ADULT TITLES 15 AND 24 REGULATIONS REVISION

EXECUTIVE STEERING COMMITTEE RECOMMENDATIONS TO THE BOARD OF STATE AND COMMUNITY CORRECTIONS

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*Bold and italics indicate proposed revision; underline indicates proposed new regulations.*
1. Regulation and Recommended Revision

§ 1004. Severability.

If any article, section, subsection, sentence, clause or phrase of these regulations is for any reason held to be unconstitutional, contrary to statute, exceeding the authority of the Board, or otherwise inoperative, such decision shall not affect the validity of the remaining portion of these regulations.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem?  (What is the rationale?)

No amendments were made by the Administration Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1005. Other Standards and Requirements.

Nothing contained in the standards and requirements hereby fixed shall be construed to prohibit a city, county, or city and county agency operating a local detention facility from adopting standards and requirements governing its own employees and facilities; provided, such standards and requirements meet or exceed and do not conflict with these standards and requirements. Nor shall these regulations be construed as authority to violate any state fire safety standard, building standard, or health and safety code.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Administration Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1006. Definitions.

The following definitions shall apply:

“Administering Medication,” as it relates to managing legally obtained drugs, means the act by which a single dose of medication is given to a patient. The single dose of medication may be taken either from stock (undispensed), or dispensed supplies.

“Administrative segregation” means the physical separation of different types of inmates from each other as specified in Penal Code Sections 4001 and 4002, and Section 1053 of these regulations. Administrative segregation is accomplished to provide that level of control and security necessary for good management and the protection of staff and inmates.

“Alternate means of compliance” means a process for meeting or exceeding standards in an innovative way, after a pilot project evaluation, approved by the Board pursuant to an application.

“Average daily population” means the number of inmates housed in a facility in a day. Average daily population (ADP) is the average number of inmates housed daily population divided by the number of days in the period of measurement during the last fiscal year.

“Board” means the Board of State and Community Corrections, whose board acts by and through its executive director, deputy directors, and field representatives.

“Clinical evaluation” means an assessment of a person’s physical and/or mental health condition conducted by licensed health personnel operating within recognized scope of practice specific to their profession and authorized by a supervising physician or psychiatrist.

“Concept drawings” means, with respect to a design-build project, any drawings or architectural renderings that may be prepared, in addition to performance criteria, in such detail as the agency determines necessary to sufficiently describe the agency’s needs.

“Contact” means any physical or sustained sight or sound contact between juveniles in detention and incarcerated adults. Sight contact is clear visual contact between adult inmates and juveniles within close proximity to each other. Sound contact is direct oral communication between adult inmates and juvenile offenders.

"Contact visit" means an on-site visit without barriers.

“Court Holding facility” means a local detention facility constructed within a court building after January 1, 1978, used for the confinement of persons solely for the purpose of a court appearance for a period not to exceed 12 hours.

“Custodial personnel” means those officers with the rank of deputy, correctional officer, patrol persons, or other equivalent sworn or civilian rank whose duties include the supervision of inmates.
“Delivering Medication,” as it relates to managing legally obtained drugs, means the act of providing one or more doses of a prescribed and dispensed medication to a patient.

“Design-bid-build” means a construction procurement process independent of the design process and in which the construction of a project is procured based on completed construction documents.

“Design-build” means a construction procurement process in which both the design and construction of a project are procured from a single entity.

“Developmentally disabled” means those persons who have a disability which originates before an individual attains age 18, continues, or can be expected to continue indefinitely, and constitutes a substantial disability for that individual. This term includes mental retardation, cerebral palsy, epilepsy, and autism, as well as disabling conditions found to be closely related to mental retardation or to require treatment similar to that required for mentally retarded individuals.

“Direct visual observation” means direct personal view of the inmate in the context of his/her surroundings without the aid of audio/video equipment. Audio/video monitoring may supplement but not substitute for direct visual observation.

“Disciplinary separation isolation” means that punishment status assigned an inmate as the result of violating facility rules and which consists of confinement in a cell or housing unit separate from regular jail inmates.

“Dispensing,” as it relates to managing legally obtained drugs, means the interpretation of the prescription order, the preparation, repackaging, and labeling of the drug based upon a prescription from a physician, dentist, or other prescriber authorized by law.

“Disposal,” as it relates to managing legally obtained drugs, means the destruction of medication or its return to the manufacturer or supplier.

“Emergency” means any significant disruption of normal facility procedure, policies, or activities caused by a riot, fire, earthquake, attack, strike, or other emergent condition.

“Emergency medical situations” means those situations where immediate services are required for the alleviation of severe pain, or immediate diagnosis and treatment of unforeseeable medical conditions are required, if such conditions would lead to serious disability or death if not immediately diagnosed and treated.

“Exercise” means physical exertion of large muscle groups.

“Facility/system administrator” means the sheriff, chief of police, chief probation officer, or other official charged by law with the administration of a local detention facility/system.
“Facility manager” means the jail commander, camp superintendent, or other comparable employee who has been delegated the responsibility for operating a local detention facility by a facility administrator.

“Facility watch commander” means the individual designated by the facility manager to make operational decisions during his/her work hours, tour of duty.

“Health authority” means that individual or agency that is designated with responsibility for health care policy pursuant to a written agreement, contract or job description. The health authority may be a physician, an individual or a health agency. In those instances where medical and mental health services are provided by separate entities, decisions regarding mental health services shall be made in cooperation with the mental health director. When this authority is other than a physician, final clinical decisions rest with a single designated responsible physician.

“Health care” means medical, mental health and dental services.

"In-person visit" means an on-site visit that may include barriers.

“Jail,” as used in Article 8, means a Type II or III facility as defined in the “Minimum Standards for Local Detention Facilities.”

“Labeling,” as it relates to managing legally obtained drugs, means the act of preparing and affixing an appropriate label to a medication container.

“Law enforcement facility” means a building that contains a Type I Jail, Temporary Holding Facility, or Lockup. It does not include a Type II or III jail, which has the purpose of detaining adults, charged with criminal law violations while awaiting trial or sentenced adult criminal offenders.

“Legend drugs” are any drugs defined as “dangerous drugs” under Chapter 9, Division 2, Section 4211 of the California Business and Professions Code. These drugs bear the legend, “Caution Federal Law Prohibits Dispensing Without a Prescription.” The Food and Drug Administration (FDA) has determined because of toxicity or other potentially harmful effects that these drugs are not safe for use except under the supervision of a health care practitioner licensed by law to prescribe legend drugs.

“Living areas” means those areas of a facility utilized for the day-to-day housing and activities of inmates. These areas do not include special use cells such as sobering, safety, and holding or staging cells normally located in receiving areas.

“Local detention facility” means any city, county, city and county, or regional jail, camp, court holding facility, or other correctional facility, whether publicly or privately operated, used for confinement of adults or of both adults and minors, but does not include that portion of a facility for confinement of both adults and minors which is devoted only to the confinement of minors.
“Local detention system” means all of the local detention facilities that are under the jurisdiction of a city, county or combination thereof whether publicly or privately operated. Nothing in the standards are to be construed as creating enabling language to broaden or restrict privatization of local detention facilities beyond that which is contained in statute.

“Local Health Officer” means that licensed physician who is appointed pursuant to Health and Safety Code Section 101000 to carry out duly authorized orders and statutes related to public health within their jurisdiction.

“Lockup” means a locked room or secure enclosure under the control of a peace officer or custodial officer that is primarily used for the temporary confinement of adults who have recently been arrested; sentenced prisoners who are inmate workers may reside in the facility to carry out appropriate work.

“May” is permissive; “shall” is mandatory.

"Medical detoxification" means a process that systematically and safely withdraws people from addicting drugs, usually under the care of a physician. Drinking alcohol or using prescribed and/or illicit drugs can cause physical and/or psychological dependence over time and stopping them can result in withdrawal symptoms in people with this dependence. The detoxification process is designed to treat the immediate bodily effects of stopping drug use that may be life-threatening.

“Mental Health Director,” means that individual who is designated by contract, written agreement or job description, to have administrative responsibility for the facility or system mental health program.

“Non-secure custody” means that a minor’s freedom of movement in a law enforcement facility is controlled by the staff of the facility; and

1. the minor is under constant direct visual observation by the staff;
2. the minor is not locked in a room or enclosure; and,
3. the minor is not physically secured to a cuffing rail or other stationary object.

“Non-sentenced inmate,” means an inmate with any pending local charges or one who is being held solely for charges pending in another jurisdiction.

“Over-the-counter (OTC) Drugs,” as it relates to managing legally obtained drugs, are medications which do not require a prescription (non-legend).

“People with disabilities” includes, but is not limited to, persons with a physical or mental impairment that substantially limits one or more of their major life activities or those persons with a record of such impairment or perceived impairment that does not include substance use disorders resulting from current illegal use of a controlled substance.

“Performance criteria” means, with respect to a design-build project, the information that fully describes the scope of the proposed project and includes, but is not limited to, the size, type, and
design character of the buildings and site; the required form, fit, function, operational requirements and quality of design, materials, equipment and workmanship; and any other information deemed necessary to sufficiently describe the agency’s needs; including documents prepared pursuant to paragraph (1) of subdivision (d) of Section 20133 of the Public Contract Code.

“Pilot Project” means an initial short-term method to test or apply an innovation or concept related to the operation, management or design of a local detention facility pursuant to application to, and approval by, the Board.

“Procurement,” as it relates to managing legally obtained drugs, means the system for ordering and obtaining medications for facility stock.

“Psychotropic medication” means any medication prescribed for the treatment of symptoms of psychoses and other mental and emotional disorders.

“Rated capacity” means the number of inmate occupants for which a facility’s single and double occupancy cells or dormitories, except those dedicated for health care or disciplinary separation housing, were planned and designed in conformity to the standards and requirements contained in Title 15 and in Title 24.

“Regional Center for Developmentally Disabled” means those private agencies throughout the state, funded through the Department of Developmental Services, which assure provision of services to persons with developmental disabilities. Such centers will be referred to as regional centers in these regulations.

“Remodel” means to alter the facility structure by adding, deleting, or moving any of the buildings’ components thereby affecting any of the spaces specified in Title 24, Part 2, Section 1231.

“Repackaging,” as it relates to managing legally obtained drugs, means the transferring of medications from the original manufacturers’ container to another properly labeled container.

“Repair” means to restore to original condition or replace with like-in-kind.

"Responsible health care staff" means an individual who is qualified by education, training and/or licensure/regulation and/or facility privileges (when applicable) who performs a professional service within his or her scope of practice and in accordance with assigned duties. This distinguishes the "responsible health care staff" from the many other "qualified health care staff" that are not specifically assigned to assure that certain care is rendered.

“Safety checks” means direct, visual observation performed at random intervals within timeframes prescribed in these regulations to provide for the health and welfare of inmates.
“Secure custody” means that a minor being held in temporary custody in a law enforcement facility is locked in a room or enclosure and/or is physically secured to a cuffing rail or other stationary object.

“Security glazing” means a glass/polycarbonate composite glazing material designed for use in detention facility doors and windows and intended to withstand measurable, complex loads from deliberate and sustained attacks in a detention environment.

“Sentenced inmate,” means an inmate that is sentenced on all local charges.

“Shall” is mandatory; “may” is permissive.

“Sobering cell” as referenced in Section 1056, refers to an initial “sobering up” place for arrestees who are sufficiently intoxicated from any substance to require a protected environment to prevent injury by falling or victimization by other inmates.

“Storage,” as it relates to legally obtained drugs, means the controlled physical environment used for the safekeeping and accounting of medications.

“Supervision in a law enforcement facility” means that a minor is being directly observed by the responsible individual in the facility to the extent that immediate intervention or other required action is possible.

“Supervisory custodial personnel” means those staff members whose duties include direct supervision of custodial personnel.

"Telehealth" means a collection of means or methods for enhancing health care using telecommunications technologies. Telehealth encompasses a broad variety of technologies to deliver virtual health services.

“Temporary custody” means that the minor is not at liberty to leave the law enforcement facility.

“Temporary Holding facility” means a local detention facility constructed after January 1, 1978, used for the confinement of persons for 24 hours or less pending release, transfer to another facility, or appearance in court.

“Type I facility” means a local detention facility used for the detention of persons for not more than 96 hours excluding holidays after booking. Such a Type I facility may also detain persons on court order either for their own safekeeping or sentenced to a city jail as an inmate worker, and may house inmate workers sentenced to the county jail provided such placement in the facility is made on a voluntary basis on the part of the inmate. As used in this section, an inmate worker is defined as a person assigned to perform designated tasks outside of his/her cell or dormitory, pursuant to the written policy of the facility, for a minimum of four hours each day on a five day scheduled work week.
“Type II facility” means a local detention facility used for the detention of persons pending arraignment, during trial, and upon a sentence of commitment.

“Type III facility” means a local detention facility used only for the detention of convicted and sentenced persons.

“Type IV facility” means a local detention facility or portion thereof designated for the housing of inmates eligible under Penal Code Section 1208 for work/education furlough and/or other programs involving inmate access into the community.

"Video visit" means an on-site or remote visit through the means of audio-visual communication devices.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

The definition for "average daily population" was amended to match the definition as used in the BSCC's Jail Profile Survey.

Definitions for "contact visit", "in-person visit" and "video visit" were added to define those methodologies commonly encountered in inmate visitation.

The definition of “disciplinary isolation” was edited by removing the phrase “separate from regular jail inmates” because the deleted phrase was unnecessary and included an undefined term (“regular jail inmates”). The word “isolation” was replaced with “separation” to more closely define the condition of confinement.

The definition of “facility watch commander” was edited by removing the phrase “tour of duty” and inserting the phrase “work hours.” This change was made to replace outdated language with a more contemporary and readily-understood phrase.

The term "medical detoxification" was added to clarify the difference between the detoxification process that safely withdraws people from addicting drugs, and the use of the sobering cell where inmates are held if they are a threat to their own safety or the safety of others due to their state of intoxication.

The definition of “rated capacity” was edited to replace “disciplinary isolation” with “disciplinary separation” to more accurately describe the condition of confinement.
The term "responsible health care staff" was added to this section to describe a group of individuals qualified to perform a professional service within his or her scope of practice. This definition provides consistency to these regulations. (Sections 1204, 1210, 1055, 1056 and 1058 were also amended using this term.)

The definition of “sobering cell” was edited to remove the phrase “to prevent injury by falling or victimization by other inmates” because the deleted text was not needed.

The term "telehealth" was added to describe a method by which health care professionals may facilitate the health care of inmates remotely using video cameras and was referenced in Sections 1052 and 1209.

4. **What is the operational impact that will result from this revision; how will it change operations?**

No operational impact for any of the changes.

5. a.) **What is the fiscal impact that will result from this revision?**  
   b.) **How can it be justified?**

No fiscal impact for any of the changes.

6. **How will BSCC measure compliance with this revision?**

Refining or adding definitions will not affect the inspection process.

7. **Summary of Workgroup Discussion and Intent**

The Administration Workgroup felt that the definitions for disciplinary isolation, facility watch commander, rated capacity and sobering cell would benefit from the reduction of ambiguity and unnecessary words.

The Classification and Discipline Workgroup determined that defining gender expression/identity would be important as this element is added to classification categories to be considered (Section 1050 Classification Plan).

The Medical/Mental Health Workgroup felt that defining medical detoxification, responsible health care staff and telehealth would add clarity and consistency to these regulations.

The Programs and Services Workgroup agreed that amending average daily population would add clarity to these regulations and other BSCC processes. The group also discussed adding a definition for "partially sentenced" as it related to statistical surveys, but opted not to pursue that at this time.
• In their discussion of Section 1062, the Programs and Services Workgroup felt that it was important to define "contact visit", "in-person visit" and "video visit" to distinguish between the various options facility operators have to provide inmates opportunities for visiting.

8. **ESC Action/Response**

Accept the workgroups’ recommendations, with the exception of one modification. In review of the Classification and Discipline Workgroup’s recommendation to define “gender expression/identity”, the ESC chose not to recommend this definition at this time because local agencies use various definitions of the term “gender expression/identity” during their classification processes. The ESC felt that this definition could cause some confusion by including it in regulation. It is recognized, however, that this is an existing consideration in the classification process. The workgroup had proposed the following:

• “Gender expression/identity” means how one expresses oneself, in terms of dress, mannerisms and/or behaviors that society characterizes as “masculine” or feminine.”
1. Regulation and Recommended Revision

§ 1007. Pilot Projects.

The pilot project is the short-term method used by a local detention facility/system, approved by the Board, to evaluate innovative programs, operations or concepts which meet or exceed the intent of these regulations.

The Board may, upon application of a city, county or city and county, grant pilot project status to a program, operational innovation or new concept related to the operation and management of a local detention facility. An application for a pilot project shall include, at a minimum, the following information:

(a) The regulations which the pilot project will affect.
(b) Review of case law, including any lawsuits brought against the applicant local detention facility, pertinent to the proposal.
(c) The applicant’s history of compliance or non-compliance with standards.
(d) A summary of the “totality of conditions” in the facility or facilities, including but not limited to;
   (1) program activities, exercise and recreation;
   (2) adequacy of supervision;
   (3) types of inmates affected; and,
   (4) inmate classification procedures.
(e) A statement of the goals the pilot project is intended to achieve, the reasons a pilot project is necessary and why the particular approach was selected.
(f) The projected costs of the pilot project and projected cost savings to the city, county, or city and county, if any.
(g) A plan for developing and implementing the pilot project including a time line where appropriate.
(h) A statement of how the overall goal of providing safety to staff and inmates will be achieved.

The Board shall consider applications for pilot projects based on the relevance and appropriateness of the proposed project, the completeness of the information provided in the application, and staff recommendations.

Within 10 working days of receipt of the application, Board staff will notify the applicant, in writing, that the application is complete and accepted for filing, or that the application is being returned as deficient and identifying what specific additional information is needed. This does not preclude the Board members from requesting additional information necessary to make a determination that the pilot project proposed actually meets or exceeds the intent of these regulations at the time of the hearing. When complete, the application will be placed on the agenda for the Board’s consideration at a regularly scheduled meeting. The written notification from the Board to the applicant shall also include the date, time and location of the meeting at which the application will be considered. (The Board meeting schedule for the current calendar year is available through its office in Sacramento.)
When an application for a pilot project is approved by the Board, Board staff shall notify the applicant, in writing within 10 working days of the meeting, of any conditions included in the approval and the time period for the pilot project. Regular progress reports and evaluative data on the success of the pilot project in meeting its goals shall be provided to the Board. If disapproved, the applicant shall be notified in writing, within 10 working days of the meeting, the reasons for said disapproval. This application approval process may take up to 90 days from the date of receipt of a complete application.

Pilot project status granted by the Board shall not exceed twelve months after its approval date. When deemed to be in the best interest of the application, the Board may extend the expiration date for up to an additional twelve months. Once a city, county, or city and county successfully completes the pilot project evaluation period and desires to continue with the program, it may apply for an alternate means of compliance as described in Section 1008 of these regulations.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem?  (What is the rationale?)

No amendments were made by the Administration Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1008. Alternate Means of Compliance.

The alternate means of compliance is the long-term method used by a local detention facility/system, approved by the Board, to encourage responsible innovation and creativity in the operation of California’s local detention facilities. The Board may, upon application of a city, county, or city and county, consider alternate means of compliance with these regulations after the pilot project process has been successfully evaluated (as defined in Section 1007). The city, county, or city and county must present the completed application to the Board no later than 30 days prior to the expiration of its pilot project.

Applications for alternate means of compliance must meet the spirit and intent of improving jail management, shall be equal to or exceed the existing standard(s) and shall include reporting and evaluation components. An application for alternate means of compliance shall include, at a minimum, the following information:

(a) Review of case law, including any lawsuits brought against the applicant local detention facility, pertinent to the proposal.
(b) The applicant’s history of compliance or non-compliance with standards.
(c) A summary of the “totality of conditions” in the facility or facilities, including but not limited to:
   (1) program activities, exercise and recreation;
   (2) adequacy of supervision;
   (3) types of inmates affected; and,
   (4) inmate classification procedures.
(d) A statement of the problem the alternate means of compliance is intended to solve, how the alternative will contribute to a solution of the problem and why it is considered an effective solution.
(e) The projected costs of the alternative and projected cost savings to the city, county, or city and county if any.
(f) A plan for developing and implementing the alternative including a time line where appropriate.
(g) A statement of how the overall goal of providing safety to staff and inmates was achieved during the pilot project evaluation phase (Section 1007).

The Board shall consider applications for alternate means of compliance based on the relevance and appropriateness of the proposed alternative, the completeness of the information provided in the application, the experiences of the jurisdiction during the pilot project, and staff recommendations.

Within 10 working days of receipt of the application, Board staff will notify the applicant, in writing, that the application is complete and accepted for filing, or that the application is being returned as deficient and identifying what specific additional information is needed. This does not preclude the Board from requesting additional information necessary to make a determination that the alternate means of compliance proposed meets or exceeds the intent of these regulations at the
time of the hearing. When complete, the application will be placed on the agenda for the Board’s consideration at a regularly scheduled meeting. The written notification from the Board to the applicant shall also include the date, time and location of the meeting at which the application will be considered. (The Board meeting schedule for the current calendar year is available through its office in Sacramento.)

When an application for an alternate means of compliance is approved by the Board, Board staff shall notify the applicant, in writing within 10 working days of the meeting, of any conditions included in the approval and the time period for which the alternate means of compliance shall be permitted. The Board may require regular progress reports and evaluative data as to the success of the alternate means of compliance. If disapproved, the applicant shall be notified in writing, within 10 working days of the meeting, the reasons for said disapproval. This application approval process may take up to 90 days from the date of receipt of a complete application.

The Board may revise the minimum jail standards during the next biennial review (reference Penal Code Section 6030) based on data and information obtained during the alternate means of compliance process. If, however, the alternate means of compliance does not have universal application, a city, county, or city and county may continue to operate under this status as long as they meet the terms of this regulation.


2. **ESC Notes/Recommendations**

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem?  (What is the rationale?)

No amendments were made by the Administration Workgroup.

4. **What is the operational impact that will result from this revision; how will it change operations?**

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. **How will BSCC measure compliance with this revision?**

7. **Summary of Workgroup Discussion and Intent**

8. **ESC Action/Response**

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1010. Applicability of Standards.

(a) All standards and requirements contained herein shall apply to Types I, II, III and IV facilities except as specifically noted in these regulations.

