide DHHSC with the name and phone number of an on site liaison/contact person.
- Indemnification: Monterey County Sheriff's Department agrees to indemnify, defend, and hold harmless DHHSC from any claims, suits, actions, losses, costs, and expenses, liabilities, or damages that DHHSC may incur arising out of or relating to any breach of this agreement by Monterey County Sheriff's Department or the failure of Monterey County Sheriff's Department to properly perform its duties hereunder. DHHSC agrees to indemnify, defend, and hold harmless Monterey County Sheriff's Department from any claims, suits, actions, losses, costs, and expenses, liabilities or damages that Monterey County Sheriff's Department may incur arising out of or relating to any breach of this agreement by DHHSC or DHHSC's failure to properly perform its duties hereunder.
- This agreement may be terminated upon written notice by either party.

Entered into by and between Deaf and hard of Hearing Service Center and Monterey County Sheriff's Department this \_\_\_\_\_ day of \_\_\_\_\_, 2014 and continues in effect for one year. Further, this agreement may be modified or amended at any time by the mutual written consent of both parties.

Deaf and Hard of Hearing Service Center  
5340 N. Fresno Street  
Fresno, CA 93710  
(559) 225-3382 (V) (559) 334-5001 TTY  
(559) 221-8224 Fax interpreting@DHHSC.org

*Radhika Joshi*  
Interpreting Services

10/07/2014  
Date

Company Name: Monterey County Sheriff's Department  
Attn: (optional) *Aye Wee King*  
Address: *1414 N. Trinidad Rd.*  
City, ST Zip: *Salinas, CA 93906*  
Phone: *(831) 755-5111*

*Scott Miller Sheriff*  
Monterey County Sheriff's Department Administrator

10-07-14  
Date