(b) Court holding facilities shall comply with the following regulations:
   1. 1012, Emergency Suspensions of Standards or Requirements
   2. 1018, Appeal
   3. 1024, Court Holding and Temporary Holding Facility Training
   4. 1027, Number of Personnel
   5. 1027.5, Safety Checks
   6. 1028, Fire and Life Safety Staff
   7. 1029, Policy and Procedures Manual
   8. 1030, Suicide Prevention Program
   8.9 1032, Fire Suppression Preplanning
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   23-25. Title 24, Part 2, Section 1231.3, Design Criteria for Furnishings and Equipment
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   25-26. 1219, Suicide Prevention Program
   26-27. 1220, First Aid Kit(s)
   27-28. 1246, Food Serving and Supervision
   28-29. 1280, Facility Sanitation, Safety, Maintenance

(c) In addition to the regulations cited above, court holding facilities that hold minors shall also comply with the following regulations:
   1. 1047, Serious Illness of a Minor in an Adult Detention Facility
   2. 1122.5, Pregnant Minors
   33. 1160, Purpose
   34. 1161, Conditions of Detention
   45. 1162, Supervision of Minors
(d) Temporary holding facilities shall comply with the following regulations:
   (1) 1012, Emergency Suspensions of Standards or Requirements
   (2) 1018, Appeal
   (3) 1024, Court Holding and Temporary Holding Facility Training
   (4) 1027, Number of Personnel
   (5) 1027.5, Safety Checks
   (6) 1028, Fire and Life Safety Staff
   (7) 1029, Policy and Procedures Manual
   (8) 1030, Suicide Prevention Program
   (9) 1032, Fire Suppression Preplanning
   (10) 1044, Incident Reports
   (11) 1046, Death in Custody
   (12) 1050, Classification Plan
   (13) 1051, Communicable Diseases
   (14) 1052, Mentally Disordered Inmates
   (15) 1053, Administrative Segregation
   (16) 1057, Developmentally Disabled Inmates
   (17) 1058, Use of Restraint Devices
   (18) 1058.5, Restraints and Pregnant Inmates
   (19) 1067, Access to Telephone
   (20) 1068, Access to Courts and Counsel
   (21) Title 24, Section 13-102(c)1, Letter of Intent
   (22) Title 24, Section 13-102(c)3, Operational Program Statement
   (23) Title 24, Section 13-102(c)5, Submittal of Plans and Specifications
   (24) Title 24, Section 13-102(c)6C, Design Requirements
   (25) Title 24, Part 2, Section 1231.2, Design Criteria for Required Spaces
   (26) Title 24, Part 2 Section 1231.3, Design Criteria for Furnishings and Equipment
   (27) 1200, Responsibility for Health Care Services
   (28) 1207, Medical Receiving Screening
   (29) 1209, Transfer to Treatment Facility
   (30) 1212, Vermin Control
   (31) 1213, Detoxification Treatment
   (32) 1219, Suicide Prevention Program
   (33) 1220, First Aid Kit(s)
   (34) 1240, Frequency of Serving
   (35) 1241, Minimum Diet
   (36) 1243, Food Service Plan
   (37) 1246, Food Serving and Supervision
   (38) 1280, Facility Sanitation, Safety, Maintenance

(e) The following sections are applicable to temporary holding facilities where such procedural
   or physical plant items are utilized.
   (1) 1055, Use of Safety Cell
   (2) 1056, Use of Sobering Cell
(3) 1058, Use of Restraint Devices
(4) 1058.5, Restraints and Pregnant Inmates
(45) 1080, Rules and Disciplinary Penalties
(56) 1081, Plan for Inmate Discipline
(67) 1082, Forms of Discipline
(78) 1083, Limitations on Disciplinary Actions
(89) 1084, Disciplinary Records
(910) Title 24, Part 2, Section 1231.2.1 Area for Reception and Booking
(1011) Title 24, Part 2, Section 1231.2.4 Sobering Cell
(1112) Title 24, Part 2, Section 1231.2.5 Safety Cell
(1213) Title 24, Part 2, Section 1231.3.4 Design Criteria for Showers
(1314) Title 24, Part 2, Section 1231.3.5 Design Criteria for Beds/Bunks
(1415) Title 24, Part 2, Section 1231.3.8 Design Criteria for Cell Padding
(1516) 1270, Standard Bedding and Linen Issue
(1617) 1272, Mattresses

(f) Law enforcement facilities, including lockups that hold minors in temporary custody shall, in addition to the previously cited applicable regulations, comply with the following regulations:

1. 1046, Death in Custody
2. 1047, Serious Illness of a Minor in an Adult Detention Facility
3. 1140, Purpose
4. 1141, Minors Arrested for Law Violations
5. 1142, Written Policies and Procedures
6. 1143, Care of Minors in Temporary Custody
7. 1144, Contact Between Minors and Adult Prisoners
8. 1145, Decision on Secure Detention
9. 1146, Conditions of Secure Detention
10. 1147, Supervision of Minors Held Inside a Locked Enclosure
11. 1148, Supervision of Minors in Secure Detention Outside a Locked Enclosure
12. 1149, Criteria for Non-secure Custody
13. 1150, Supervision of Minors in Non-secure Custody
14. 1151, Intoxicated and Substance Abusing Minors in a Lockup


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem?  (What is the rationale?)

Section 1027.5 Safety Checks is a new regulation, and this citation was added to this regulation in subsections (b) and (d) because Section 1027.5 is applicable not only to Type I, II, III and IV facilities, but also to court holding and temporary holding facilities.
Section 1030 Suicide Prevention Program was moved from its previously designated Section 1219, to coincide with the changes proposed to those sections in regulation.

Section 1058.5 Restraints and Pregnant Inmates, a newly established regulation, was added in wherever Section 1058 Use of Restraints already exists.

Section 1122.5 Pregnant Minors was added to court holding facilities that hold minors.

4. What is the operational impact that will result from this revision; how will it change operations?

Section 1027.5 – No operational impact is anticipated. Facilities already conduct safety checks as required by Section 1027.

Section 1030 – The regulation was moved to this section in the operations portion of the regulations and has been expanded to require further policies and procedures related to suicide prevention.

Section 1058.5 – This regulation complies with laws that have been in existence since 2013.

Section 1122.5 – This regulation complies with laws that have been in existence since 2013.

5. What is the fiscal impact that will result from this revision? b.) How can it be justified?

No fiscal impact is anticipated.

6. How will BSCC measure compliance with this revision?

BSCC will review documentation and policies to determine compliance.

7. Summary of Workgroup Discussion and Intent

The Administration Workgroup created a new regulation, Section 1027.5, which contains the safety check mandate previously found in Section 1027. Section 1027.5 is applicable to all types of facilities and is included in this section to note its applicability.

Section 1030 was determined it should be moved from Section 1219 and expanded to required further policies and procedures related to suicide prevention.

Section 1058.5 – This regulation complies with laws that have been in existence since 2013.

Section 1122.5 – This regulation complies with laws that have been in existence since 2013.

8. ESC Action/Response

Accept the workgroups’ recommendations.
1. Regulation and Recommended Revision

§ 1012. Emergency Suspensions of Standards or Requirements.

Nothing contained herein shall be construed to deny the power of any facility administrator to temporarily suspend any standard or requirement herein prescribed in the event of any emergency which threatens the safety of a local detention facility, its inmates or staff, or the public. Only such regulations directly affected by the emergency may be suspended. The facility administrator shall notify the Board in writing in the event that such a suspension lasts longer than three days. Suspensions lasting for more than 15 days require approval of the chairperson of the Board. Such approval shall be effective for the time specified by the chairperson.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Administration Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1013. Criminal History Information.

Such criminal history information as is necessary for conducting facility inspections as specified in Section 6031.1 of the Penal Code and detention needs surveys as specified in Section 6029 of the Penal Code shall be made available to the staff of the Board. Such information shall be held confidential except that published reports may contain such information in a form which does not identify an individual.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Administration Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1016. Contracts for Local Detention Facilities.

In the event that a county, city or city and county contracts for a local detention facility with a community-based public or private organization, compliance with appropriate Title 15 and Title 24 regulations shall be made a part of the contract. Nothing in this standard shall be construed as creating enabling language to broaden or restrict privatization of local detention facilities beyond that which is contained in statute.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Administration Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1018. Appeal.

The appeal hearing procedures are intended to provide a review concerning the Board application and enforcement of standards and regulations in local detention facilities and lockups. A county, city, or city and county facility may appeal on the basis of alleged misapplication, capricious enforcement of regulations, or substantial differences of opinion as may occur concerning the proper application of regulations or procedures.

(a) Levels of Appeal.
   (1) There are two levels of appeal as follows:
      (A) appeal to the Executive Director; and,
      (B) appeal to the Board.
   (2) An appeal shall first be filed with the Executive Director.

(b) Appeal to the Executive Director.
   (1) If a county, city, or city and county facility is dissatisfied with an action of the Board staff, it may appeal the cause of the dissatisfaction to the Executive Director. Such appeal shall be filed within 30 calendar days of the notification of the action with which the county or city is dissatisfied.
   (2) The appeal shall be in writing and:
      (A) state the basis for the dissatisfaction;
      (B) state the action being requested of the Executive Director; and,
      (C) attach any correspondence or other documentation related to the cause for dissatisfaction.

(c) Executive Director Appeal Procedures.
   (1) The Executive Director shall review the correspondence and related documentation and render a decision on the appeal within 30 calendar days except in those cases where the appellant withdraws or abandons the appeal.
   (2) The procedural time requirement may be waived with the mutual consent of the appellant and the Executive Director.
   (3) The Executive Director may render a decision based on the correspondence and related documentation provided by the appellant and may consider other relevant sources of information deemed appropriate.

(d) Executive Director’s Decision.
The decision of the Executive Director shall be in writing and shall provide the rationale for the decision.

(e) Request for Appeal Hearing by Board.
   (1) If a county, city, or city and county facility is dissatisfied with the decision of the Executive Director, it may file a request for an appeal hearing with the Board. Such appeal shall be filed within 30 calendar days after receipt of the Executive Director’s decision.
(2) The request shall be in writing and:
   (a) state the basis for the dissatisfaction;
   (b) state the action being requested of the Board; and,
   (c) attach any correspondence related to the appeal from the Executive Director.

(f) Board Hearing Procedures.
   (1) The hearing shall be conducted by a hearing panel designated by the Chairman of the Board at a reasonable time, date, and place, but not later than 21 days after the filing of the request for hearing with the Board, unless delayed for good cause. The Board shall mail or deliver to the appellant or authorized representative a written notice of the time and place of hearing not less than 7 days prior to the hearing.
   (2) The procedural time requirements may be waived with mutual consent of the parties involved.
   (3) Appeal hearing matters shall be set for hearing, heard, and disposed of by a notice of decision within 60 days from the date of the request for appeal hearing, except in those cases where the appellant withdraws or abandons the request for hearing or the matter is continued for what is determined by the hearing panel to be good cause.
   (4) An appellant may waive a personal hearing before the hearing panel and, under such circumstances, the hearing panel shall consider the written information submitted by the appellant and other relevant information as may be deemed appropriate.
   (5) The hearing is not formal or judicial in nature. Pertinent and relative information, whether written or oral, shall be accepted. Hearings shall be tape recorded.
   (6) After the hearing has been completed, the hearing panel shall submit a proposed decision in writing to the Board at its next regular public meeting.

(g) Board of State and Community Corrections Decision.
   (1) The Board, after receiving the proposed decision, may:
      (a) adopt the proposed decision;
      (b) decide the matter on the record with or without taking additional evidence; or,
      (c) order a further hearing to be conducted if additional information is needed to decide the issue.
   (2) The Board, or notice of a new hearing ordered, notice of decision or other such actions shall be mailed or otherwise delivered by the Board to the appellant.
   (3) The record of the testimony exhibits, together with all papers and requests filed in the proceedings and the hearing panel’s proposed decision, shall constitute the exclusive record for decision and shall be available to the appellant at any reasonable time for one year after the date of the Board’s notice of decision in the case.
   (4) The decision of the Board shall be final.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)
No amendments were made by the Administration Workgroup.

4. **What is the operational impact that will result from this revision; how will it change operations?**

5. a.) **What is the fiscal impact that will result from this revision?**  b.) **How can it be justified?**

6. **How will BSCC measure compliance with this revision?**

7. **Summary of Workgroup Discussion and Intent**

8. **ESC Action/Response**

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1020. Corrections Officer Core Course.

(a) In addition to the provisions of California Penal Code Section 831.5, all custodial personnel of a Type I, II, III, or IV facility shall successfully complete the “Corrections Officer Core Course” as described in Section 179 of Title 15, CCR, within one year from the date of assignment.

(b) Custodial Personnel who have successfully completed the course of instruction required by Penal Code Section 832.3 shall also successfully complete the “Corrections Officer Basic Academy Supplemental Core Course” as described in Section 180 of Title 15, CCR, within one year from the date of assignment.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Administration Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

The Administration Workgroup discussed the merits of requiring “beginning” the academy within one year of assignment and “completing” the academy in the same time period. By consensus, the workgroup decided to make no amendments to the regulation.

At least one workgroup member felt that all correctional officers should complete the Core course before having sole supervision of an inmate. He asked that this remark be forwarded to the ESC.

Subsequent to the workgroup meeting, an additional recommendation was received for consideration and forwarded to the workgroup. Changes were requested to this regulation which would have lessened the training requirements for non-Core trained patrol officers who...
infrequently work in a Type I jail. The recommendations included requiring only 4-6 hours of training for occasionally assigned staff, allowing a single Core-trained staff member to satisfy training requirements for the entire shift, and creating a new employee class, “Type I Occasional Relief Personnel,” who would be exempt from Section 1020 altogether. The Administration Workgroup opted not to make this change.

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1021. Jail Supervisory Training.

Prior to assuming supervisory duties, jail supervisors shall complete the core training requirements pursuant to Section 1020, Corrections Officer Core Course. In addition, supervisory personnel of any Type I, II, III or IV jail shall also be required to complete either the STC Supervisory Course (as described in Section 181, Title 15, CCR) or the POST supervisory course within one year from date of assignment.

Note: Authority cited: Sections 6030, 6031.6 and 6035, Penal Code. Reference: Section 6030, Penal Code.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  
    b.) How will this revision address/fix the problem?  (What is the rationale?)

No amendments were made by the Administration Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  
    b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. **Regulation and Recommended Revision**


Managerial personnel of any Type I, II, III or IV jail shall be required to complete either the STC management course (as described in Section 182, Title 15, CCR) or the POST management course within one year from date of assignment.

Note: Authority cited: Sections 6030, 6031.6 and 6035, Penal Code. Reference: Section 6030, Penal Code.

2. **ESC Notes/Recommendations**

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem?  (What is the rationale?)

No amendments were made by the Administration Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. **Summary of Workgroup Discussion and Intent**

8. **ESC Action/Response**

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1024. Court Holding and Temporary Holding Facility Training.

Custodial personnel who supervise inmates in, and supervisors of, a Court Holding or Temporary Holding facility shall complete 8 hours of specialized training.

Such training shall include, but not be limited to:

(a) applicable minimum jail standards;
(b) jail operations liability;
(c) inmate segregation;
(d) emergency procedures and planning, fire and life safety; and,
(e) suicide prevention.

Such training shall be completed as soon as practical, but in any event not more than six months after the date of assigned responsibility, or the effective date of this regulation. Successful completion of Core training or supplemental Core training, pursuant to Section 1020, Corrections Officer Core Course, may be substituted for the initial eight hours of training.

Eight hours of refresher training shall be completed once every two years. Successful completion of the requirements in Section 1025, Continuing Professional Training may be substituted for the eight hour refresher.

Each agency shall determine if additional training is needed based upon, but not limited to, the complexity of the facility, the number of inmates, the employees’ level of experience and training, and other relevant factors.


2. ESC Notes/Recommendations

For clarity, the first sentence should be revised to read:

Custodial personnel who supervise inmates, are responsible for supervising inmates in, and supervisors of, a Court Holding or Temporary Holding facility shall complete 8 hours of specialized training. The Administration Workgroup (AWG) adopted this recommendation, with modification, and edited the regulation as indicated.

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

This regulation was amended to add the word “supervise” and remove the phrase “are responsible for supervising” to enhance its clarity.
In Section 1028 Fire and Life Safety Staff, the ESC recommended that the Administration Workgroup clarify the level of training in fire and life safety required for staff in TH and CH facilities. To address that recommendation, the Administration Workgroup amended Section 1024 to include the topic of fire and life safety. By being compliant with Section 1024, an agency will also meet the training requirement of Section 1028. Subsection “d” was amended to read “emergency procedures and planning, fire & life safety; and,”.

4. What is the operational impact that will result from this revision; how will it change operations?

Operational impact will be minimal. Agencies must now formalize their training curriculums to include fire and life safety training.

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

Fiscal impact is not anticipated to occur because agencies are currently required to train on fire and life safety topics. This amendment clarifies the standard to be met and does not impose a higher standard than now exists.

6. How will BSCC measure compliance with this revision?

BSCC will continue to review training curriculum to determine compliance.

7. Summary of Workgroup Discussion and Intent

The Administration Workgroup discussed the need to clarify the language in the first sentence of the regulation, and made a proposed revision accordingly. Further, In Section 1028 Fire and Life Safety Staff, the ESC recommended that the Administration Workgroup clarify the level of training in fire and life safety required for staff in TH and CH facilities. To address that recommendation, the Administration Workgroup amended Section 1024 to include the topic of fire and life safety. By being compliant with Section 1024, an agency will also meet the training requirement of Section 1028.

8. ESC Action/Response

Accept the workgroup’s recommendations.
1. Regulation and Recommended Revision

§ 1025. Continuing Professional Training.

With the exception of any year that a core training module is successfully completed, all facility/system administrators, managers, supervisors, and custody personnel of a Type I, II, III, or IV facility shall successfully complete the “annual required training” specified in Section 184 of Title 15, CCR.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Administration Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1027. Number of Personnel.

A sufficient number of personnel shall be employed in each local detention facility to conduct at least hourly safety checks of inmates through direct visual observation of all inmates and to ensure the implementation and operation of the programs and activities required by these regulations. There shall be a written plan that includes the documentation of routine safety checks.

Whenever there is an inmate in custody, there shall be at least one employee on duty at all times in a local detention facility or in the building which houses a local detention facility who shall be immediately available and accessible to inmates in the event of an emergency. Such an employee shall not have any other duties which would conflict with the supervision and care of inmates in the event of an emergency. Whenever one or more female inmates are in custody, there shall be at least one female employee who shall in like manner be immediately available and accessible to such females.

Additionally, in Type IV programs the administrator shall ensure a sufficient number of personnel to provide case review, program support, and field supervision.

In order to determine if there is a sufficient number of personnel for a specific facility, the facility administrator shall prepare and retain a staffing plan indicating the personnel assigned in the facility and their duties. Such a staffing plan shall be reviewed by the Board staff at the time of their biennial inspection. The results of such a review and recommendations shall be reported to the local jurisdiction having fiscal responsibility for the facility.

Note: Authority cited: Section 6030, Penal Code. Reference: Sections 6030, 6031 and 6031.1, Penal Code.

2. ESC Notes/Recommendations

The ESC requested the Administration Workgroup consider the input, while giving attention to the following:

1. Potential fiscal impact.
2. Staffing of facilities varies depending on when/how built.

Rec A

In-text Change: A sufficient number of personnel shall be employed in each local detention facility to conduct at least hourly safety checks of inmates through direct visual observation of all inmates and to ensure the implementation and operation of the programs and activities required by these regulations. PREA and AB 109 have impacted jails and put a strain on staff. Jails need to ensure staffing plans cover these regulations. AWG opted not to make this change.
Rec B
At a minimum, this section should include:
1. Language indicating that there shall be sufficient inmate-to-personnel ratios to ensure inmates are provided with adequate supervision and safety. AWG opted not to make this change.

Rec C
- Review the need for hourly checks given the number of vital functions that have to be performed in light of all the mandates. AWG opted not to make this change.
- Prescribe staffing minimums for small, medium and large facilities. It is challenging that inspections can result in a finding of not enough staff, yet there is no minimum staffing number required. AWG opted not to make this change.

Rec D
- Revise for clarity on how to determine “a sufficient number of personnel,” provide a goal to work towards, reference document to seek resources.
- Establish minimum personnel to perform the duty.
- Technical assistance (TA) to establish minimum personnel by qualified rater.
- Compliance can be measured by:
  - TA completed – yes/no
  - Staffing level achieved – yes/no
  - Safety checks compliance/improve – yes/no
  AWG opted not to make this change.

Rec E
- Consider developing a separate regulation for 1) Number of Personnel and 2) Safety Checks. AWG took action on this item by deleting all references to safety checks from this regulation and moving the deleted references to a new regulation, numbering it Section 1027.5.
- Add “no more than 60 minute lapse between safety checks.” AWG took action on this item by adding the sentence, “There shall be no more than 60 min lapse between safety checks.” to Section 1027.5.
- Add ”random” prior to safety checks and clarify “random” in safety check regulation: “Safety checks” means direct, visual observation performed at unscheduled random intervals within timeframes prescribed in these regulations to provide for the health and welfare of inmates. AWG opted not to make this change.

Rec F
Officers, and detention officers, often misunderstand the requirements when a female is held in custody at a local municipality prior to being transported to a county jail facility. It is unclear to most of them whether a female officer has to be present in the detention facility, or it is sufficient to have a female officer available to the detainee. AWG took action on this item by deleting the phrase “in like manner” from the second paragraph.
3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

Prior language was confusing for the field and included dissimilar criteria in determining compliance (objectively counting safety checks and subjectively reviewing programs to assess staffing.) The revised regulation separates presumptive, objective standards (frequency of safety checks) from performance, subjective standards (assessment of staffing by verification of programs and activities). Safety checks are moved to a new regulation, Section 1027.5.

In the second paragraph, the phrase “in like manner” was deleted because the term was confusing.

4. What is the operational impact that will result from this revision; how will it change operations?

No impact to facility operations is anticipated.

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

No fiscal impact to facility operations is anticipated.

6. How will BSCC measure compliance with this revision?

The division of this standard into two regulations will not change the process BSCC uses to determine compliance.

7. Summary of Workgroup Discussion and Intent

The Administration Workgroup discussed staff duties such as safety checks, the randomness of checks, and PREA. Their intent was to clarify the need for safety checks by removing that specific standard to its own regulation (new Section1027.5) while avoiding standards which would unnecessarily limit individual administrators’ discretion, such as mandating “random” checks.

The workgroup also clarified the requirement for female staff members by removing the unnecessary phrase “in like manner” from the second paragraph.

8. ESC Action/Response

Accept the workgroup’s recommendations.
1. Regulation and Recommended Revision

§ 1027.5 Safety Checks.

Safety checks shall be conducted at least hourly through direct visual observation of all inmates. There shall be no more than a 60 minute lapse between safety checks. There shall be a written plan that includes the documentation of routine safety checks.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

This new regulation consists of elements deleted from Section 1027. Prior to this edit, Section 1027 mixed presumptive standards (frequency of safety checks) and performance standards (subjective assessment of programs and activities). Separating these dissimilar types of criteria will eliminate confusion in interpreting inspection results and give agencies clearer direction to remedy points of non-compliance.

4. What is the operational impact that will result from this revision; how will it change operations?

No operational changes are anticipated.

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

No fiscal changes are anticipated.

6. How will BSCC measure compliance with this revision?

BSCC already measures compliance with this regulation. No change in monitoring is anticipated.

7. Summary of Workgroup Discussion and Intent

The Administration Workgroup wanted to remove objective standards from Section 1027 to allow staff to more clearly understand their obligations and focus their remedial efforts when non-compliant. As now written, non-compliance with either Section 1027 or 1027.5 is more clearly demonstrated and corrective action can be more easily determined.

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1028. Fire and Life Safety Staff.

Pursuant to Penal Code Section 6030(c), effective January 1, 1980, whenever there is an inmate in custody, there shall be at least one person on duty at all times who meets the training standards established by the Board for general fire and life safety. The facility manager shall ensure that there is at least one person on duty who trained in fire and life safety procedures that relate specifically to the facility.


2. ESC Notes/Recommendations

Clarify that this regulation applies differently to TII and III facilities and TH and CH facilities:

Pursuant to Penal Code Section 6030(c), effective January 1, 1980, whenever there is an inmate in custody, there shall be at least one person on duty at all times who meets the training standards established by the Corrections Standards Authority for general fire and life safety. The facility manager shall ensure that there is at least one person on duty who trained in fire and life safety procedures that relate specifically to the facility.

In TII and III facilities, Core training will suffice. In TH and CH facilities, Title 15, Section 1024 requirements will suffice.

Rationale: Since this regulation applies to all types of facilities, and the training requirements are so different, it would clarify which type of facility staff need what type of training, and help eliminate confusion. AWG opted not to make this change, but did amend Section 1024 Court and Temporary Holding Facility Training, which accomplishes the intent of this recommendation.

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Administration Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?
6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision


Facility administrator(s) shall develop and publish a manual of policy and procedures for the facility. The policy and procedures manual shall address all applicable Title 15 and Title 24 regulations and shall be comprehensively reviewed and updated at least every two years. Such a manual shall be made available to all employees.

(a) The manual for Temporary Holding, Type I, II, and III facilities shall provide for, but not be limited to, the following:

1. Table of organization, including channels of communications.
2. Inspections and operations reviews by the facility administrator/manager.
4. Policy on the use of restraint equipment, including the restraint of pregnant inmates as referenced in Penal Code Section 6030(f) 3407.
5. Procedure and criteria for screening newly received inmates for release per Penal Code sections 849(b)(2) and 853.6, and any other such processes as the facility administrator is empowered to use.
6. Security and control including physical counts of inmates, searches of the facility and inmates, contraband control, and key control. Each facility administrator shall, at least annually, review, evaluate, and make a record of security measures. The review and evaluation shall include internal and external security measures of the facility.
7. Emergency procedures include:
   A. fire suppression preplan as required by section 1032 of these regulations;
   B. escape, disturbances, and the taking of hostages;
   C. mass arrests; civil disturbance;
   D. natural disasters;
   E. periodic testing of emergency equipment; and,
   F. storage, issue, and use of weapons, ammunition, chemical agents, and related security devices.
8. Suicide Prevention.
10. The policies and procedures required in subsections (6) and (7) may be placed in a separate manual to ensure confidentiality.

(b) The manual for court holding facilities shall include all of the procedures listed in subsection (a), except number (5).

(c) The manual for Type IV facilities shall include, in addition to the procedures required in subsection (a), except number (5), procedures for:

1. accounting of inmate funds;
2. community contacts;
3. field supervision;
4. temporary release; and
(5) obtaining health care.


2. ESC Notes/Recommendations

The ESC requested the Administration Workgroup consider the input, while giving attention to the potential fiscal impact.

Rec A
1029(a)(7)(C) regulations should specify what is meant by “civil disturbance” and clarify the intent of having a policy and procedure for such an event. Is it meant to cover “mass arrests” during a civil disturbance? AWG took action on this recommendation and replaced the phrase “civil disturbance” with the phrase “mass arrests.”

Rec B
In-Text Addition: Facility administrator(s) shall develop and publish a manual of policy and procedures for the facility that is also translated into Spanish. And made available for Spanish speaking and/or English second learners.

Rationale: Facility administrators should not only focus on current duties, documentation, facility control and excessive force, jail management, discipline and apprehension, but also be reflected of jail population and linguistics especially of large populations such as Latino.

Fiscal/Operational Impact: Yes, it will require the shift from punitive and outdated policies and budget allocations throughout Title 15 and 24 to ensure quality assurance by addressing linguistic barriers. AWG opted not to make this change.

Rec C
(a)(4): Append to “and Penal Code Section 3407, including: an inmate known to be pregnant or in recovery after delivery shall not be restrained by the use of leg irons, waist chains, or handcuffs behind the body; a pregnant inmate in labor, during delivery, or in recovery after delivery, shall not be restrained by the wrists, ankles, or both, unless deemed necessary for the safety and security of the inmate, the staff, or the public; restraints shall be removed when a professional who is currently responsible for the medical care of a pregnant inmate during a medical emergency, labor, delivery, or recovery after delivery determines that the removal of restraints is medically necessary; upon confirmation of an inmate’s pregnancy, she shall be advised, orally or in writing, of the standards and policies governing pregnant inmates, including, but not limited to, the provisions of Penal Code Section 3407.” Medical/Mental Health Workgroup (MMHWG) added new regulation Section 1058.5 Restraints and Pregnant Inmates; and 1122.5 Pregnant Minors. AWG took no action.

(a)(5): Append “including an alternative custody program under Penal Code Section 1170.06.” AWG opted not to make this change.
Rec D
Policies and Procedures should continue to state that women known to be pregnant and women in recovery after delivery shall not be restrained; a clear review of each facility’s compliance should be documented. AWG opted not to make this change.

Rec E
More definition is needed within each topic area listed, defining what exactly is needed. AWG opted not to make this change.

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

The Medical/Mental Health Workgroup notes that, in subsection (a) (4), the reference to Penal Code Section 6030(f) is not current. Adding reference to Penal Code Section 3407 helps to assure that facility operators would abide by those statutory requirements. The Administration Workgroup concurs with this recommendation.

In subsection (a)(7)(c), the Administration Workgroup deleted “civil disturbance” and added “mass arrests” to add clarity and specificity to the type of civil disturbance intended.

4. What is the operational impact that will result from this revision; how will it change operations?

The change to subsection (a)(4) will not impact facility operations because the limitations of PC 3407 are already imposed by statute.

The change to (a)(7)(c) will not impact facility operations.

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

No fiscal impact is anticipated with either amendment.

6. How will BSCC measure compliance with this revision?

No change is anticipated in the manner with which BSCC determines compliance.

7. Summary of Workgroup Discussion and Intent

The Administration Workgroup clarified their understanding of “civil disturbance” to mean plans for a mass arrest situation.

The Medical/Mental Health Workgroup agreed to add reference to Penal Code Section 3407 in subsection (a) (4). They also agreed to put the detail of the statute in two new regulations: Section 1058.5 Restraints and Pregnant Inmates, and Section 1122.5 Pregnant Minors. These new
regulations to capture the statutory prohibitions on restraint of pregnant prisoners as required by Penal Code Section 3407. The Administration Workgroup concurs.

8. **ESC Action/Response**

Accept the workgroups’ recommendations.
1. Regulation and Recommended Revision

§ 12491030. Suicide Prevention Program.

The facility shall have a comprehensive written suicide prevention program developed by the facility administrator, and in conjunction with the health authority and mental health director, to develop a written plan for a suicide prevention program designed to identify, monitor, and provide treatment to those inmates who present a suicide risk. The program shall include the following:

(a) Suicide prevention training for all staff that have direct contact with inmates.
(b) Intake screening for suicide risk immediately upon intake and prior to housing assignment.
(c) Provisions facilitating communication among arresting/transporting officers, facility staff, medical and mental health personnel in relation to suicide risk.
(d) Housing recommendations for inmates at risk of suicide.
(e) Supervision depending on level of suicide risk.
(f) Suicide attempt and suicide intervention policies and procedures.
(g) Provisions for reporting suicides and suicides attempts.
(h) Multi-disciplinary administrative review of suicides and attempted suicides as defined by the facility administrator.


2. ESC Notes/Recommendations

The ESC requested the Medical/Mental Health Workgroup consider the input, giving attention to the following:

1. These are minimum standards.

Rec A
Also cited in 1055: Instead of the use of Safety Cells for suicide prevention, group housing of suicidal inmates when possible based on level and classification. Isolation only when absolutely necessary. Mental Health professionals complete an objective assessment of suicide risk level to determine which inmate necessitate isolation in a safety cell, and which may be housed in a group setting for a better outcome. Based on a 20 year study by the National Institute of Corrections survey of suicides in all county jails nationwide. That study recommended group housing and isolating only when unavoidable. MMHWG, AWG and MIDWG opted not to make this change.

Rec B
In-text Addition: …a written plan for a suicide prevention program designed to identify, monitor, and provide treatment, either individually or in a group setting, to those inmates who present a suicide risk. MMHWG, AWG and MIDWG opted not to make this change.

Rec C
At a minimum, this section should:

1. More fully describe the components of an adequate prevention plan. At a minimum, it should include a program as described in National Commission on Correctional Health Care Standard J-G-05. **MMHWG created a new regulation and recommends including it in Title 15 as Section 1030; AWG concurs.**

3. **a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)**

The current Section 1219 is located in Article 11, Medical/Mental Health Services and contains minimal direction to facility administrators. The new regulation, with increased requirements for a written suicide prevention program and placed in the operational regulations, will assure that facility administrators will have a comprehensive suicide prevention program in place.

The Medical/Mental Health Workgroup and Administration Workgroup propose changes that would include the facility administrator, in conjunction with the health authority and mental health director, in crafting policy.

4. **What is the operational impact that will result from this revision; how will it change operations?**

**MMHWG and AWG:** Policies and procedures will need to be expanded to include the requirements of this regulation. This will require input from and coordination with the health authority and mental health director. Along with policies and procedures, a training program will need to be created to support these new requirements.

5. **a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?**

**MMHWG and AWG:** This regulation change could result in increased costs for policy and procedure development and training. Any increased costs are justified by the improved quality of inmate health care.

6. **How will BSCC measure compliance with this revision?**

The inspector will review the custody policies and procedures manual.

7. **Summary of Workgroup Discussion and Intent**

**MMHWG:** The Medical/Mental Health Workgroup agreed that moving the Suicide Prevention Program regulation to the operational regulations, and expanding upon the components will assure that facility administrators will have a comprehensive suicide prevention program in place.

**AWG:** The Administration Workgroup concurs with the MMHWG, with noted modifications.
MIDWG: The Minors in Detention Workgroup discussed the impact of 1030 on agencies without a recognized mental health director (such as Type I and Temporary Holding Facilities), the cost of imposing training, the impact of “shall” on the resources, and the likelihood that failure to reach an unrealistic expectation might be harmful in litigation.

One major objection was the inclusion of anyone having direct contact with inmates. The workgroup discussed that Type I court transportation is often conducted by patrol officers or other non-jail staff and the new regulation, as written, would mandate comprehensive training for many officers having only coincidental contact with inmates.

The Minors in Detention Workgroup recognizes the merit of changes reflected in 1030, but find it too burdensome for many agencies, especially smaller agencies. Existing regulation 1219 should be maintained and the changes of 1030 are not recommended by the Minors in Detention Workgroup.

8. ESC Action/Response

Accept the Administration Workgroup’s recommendations. The ESC was in favor of expanding the components of the regulation. The ESC’s discussion with the Medical/Mental Health Workgroup reflected the group’s agreement with the final changes.
1. Regulation and Recommended Revision

§ 1032. Fire Suppression Preplanning.

Pursuant to Penal Code Section 6031.1(b), the facility administrator shall consult with the local fire department having jurisdiction over the facility, with the State Fire Marshal, or both, in developing a plan for fire suppression which shall include, but not be limited to:

(a) a fire suppression pre-plan developed with the local fire department to be included as part of the policy and procedures manual (Title 15, California Code of Regulations Section 1029);
(b) regular fire prevention inspections by facility staff on a monthly basis with two year retention of the inspection record;
(c) fire prevention inspections as required by Health and Safety Code Section 13146.1(a) and (b) which requires inspections at least once every two years;
(d) an evacuation plan; and,
(e) a plan for the emergency housing of inmates in the case of fire.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  
   b.) How will this revision address/fix the problem?  (What is the rationale?)

No amendments were made by the Administration Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  
   b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision


Except in court holding and temporary holding facilities, each facility administrator shall maintain an inmate demographics accounting system which reflects the monthly average daily population of sentenced and non-sentenced inmates by categories of male, female and juvenile. Facility administrators shall provide the Board with applicable inmate demographic information as described in the Jail Profile Survey.


2. ESC Notes/Recommendations

The ESC requested the Administration Workgroup consider the input, while giving attention to the following:

1. Consistency is needed among counties with what is counted and the definition of such.
2. Evaluate the Jail Profile Survey in comparison to the recommendations.
3. Consider who benefits and how it is shared.

AWG engaged in a discussion and considered each element in their considerations.

Rec A

In-text Addition & Change: Except in court holding and temporary holding facilities, each facility administrator shall maintain an inmate demographics accounting system which reflects the monthly average daily population of sentenced and length of stay of those non-sentenced inmates by categories of male, female and juvenile.

Rationale: Facility administrators should not only focus on current duties, documentation, facility control and excessive force, jail management, discipline and apprehension, but also be reflected of jail population and linguistics especially of large populations such as Latino and ensure racial over-representation and disproportionately is addressed. Further, lack of pre-trial services assessments and needs assessments leave most facilities operating with lack luster data and overlook the role of data.

Fiscal/Operational Impact: Yes, it will require the shift from punitive and outdated policies and budget allocations throughout Title 15 and 24 and promote a data and research driven decision making. AWG opted not to make this change.

Rec B

In-text Addition: Each facility administrator shall also track time served at release, arresting agency, and sentencing offense or most serious offense charged and shall provide the Corrections Standards Authority with applicable inmate demographic information as described in the Jail Profile Survey. AWG opted not to make this change.
Rec C
Counties should report more demographic data in a way that allows for a cross-sectional empirical analysis, including: length of stay, sentencing offense for sentenced people, most serious offense charged, whether bail was set for non-sentenced people, race/gender information, and mental health diagnosis. AWG opted not to make this change.

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Administration Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1041. Inmate Records.

Each facility administrator of a Type I, II, III or IV facility shall develop written policies and procedures for the maintenance of individual inmate records which shall include, but not be limited to, intake information, personal property receipts, commitment papers, court orders, reports of disciplinary actions taken, medical orders issued by the responsible physician and staff response, and non-medical information regarding disabilities and other limitations.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Administration Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1044. Incident Reports.

Each facility administrator shall develop written policies and procedures for the maintenance of written records and reporting of all incidents which result in physical harm, or serious threat of physical harm, to an employee or inmate of a detention facility or other person. Such records shall include the names of the persons involved, a description of the incident, the actions taken, and the date and time of the occurrence. Such a written record shall be prepared by the staff assigned to investigate the incident and submitted to the facility manager or his/her designee.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Administration Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1045. Public Information Plan.

Each facility administrator of a Type I, II, III or IV facility shall develop written policies and procedures for the dissemination of information to the public, to other government agencies, and to the news media. The public and inmates shall have available for review the following material:

(a) The Board of State and Community Corrections Minimum Standards for Local Detention Facilities as found in Title 15 of the California Code of Regulations.

(b) Facility rules and procedures affecting inmates as specified in sections:

   (1) 1045, Public Information Plan
   (2) 1061, Inmate Education Plan
   (3) 1062, Visiting
   (4) 1063, Correspondence
   (5) 1064, Library Service
   (6) 1065, Exercise and Recreation
   (7) 1066, Books, Newspapers, Periodicals and Writings
   (8) 1067, Access to Telephone
   (9) 1068, Access to Courts and Counsel
   (10) 1069, Inmate Orientation
   (11) 1070, Individual/Family Service Programs
   (12) 1071, Voting
   (13) 1072, Religious Observance
   (14) 1073, Inmate Grievance Procedure
   (15) 1080, Rules and Disciplinary Penalties
   (16) 1081, Plan for Inmate Discipline
   (17) 1082, Forms of Discipline
   (18) 1083, Limitations on Discipline
   (19) 1200, Responsibility for Health Care Services


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Administration Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?
5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1046. Death in Custody.

(a) Death in Custody Reviews for Adults and Minors.
The facility administrator, in cooperation with the health administrator, shall develop written policy and procedures to ensure that there is an initial review of every in-custody death within 30 days. The review team shall include the facility administrator and/or the facility manager, the health administrator, the responsible physician and other health care and supervision staff who are relevant to the incident.

Deaths shall be reviewed to determine the appropriateness of clinical care; whether changes to policies, procedures, or practices are warranted; and to identify issues that require further study.

(b) Death of a Minor
In any case in which a minor dies while detained in a jail, lockup, or court holding facility:

1. The administrator of the facility shall provide to the Board a copy of the report submitted to the Attorney General under Government Code Section 12525. A copy of the report shall be submitted within 10 calendar days after the death.
2. Upon receipt of a report of death of a minor from the administrator, the Board may within 30 calendar days inspect and evaluate the jail, lockup, or court holding facility pursuant to the provisions of this subchapter. Any inquiry made by the Board shall be limited to the standards and requirements set forth in these regulations.


2. ESC Notes/Recommendations

The ESC requested the Administration Workgroup consider the input, while giving attention to the following:

1. Need to clarify the type of death review that would be completed within 30 days.
2. Review NCCHC definitions.

Rec A
At a minimum this section should be revised to include that:

1. Deaths shall be reviewed to determine the appropriateness of clinical care; whether changes to policies, procedures, or practices are warranted; and to identify issues that require further study.
   - MMHWG agreed with this change.
   - AWG offers the option of not making the change; questions about “clinical care” are not appropriately directed to custody staff.
   - MIDWG offers the option of not making the change.

2. All deaths are reviewed within 30 days.
• MMHWG agreed with this change.
• AWG offers the option of not making the change; information critical to the review process is often not available within 30 days of the incident.
• MIDWG offers the option of not making the change.


Rec B
After “in-custody death”, insert “and report under Government Code Sections 12525 and 12525.5”.
• MMHWG and AWG opted not to make this change and noted that the reference to Government Code 12525.5 is not relevant to the regulation.

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

MMHWG: The revisions in this regulation clarify the type of death review and places a timeframe on when it is to be conducted.

4. What is the operational impact that will result from this revision; how will it change operations?

MMHWG: The death in custody review was already required by these regulations. Adding the word "initial" along with the second paragraph clarifies that it is not an investigative review. This change does not affect facility operations. Adding that this review is to be done within 30 days merely places a time frame on the review and does not affect facility operations.

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

There is no fiscal impact to these amendments.

6. How will BSCC measure compliance with this revision?

MMHWG: Inspectors would need to review documentation that shows this initial review took place.

7. Summary of Workgroup Discussion and Intent

MMHWG: The Medical/Mental Health Workgroup agreed that the intent of the review described in this regulation is one of quality assurance. Adding the second paragraph clarified the intent of this regulation.
The group determined that clarifying that this was an "initial" review to be completed within 30 days would assure that circumstances surrounding the death in custody would be fresh in the minds of those involved.

**AWG:** The Administration Workgroup felt that the original regulation is adequate and appropriate. The workgroup members noted that a review to determine the appropriateness of clinical care is beyond the scope of custody staff who would be bound by this regulation. Additionally, in their experience, not all required data will be available within 30 days to conduct a knowledgeable critical incident review.

**MIDWG:** The Minors in Detention Workgroup discussed Rec A (1&2) and stated that non-secure minors are not held in an area where adult prisoners will be located. Non-secure minors are in constant direct supervision of an officer at all times. No changes recommended.

**8. ESC Action/Response**

Accept the Medical/Mental Health Workgroup’s recommendations, in favor of taking the approach of an initial review not long after the occurrence. Further, modify “assure” to “ensure” to better reflect the intent.
1. Regulation and Recommended Revision

§ 1047. Serious Illness or Injury of a Minor in an Adult Detention Facility.

The facility administrator shall develop policy and procedures for notification of the court of jurisdiction and the parent, guardian, or person standing in loco parentis, in the event of a suicide attempt, serious illness, injury or death of a minor in custody.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Administration Workgroup, Medical/Mental Health Workgroup nor Minors in Detention Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
CLASSIFICATION AND DISCIPLINE WORKGROUP

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*Bold and italics indicate proposed revision; underline indicates proposed new regulation.
1. Regulation and Recommended Revision

§ 1050. Classification Plan.

(a) Each administrator of a temporary holding, Type I, II, or III facility shall develop and implement a written classification plan designed to properly assign inmates to housing units and activities according to the categories of sex, age, criminal sophistication, seriousness of crime charged, physical or mental health needs, assaultive/non-assaultive behavior and other criteria which will provide for the safety of the inmates and staff. Such housing unit assignment shall be accomplished to the extent possible within the limits of the available number of distinct housing units or cells in a facility.

The written classification plan shall be based on objective criteria and include receiving screening performed at the time of intake by trained personnel, and a record of each inmate’s classification level, housing restrictions, and housing assignments.

Each administrator of a Type II or III facility shall establish and implement a classification system which will include the use of classification officers or a classification committee in order to properly assign inmates to housing, work, rehabilitation programs, and leisure activities. Such a plan shall include the use of as much information as is available about the inmate and from the inmate and shall provide for a channel of appeal by the inmate to the facility administrator or designee. An inmate who has been sentenced to more than 60 days may request a review of his classification plan no more often than 30 days from his last review.

(b) Each administrator of a court holding facility shall establish and implement a written plan designed to provide for the safety of staff and inmates held at the facility. The plan shall include receiving and transmitting of information regarding inmates who represent unusual risk or hazard while confined at the facility, and the segregation of such inmates to the extent possible within the limits of the court holding facility.


2. ESC Notes/Recommendations

The ESC requested the Classification and Discipline Workgroup consider the input, while giving attention to the following:

1. If “least restrictive” is used,
   a. it needs to be defined, and
   b. include that it is the use of the least restrictive housing available.

Rec A
At a minimum, subsection (a) should include:

1. In-text Addition: That Type I, II, or III facilities shall develop and implement written classification plans designed to properly assign inmates to the least restrictive housing units.

The Classification and Discipline Workgroup (CDWG) opted not to make this change.
2. This subsection should also specify that institutional behaviors shall be considered in classification decisions. **The CDWG opted not to make this change.** Reference: 15 CCR § 3375

**Rec B**

Further definitions are needed, such as for gender identity. **The CDWG added a definition in Section 1006 Definitions, and with the same terminology added a category in this regulation for consideration in the classification process.**

3. **a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)**

The addition of “or designee” in the channel of appeal allows for the appropriate designation of a position below the administrator. The administrator is typically not part of the appeal chain.

4. **What is the operational impact that will result from this revision; how will it change operations?**

The addition of “or designee” allows for the appropriate designation of a position below the administrator in the chain of appeal.

5. **a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?**

No fiscal impact.

6. **How will BSCC measure compliance with this revision?**

Inspectors will consider this when reviewing facility policy and procedures as well as classification records.

7. **Summary of Workgroup Discussion and Intent**

The workgroup decided to add the “gender expression/identity” category to the classification considerations, which allows agencies to more appropriately address the complex gender issues facility operators are faced with as part of the classification process.

Additionally, the workgroup determined a clarification was needed for the chain of appeal, and added “or designee” after administrator to better reflect the appropriate chain.

8. **ESC Action/Response**

Accept the workgroup’s recommendation to add “or designee.” After reviewing the workgroup’s addition of “gender expression/identity”, the ESC decided not to include it in the final recommendations. The workgroup had proposed the following in the first sentence of the regulation:
Each administrator of a temporary holding, Type I, II, or III facility shall develop and implement a written classification plan designed to properly assign inmates to housing units and activities according to the categories of sex, age, criminal sophistication, seriousness of crime charged, physical or mental health needs, assaultive/non-assaultive behavior, gender expression/identity - and other criteria which will provide for the safety of the inmates and staff.
1. Regulation and Recommended Revision

§ 1051. Communicable Diseases.

The facility administrator, in cooperation with the responsible physician, shall develop written policies and procedures specifying those symptoms that require segregation of an inmate until a medical evaluation is completed. At the time of intake into the facility, an inquiry shall be made of the person being booked as to whether or not he/she has or has had any communicable diseases, such as tuberculosis or has observable symptoms of tuberculosis or any other communicable diseases, including but not limited to, tuberculosis, other airborne diseases, or other special medical problem identified by the health authority. The response shall be noted on the booking form and/or screening device.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

This regulation contains redundant language. The sentence was reworded to provide clarity.

4. What is the operational impact that will result from this revision; how will it change operations?

No operational impact.

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

No fiscal impact.

6. How will BSCC measure compliance with this revision?

This change will not affect how compliance is measured.

7. Summary of Workgroup Discussion and Intent

The Medical/Mental Health Workgroup agreed that this regulation contained redundant language. The Classification and Discipline Workgroup concurred, and accepted the change proposed by the Medical/Mental Health Workgroup.

8. ESC Action/Response

Accept the workgroup’s recommendations.
1. Regulation and Recommended Revision

§ 1052. Mentally Disordered Inmates.

The facility administrator, in cooperation with the responsible physician, shall develop written policies and procedures to identify and evaluate all mentally disordered inmates, and may include telehealth. If an evaluation from medical or mental health staff is not readily available, an inmate shall be considered mentally disordered for the purpose of this section if he or she appears to be a danger to himself/herself or others or if he/she appears gravely disabled. An evaluation from medical or mental health staff shall be secured within 24 hours of identification or at the next daily sick call, whichever is earliest. Segregation may be used if necessary to protect the safety of the inmate or others.


2. ESC Notes/Recommendations

The ESC requested the Classification and Discipline Workgroup and the Medical/Mental Health Workgroup consider the input, while giving attention to the following:

1. “Timely” is vague.
2. Timely referral to qualified licensed mental health staff could be an RN initially.
3. Telemedicine would be acceptable.
4. “Restrictive setting” needs further consideration.

Rec A

In-Text Additions: At a minimum, this section should be revised to include that:

1. The written policies and procedures shall require timely evaluation of all mentally disordered offenders by qualified, licensed mental health staff. Medical/Mental Health Workgroup (MMHWG) opted not to make this change. CDWG concurred.
2. Segregation in the least restrictive setting may only be used if necessary to protect the safety of the inmate or others. MMHWG opted not to make this change. CDWG concurred.

Reference: 28 CFR §§ 35.130, 35.149, 35.152

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

This amendment provides an additional resource for facilities to accomplish needed medical or mental health evaluations.

4. What is the operational impact that will result from this revision; how will it change operations?

Adding telehealth as an option could make it much easier for inmates to receive appropriate health care.
5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

If an agency elected to purchase video equipment, this amendment could result in increased up-front costs. However, there could be long-term cost savings because health professionals could be providing services by video camera in lieu of potentially driving long distances to see inmates. Any costs may be justified by the improved quality of inmate health care.

6. How will BSCC measure compliance with this revision?

This change will not affect how compliance is measured.

7. Summary of Workgroup Discussion and Intent

The Medical/Mental Health Workgroup agreed that adding telehealth would be an acceptable method to identify and evaluate mentally disordered inmates. While it is preferable to have face-to-face contact with inmates, telehealth provides more options to obtaining appropriate health care.

The Classification and Discipline Workgroup agrees with the telehealth addition.

8. ESC Action/Response

Accept the workgroup’s recommendations.
1. Regulation and Recommended Revision

§ 1053. Administrative Segregation.

Except in Type IV facilities, each facility administrator shall develop written policies and procedures which provide for the administrative segregation of inmates who are determined to be prone to: promote activity or behavior that is criminal in nature or disruptive to facility operations; demonstrate influence over other inmates, including influence to promote or direct action or behavior that is criminal in nature or disruptive to the safety and security of other inmates or facility staff, as well as to the safe operation of the facility; escape; assault, attempted assault, or participation in a conspiracy to assault or harm staff or other inmates or facility staff; disrupt the operations of the jail; or likely to need protection from other inmates, if such administrative segregation is determined to be necessary in order to obtain the objective of protecting the welfare of inmates and staff. Administrative segregation shall consist of separate and secure housing but shall not involve any other deprivation of privileges than is necessary to obtain the objective of protecting the inmates and staff.


2. ESC Notes/Recommendations

The ESC requested the Classification and Discipline Workgroup consider the input.

Rec A

*In-text Additions:* Administrative segregation shall consist of separate and secure housing but shall not involve any other deprivation of privileges, including but not limited to out of cell time, than is necessary to obtain the objective of protecting the inmates and staff. **CDWG opted not to make this change.**

Before assigning any inmate to ad seg, staff will ascertain whether the conduct is the result of a disability. If so, they will attempt to accommodate the inmate in current housing prior to segregation and provide notation of the attempt or its unfeasibility. **CDWG opted not to make this change.**

Rec B

At a minimum, this section should be revised to include the following:

1. Inmates in administrative segregation must be housed in the *least restrictive setting* to achieve the objective of protecting the welfare of inmates and staff. **CDWG opted not to make this change.**

2. Inmates with serious mental illness or developmental disabilities shall be housed in administrative segregation only with the approval of the designated physician or psychiatrist. **CDWG opted not to make this change.**

3. Inmates with serious mental illness or developmental disabilities who are placed in administrative segregation shall have their status reviewed every two weeks by the facility.
manager and designated physician or psychiatrist to determine if they can be safely housed in less restrictive housing units. **CDWG opted not to make this change.**

Reference: 15 CCR §§ 3335(d), 3342, 3343; 28 CFR §§ 35.130, 35.149, 35.152

**Rec C**

*In-text Addition:* Except in Type IV facilities, each facility administrator shall develop written policies and procedures which provide for the administrative segregation of inmates who are determined to be prone to: promote activities or behavior that are criminal in nature or disruptive to facility operations; demonstrate influence over other inmates, including influence to promote or direct action or behavior that are criminal in nature or disruptive to the safety and security of other inmates or facility staff, as well as to the safe operation of the facility; escape; assault, attempted assault, or participation in a conspiracy to assault or harm other inmates or facility staff; **CDWG agreed to accept this change with minor modification.**

Fiscal/Operational Impact: The revision will have an operational impact. The facility administrator will eliminate the direct pressure and influence on the inmate population to promote behavior that is criminal in nature. It will decrease the movement of jail contraband and it will prevent assaults on other inmates and staff.

**Rec D**

Change “Segregation” to “Separation.” The last sentence starting with “Administrative segregation shall consist of . . .” can be removed and should be moved to its own section. **CDWG opted not to make this change.**

**Rec E**

- People should always be housed in the least restrictive setting possible. **CDWG opted not to make this change.**
- People in administrative segregation must be housed in the least restrictive setting to achieve the objective of protecting the welfare of the incarcerated people and staff. **CDWG opted not to make this change.**
- Their status should be reviewed every week, at a minimum, to determine if they can be safely housed in less restrictive housing units. **CDWG opted not to make this change.**
- People with serious mental illness or developmental disabilities shall be housed in administrative segregation only with the approval of the designated physician or psychiatrist. **CDWG opted not to make this change.**

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

The current administrative segregation regulation is broad and brief in discussion of the cases in which an inmate may be placed in administrative segregation. This change provides a more detailed description of behavior and needs that may require placement, and provides clearer parameters when addressing classification.
4. **What is the operational impact that will result from this revision; how will it change operations?**

The facility administrator may eliminate the direct pressure and influence on the inmate population to promote behavior that is criminal in nature. It may decrease the movement of jail contraband and reduce assaults on other inmates and staff.

5. **a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?**

No fiscal impact.

6. **How will BSCC measure compliance with this revision?**

Inspections will include a review of policy and procedures, and classification records.

7. **Summary of Workgroup Discussion and Intent**

The Classification and Discipline Workgroup determined the addition of this language strengthens and clarifies the reasoning for the usage of administrative segregation, and allows agencies to address the significant impacts to jail operations that often result in the need to remove inmates from the general population.

8. **ESC Action/Response**

Accept the workgroup’s recommendations.
1. Regulation and Recommended Revision

§ 1054. Administrative Removal-Type IV Facility.

In Type IV facilities, the facility administrator shall develop written policies and procedures which provide for the administrative removal of an inmate for the safety and well being of the inmate, the staff, the program, the facility, and/or the general public. Such removal shall be subject to review by the facility administrator or designee on the next business day.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

The addition of “or designee” in the review of administrative removal allows for the appropriate designation of a position below the administrator who can act on these occurrences. The administrator him/herself does not need to review each of the removals.

4. What is the operational impact that will result from this revision; how will it change operations?

The addition of “or designee” allows for the appropriate designation of a position below the administrator to review removals.

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

No fiscal impact.

6. How will BSCC measure compliance with this revision?

Inspectors will review policy and procedures, and facility documentation.

7. Summary of Workgroup Discussion and Intent

The Classification and Discipline Workgroup determined the addition of “or designee” was warranted so the facility administrator is not tasked with each review. It is an appropriate delegation to a designee.

8. ESC Action/Response

Accept the workgroup’s recommendations.
1. Regulation and Recommended Revision

§ 1055. Use of Safety Cell.

The safety cell described in Title 24, Part 2, Section 1231.2.5, shall be used to hold only those inmates who display behavior which results in the destruction of property or reveals an intent to cause physical harm to self or others. The facility administrator, in cooperation with the responsible physician, shall develop written policies and procedures governing safety cell use and may delegate authority to place an inmate in a safety cell to a physician.

In no case shall the safety cell be used for punishment or as a substitute for treatment.

An inmate shall be placed in a safety cell only with the approval of the facility manager or designee, or the designated physician or responsible health care staff; continued retention shall be reviewed a minimum of every eight hours. A medical assessment shall be completed within a maximum of 12 hours of placement in the safety cell or at the next daily sick call, whichever is earliest. The inmate shall be medically cleared for continued retention every 24 hours thereafter. The facility manager, designee or responsible health care staff shall obtain a mental health opinion/consultation with responsible health care staff on placement and retention, which shall be secured within 24 hours of placement. Direct visual observation shall be conducted at least twice every thirty minutes. Such observation shall be documented.

Procedures shall be established to assure administration of necessary nutrition and fluids. Inmates shall be allowed to retain sufficient clothing, or be provided with a suitably designed “safety garment,” to provide for their personal privacy unless specific identifiable risks to the inmate’s safety or to the security of the facility are documented.


2. ESC Notes/Recommendations

The ESC requested the Classification and Discipline Workgroup consider the input.

With regards to Recommendation B, give attention to the following:

1. Look at NCCHC standards. MMHWG: There are no NCCHC standards for this issue.
2. “Least restrictive” needs to be defined. MMHWG opted not to use this vague term.
3. Add “or designee” to the facility administrator. CDWG made this change.
4. Rather than “responsible physician,” use “responsible health care staff.” MMHWG used responsible health care staff.
5. Time and qualified staff are significant issues.
6. #2 of this recommendation: 12-hour references are too short, and being taken to a facility for 72-hour treatment is not practical.

Rec A
In-text Addition: (to end of section) Safety cell will only be used if it is the least restrictive manner to prevent physical harm to self or others, or destruction of property. MMHWG opted not to make this change. With the exception of "least restrictive manner" (see comment above), this language is already in the regulation. CDWG concurred; opted not to make change.

Rec B
At a minimum, this section should be revised to include the following:

1. Inmates shall only be held in safety cells after the facility administrator, in cooperation with the responsible physician, reaches the conclusion that no other less restrictive housing is appropriate. Neither MMHWG nor CDWG opted to use this vague term (less restrictive housing).

2. No inmates shall be housed in safety cells for longer than 12 hours at a time. If the facility administrator, in cooperation with the responsible physician, determines that there is no less restrictive housing appropriate after 12 hours, the inmate shall be taken to a facility for 72-hour treatment and evaluation pursuant to Section 5150 of the Welfare and Institutions Code and Section 4011.6 of the Penal Code. Neither MMHWG nor CDWG opted to accept this change and agreed with the ESC that the 12-hour references are too short, and being taken to a facility for 72-hour treatment is not practical.

3. Continued retention shall be reviewed a minimum of every four hours.
   - The MMHWG offers the option of changing to every four hours.
   - The CDWG offers the option of maintaining every eight hours.

4. A medical assessment shall be completed within a maximum of two hours of placement, and the inmate shall be medically cleared by qualified medical staff for continued retention every four hours thereafter. MMHWG nor CDWG opted to make this change.

5. A mental health opinion on placement and retention shall be secured from qualified, licensed mental health staff within two hours of placement. MMHWG nor CDWG opted to make this change.

6. Direct visual observation shall be conducted at least twice every thirty minutes by health trained personnel or health services staff. MMHWG nor CDWG opted to make this change.


Rec C
In regards to the use of a safety cell, Title 15 Section 1055 states, "Direct visual observation shall be conducted at least twice every thirty minutes." This has led to confusion as the terminology can be construed in different ways. I believe the language should be more explanatory, such as "direct visual observation shall be conducted at least once every fifteen minutes. Whenever possible these checks will occur more frequently." MMHWG deferred to CDWG. CDWG opted not to make this change.
Operational/Fiscal Impact for Rec #3 and #4: Redesign/repurpose of physical plant to accommodate group housing, and associated cost.

**Rec D**
- Group housing of suicidal inmates when possible based on level and classification. Isolation only when absolutely necessary.
- Mental Health professionals complete an objective assessment of suicide risk level to determine which inmate necessitate isolation in a safety cell, and which may be housed in a group setting for a better outcome. Neither MMHWG nor CDWG opted to make these changes.

**Rec E**
Last sentence- Clarify in regulation intent that all inmates are seen by mental health, not just if they’re there for more than 24 hours. MMHWG nor CDWG opted to make this change.

MMHWG: Regulation calls for mental health opinion. This may be obtained over the telephone.

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

CDWG: The addition of “or designee” in the approval of safety cell placement by the facility manager allows for the appropriate designation of a position below the manager who can act on these events. Whether or not an agency utilizes the “watch commander” (deleted) terminology, the broader “designee” term captures the intent of the position designated by the manager, or next in the chain of command.

MMHWG: The use of a designated physician in this regulation is overly restrictive. "Designated physician" was deleted and "responsible health care staff" was added because it isn't necessary to have a physician approve placement and continued retention. Responsible health care staff as defined by the new definition in Section 1006, would be appropriately qualified to place inmates in a safety cell and approve continued retention.

Inmates may be placed in safety cells due to behavior which results in the destruction of property or reveals an intent to cause physical harm to self. In these cells, inmates could 1) harm themselves and require health care interventions or 2) their behavior could be masking a medical condition.

Changing the timeframe for continued retention from eight hours to four hours will improve inmate safety.

Changing the timeframe that a mental health opinion on placement and retention is secured from 24 to 12 hours will improve inmate safety.

4. What is the operational impact that will result from this revision; how will it change operations?
CDWG: The addition of “or designee” allows for the appropriate designation of a position below the facility manager, or next in command, to approve safety cell placements.

MMHWG: The use of a designated physician in this regulation is overly restrictive. "Responsible health care staff," as newly defined in these regulations (Section 1006), will provide flexibility by opening up access and services to inmates by utilizing available staff within their scope of practice.

Changing the timeframe for continued retention from eight hours to four hours will increase the oversight that the facility manager, the facility watch commander, or responsible health care staff will have with inmates in safety cells.

Changing the timeframe for the mental health opinion from 24 hours to 12 hours will require increased involvement from health care staff.

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

CDWG: No fiscal impact associated with utilizing “or designee.”

MMHWG: The use of “responsible health care staff” may reduce costs because it gives the health authority more options to hire and use staff at varying levels within the appropriate scope of practice.

Depending on who is approving the continued retention, changing the timeframe for continued retention from eight hours to four hours should not increase costs. For example, a watch commander will be on duty in the facility. However, if responsible health care staff are required by policies and procedures to approve continued retention, there could be an increased cost. This is justified by the improved quality of inmate health care.

Changing the timeframe for the mental health opinion from 24 hours to 12 hours will increase costs because the involvement of the health care staff has increased. The increased costs are justified by the improved quality of inmate health care.

6. How will BSCC measure compliance with this revision?

The inspector will review custody policies and procedures and documentation for the use of the safety cell.

7. Summary of Workgroup Discussion and Intent

CDWG: The Classification and Discipline Workgroup discussed the change of the term “watch commander” to “or designee” to capture the broad use of the position which may be designated by the facility manager to approve safety cell placements.

The group discussed the Medical/Mental Health Workgroup’s proposed changes to timeframes associated with the facility manager or responsible health care staff’s review of continued
retention, and the mental health opinion on placement and retention, and believe further consideration is warranted due to the impact of creating a minimum standard that is too restrictive given staffing and the competing facility operational demands.

MMHWG: The Medical/Mental Health Workgroup felt that amending this regulation by changing "designated physician" to "responsible health care staff" will provide flexibility by opening up access and services to inmates by utilizing available staff within their scope of practice and will add clarity and consistency to these regulations. "Responsible health care staff" as defined by the new definition in Section 1006, would be appropriately qualified to place inmates in a safety cell and approve continued retention.

The group discussed that with the placement of inmates in safety cells, inmates could 1) harm themselves and require health care interventions or 2) their behavior could be masking a medical condition. For these reasons, the group agreed that continued retention should be acquired sooner than eight hours from the time of placement and agreed to the four hour timeframe. They also agreed that a mental health opinion (that may be obtained over the telephone) should be acquired sooner than 24 hours and agreed to the 12 hour timeframe.

8. ESC Action/Response

Accept the Classification and Discipline Workgroup’s recommendation to add “or designee”, and accept the Medical/Mental Health Workgroup’s recommendations for the remaining language, including the reduction in number of hours associated with reviewing continued retention and with obtaining mental health’s involvement.
1. Regulation and Recommended Revision

§ 1056. Use of Sobering Cell.

The sobering cell described in Title 24, Part 2, Section 1231.2.4, shall be used for the holding of inmates who are a threat to their own safety or the safety of others due to their state of intoxication and pursuant to written policies and procedures developed by the facility administrator. Such inmates shall be removed from the sobering cell as they are able to continue in the processing. In no case shall an inmate remain in a sobering cell over six hours without an evaluation by a medical staff person or an evaluation by custody staff, pursuant to written medical procedures in accordance with section 1213 of these regulations, to determine whether the prisoner has an urgent medical problem. At 12 hours from the time of placement, all inmates will receive an evaluation by responsible health care staff. Intermittent direct visual observation of inmates held in the sobering cell shall be conducted no less than every half hour. Such observation shall be documented.


2. ESC Notes/Recommendations

The ESC requested the Classification and Discipline Workgroup consider the input.

Additionally, with regards to Recommendation B, give attention to pertinent portions of the ESC comments in 1055 Use of Safety Cell.

Rec A
In-text Addition: Such inmates shall be removed from the sobering cell as soon as they are able to continue in the processing. MMHWG and CDWG opted not to make this change due to redundancy.


Rec B
At a minimum, this section should be revised to include the following:

1. Inmates placed in sobering cells shall be immediately evaluated by qualified medical staff. MMHWG opted not to make this change.

2. Inmates suffering severe or progressive intoxication (overdose) or severe alcohol/sedative withdrawal shall be transferred immediately to an appropriate, licensed care facility. MMHWG opted not to make this change because the detoxification process is addressed in Section 1213. Additionally, a new definition was added to describe “medical detoxification.”

3. Inmates placed in sobering cells shall be appropriately monitored by qualified medical staff until they are removed. MMHWG opted not to make this change.
4. Direct visual observation shall be conducted no less that twice every half hour by medical staff or correctional personnel trained in recognizing the signs and symptoms of intoxication and withdrawal.
   - MMHWG offered the option of changing to twice every half hour; but opted not to add language regarding training as it is already required by regulation.
   - CDWG offered the option of maintaining every half hour.

Rec C
Clarity the time frame of the safety checks. For example a sobering cell safety check shall be performed "no less than every half hour." This wording would not allow for random checks ten to twenty minutes after the initial observation. The language has been interpreted to mean within the 30 minute period or at the 31 minute. CDWG opted not to make this change.

Rec D
Clarify safety checks: Intermittent direct visual observation of inmates held in the sobering cell shall be conducted at least once every half hour. CDWG opted not to make this change.

Rec E
Such inmates shall be removed from the sobering cell as they are able to continue in the process. This should be modified to say they shall be removed when they are “no longer a threat to their own safety or the safety of others.” MMHWG nor CDWG opted to make this change.

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

Due to their level of intoxication, inmates placed in sobering cells could be prone to medical situations that require interventions for their safety. Increasing the involvement of responsible health care staff would address this concern.

4. What is the operational impact that will result from this revision; how will it change operations?

Adding "At 12 hours from the time of placement all inmates will receive an evaluation by responsible health care staff" will require increased involvement by health care staff.

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

Adding "At 12 hours from the time of placement all inmates will receive an evaluation by responsible health care staff" will require increased involvement of health care staff, thereby increasing health care costs. Any increased costs are justified by the improved quality of inmate health care.

6. How will BSCC measure compliance with this revision?
The inspector will review custody policies and procedures and documentation for the use of the safety cell.

**7. Summary of Workgroup Discussion and Intent**

**MMHWG:** The Medical/Mental Health Workgroup agreed that due to their level of intoxication, inmates placed in sobering cells could be prone to medical situations that require interventions for their safety. The existing regulation requires that "In no case shall an inmate remain in a sobering cell over six hours without an evaluation by a medical staff person or an evaluation by custody staff, pursuant to written medical procedures …" The group felt that this did not go far enough in assuring that the intoxicated inmate in the sobering cell for over six hours was being appropriately monitored.

The group agreed to amend this regulation by adding "At 12 hours from the time of placement all inmates will receive an evaluation by responsible health care staff." This will require increased involvement by health care staff.

Additionally, they agreed to increase the documented safety checks from every half hour to twice every half hour. Both of these will require custody or responsible health care staff to make more frequent documented observations of inmates in sobering cells.

**CDWG:** The Classification and Discipline Workgroup discussed the changes proposed by the Medical/Mental Health Workgroup.

The group agreed that increasing the number of safety checks of inmates in sobering cells warrants further discussion due to the impact on staffing and the competing facility operational demands.

**8. ESC Action/Response**

Accept the workgroups’ recommendation to add a health care evaluation at 12 hours; however, the ESC chose to maintain the requirement of direct visual observations at no less than every half hour. The Medical/Mental Health Workgroup had proposed the following change:

- Intermittent direct visual observation of inmates held in the sobering cell shall be conducted no less than twice every half hour.
1. Regulation and Recommended Revision

§ 1057. Developmentally Disabled Inmates.

The facility administrator, in cooperation with the responsible physician, shall develop written policies and procedures for the identification and evaluation, appropriate classification and housing, protection, and nondiscrimination of all developmentally disabled inmates.

The health authority or designee shall contact the regional center on any inmate suspected or confirmed to be developmentally disabled for the purposes of diagnosis and/or treatment within 24 hours of such determination, excluding holidays and weekends.


2. ESC Notes/Recommendations

At a minimum, revise this section to include the following language:

1. “The facility administrator, in cooperation with the responsible physician, shall develop written policies and procedures for the identification and evaluation, appropriate classification and housing, protection, and nondiscrimination of all developmentally disabled inmates.”


3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

As defined in Section 1006, “developmentally disabled” means those persons who have a disability which originates before an individual attains age 18, continues, or can be expected to continue indefinitely, and constitutes a substantial disability for that individual. This term includes mental retardation, cerebral palsy, epilepsy, and autism, as well as disabling conditions found to be closely related to mental retardation or to require treatment similar to that required for mentally retarded individuals.

Due to their disability, developmentally disabled inmates could be vulnerable in a jail setting. The Medical/Mental Health Workgroup agreed that adding "appropriate classification and housing, protection, and nondiscrimination" clarifies the intent of this regulation and will emphasize the special considerations these inmates require.

4. What is the operational impact that will result from this revision; how will it change operations?

There should be no operational impact as these inmates already receive special considerations.

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?
While the Medical/Mental Health Workgroup felt that the amendments to this regulation were clarifying in nature, by definition, developmentally disabled inmates include those with cerebral palsy. There could be significant costs related to remodeling an existing facility to accommodate those with cerebral palsy. Any costs associated with improving physical plant accommodations for those inmates are justified by increased inmate safety.

6. **How will BSCC measure compliance with this revision?**

The inspector will review custody policies and procedures.

7. **Summary of Workgroup Discussion and Intent**

The Medical/Mental Health Workgroup agreed that due to their disability, developmentally disabled inmates could be vulnerable in a jail setting. The group agreed that adding "appropriate classification and housing, protection, and nondiscrimination" will emphasize the special considerations these inmates require.

The Classification and Discipline Workgroup concurs with the changes.

8. **ESC Action/Response**

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1058. Use of Restraint Devices.

The facility administrator, in cooperation with the responsible physician, shall develop written policies and procedures for the use of restraint devices and may delegate authority to place an inmate in restraints to a physician responsible health care staff. In addition to the areas specifically outlined in this regulation, at a minimum, the policy shall address the following areas: acceptable restraint devices; signs or symptoms which should result in immediate medical/mental health referral; availability of cardiopulmonary resuscitation equipment; protective housing of restrained persons; provision for hydration and sanitation needs; and exercising of extremities.

In no case shall restraints be used for punishment or as a substitute for treatment.

Restraint devices shall only be used on inmates who display behavior which results in the destruction of property or reveal an intent to cause physical harm to self or others. Restraint devices include any devices which immobilize an inmate’s extremities and/or prevent the inmate from being ambulatory. Physical restraints should be utilized only when it appears less restrictive alternatives would be ineffective in controlling the disordered behavior.

Inmates shall be placed in restraints only with the approval of the facility manager, the facility watch commander, or the designated physician responsible health care staff; continued retention shall be reviewed a minimum of every two hours. A medical opinion on placement and retention shall be secured as soon as possible within one hour, but no later than four hours from the time of placement. A medical assessment shall be completed within four hours of placement. The inmate shall be medically cleared for continued retention at least every six hours thereafter. A mental health consultation shall be secured as soon as possible, but in no case longer than eight hours from the time of placement, to assess the need for mental health treatment. If the facility manager, or designee, in consultation with responsible health care staff determines that an inmate cannot be safely removed from restraints after eight hours, the inmate shall be taken to a medical facility for further evaluation.

Direct visual observation shall be conducted at least twice every thirty minutes to ensure that the restraints are properly employed, and to ensure the safety and well-being of the inmate. Such observation shall be documented. While in restraint devices all inmates shall be housed alone or in a specified housing area for restrained inmates which makes provisions to protect the inmate from abuse. In no case shall restraints be used for discipline, or as a substitute for treatment.

The provisions of this section do not apply to the use of handcuffs, shackles or other restraint devices when used to restrain inmates for security reasons.


2. ESC Notes/Recommendations

The ESC requested the Classification and Discipline Workgroup consider the input.
**Rec A**

At a minimum, this section should be revised to include the following:

1. In no case shall restraints be used for punishment or as a substitute for treatment.  
   **MMHWG and CDWG agreed with this change.**
2. Health care staff shall be notified of the use of restraints at the time of placement.  
   **MMHWG determined that notification (or medical option on placement and retention) must take place w/in one hour. CDWG concurred.**
3. A medical opinion on placement and retention shall be secured as soon as possible, but no later than one hour from the time of placement.  
   **MMHWG and CDWG agreed with this change.**
4. The inmate shall be medically cleared for continued retention at least every hour thereafter, and shall not be held in restraints longer than four hours from the time of placement.  
   **MMHWG determined that inmates shall not be held beyond eight hours. CDWG concurs.**
5. A mental health consultation shall be secured as soon as possible, but in no case longer than two hours from the time of placement, to assess the need for mental health treatment.  
   **MMHWG and CDWG opted not to make this change.**
6. If the facility manager, in consultation with the responsible physician, determines that an inmate cannot be safely removed from restraints after four hours, the inmate shall be taken to a facility for 72-hour treatment and evaluation pursuant to Section 5150 of the Welfare and Institutions Code and Section 4011.6 of the Penal Code.  
   **MMHWG agreed to transfer to medical facility after eight hours. CDWG concurred.**
7. Direct visual observation shall be conducted by licensed health services staff or licensed health-trained personnel every 15 minutes.  
   **MMHWG and CDWG opted not to make this change.**


**Rec B**

*In-Text Changes & Additions:* Physical restraints should be utilized only when it appears less restrictive alternatives would be ineffective in controlling the disordered behavior. The attempted use and/or the unfeasibility of less restricted alternatives will be documented.

- The MMHWG offers the option of agreeing to the first change by eliminating “physical.”
- The CDWG offers the option of maintaining “physical restraints.”

The inmate shall be medically cleared for continued retention at least every six two hours thereafter. A mental health consultation shall be secured as soon as possible, but in no case longer than eight two hours from the time of placement, to assess the need for mental health treatment.  
**MMHWG and CDWG opted not to make this change.**

**Rec C**
After “the following areas,” insert “restraint during pregnancy”. MMHWG agreed to add a regulation addressing restraints and pregnant inmates (Sections 1058.5 and 1122.5). CDWG concurred.

Rec D
- In no case shall restraints be used for punishment or as a substitute for treatment. MMHWG and CDWG agree with this change.
- Health care staff shall be notified of the use of restraints at the time of placement. MMHWG determined that notification (or medical opinion on placement and retention) must take place w/in one hour. CDWG concurred.
- A medical opinion on placement and retention shall be secured as soon as possible, but no later than one hour from the time of placement. MMHWG and CDWG agree with this change.
- The person shall be medically cleared for continued retention at least every hour thereafter, and shall not be held in restraints longer than four hours from the time of placement. MMHWG determined that inmates shall not be held beyond eight hours. CDWG concurred.
- A mental health consultation shall be secured as soon as possible, but in no case longer than two hours from the time of placement, to assess the need for mental health treatment. MMHWG and CDWG opted not to make this change.
- If the facility manager, in consultation with the responsible physician, determines that a person cannot be safely removed from restraints after four hours, the person shall be taken to a facility for 72-hour treatment and evaluation pursuant to Section 5150 of the Welfare and Institutions Code and Section 4011.6 of the Penal Code. MMHWG agreed to transfer to medical facility after eight hours. CDWG concurred.
- Direct visual observation shall be conducted by licensed health services staff or licensed health-trained personnel every 15 minutes. MMHWG opted not to make this change.

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

The use of a physician in this regulation is overly restrictive. In the first paragraph, "physician" was deleted and "responsible health care staff" was added because it isn't necessary to have a physician approve placement in restraints. Responsible health care staff as defined by the new definition in Section 1006, would be appropriately qualified to place inmates in restraints.

To be consistent with Section 1055 Use of Safety Cell and to clarify the intent of this regulation, the following sentence was added as a second paragraph: "In no case shall restraints be used for punishment or as a substitute for treatment." To eliminate redundancy, the last sentence in this regulation was deleted.

The use of a designated physician in this regulation is overly restrictive. In the now fourth paragraph, "designated physician" was deleted and "responsible health care staff" was added.
because it isn't necessary to have a physician approve continued retention. Responsible health care staff as defined by the new definition in Section 1006, would be appropriately qualified to approve continued retention.

Inmates may be placed in restraint devices due to behavior which results in the destruction of property or reveals an intent to cause physical harm to self. In restraints, inmates could 1) harm themselves and require health care interventions or 2) their behavior could be masking a medical condition. Increasing the involvement of facility management/responsible health care staff would address this concern.

The following amendments were made in the fourth paragraph: the timeframe for approval for continued retention was changed from a minimum of every two hours to every hour; the timeframe to secure a medical opinion on placement and retention was changed from "as soon as possible, but no later than four hours" to "within one hour;" a "medical assessment shall be completed within four hours of placement" was added.

Also in the fourth paragraph, the following was added: "If the facility manager, in consultation with responsible health care staff determines that an inmate cannot be safely removed from restraints after eight hours, the inmate shall be taken to a medical facility for further evaluation."

The addition of "or designee" in relation to the safe removal of restraints or further action by the facility manager, allows for the appropriate designation of a position below the manager, or next in command, who can act on these events.

4. **What is the operational impact that will result from this revision; how will it change operations?**

In the first and now fourth paragraph, the use of a physician in this regulation is overly restrictive. "Responsible health care staff," as newly defined in these regulations (Section 1006), will provide flexibility by utilizing qualified available staff within their scope of practice.

Adding: "In no case shall restraints be used for punishment or as a substitute for treatment" will not affect jail operations.

Changing the timeframe for approval for continued retention from a minimum of every two hours to every hour will increase facility management/responsible health care staff involvement with inmates in restraints. Changing the timeframe that a medical opinion on placement and retention is secured from "as soon as possible, but no later than four hours" to "within one hour" and adding that a "medical assessment shall be completed within four hours of placement" will require increased involvement from health care staff.

Adding the language that "if the facility manager, in consultation with responsible health care staff determines that an inmate cannot be safely removed from restraints after eight hours, the inmate shall be taken to a medical facility for further evaluation," will require increased coordination between the facility manager and responsible health care staff. It may also require appropriate staff to drive the inmate to a medical facility.
Deleting "In no case shall restraints be used for discipline, or as a substitute for treatment" will not have an operational impact.

The addition of “or designee” allows for the appropriate designation of a position below the facility manager, or next in command, to approve the safe removal of restraints or taking further action.

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

Adding: "In no case shall restraints be used for punishment or as a substitute for treatment" will not result in a fiscal impact.

The use of "responsible health care staff" may reduce costs because it gives the health authority more options to hire and use staff at varying levels within the appropriate scope of practice.

6. How will BSCC measure compliance with this revision?

The inspector will review custody policies and procedures and documentation for the use of the safety cell.

7. Summary of Workgroup Discussion and Intent

MMHWG: The Medical/Mental Health Workgroup felt that amending this regulation by changing "physician" or "designated physician" to "responsible health care staff" will provide flexibility by opening up access and services to inmates by utilizing available staff within their scope of practice and will add clarity and consistency to these regulations. "Responsible health care staff” as defined by the new definition in Section 1006, would be appropriately qualified to place inmates in a safety cell and approve continued retention.
The Medical/Mental Health Workgroup agreed that adding "In no case shall restraints be used for punishment or as a substitute for treatment" was appropriate and consistent with Section 1055 Use of Safety Cell. They also agreed to delete the last sentence of this regulation because it was redundant.

The group agreed that deleting "Physical" before "restraints" in the second paragraph and changing "designated physician" to "responsible health care staff" brought consistency to this regulation.

The group also agreed that changing the timeframe for continued retention from two hours to one hour, changing the timeframe for the medical opinion to within one hour of the time of placement and adding that a medical assessment shall be completed within four hours of placement will improve inmate safety and the quality of inmate health care.

Finally, the workgroup agreed that adding the language that "if the facility manager, in consultation with responsible health care staff determines that an inmate cannot be safely removed from restraints after eight hours, the inmate shall be taken to a medical facility for further evaluation," will assure that the inmate will receive appropriate health care.

CDWG: The addition of “or designee” allows for the appropriate designation of a position below the facility manager, or next in command, to approve the safe removal of restraints or taking further action.

Further, maintaining the connection of “physical” to “restraints” (now fourth paragraph) was considered an important clarification regarding the type of restraints intended as the subject of this regulation.

8. ESC Action/Response

Accept the workgroups’ recommendations; however, maintain the “physical restraints” language as proposed by the Classification and Discipline Workgroup. The Medical/Mental Health Workgroup had proposed the following change to the third paragraph:

- Physical restraints should be utilized only when it appears less restrictive alternatives would be ineffective in controlling the disordered behavior.
1. Regulation and Recommended Revision

§ 1058.5. Restraints and Pregnant Inmates.

The facility administrator, in cooperation with the responsible physician, shall develop written policies and procedures for the use of restraint devices on pregnant inmates. In accordance with Penal Code 3407 the policy shall include reference to the following:

1) An inmate known to be pregnant or in recovery after delivery shall not be restrained by the use of leg irons, waist chains, or handcuffs behind the body.
2) A pregnant inmate in labor, during delivery, or in recovery after delivery, shall not be restrained by the wrists, ankles, or both, unless deemed necessary for the safety and security of the inmate, the staff, or the public.
3) Restraints shall be removed when a professional who is currently responsible for the medical care of a pregnant inmate during a medical emergency, labor, delivery, or recovery after delivery determines that the removal of restraints is medically necessary.
4) Upon confirmation of an inmate's pregnancy, she shall be advised, orally or in writing, of the standards and policies governing pregnant inmates.

NOTE: Authority cited: Section 6030, Penal Code. Reference: Sections 3407 and 6030, Penal Code

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

Current regulations do not contain statutory language pertaining to restraints and pregnant inmates. This new regulation assures that facility operators would abide by those requirements.

4. What is the operational impact that will result from this revision; how will it change operations?

Facility operations should not be changed by this amendment, as this law (PC 3407) was enacted in 2013.

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

There will be no fiscal impact.

6. How will BSCC measure compliance with this revision?

Inspectors will review policies and procedures for compliance.

7. Summary of Workgroup Discussion and Intent
The Medical/Mental Health Workgroup agreed to add a new regulation containing the statutory language from Penal Code Section 3407 pertaining to pregnant inmates.

The Classification and Discipline Workgroup concurs with the addition of this new regulation.

8. **ESC Action/Response**

Accept the workgroups’ recommendations.
1. Regulation and Recommended Revision

§ 1059. DNA Collection, Use of Force.

(a) Pursuant to Penal Code Section 298.1, authorized law enforcement, custodial, or corrections personnel including peace officers, may employ reasonable force to collect blood specimens, saliva samples, or thumb or palm print impressions from individuals who are required to provide such samples, specimens or impressions pursuant to Penal Code Section 296 and who refuse following written or oral request.

(1) For the purpose of this regulation, the “use of reasonable force” shall be defined as the force that an objective, trained and competent correctional employee, faced with similar facts and circumstances, would consider necessary and reasonable to gain compliance with this regulation.

(2) The use of reasonable force shall be preceded by efforts to secure voluntary compliance. Efforts to secure voluntary compliance shall be documented and include an advisement of the legal obligation to provide the requisite specimen, sample or impression and the consequences of refusal.

(b) The force shall not be used without the prior written authorization of the facility watch commander on duty. The authorization shall include information that reflects the fact that the offender was asked to provide the requisite specimen, sample, or impression and refused.

(c) If the use of reasonable force includes a cell extraction, the extraction shall be videotaped, including audio. Video shall be directed at the cell extraction event. The videotape shall be retained by the agency for the length of time required by statute. Notwithstanding the use of the video as evidence in a criminal proceeding, the tape shall be retained administratively.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Classification and Discipline Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?
6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1080. Rules and Disciplinary Penalties.

Wherever discipline is administered, each facility administrator shall establish written rules and disciplinary penalties to guide inmate conduct. Such rules and disciplinary penalties shall be stated simply and affirmatively, and posted conspicuously in housing units and the booking area or issued to each inmate upon booking. For those inmates who are illiterate or unable to read English, and for persons with disabilities, provision shall be made for the jail staff to instruct them verbally or provide them with material in an understandable form regarding jail rules and disciplinary procedures and penalties.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Classification and Discipline Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1081. Plan for Inmate Discipline.

Each facility administrator shall develop written policies and procedures for inmate discipline which shall include, but not be limited to, the following elements:

(a) Designation of one or more subordinates who will act on all formal charges of violation of facility rules by inmates, and who shall have investigative and punitive powers. Staff so designated shall not participate in disciplinary review if they are involved in the charges.

(b) Minor acts of non-conformance or minor violations of institution rules may be handled informally by any staff member by counseling or advising the inmate of expected conduct, assignment to an extra work detail, or removal from a work assignment without loss of work time credit. In addition, temporary loss of privileges such as, but not limited to, access to television, telephones, or commissary, or lockdown for less than 24 hours, may be considered minor discipline if such acts are accompanied by written documentation, and a policy of review and appeal to a supervisor.

(c) Major violations or repetitive minor acts of non-conformance or repetitive minor violations of institutional rules shall be reported in writing by the staff member observing the act and submitted to the disciplinary officer. The inmate shall be informed of the charge(s) in writing. The consequences of a major violation may include, but are not limited to, loss of good time/work time, placement in disciplinary isolation, disciplinary isolation diet, or loss of privileges mandated by regulations. In addition:

(1) Charges pending against an inmate shall be acted on no sooner than 24 hours after the report has been submitted to the disciplinary officer and the inmate has been informed of the charges in writing. A violation(s) shall be acted on no later than 72 hours after an inmate has been informed of the charge(s) in writing. The inmate may waive the 24-hour limitation. The hearing may be postponed or continued for a reasonable time through a written waiver by the inmate or for good cause.

(2) The inmate shall be permitted to appear on his/her own behalf at the time of hearing.

(3) Subsequent to final disposition of disciplinary charges by the disciplinary officer, the charges and the action taken shall be reviewed by the facility manager or designee.

(4) The inmate shall be advised of the action taken by the disciplinary officer by a copy of the record required to be kept by Penal Code Section 4019.5.

(d) Nothing in this section precludes a facility administrator from administratively segregating any inmate from the general population or program for reasons of personal, mental, or physical health, or under any circumstance in which the safety of the inmates, staff, program, or community is endangered, pending disciplinary action or a review as required by Section 1054 of these regulations.

Each facility administrator shall develop written policies and procedures for inmate discipline. The plan shall include, but not be limited to, the following elements:
(a) Temporary Loss of Privileges: For minor acts of non-conformance or minor violations of facility rules, staff may impose a temporary loss of privileges, such as access to television, telephones, commissary, or lockdown for less than 24 hours, provided there is written documentation and supervisory approval.

(b) Punitive Actions: Major violations of facility rules or repetitive minor acts of non-conformance or repetitive minor violations of facility rules shall be reported in writing by the staff member observing the act and submitted to the disciplinary officer. The consequences of such violations may include, but are not limited to:

1. Loss of good time/work time.
2. Placement in disciplinary separation.
3. Disciplinary separation diet.
4. Loss of privileges mandated by regulations.

A staff member with investigative and punitive authority shall be designated as a disciplinary officer to impose such consequences. Staff shall not participate in disciplinary review if they are involved in the charges.

Such charges pending against an inmate shall be acted on with the following provisions and within specified timeframes:

1. A copy of the report, and/or a separate written notice of the violation(s), shall be provided to the inmate.
2. Unless declined by the inmate, a hearing shall be provided no sooner than 24 hours after the report has been submitted to the disciplinary officer and the inmate has been informed of the charges in writing. The hearing may be postponed or continued for a reasonable time through a written waiver by the inmate, or for good cause.
3. The inmate shall be permitted to appear on his/her own behalf at the time of hearing and present witnesses and documentary evidence. The inmate shall have access to staff or inmate assistance when the inmate is illiterate or the issues are complex.
4. A charge(s) shall be acted on no later than 72 hours after an inmate has been informed of the charge(s) in writing.
5. Subsequent to final disposition of disciplinary charges by the disciplinary officer, the charges and the action taken shall be reviewed by the facility manager or designee.
6. The inmate shall be advised in a written statement by the fact-finders about the evidence relied on and the reasons for the disciplinary action. A copy of the record shall be kept pursuant to Penal Code Section 4019.5.
7. There shall be a policy of review and appeal to a supervisor on all disciplinary action.

(c) Nothing in this section precludes a facility administrator from administratively segregating any inmate from the general population or program for reasons of personal, mental, or physical health, or under any circumstance in which the safety of the inmates, staff, program, or community is endangered, pending disciplinary action or a review as required by Section 1053 of these regulations.

(d) Nothing in this section precludes the imposition of conditions or restrictions that reasonably relate to a legitimate, non-punitive administrative purpose.

NOTE: Authority cited: Sections 6024 and 6030, Penal Code. Reference: Sections 4019.5 and 6030, Penal Code.

2. ESC Notes/Recommendations

The ESC requested the Classification and Discipline Workgroup consider the input.

The ESC requests that BSCC staff develop a proposed revision to clarify the intent of the regulation and present to the workgroup for consideration.

Rec A
Add in section: For inmates with disabilities, the plan will include a policy for review by the inmate’s treatment team to determine if the violation was related to the inmate’s disability. If the violation was related to a disability, the team will determine if there is a reasonable accommodation that could have prevented the violation. If there is, discipline will not be administered until there is a violation with the accommodation. CDWG opted not to make this change.

Rec B
At a minimum, this section should be revised to include the following:

1. It should make clear that all inmates charged with major violations or repetitive minor violations of institutional rules shall be provided with a hearing before final disposition of the disciplinary charges. CDWG accepted; clarity has been provided.

2. Inmates with pending charges that are complex shall be provided with counsel-substitute to assist them with the hearing. CDWG opted not to make this change.

3. Inmates with mental illness, developmental disabilities, or who are illiterate shall be provided with counsel-substitute in all hearings. CDWG opted not to make this change.

4. Inmates shall have the opportunity to present witnesses and documentary evidence during their hearings. CDWG accepted this change.

5. Inmates with disabilities shall be provided with notice of their charges in accessible formats, and receive auxiliary aids and assistive devices as needed during their hearings. CDWG opted not to make this change.

Rec C
The direction for the disciplinary hearing process may need to be reviewed. 1081 discusses the inmate's ability to appear on their own behalf during the hearing. However, *Wolff v. McDonnell* 418 U.S. 539 (1974) allows for the inmate to be able to call witnesses and present evidence. CDWG accepted this change.

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

The regulation was reordered to provide clarity and thereby address prior confusion.

In order to be consistent with the definition title change in Section 1006 Definitions, from “disciplinary isolation” to “disciplinary separation”, the same change is carried into this regulation in (b) Punitive Actions 2. and 3. The change to the definition title is done for the purpose of more closely defining the condition of confinement.

Changes to (b) 3 regarding the hearing, (b) 6 regarding a written statement, and (d) regarding the imposition of conditions or restrictions, reflect greater consistency with case law.

Reference to Section 1054 in (c) has been changed due to this incorrect reference. It has been corrected to Section 1053.

4. What is the operational impact that will result from this revision; how will it change operations?

The regulation reads more clearly and is therefore easier to interpret.

The regulation is now more consistent with case law and will aid in operations accordingly.

There are further requirements in the hearing process due to changes – allowing inmate’s witnesses and documentary evidence at a hearing, and allowing the inmate to have assistance at a hearing.

Correctly referencing Section 1053 clarifies any confusion that may exist by the previously incorrect reference to Section 1054.

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

No fiscal impact.

6. How will BSCC measure compliance with this revision?

Inspectors will review policy and procedures, as well as discipline documentation.
7. **Summary of Workgroup Discussion and Intent**

At the request of the Executive Steering Committee, BSCC staff drafted an initial edit to Section 1081 to clarify the intent of this regulation. The Classification and Discipline Workgroup reviewed the draft rewrite and further edited where they determined supervisory involvement was needed, and also where they drew consistencies with case law in the hearing process – Wolff v. McDonnell (1974). Subsequently BSCC staff provided further edits for consideration which drew increased consistencies with additional case law – Bell v. Wolfish (1979); the workgroup reviewed and accepted these additional edits.

8. **ESC Action/Response**

Accept the workgroup’s recommendation; however, modify (b) Punitive Actions 2. and 3. to change “disciplinary isolation” to “disciplinary separation” to be consistent with the change to the definition title in Section 1006 where this language change was already accepted.
1. Regulation and Recommended Revision

§ 1082. Forms of Discipline.

The degree of punitive actions taken by the disciplinary officer shall be directly related to the severity of the rule infraction. Acceptable forms of discipline shall consist of, but not be limited to, the following:

(a) Loss of privileges.
(b) Extra work detail.
(c) Short term lockdown for less than 24 hours.
(d) Removal from work details.
(e) Forfeiture of “good time” credits earned under Penal Code Section 4019.
(f) Forfeiture of “work time” credits earned under Penal Code Section 4019.
(g) Disciplinary isolation separation.
(h) Disciplinary isolation separation diet.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

In order to be consistent with the definition title change in Section 1006 Definitions, from “disciplinary isolation” to “disciplinary separation”, the same change is carried into this regulation. The change to the definition title was done for the purpose of more closely defining the condition of confinement.

4. What is the operational impact that will result from this revision; how will it change operations?

There is no operational impact.

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

There is no fiscal impact.

6. How will BSCC measure compliance with this revision?

These changes will not affect how compliance is measured.

7. Summary of Workgroup Discussion and Intent
No amendments were made by the Classification and Discipline Workgroup.

8. ESC Action/Response

Modify the workgroup’s recommendation and change “disciplinary isolation” to read “disciplinary separation” to be consistent with the change to the definition title in Section 1006 Definitions.
1. Regulation and Recommended Revision

§ 1083. Limitations on Disciplinary Actions.

The Penal Code and the State Constitution expressly prohibit all cruel and unusual punishment. Additionally, there shall be the following limitations:

(a) If an inmate is on disciplinary isolation separation status for 30 consecutive days there shall be a review by the facility manager before the disciplinary isolation separation status is continued. This review shall include a consultation with health care staff. Such reviews shall continue at least every fifteen days thereafter until the disciplinary status has ended. This review shall be documented.

(b) The disciplinary isolation separation cells or cell shall have the minimum furnishings and space specified in Title 24, Part 2, 1231.2.6 and 2.7. Occupants shall be issued clothing and bedding as specified in Articles 13 and 14 of these regulations and shall not be deprived of them through any portion of the day except that those inmates who engage in the destruction of bedding or clothing may be deprived of such articles. The decision to deprive inmates of such articles of clothing and bedding shall be reviewed by the facility manager or designee during each 24 hour period.

(c) Penal Code Section 4019.5 expressly prohibits the delegation of authority to any inmate or group of inmates to exercise the right of punishment over any other inmate or group of inmates.

(d) In no case shall a safety cell, as specified in Title 24, Part 2, 1231.2.5, or any restraint device be used for disciplinary purposes.

(e) No inmate may be deprived of the implements necessary to maintain an acceptable level of personal hygiene as specified in Section 1265 of these regulations.

(f) Food shall not be withheld as a disciplinary measure.

(g) The disciplinary isolation separation diet described in section 1247 of these regulations shall only be utilized for major violations of institutional rules.

(1) In addition to the provisions of Section 1247, the facility manager shall approve the initial placement on the disciplinary isolation separation diet and ensure that medical staff is notified.

(2) In consultation with medical care staff, the facility manager shall approve any continuation on that diet every 72 hours after the initial placement.

(h) Correspondence privileges shall not be withheld except in cases where the inmate has violated correspondence regulations, in which case correspondence may be suspended for no longer than 72 hours, without the review and approval of the facility manager.

(i) In no case shall access to courts and legal counsel be suspended as a disciplinary measure.


2. ESC Notes/Recommendations

The ESC requested the Classification and Discipline Workgroup consider the input.
**Rec A**
At a minimum, this section should be revised to include the following:

1. Inmates with serious mental illness or developmental disabilities charged with violations of institutional rules shall only receive consequences with the consultation of qualified licensed mental health staff to determine the effectiveness of the consequence in correcting the inmate’s behavior and to ensure such consequences do not create a substantial risk of worsening the inmate’s mental status. **CDWG opted not to make this change.**
2. Inmates with serious mental illness or developmental disabilities shall not be placed on disciplinary isolation. **CDWG opted not to make this change.**
3. Inmates with serious mental illness or developmental disabilities shall be housed in the least restrictive setting available. **CDWG opted not to make this change.**
4. The number of days before a review by the facility manager to continue the status of disciplinary isolation should be significantly reduced. **CDWG opted not to make this change.**
5. There should be a limit to the total number of days an inmate can be placed on disciplinary isolation. **CDWG opted not to make this change.**

Reference: 15 CCR §§ 3317, 3315(d)(2)(A); 28 CFR §§ 35.130, 35.149, 35.152

**Rec B**
Change section (f) to: Food shall only be limited in the form of a Disciplinary Diet. **CDWG opted not to make this change.**

**Rec C**
Revision: Such reviews shall continue at least every thirty days thereafter unless health care staff recommend more frequent reviews, then every fifteen days. A medical opinion on continued retention and assessment of the need for mental health shall be obtained every fifteen days after serving 30 consecutive days on disciplinary isolation. Medical and mental health professionals will be performing the fifteen days evaluations in place of a facility manager. **CDWG opted not to make this change.**

**Rec D**
Disciplinary isolation diet should be removed from the options to discipline. **CDWG opted not to make this change.**

**Rec E**
People with serious mental illness or developmental disabilities charged with violations of institutional rules shall only receive consequences with the consultation of qualified licensed mental health staff to determine the effectiveness of the consequence in correcting the person's behavior and to ensure such consequences do not create a substantial risk of worsening the person's mental status. People with serious mental illness or developmental disabilities shall not be placed on disciplinary isolation. The number of days before a review by the facility manager to continue
the status of disciplinary isolation should be significantly reduced. There should be a limit to the total number of days a person can be placed on disciplinary isolation. **CDWG opted not to make this change.**

3. **a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)**

In order to be consistent with the definition title change in Section 1006 Definitions, from “disciplinary isolation” to “disciplinary separation”, the same change is carried into this regulation. The change to the definition title was done for the purpose of more closely defining the condition of confinement.

4. **What is the operational impact that will result from this revision; how will it change operations?**

There is no operational impact.

5. **a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?**

There is no fiscal impact.

6. **How will BSCC measure compliance with this revision?**

These changes will not affect how compliance is measured.

7. **Summary of Workgroup Discussion and Intent**

No amendments were made by the Classification and Discipline Workgroup.

8. **ESC Action/Response**

Modify the workgroup’s recommendation and change “disciplinary isolation” to read “disciplinary separation” to be consistent with the change to the definition title in Section 1006 Definitions.
1. Regulation and Recommended Revision

§ 1084. Disciplinary Records.

Penal Code Section 4019.5 requires that a record is kept of all disciplinary infractions and punishment administered therefore. This requirement may be satisfied by retaining copies of rule violation reports and report of the disposition of each.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Classification and Discipline Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
PROGRAMS AND SERVICES WORKGROUP

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*Bold and italics indicate proposed revision.
1. Regulation and Recommended Revision

§ 1061. Inmate Education Plan.

The facility administrator of any Type II or III facility shall plan and shall request of appropriate public officials an inmate education program. When such services are not made available by the appropriate public officials, then the facility administrator shall develop and implement an education program with available resources. Such a plan shall provide for the voluntary academic and/or vocational education of both sentenced and non-sentenced housed inmates. Reasonable criteria for program eligibility shall be established and an inmate may be excluded or removed from any class based on sound security practices or failure to abide by facility rules and regulations.


2. ESC Notes/Recommendations

The ESC requested the Programs and Services Workgroup consider the input.

Additionally, with regards to Recommendation B, give attention to the following:
   1. Give cautious consideration to equal access, to ensure flexibility. PSWG opted not to make this change.
   2. A variety of programs should be available. PSWG opted not to make this change.

Rec A
The non-sentenced portion of the regulation should be removed. PSWG opted to make this change.

Rec B
At a minimum, this section should be revised to include:
   1. A statement that the education plan shall ensure equal access for inmates with disabilities. PSWG opted not to make this change.

Reference: 28 CFR §§ 35.130, 35.149, 35.152

Rec C
We would recommend that Inmate Programs Administrators and/or Managers from various Counties be invited to an open discussion forum to address issues, challenges and changes in programs and legislative mandates.

Fiscal/Operational Impact: Presumably, changes to the language in Title 15 to meet legislatives mandates of "Evidence-Based Practices" will have a fiscal impact as data will need to be collected and analyzed. Funding will be necessary for the staff needed to accomplish these tasks.

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)
In the third sentence, the words "both sentenced and non-sentenced" were deleted and replaced by "housed." "Housed" clarifies that an agency has a responsibility to offer voluntary education to all inmates assigned to a housing unit, but not inmates on alternative, non-custodial programs.

In the last sentence, "program" was added between "for" and "eligibility" to provide clarity.

Also in the last sentence, "from any class" was deleted to make it clear that inmates may be excluded or removed from any program whether or not it is a class or a program offered via tablets or the internet.

4. **What is the operational impact that will result from this revision; how will it change operations?**

Deleting "both sentenced and non-sentenced" and replacing that with "housed" will not affect facility operations.

Adding "program" between "for" and "eligibility" will not affect facility operations.

Deleting "from any class" provides greater flexibility to facility operators by clarifying that inmates may be excluded or removed from any program whether or not it is a class or a program that is offered via tablets or the internet. This provides facility operators with additional consequences for inmates' negative behavior.

5. a.) **What is the fiscal impact that will result from this revision?**  
b.) **How can it be justified?**

Deleting "both sentenced and non-sentenced" and replacing that with "housed" will not result in a fiscal impact.

Adding "program" between "for" and "eligibility" will not result in a fiscal impact.

Deleting "from any class" will not result in a fiscal impact.

6. **How will BSCC measure compliance with this revision?**

These amendments will not affect the BSCC's inspection process.

7. **Summary of Workgroup Discussion and Intent**

The Programs and Services Workgroup discussed the issue of equal access for inmates with disabilities and felt that existing ADA mandates are sufficient to assure those inmates equal access to the educational plan.
The issue of the types and variety of programs that should be offered was also discussed. The group felt that the existing language in this regulation provides adequate flexibility to encompass all types of programs under the umbrella of "education" and "vocational."

Further discussion evolved around whether to require evidence-based programs (EBP) in local detention facilities. The group ended the discussion by agreeing not to build regulations around a current trend which may be renamed or altered in the future. Additionally, while agencies may provide EBP at their discretion, mandating EBP statewide could cause an uneven burden on smaller agencies due to the cost to implement those programs.

The workgroup agreed that the requirements in Section 1061 pertain to only inmates housed in a local detention facility – not to inmates in alternative, non-custodial programs. They further agreed that clarifying the last sentence will provide additional sanctions for facility administrators for addressing inmates' negative behavior. Additionally, with the recommended change, inmates may be removed from a class, but still be allowed to participate in a program in his or her housing unit through the use of technology (i.e. a tablet).

8. ESC Action/Response

Accept the workgroup’s recommendations.
1. Regulation and Recommended Revision

§ 1062. Visiting.

(a) The facility administrator shall develop written policies and procedures for inmate visiting which shall provide for as many visits and visitors as facility schedules, space, and number of personnel will allow. For sentenced inmates in Type I facilities and all inmates in Type II facilities, there shall be allowed no fewer than two visits totaling at least one hour per inmate each week. In Type III and Type IV facilities there shall be allowed one or more visits, totaling at least one hour, per inmate each week.

(b) In Type I facilities, the facility administrator shall develop and implement written policies and procedures to allow visiting for non-sentenced detainees. The policies and procedures will include a schedule to assure that non-sentenced detainees will be afforded a visit no later than the calendar day following arrest.

(c) The visiting policies developed pursuant to this section shall include provision for visitation by minor children of the inmate.

(d) One hour per week of on-site (in-person or video) visiting time shall be free of charge.


2. ESC Notes/Recommendations

The ESC requested the Programs and Services Workgroup consider the input, giving attention to the following:

1. Flexibility shall be given whether two half-hour visiting periods, or one one-hour period. **PSWG opted to make this change.**
2. Include discussion on video visitation.

**Rec A**

At a minimum, this section should be revised to include:

1. A statement that visiting policies shall ensure equal access for inmates and visitors with disabilities, including provision of auxiliary aids and assistive devices to facilitate their full participation in visits. **PSWG opted not to make this change.**

Reference: 28 CFR §§ 35.130, 35.149, 35.152; 15 CCR §§ 3170.1(e), 3170(a), 3170(b)

**Rec B**

Recommended change visiting from two-thirty minute visits to one visit weekly for one hour. It eliminates the unnecessary pause between their two-thirty minute visits with the same visitor. The revision will also eliminate the unnecessary inmate movement in the Administrative Segregation housing units affecting the recreational time of other inmates. **PSWG opted to make this change.**

**Rec C**
There should be no restriction on the number of visits regardless of facility type. Minors 16 and over should be able to visit their parent without a guardian present, a policy recently adopted in San Francisco. In-person visits should not be limited due to the existence of a video visitation option. Some facilities have stopped in-person visitation due to implementing a video visitation option. We do not want to see that happen in any facilities in California. Visiting policies shall ensure equal access for incarcerated people and visitors with disabilities, including provision of auxiliary aids and assistive devices to facilitate their full participation in visits. **PSWG opted not to make this change.**

**Rec D**

Regarding video visitation, counties need to be legally defensible in its use.

3. **a.) What existing problem is being addressed by this revision?**  **b.) How will this revision address/fix the problem? (What is the rationale?)**

As currently written, the second sentence of the regulation does not provide sufficient flexibility to facility operators because it seems to require visits on two separate days totaling one hour. Removing "facilities there shall be allowed no fewer than two visits totaling at least one hour per inmate each week" in the second sentence clarifies that the required visitation time of one hour may be provided in two half-hour visiting periods or one one-hour period.

Subsection (d) was added because some facilities use video visitation in lieu of the in-person visits between the inmate and family and friends. If providers of video visitation charge for the mandated one-hour of visitation, it could be a fiscal hardship to the inmate, family and friends.

**4. What is the operational impact that will result from this revision; how will it change operations?**

For those agencies that currently provide visits on two separate days, but choose to move to one hour of visiting in one day, policies and procedures will need to be revised to reflect this new practice.

For those agencies that provide video visiting, policies and procedures will need to be revised to reflect that the first hour of visiting is free of charge.

For those agencies that currently provide visits on two separate days, but choose to move to one hour of visiting in one day, there would be less staff time involved in moving inmates. Moving inmates less frequently could also improve staff and inmate safety.

For facilities that utilize video visitation, providing that service free of charge will not have an operational impact.

5. **a.) What is the fiscal impact that will result from this revision?**  **b.) How can it be justified?**
For facilities that choose to move to one hour of visiting in one day, policies and procedures will need to be revised to reflect this change in operations. Staff time to revise policies and procedures will result in an increased cost that will be offset by the cost savings resulting from less inmate movement.

For facilities that utilize video visiting, policies and procedures would need to be revised to reflect that the first hour of visiting is free of charge.

6. **How will BSCC measure compliance with this revision?**

Inspectors will review facility policies and procedures.

7. **Summary of Workgroup Discussion and Intent**

The Programs and Services Workgroup meeting opened with two individuals offering public comment regarding the negative effects on inmates and on inmates' family/friends of providing only video visitation (lack of human contact, cost and inconvenience to visitors). Both individuals encouraged the workgroup to mandate in-person visiting at local detention facilities, in addition to any other method of visiting provided.

The workgroup engaged in a lengthy discussion regarding video visitation versus in-person visits. Several members of the group reported that their county is planning or building new facilities with space for video visiting only (no space for in-person visits). They felt that if Title 24 required space for in-person visits, then their new facilities would be noncompliant the day the facility opened. Some of the members cited some potential negative impacts of in-person visits such as exposing children to the inside of a jail, the staff time it can take to move inmates and the security concerns of moving high-security inmates.

Most of the group agreed that the regulation should remain flexible regarding how visitation is provided and decided to develop the following definitions:

- "In-person visit" means an on-site visit that may include barriers.
- "Contact visit" means an on-site visit without barriers.
- "Video visit" means an on-site or remote visit through the means of audio-visual communication devices.

The workgroup also discussed practices surrounding video visitation, both at the facility and remotely (possibly from the visitor's home). They agreed that the required one hour of visiting per week should be at no cost to the inmate, family and friends.

It must be noted that the workgroup was not unanimous in agreement over the decision not to require in-person visits in local detention facilities.

The issue of equal access for inmates and visitors with disabilities was discussed. The group felt that existing ADA mandates are sufficient to assure equal access for disabled individuals.
The workgroup agreed that the second sentence of the regulation did not provide sufficient flexibility to facility operators because it seemed to require two visits on two separate days totaling one hour. It was decided that removing the confusing language in the second sentence would clarify that the required visitation time of one hour may be provided in two half-hour visiting periods or one one-hour period.

8. ESC Action/Response

Accept the workgroup’s recommendations.
1. Regulation and Recommended Revision

§ 1063. Correspondence.

The facility administrator shall develop written policies and procedures for inmate correspondence which provide that:

   (a) there is no limitation on the volume of mail that an inmate may send or receive;
   (b) inmate correspondence may be read when there is a valid security reason and the facility manager or his/her designee approves;
   (c) jail staff shall not review inmate correspondence to or from state and federal courts, any member of the State Bar or holder of public office, and the Board of State and Community Corrections; however, jail authorities may open and inspect such mail only to search for contraband, cash, checks, or money orders and in the presence of the inmate;
   (d) inmates may correspond, confidentially, with the facility manager or the facility administrator; and,
   (e) those inmates who are without funds shall be permitted at least two postage paid envelopes and two sheets of paper letters to his or her attorney and to the courts.


2. ESC Notes/Recommendations

Revise 1063(d) to read "two postage paid envelopes" instead of "letters" to ensure that inmate gets stamp, envelope and paper. PSWG opted to make this change.

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

The amendments to this regulation provided needed clarity.

4. What is the operational impact that will result from this revision; how will it change operations?

No operational impact.

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

No fiscal impact.

6. How will BSCC measure compliance with this revision?
Inspectors will review policies and procedures to assure compliance.

7. **Summary of Workgroup Discussion and Intent**

The Programs and Services Workgroup discussed that as currently described in the regulation, "postage paid letters" was not sufficiently clear. The group agreed that this regulation should be amended to require two postage paid envelopes and two sheets of paper.

The group also discussed the use of email correspondence and agreed to table the issue of email alternatives.

8. **ESC Action/Response**

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1064. Library Service.

The facility administrator shall develop written policies and procedures for library service in all Type II, III, and IV facilities. The scope of such service shall be determined by the facility administrator. The library service shall include access to legal reference materials, current information on community services and resources, and religious, educational, and recreational reading material. In Type IV facilities such a program can be either in-house or provided through access to the community.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Programs and Services Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response
1. Regulation and Recommended Revision

§ 1065. Exercise and Recreation.

(a) The facility administrator of a Type II or III facility shall develop written policies and procedures for an exercise and recreation program, in an area designed for recreation, which will allow a minimum of three hours of exercise distributed over a period of seven days. Such regulations as are reasonable and necessary to protect the facility’s security and the inmates’ welfare shall be included in such a program. In Type IV facilities, such a program can be either in-house or provided through access to the community.

(b) The facility administrator of a Type I facility shall make table games and/or television available to inmates.


2. ESC Notes/Recommendations

The ESC requested the Programs and Services Workgroup consider the input, giving attention to the following:

1. Regarding Rec A, exclude #3 of this recommendation.
2. Regarding Rec B, give consideration although outdoor recreation is not required; remove ‘c’ from consideration.

Rec A
At a minimum, this section should be revised to include the following changes:

1. The minimum number of hours for exercise distributed over a period of seven days should be significantly increased. **PSWG opted not to make this change.**
2. It should specify a minimum number of hours for exercise that must be provided outside over a period of seven days. **PSWG opted not to make this change.**
3. An increased number of minimum hours for exercise and recreation may be required for inmates with serious mental illness, as ordered by the responsible physician or psychiatrist, in consultation with the facility manager, to prevent worsening mental health symptoms or suicide. **PSWG opted not to make this change.**

References: 15 CCR § 3331(h); 15 CCR § 3343(h); *Thomas v. Ponder*, 611 F.3d 1144, 1151-52 (9th Cir. 2010); *Lopez v. Smith*, 203 F.3d 1122, 1132-33 (9th Cir. 2000) (en banc); *Keenan v. Hall*, 83 F.3d 1083, 1089-90 (9th Cir. 1996) as amended 135 F.3d 1318 (9th Cir. 1998); *Allen v. Sakai*, 48 F.3d 1082, 1088 (9th Cir. 1994); *Spain v.Procuiner*, 600 F.2d 189, 199 (9th Cir. 1979); *Kane v. Pierce*, 2009 WL 160255, at *5 (E.D. Cal. Jan. 21, 2009).

Rec B
*In-text Change:* (a) The facility administrator of a Type II or III facility shall develop written policies and procedures for an exercise and recreation program, in an area designed for recreation, which will allow a minimum of three hours of exercise distributed over a period of seven days. Such regulations as are reasonable and necessary to protect the facility’s security...
and the inmates’ welfare shall be included in such a program. In Type IV facilities, such a program can be either in-house or provided through access to the community.

In-text Addition: (c) In no case will the hours of exercise be less than one hour every day. In addition, the policies must prescribe at least three hours of time out of doors over a period of seven days. The minimum of ten hours per week will be provided during normal waking hours. PSWG opted not to make this change.

Rec C
Title 15 says inmates get 3 hours of yard per every 7 days. We recommend clarification that states we will give persons in administrative segregation at minimum 1 hour of dayroom time on a daily basis. PSWG opted not to make this change.

Rec D
Yard recreation time out: clarification is needed in the definition, is it a minimum of (3) hours out in the yard or does time spent out on unlock period in the housing unit count as yard recreation time out? If time out in the housing unit does not count as rec yard time out, then are we to do both? meaning (3) hours out in the rec yard plus (3) hours outside of the cell? for a total of (6) hours outside the cell a week? Placing inmates out in the rec yard becomes a movement issues at times. PSWG opted not to make this change.

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Programs and Services Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

The Programs and Services Workgroup discussed this regulation at length and determined that no changes would be recommended at this time. The group acknowledged that inmates may be sentenced for increasingly longer terms in local detention facilities and jail administrators should provide inmates as much out-of-cell time as possible. However, changing this Title 15 regulation
would be creating a mandate that many jurisdictions would be unable to meet. This is due to a number of factors.

To begin with, classification systems are becoming increasingly complicated due to the growing number of higher security inmates, inmates with behavioral issues, mentally ill inmates, and issues related to gender identity. This results in the need for facility administrators to restrict dayroom or outdoor exercise periods to one inmate at a time in some cases. Many jails do not have sufficient dayroom, recreation or outdoor exercise space to provide that opportunity for each inmate. Additionally, due to their location, some counties experience inclement weather, severely limiting the use of their outdoor exercise areas.

Other topics of discussion included the difference between "exercise" and "recreation." The group agreed not to define "recreation" at this time, determining that as written, the regulation provides flexibility to facility operators.

The use of the dayroom for exercise, as opposed to the exercise area required by Title 24, Section 1231.2.10, was also discussed. It was determined that as long as the dayroom is suitable for exercise (not being used as overflow housing), the dayroom is an appropriate space for the exercise of large muscle groups.

8. ESC Action/Response

Accept the workgroup’s recommendations.
1. Regulation and Recommended Revision


(a) The facility administrator of a Type II or III facility shall develop written policies and procedures which will permit inmates to purchase, receive and read any book, newspaper, periodical, or writing accepted for distribution by the United States Postal Service. Nothing herein shall be construed as limiting the right of a facility administrator to:

1. exclude any publications or writings based on any legitimate penological interest;
2. exclude obscene publications or writings, and mail containing information concerning where, how, or from whom such matter may be obtained; and any matter of a character tending to incite murder, arson, riot, violent racism, or any other form of violence; any matter of a character tending to incite crimes against children; any matter concerning unlawful gambling or an unlawful lottery; the manufacture or use of weapons, narcotics, or explosives; or any other unlawful activity;
3. open and inspect any publications or packages received by an inmate; and
4. restrict the number of books, newspapers, periodicals, or writings the inmate may have in his/her cell or elsewhere in the facility at one time.

(b) The facility administrator of a Type I facility shall develop and implement a written plan to make available a daily newspaper in general circulation, including a non-English language publication, to assure reasonable access to interested inmates.


2. ESC Notes/Recommendations

Should include non-English newspapers. **PSWG opted not to make this change.**

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Programs and Services Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?
7. **Summary of Workgroup Discussion and Intent**

The Programs and Services Workgroup discussed the ESC’s recommendation to assure that non-English newspapers are allowed. The group felt that the regulation as written is sufficient.

8. **ESC Action/Response**

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1067. Access to Telephone.

The facility administrator shall develop written policies and procedures which allow reasonable access to a telephone beyond those telephone calls which are required by Section 851.5 of the Penal Code.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Programs and Services Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. **Regulation and Recommended Revision**

§ 1068. Access to the Courts and Counsel.

The facility administrator shall develop written policies and procedures to ensure inmates have access to the court and to legal counsel. Such access shall consist of:

(a) unlimited mail as provided in Section 1063 of these regulations, and,
(b) confidential consultation with attorneys.


2. **ESC Notes/Recommendations**

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Programs and Services Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. **Summary of Workgroup Discussion and Intent**

8. **ESC Action/Response**

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1069. Inmate Orientation.

(a) In Type II, III, and IV facilities, the facility administrator shall develop written policies and procedures for the implementation of a program reasonably understandable to inmates designed to orient a newly received inmate at the time of placement in a living area. Such a program shall be published and include, but not be limited to, the following:

   (1) correspondence, visiting, and telephone usage rules;
   (2) rules and disciplinary procedures;
   (3) inmate grievance procedures;
   (4) programs and activities available and method of application;
   (5) medical services;
   (6) classification/housing assignments;
   (7) court appearance where scheduled, if known; and,
   (8) voting, including registration.

(b) In Type I facilities, the facility administrator shall develop written policies and procedures for a program reasonably understandable to non-sentenced detainees to orient an inmate at the time of placement in a living area. Such a program shall be published and include, but not be limited to, the following:

   (1) rules and disciplinary procedures;
   (2) visiting rules;
   (3) availability of personal care items, opportunities for personal hygiene;
   (4) availability of reading and recreational materials; and,
   (5) medical/mental health procedures.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem?  (What is the rationale?)

No amendments were made by the Programs and Services Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?
6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1070. Individual/Family Service Programs.

The facility administrator of a Type II, III, or IV facility shall develop written policies and procedures which facilitate cooperation with appropriate public or private agencies for individual and/or family social service programs for inmates. Such a program shall utilize the services and resources available in the community and may be in the form of a resource guide and/or actual service delivery. The range and source of such services shall be at the discretion of the facility administrator and may include:

(a) individual, group and/or family counseling; risk and needs assessments;
(b) drug and alcohol abuse counseling; best practices in:
   (1) community volunteers; individual, group and/or family counseling;
   (2) drug and alcohol abuse counseling;
   (3) cognitive behavioral interventions;
   (4) vocational testing and counseling;
   (5) employment counseling;
(d) vocational testing and counseling; referral to community resources and programs;
(d) employment counseling; reentry planning and service development;
(e) legal assistance;
(f) referral to community resources and programs; regional center services for the developmentally disabled; and;
(g) prerelease and release assistance; community volunteers;
(h) legal assistance; and;
(i) regional center services for the developmentally disabled.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

To better reflect the needs of inmates, the range and source of services in this regulation was reordered and expanded.

In subsection (a), "individual, group and/or family counseling" was deleted and added to subsection (b)(1) under best practices.

In order to provide appropriate and relevant services to inmates in local detention facilities, a means of gathering information from an inmate is necessary. Risk and needs assessments are instruments that assist practitioners in collecting and synthesizing information about inmates. It was added to the top of the list of services to emphasize the importance of the assessment process.
"Drug and alcohol abuse counseling" was deleted in subsection (b) and moved to (b)(2) under best practices.

"Best practices" was added as subsection (b) to emphasize the importance of assuring that the services that follow in the new subsections (1) through (5) are proven effective.

"Cognitive behavioral interventions" was added to subsection (b)(3) because many inmates in local detention facilities suffer from a number of mental disorders. Including this in the list of services will assure that inmates receive needed treatment.

"Vocational testing and counseling" was moved from subsection (d) to (b)(4) because it fits under the umbrella of best practices.

"Employment counseling" was moved from subsection (e) to (b)(5) because it fits under the umbrella of best practices.

"Referral to community resources and programs" was moved from subsection (f) to (c).

In subsection (d) "reentry planning and service development" replaced "prerelease and release assistance" because it is a more accurate description of services to be rendered.

"Legal assistance" was moved from subsection (f) to (e).

"Regional center services for the developmentally disabled" was moved from subsection (i) to (f).

"Community volunteers" was moved from subsection (c) to (g).

Subsections (h) and (i) were deleted because they were moved to subsections (e) and (f) respectively.

4. **What is the operational impact that will result from this revision; how will it change operations?**

For facilities that are not currently administering risk and needs assessments, policies and procedures may require amendment and staff training would be required.

Best practices in cognitive behavioral interventions could require appropriate staff to provide those services.

The addition of "reentry planning and service development" in lieu of "prerelease and release assistance" will not affect operations.

The remainder of changes to the list of services do not affect facility operations.

5. **a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?**
For facilities that are not currently administering risk and needs assessments there would be a fiscal impact because policies and procedures may require amendment and staff training would be required. The increased costs are justified by the improvement in the quality and delivery of services to inmates.

Best practices in cognitive behavioral interventions could require appropriate staff to provide those services. The increased costs are justified by the improvement in the quality and delivery of services to inmates.

The addition of "reentry planning and service development" in lieu of "prerelease and release assistance" will not result in a fiscal impact.

The remainder of changes to the list of services will not have a fiscal impact.

6. **How will BSCC measure compliance with this revision?**

This change will not affect how compliance is measured.

7. **Summary of Workgroup Discussion and Intent**

The Programs and Services Workgroup discussed the types of individual and/or family services that are important to provide inmates in local detention facilities. They agreed to reorder and expand that list to better reflect the needs of inmates.

8. **ESC Action/Response**

Accept the workgroup’s recommendations.
1. Regulation and Recommended Revision

§ 1071. Voting.

The facility administrator of a Type I (holding sentenced inmate workers) II, III or IV facility shall develop written policies and procedures whereby the county registrar of voters allows qualified voters to vote in local, state, and federal elections, pursuant to election codes.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Programs and Services Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1072. Religious Observances.

The facility administrator of a Type I, II, III or IV facility shall develop written policies and procedures to provide opportunities for inmates to participate in religious services, practices and counseling on a voluntary basis.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Programs and Services Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1073. Inmate Grievance Procedure.

(a) Each administrator of a Type II, III, or IV facility and Type I facilities which hold inmate workers shall develop written policies and procedures whereby any inmate may appeal and have resolved grievances relating to any conditions of confinement, included but not limited to: medical care; classification actions; disciplinary actions; program participation; telephone, mail, and visiting procedures; and food, clothing, and bedding. Such policies and procedures shall include:

(1) a grievance form or instructions for registering a grievance;
(2) resolution of the grievance at the lowest appropriate staff level;
(3) appeal to the next level of review;
(4) written reasons for denial of grievance at each level of review which acts on the grievance;
(5) provision for response within a reasonable time limit; and,
(6) provision for resolving questions of jurisdiction within the facility.

(b) Grievance System Abuse:
The facility may establish written policy and procedure to control the submission of an excessive number of grievances.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Programs and Services Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?
7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
MINORS IN DETENTION WORKGROUP

Dale Miller, CHAIR
Jail Manager
Huntington Beach Police Department

Juan Cornejo, Sergeant
Santa Monica Police Department

Gregg Peterson, Sergeant
Covina Police Department

Bob Yamada, Jail Manager
Newport Beach Police Department

James Wiens, Detective
Los Gatos/Monte Sereno Police Department

Juan Lopez, Jail Administrator
Glendale Police Department

Sylvia Gelfman, Jail Manager
Beverly Hills Police Department

Troy Hoefling, Sergeant
Morgan Hill Police Department

Maria Temprano, Jail Manager
Redondo Beach Police Department

Victor Benitez, Multi Service Officer
Morgan Hill Police Department

Martin Sissac, Chief of Police
Fontana School District

Gregory Grothaus, Jail Manager
San Jose Police Department
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*Bold and italics indicate proposed revision; underline indicates proposed new regulation.*
1. Regulation and Recommended Revision

§ 1100. Purpose.

The purpose of this article is to establish minimum standards for local adult detention facilities, Types II and III, in which minors are lawfully detained.

Unless otherwise specified in statute or these regulations, minors lawfully held in local adult detention facilities shall be subject to the regulations and statutes governing those facilities found in Minimum Standards for Local Detention Facilities, Title 15, Division 1, Chapter 1, Subchapter 4, Section 1000 et seq. and Title 24, Part 1, Section 13-102, and Part 2, Section 1231, California Code of Regulations.

An existing jail built in accordance with construction standards in effect at the time of construction and approved for the detention of minors by the Board shall be considered as being in compliance with the provisions of this article unless the condition of the structure is determined by the Board to be dangerous to life, health or welfare of minors.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Minors in Detention Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1101. Restrictions on Contact with Adult Prisoners.

The facility administrator shall establish policies and procedures to restrict contact, as defined in Section 1006, between detained minors and adults confined in the facility.

In situations where brief or accidental contact may occur, such as booking or facility movement, facility staff (trained in the supervision of inmates) shall maintain a constant, side-by-side presence with the minor or the adult to prevent sustained contact.

The above restrictions do not apply to minors who are participating in supervised program activities pursuant to Section 208 (c) of the Welfare and Institutions Code.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Minors in Detention Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1102. Classification.

The facility administrator shall develop and implement a written plan designed to provide for the safety of staff and minors held at the facility. The plan shall include the following:

(a) a procedure for receiving and transmitting information regarding minors who present a risk or hazard to self or others while confined at the facility, and the segregation of such minors to the extent possible within the limits of the facility.
(b) a procedure to provide care for any minor who appears to be in need of or who requests medical, mental health, or developmental disability treatment. Written procedures shall be established by the responsible health administrator in cooperation with the facility administrator.
(c) a suicide prevention program designed to identify, monitor, and provide treatment to those minors who present a suicide risk.
(d) provide that minors be housed separately from adults and not be allowed to come or remain in contact with adults except as provided in Sections 208(c) of the Welfare and Institutions Code.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Minors in Detention Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision


Facility staff shall notify the parents or guardians prior to the release of a minor. The minor’s personal clothing and valuables shall be returned to the minor, parents or guardian, upon the minor’s release or consent.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Minors in Detention Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1104. Supervision of Minors.

The facility administrator shall develop and implement policy and procedures that provide for:

(a) continuous around-the-clock supervision of minors with assurance that staff can hear and respond; and,
(b) safety checks of minors at least once every 30 minutes. These safety checks shall include the direct visual observation of movement and/or skin. Safety checks shall not be replaced, but may be supplemented by, an audio/visual electronic surveillance system designed to detect overt, aggressive, or assaultive behavior and to summon aid in emergencies. All safety checks shall be documented.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Minors in Detention Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1105. Recreation Programs.

The facility administrator shall develop written policies and procedures to provide a recreation program that shall protect the welfare of minors and other inmates, recognize facility security needs and comply with minimum jail standards for recreation (California Code of Regulations, Title 15, Section 1065).


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?   b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Minors in Detention Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?   b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1106. Disciplinary Procedures.

Nothing in this regulation shall prevent the administrator from removing a detained minor from the general population or program for reasons of the minor’s mental or physical health; or under any circumstances in which the safety of the minor, other inmates, staff, the program or community is endangered, pending a disciplinary action or review.

(a) Minors requiring disciplinary confinement shall be housed only in living areas designated for the detention of minors.
(b) Permitted forms of discipline include:
   (1) loss of privileges; and,
   (2) disciplinary confinement.
(c) Access to visitation and recreation shall be restricted only after a second level review by a supervisor or manager, and shall not extend beyond five days without subsequent review.
(d) A status review shall be conducted for those minors placed in disciplinary confinement no less than every 24 hours.
(e) Prohibited forms of discipline include:
   (1) discipline that does not fit the violation;
   (2) corporal punishment;
   (3) inmate imposed discipline;
   (4) placement in safety cells;
   (5) deprivation of food; and,
   (6) the adult disciplinary diet.


2. ESC Notes/Recommendations

The ESC requested the Minors in Detention Workgroup consider the input.

Rec A
In-text Addition: (f) For inmates with disabilities, prior to the administration of disciplinary action, staff will determine if the violation was related to the inmate’s disability. If the violation was related to a disability, the team will determine if there is a reasonable accommodation that could have prevented the violation. If there is, discipline will not be administered until there is a violation with the accommodation. MIDWG opted not to make this change; the recommendation was overly broad and the facility has limited means to assess disability.

Rec B
At a minimum, this section should be revised to include the following:

1. Need to specify that “days” means calendar days, not business day. MIDWG opted not to make this change.
2. In subsection (c), change the length of time from 5 days to 2 days for subsequent higher level review. **MIDWG opted not to make this change.**

3. In subsection (d), need to specify that the individual conducting the review should be neutral, and not a staff person that may have been involved in the behavior that subjected the minor to discipline. Amend subsection (e), the prohibited forms of discipline, to include all prohibited forms of discipline that cannot be used against minors in juvenile facilities, as specified in 15 CCR § 1390. **MIDWG opted not to make this change.**

4. Amend subsection (e), the prohibited forms of discipline to include a prohibition on the use of conditions of solitary confinement. **MIDWG opted not to make this change.**

**Rec C**

The use of disciplinary confinement for minors should be limited and minors should not be denied visitation with a parent or guardian or access to daily large muscle exercise as a form of discipline. Workgroup discussed this regulation and expressed concern that its application would erode the concept of progressive discipline. **MIDWG opted not to make this change.**

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Minors in Detention Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. **Summary of Workgroup Discussion and Intent**

The Minors in Detention Workgroup discussed Rec B (1) and determined it was dependent on staffing, scheduling and availability. For Rec B (2) the workgroup believes this recommendation is unneeded. For Rec B (3) the workgroup believes that the regulations already provide this protection. The workgroup discussed the remainder of the regulation and took no action.

8. **ESC Action/Response**

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1120. Education Program for Minors in Jails.

Whenever a minor is held in a Type II or III facility, the facility administrator shall coordinate with the County Department of Education or County Superintendent of Schools to provide education programs as required by Section 48200 of the Education Code.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem?  (What is the rationale?)

No amendments were made by the Minors in Detention Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1121. Health Education for Minors in Jails.

The health administrator for each jail, in cooperation with the facility administrator and the local health officer, shall develop written policies and procedures to assure that age- and sex-appropriate health education and disease prevention programs are offered to minors.

The education program shall be updated as necessary to address current health priorities and meet the needs of the confined population.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Minors in Detention Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1122. Reproductive Information and Services for Minors in Jails.

The health administrator, in cooperation with the facility administrator, shall develop written policies and procedures to assure that reproductive health services are available to both male and female minors in jails.

Such services shall include, but not be limited to, those prescribed by Welfare and Institutions Code Sections 220, 221 and 222 and Health and Safety Code Section 123450.


2. ESC Notes/Recommendations

The ESC requested the Minors in Detention Workgroup consider the input.

Rec A
At a minimum, this section should be revised to include the following:

1. Add to this section, or create a new section, with language similar to 15 CCR § 1417 regarding pregnant minors, or add a cross-reference to that section. MIDWG agreed with the MMHWG recommendation of a new regulation (Section 1122.5) to address the use of restraints.

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Medical/Mental Health Workgroup nor Minors in Detention Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroups’ recommendations.
1. Regulation and Recommended Revision

§ 1122.5. Pregnant Minors

(a) The health administrator, in cooperation with the facility administrator, shall develop written policies and procedures pertaining to pregnant minors that address the requirements in Title 15, Section 1417.

(b) The facility administrator, in cooperation with the responsible physician, shall develop written policies and procedures for the use of restraint devices on pregnant minors. The policy shall address requirements of Penal Code 3407. Policy shall include reference to the following:

1) A minor known to be pregnant or in recovery after delivery shall not be restrained by the use of leg irons, waist chains, or handcuffs behind the body.

2) A pregnant minor in labor, during delivery, or in recovery after delivery, shall not be restrained by the wrists, ankles, or both, unless deemed necessary for the safety and security of the minor, the staff, or the public.

3) Restraints shall be removed when a professional who is currently responsible for the medical care of a pregnant minor during a medical emergency, labor, delivery, or recovery after delivery determines that the removal of restraints is medically necessary.

4) Upon confirmation of a minor's pregnancy, she shall be advised, orally or in writing, of the standards and policies governing pregnant minors.

NOTE: Authority cited: Section 6030, Penal Code. Reference: Sections 3407 and 6030, Penal Code

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem?  (What is the rationale?)

The Title 15, Minimum Standards for Local Detention Facilities do not contain statutory language pertaining to pregnant inmates. This new regulation assures that facility operators would abide by the requirements in statute and Title 15, Minimum Standards for Juvenile Facilities.

4. What is the operational impact that will result from this revision; how will it change operations?

The requirements in subsection (a) will require facility operators to develop policies and procedures for pregnant minors consistent with Title 15, Minimum Standards for Juvenile Facilities, Section 1417.

With respect to subsection (b), facility operations will not be changed by this amendment, as this law (PC 3407) was enacted in 2013.
5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

There could be a fiscal impact associated with developing policies and procedures for pregnant minors. Any cost will be justified by the protection that appropriate policies and procedures will provide.

6. How will BSCC measure compliance with this revision?

Inspectors will review policies and procedures for compliance.

7. Summary of Workgroup Discussion and Intent

The Medical/Mental Health Workgroup and Minors in Detention Workgroup agreed to add a new regulation requiring policies and procedures pertaining to pregnant minors that encompass the requirements of Title 15, Minimum Standards for Juvenile Facilities and Penal Code Section 3407.

8. ESC Action/Response

Accept the workgroups’ recommendations.
1. Regulation and Recommended Revision

§ 1123. Health Appraisals/Medical Examinations for Minors in Jails.

When a minor is held in a jail, the health administrator, in cooperation with the facility administrator, shall develop policy and procedures to assure that a health appraisal/medical examination:

(a) is received from the sending facility at or prior to the time of transfer; and
(b) is reviewed by designated health care staff at the receiving facility; or,
(c) absent a previous appraisal/examination or receipt of the record, a health appraisal/medical examination, as outlined in Minimum Standards for Juvenile Facilities, Section 1432, Health Appraisals/Medical Examinations is completed on the minor within 96 hours of admission.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem?  (What is the rationale?)

No amendments were made by the Medical/Mental Health Workgroup nor Minors in Detention Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroups’ recommendations.
1. **Regulation and Recommended Revision**

§ 1124. Prostheses and Orthopedic Devices for Minors in Jails.

The health administrator, in cooperation with the facility administrator and the responsible physician shall develop written policy and procedures regarding the provision, retention and removal of medical and dental prostheses, including eyeglasses and hearing aids for minors in jail.

   (a) Prostheses shall be provided when the health of the minor in the jail would otherwise be adversely affected, as determined by the responsible physician.

   (b) Procedures for retention and removal of prostheses shall comply with the requirements of Penal Code Section 2656.


2. **ESC Notes/Recommendations**

n/a

3. **a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)**

No amendments were made by the Medical/Mental Health Workgroup nor Minors in Detention Workgroup.

4. **What is the operational impact that will result from this revision; how will it change operations?**

5. **a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?**

6. **How will BSCC measure compliance with this revision?**

7. **Summary of Workgroup Discussion and Intent**

8. **ESC Action/Response**

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1125. Psychotropic Medications for Minors in Jail.

The health administrator/responsible physician, in cooperation with the mental health director and the facility administrator, shall develop written policies and procedures governing the use of voluntary and involuntary psychotropic medications for minors.

(a) These policies and procedures shall include, but not be limited to:
   (1) protocols for physicians’ written and verbal orders for psychotropic medications in dosages appropriate to the minor’s need;
   (2) limitation to the length of time required for a physician’s signature on verbal orders;
   (3) the length of time voluntary and involuntary medications may be ordered and administered before re-evaluation by a physician;
   (4) provision that minors who are on psychotropic medications prescribed in the community are continued on their medications pending re-evaluation and further determination by a physician;
   (5) provision that the necessity for continuation on psychotropic medications is addressed in pre-release planning and prior to transfer to another facility or program; and,
   (6) provision for regular clinical/administrative review of utilization patterns for all psychotropic medications, including every emergency situation.

(b) Psychotropic medications shall not be administered to a minor absent an emergency unless informed consent has been given by the parent/guardian or the court.
   (1) Minors shall be informed of the expected benefits, potential side effects and alternatives to psychotropic medications.
   (2) Absent an emergency, minors may refuse treatment.

(c) Minors found by a physician to be a danger to themselves or others by reason of a mental disorder may be involuntarily given psychotropic medication immediately necessary for the preservation of life or the prevention of serious bodily harm, and when there is insufficient time to obtain consent from the parent, guardian, or court before the threatened harm would occur. It is not necessary for harm to take place or become unavoidable prior to initiating treatment.

(d) Administration of psychotropic medication is not allowed for disciplinary reasons.


2. ESC Notes/Recommendations

The ESC requested the Minors in Detention Workgroup consider the input, giving attention to the following:

1. Rec A, 1.b. – eliminate the last sentence.

Rec A
At a minimum, this section should be revised to include the following:
1. Replace the language in § 1125(d) with the language in §1439(d).
   a. To change from: “(d) Administration of psychotropic medication is not allowed for disciplinary reasons.” MMHWG and MIDWG opted not to make this change.
   b. To: “(d) Assessment and diagnosis must support the administration of psychotropic medications. Administration of psychotropic medication is not allowed for coercion, discipline, convenience or retaliation.” MMHWG and MIDWG opted not to make this change.

Rec B
*In-text Addition & Change:* (c) Minors found by a physician to be a danger to themselves or others by reason of a mental disorder may be involuntarily given psychotropic medication immediately necessary for the preservation of life or the prevention of serious bodily harm, and when there is insufficient time to obtain consent from the parent, guardian, or court before the threatened harm would occur, and there is no less restrictive alternative. It is not necessary for harm to take place or become unavoidable prior to initiating treatment. MIDWG concurs with the MMHWG in removing the words “or become unavoidable” from this regulation section.

Rec C
Between “procedures” and “governing”, insert “based on the California Guidelines for the Use of Psychotropic Medication with Children and Youth in Foster Care”. MMHWG and MIDWG opted not to make this change.

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem?  (What is the rationale?)

The phrase "or become unavoidable" in the last sentence of the first paragraph is not needed in this regulation because it is subjective.

4. What is the operational impact that will result from this revision; how will it change operations?

No operational impact.

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

No fiscal impact.

6. How will BSCC measure compliance with this revision?

No impact on facility inspections.

7. Summary of Workgroup Discussion and Intent
The Medical/Mental Health Workgroup agreed that the phrase "or become unavoidable" in the last sentence of the first paragraph is not needed in this regulation because it is subjective.

The Minors in Detention Workgroup agreed with the Medical/Mental Health Workgroup to adopt Rec. B and delete the words “or become unavoidable” from paragraph 3. All other recommendations were discussed and the workgroup declined to implement changes because the language and intent was unclear.

8. **ESC Action/Response**

Accept the workgroups’ recommendations.
1. Regulation and Recommended Revision

§ 1140. Purpose.

The purpose of this article is to establish minimum standards for law enforcement facilities in which minors are held in secure or non-secure custody.

Unless otherwise specified in statute or these regulations, minors lawfully held in local adult detention facilities shall be subject to the regulations and statutes governing those facilities found in Title 15, Division 1, Chapter 1, Subchapter 4, Section 1000 et seq. and Title 24, Part 1, Section 13-102, and Part 2, Section 1231, California Code of Regulations.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Minors in Detention Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. **Regulation and Recommended Revision**

§ 1141. Minors Arrested for Law Violations.

Any minor taken into temporary custody by a peace officer, on the basis that they are a person described by Section 602 of the Welfare and Institutions Code, may be held in secure or non-secure custody within a law enforcement facility that contains a lockup for adults provided that the standards set forth in these regulations are met.


2. **ESC Notes/Recommendations**

The ESC requested the Minors in Detention Workgroup consider the input.

Rec A
At a minimum:

1. This section needs to include language indicating that law enforcement facilities must also comply with the Juvenile Justice and Delinquency Prevention (JJDP) Act of 2002, 42 U.S.C. 5601 et. seq., and all implementing regulations in Title 28 of the Code of Federal Regulations. **MIDWG opted not to make this change.**

2. This section should be revised by replacing the cross-reference to Title 15, Division 1, Chapter 1, Subchapter 4, Section 1000 et seq. with a cross-reference to Title 15, Division 1, Chapter 1, Subchapter 5, Section 1300 et. seq. **MIDWG opted not to make this change.**

3. This section needs to include language from the JJDPA Monitoring Manual (2007) indicating that “[Enforcement Facilities Law] should keep records of every juvenile who enters the facility. For status offenders, nonoffenders, alien juveniles, and civil-type juvenile offenders, the records should indicate if the juvenile was held securely or nonsecurely.” **MIDWG opted not to make this change.**

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Minors in Detention Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?
6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

The Minors in Detention Workgroup discussed the recommendation and elected to make no changes.

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1142. Written Policies and Procedures.

The facility administrator shall develop written policies and procedures concerning minors being held in temporary custody which shall address:

   (a) suicide risk and prevention;
   (b) use of restraints;
   (c) emergency medical assistance and services; and,
   (d) prohibiting use of discipline.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?   b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Minors in Detention Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?   b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1143. Care of Minors in Temporary Custody.

(a) The following shall be made available to all minors held in temporary custody:

(1) access to toilets and washing facilities;
(2) one snack upon request during term of temporary custody if the minor has not eaten within the past four (4) hours or is otherwise in need of nourishment;
(3) access to drinking water;
(4) privacy during consultation with family, guardian, and/or lawyer;
(5) blankets and clothing, as necessary, to assure the comfort of the minor; and,
(6) his or her personal clothing unless the clothing is inadequate, presents a health or safety problem, or is required to be utilized as evidence of an offense.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Minors in Detention Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1144. Contact Between Minors and Adult Prisoners.

The facility administrator shall establish policies and procedures to restrict contact, as defined in Section 1006, between minors and adults confined in the facility.

In situations where brief or accidental contact may occur, such as booking or facility movement, facility staff (trained in the supervision of inmates) shall maintain a constant, side-by-side presence with the minor or the adult to prevent sustained contact.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Minors in Detention Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1145. Decision on Secure Custody.

A minor who is taken into temporary custody by a peace officer on the basis that he or she is a person described by Section 602 of the Welfare and Institutions Code may be held in secure custody in a law enforcement facility that contains a lockup for adults if the minor is 14 years of age or older and if, in the reasonable belief of the peace officer, the minor presents a serious security risk of harm to self or others, as long as all other conditions of secure custody set forth in these standards are met. Any minor in temporary custody who is less than 14 years of age, or who does not in the reasonable belief of the peace officer present a serious security risk of harm to self or others, shall not be placed in secure custody, but may be kept in non-secure custody in the facility as long as all other conditions of non-secure custody set forth in these standards are met.

In making the determination whether the minor presents a serious security risk of harm to self or others, the officer may take into account the following factors:

(a) age, maturity, and delinquent history of the minor;
(b) severity of the offense(s) for which the minor was taken into custody;
(c) minor’s behavior, including the degree to which the minor appears to be cooperative or non-cooperative;
(d) the availability of staff to provide adequate supervision or protection of the minor; and,
(e) the age, type, and number of other individuals who are detained in the facility.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Minors in Detention Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?
6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1146. Conditions of Secure Custody.

While in secure custody, minors may be locked in a room or other secure enclosure, secured to a cuffing rail, or otherwise reasonably restrained as necessary to prevent escape and protect the minor and others from harm.


2. ESC Notes/Recommendations

The ESC requested the Minors in Detention Workgroup consider the input.

Rec A

At a minimum, this section should be revised to include the following:

1. This section should include language indicating that if a minor is “secured to a cuffing rail, or otherwise reasonably restrained as necessary to prevent escape and protect the minor and other from harm,” then the regulations and policies in 15 CCR § 1358 (Use of Physical Restraints) must be followed. MIDWG opted not to make this change.

2. Add language similar to 15 CCR § 1359 (Safety Room Procedures): MIDWG opted not to make this change.

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Minors in Detention Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent
The Minors in Detention Workgroup discussed Recommendations 1 and 2 at length and believed that it applies the weighty requirements for restraint and safety cell against the less intrusive action of simply securing an arrestee for security reasons. Minors in Detention Workgroup took no action.

8. **ESC Action/Response**

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision


(a) Minors shall receive adequate supervision which, at a minimum, includes:

   (1) constant auditory access to staff by the minor; and,
   (2) safety checks, as defined in Section 1006, of the minor by staff of the law enforcement facility, at least once every 30 minutes, which shall be documented.

(b) Males and females shall not be placed in the same locked room unless under constant direct visual observation by staff of the law enforcement facility.


2. ESC Notes/Recommendations

The ESC requested the Minors in Detention Workgroup consider the input.

Rec A
At a minimum, this section should be revised to include the following:

1. Amend subsection (a) (2) to state that safety checks will occur at least every 15 minutes. MIDWG opted not to make this change.
2. Amend to include language similar to 15 CCR § 1328 (Safety Checks): MIDWG opted not to make this change.
3. Amend to include language similar to 15 CCR § 1359 (Safety Room Procedures): MIDWG opted not to make this change.

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Minors in Detention Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?
7. **Summary of Workgroup Discussion and Intent**

The Minors in Detention Workgroup did not accept Rec. A (1). The workgroup felt it was unduly burdensome to apply this standard to law enforcement facilities.

The Minors in Detention Workgroup did not accept Rec A (2 & 3) as the recommendation’s remedies are inappropriate for securing an arrested minor for security reasons, as opposed to the use of restraints to overcome hostile behavior.

8. **ESC Action/Response**

Accept the workgroup’s recommendation.
1. **Regulation and Recommended Revision**


Minors held in secure custody outside of a locked enclosure shall not be secured to a stationary object for more than 60 minutes unless no other locked enclosure is available. A staff person from the facility shall provide constant direct visual observation to assure the minor’s safety while secured to a stationary object. Securing minors to a stationary object for longer than 60 minutes, and every 30 minutes thereafter, shall be approved by a supervisor. The decision for securing a minor to a stationary object for longer than 60 minutes, and every 30 minutes thereafter shall be based upon the best interests of the minor and shall be documented.


2. **ESC Notes/Recommendations**

The ESC requested the Minors in Detention Workgroup consider the input.

**Rec A**

At a minimum, this section should be revised to include the following:

1. This section needs to include language indicating that when a minor is secured to a stationary object, the provisions of 15 CCR § 1358 (Use of Physical restraints) must be followed. **MIDWG opted not to make this change.**
2. Amend to include language similar to 15 CCR § 1328 (Safety Checks): **MIDWG opted not to make this change.**
3. Amend to include language similar to 15 CCR § 1359 (Safety Room Procedures). **MIDWG opted not to make this change.**

3. a.) **What existing problem is being addressed by this revision?** b.) **How will this revision address/fix the problem? (What is the rationale?)**

No amendments were made by the Minors in Detention Workgroup.

4. **What is the operational impact that will result from this revision; how will it change operations?**

5. a.) **What is the fiscal impact that will result from this revision?** b.) **How can it be justified?**

6. **How will BSCC measure compliance with this revision?**
7. **Summary of Workgroup Discussion and Intent**

The Minors in Detention Workgroup believes these recommendations are a misapplication and misinterpretation of juvenile regulations that do not apply to short term detention in law enforcement facilities. The workgroup took no action.

8. **ESC Action/Response**

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision


Minors held in temporary custody, who do not meet the criteria for secure custody as specified in Section 207.1(d) of the Welfare and Institutions Code, may be held in non-secure custody to investigate the case, facilitate release of the minor to a parent or guardian, or arrange for transfer of the minor to an appropriate juvenile facility.


2. ESC Notes/Recommendations

The ESC requested the Minors in Detention Workgroup consider the input.

Rec A
At a minimum, this section should be revised to include the following:

1. Amend to reflect language in the JJDP Act and the 2007 JJDPA Monitoring Manual stating that secure holding for juveniles can only occur in certain situations. MIDWG opted not to make this change.

2. This section should also reflect language from the November 2, 1988, Federal Register announcement, Policy Guidance for Nonsecure Custody of Juveniles in Adult Jails and Lockups; Notice of Final Policy, which can be accessed at http://www.ojjdp.gov/compliance/e-11-08-88FedRegFinalPolicy.pdf MIDWG opted not to make this change.

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Minors in Detention Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?
7. **Summary of Workgroup Discussion and Intent**

The Minors in Detention Workgroup stated that the Rec A (1) language is included and there is no need to restate. The workgroup discussed and stated that Rec A (2) lacks specificity and noted that current requirements meet or exceed the referenced document. No action was taken.

8. **ESC Action/Response**

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1150. Supervision of Minors in Non-Secure Custody.

Minors held in non-secure custody shall receive constant direct visual observation by staff of the law enforcement facility. Entry and release times shall be documented and made available for review. Monitoring a minor using audio, video, or other electronic devices shall never replace constant direct visual observation.


2. ESC Notes/Recommendations

The ESC requested the Minors in Detention Workgroup consider the input.

Rec A
At a minimum, this section should be revised to include the following:

1. This section should include language indicating that minors may not come into contact with adult prisoners while in non-secure custody. MDWG opted not to make this change.

2. This section must also include language that minors in non-secure custody shall receive constant auditory access to a staff member. MDWG opted not to make this change.

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Minors in Detention Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?
7. **Summary of Workgroup Discussion and Intent**

The Minors in Detention Workgroup discussed Rec A (1&2) and stated that non-secure minors are not held in an area where adult prisoners will be located. Non-secure minors are in constant direct supervision of an officer at all times. No action was taken.

8. **ESC Action/Response**

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1151. Minors Under the Influence of Any Intoxicating Substance in Secure or Non-Secure Custody.

Facility administrators shall develop policies and procedures providing that a medical clearance shall be obtained for minors who are under the influence of drugs, alcohol or any other intoxicating substance to the extent that they are unable to care for themselves.

Supervision of minors in secure custody in a locked room who display outward signs of being under the influence of drugs, alcohol or any other intoxicating substance shall include safety checks at least once every 15 minutes until resolution of the intoxicated state or release. These safety checks shall be documented, with actual time of occurrence recorded.

Supervision of minors in secure custody outside of a locked room who display outward signs of being under the influence of drugs, alcohol or any other intoxicating substance shall be supervised in accordance with Section 1148.

Supervision of minors in nonsecure custody who display outward signs of being under the influence of drugs, alcohol or any other intoxicating substance shall be supervised in accordance with Section 1150.

Note: Authority cited: Sections 6024 and 6030, Penal Code; and Section 210.2, Welfare and Institutions Code.

Reference: Section 6030, Penal Code; and Section 210.2, Welfare and Institutions Code.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Medical/Mental Health Workgroup nor the Minors in Detention Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?
7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroups’ recommendation.
1. Regulation and Recommended Revision

§ 1160. Purpose.

The purpose of this article is to establish minimum standards for court holding facilities in which minors are held pending appearance in juvenile or criminal court.

Unless otherwise specified in statute or these regulations, minors held in court holding facilities shall be subject to the regulations and statutes governing those facilities found in Title 15, Division 1, Chapter 1, Subchapter 4, Section 1000 et seq. and Title 24, Part I, Section 13-102, and Part 2, Section 1231, California Code of Regulations.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Minors in Detention Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1161. Conditions of Detention.

Court holding facilities shall be designed to provide the following:

(a) Separation of minors from adults in accordance with Section 208 of the Welfare and Institutions Code.
(b) Segregation of minors in accordance with an established classification plan.
(c) Secure non-public access, movement within and egress. If the same entrance/exit is used by both minors and adults, movements shall be scheduled in such a manner that there is no opportunity for contact.

An existing court holding facility built in accordance with construction standards at the time of construction shall be considered as being in compliance with this article unless the condition of the structure is determined by the appropriate authority to be dangerous to life, health, or welfare of minors. Upon notification of noncompliance with this section, the facility administrator shall develop and submit a plan for corrective action to the Board within 90 days.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?   b.) How will this revision address/fix the problem?  (What is the rationale?)

No amendments were made by the Minors in Detention Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?   b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. **Regulation and Recommended Revision**

§ 1162. Supervision of Minors.

A sufficient number of personnel shall be employed in each facility to permit unscheduled safety checks of all minors at least twice every 30 minutes, and to ensure the implementation and operation of the activities required by these regulations. There shall be a written plan that includes the documentation of safety checks.


2. **ESC Notes/Recommendations**

n/a

3. a.) What existing problem is being addressed by this revision?  
b.) How will this revision address/fix the problem?  (What is the rationale?)

No amendments were made by the Minors in Detention Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  
b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. **Summary of Workgroup Discussion and Intent**

8. **ESC Action/Response**

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1163. Classification.

The administrator of a court holding facility shall establish and implement a written plan designed to provide for the safety of staff and minors held at the facility. The plan shall include receiving and transmitting of information regarding minors who represent a risk or hazard to self or others while confined at the facility, and the segregation of such minors to the extent possible within the limits of the court holding facility, and for the separation of minors from any adult inmate(s) as required by Section 208 of the Welfare and Institutions Code.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Minors in Detention Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
# Medical/Mental Health Workgroup

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<tr>
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<td>Chief Deputy</td>
<td>Monterey County Sheriff’s Office</td>
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<tr>
<td>Dr. Alfred Joshua, Chief Medical Officer</td>
<td>MD, MBA, FAAEM, San Diego County Sheriff’s Department</td>
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<tr>
<td>Kevin Jones, Captain</td>
<td>Captain</td>
<td>Lassen County Sheriff’s Office</td>
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<tr>
<td>Kevin Kuykendall, Captain</td>
<td></td>
<td>Los Angeles County Sheriff’s Department</td>
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<tr>
<td>Gary S. Newton, Captain</td>
<td></td>
<td>Los Angeles Police Department</td>
</tr>
<tr>
<td>Dr. Karen Tait, Health Officer</td>
<td></td>
<td>Lake County Health Services Department</td>
</tr>
<tr>
<td>Kathy Wild, CO-CHAIR</td>
<td>Health Administrator</td>
<td>San Bernardino and Orange County (ret.) and Correctional Health Consultant</td>
</tr>
<tr>
<td>Kim Pearson, Deputy Agency Director</td>
<td>RN, MHA, MBA, CCHP, Orange County Health Care Agency</td>
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<tr>
<td>David Meyer, Clinical Professor</td>
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<td>Institute of Psychiatry, Law and Behavioral Sciences</td>
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<tr>
<td>Jennifer Horton, Captain</td>
<td></td>
<td>Fresno County Sheriff’s Department</td>
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<td>Bill Wilson, Correctional Healthcare Administrator</td>
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<td>Riverside County Sheriff’s Department</td>
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<td>Harriette Davis, RN</td>
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*Bold and italics indicate proposed revision; strikeout and underline indicate proposed deletions and additions.*
1. Regulation and Recommended Revision

§ 1200. Responsibility for Health Care Services.

(a) In Type I, II, III and IV facilities, the facility administrator shall have the responsibility to ensure provision of emergency and basic health care services to all inmates. Medical, dental, and mental health matters involving clinical judgments are the sole province of the responsible physician, dentist, and psychiatrist or psychologist respectively; however, security regulations applicable to facility personnel also apply to health personnel.

Each facility shall have at least one physician available to treat physical disorders. In Type IV facilities, compliance may be attained by providing access into the community; however, in such cases, there shall be a written plan for the treatment, transfer, or referral in the event of an emergency.

(b) In court holding and temporary holding facilities, the facility administrator shall have the responsibility to develop written policies and procedures which ensure provision of emergency health care services to all inmates.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Medical/Mental Health Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1202. Health Service Audits.

The health authority shall develop and implement a written plan for annual statistical summaries of health care and pharmaceutical services that are provided. The responsible physician shall also establish a mechanism to assure that the quality and adequacy of these services are assessed annually. The plan shall include a means for the correction of identified deficiencies of the health care and pharmaceutical services delivered.

Based on information from these audits, the health authority shall provide the facility administrator with an annual written report on health care and pharmaceutical services delivered.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Medical/Mental Health Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. **Regulation and Recommended Revision**

§ 1203. Health Care Staff Qualifications.

State and/or local licensure and/or certification requirements and restrictions, including those defining the recognized scope of practice specific to the profession, apply to health care personnel working in the facility the same as to those working in the community. Copies of licensing and/or certification credentials shall be on file in the facility or at a central location where they are available for review.

Note: Authority cited: Sections 6024 and 6030, Penal Code. Reference: Section 6030, Penal Code.

2. **ESC Notes/Recommendations**

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Medical/Mental Health Workgroup.

4. **What is the operational impact that will result from this revision; how will it change operations?**

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. **How will BSCC measure compliance with this revision?**

7. **Summary of Workgroup Discussion and Intent**

8. **ESC Action/Response**

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1204. Health Care Staff Procedure.

Medical/Health care performed by personnel other than a physician shall be performed pursuant to written protocol or order of the responsible physician health care staff.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

The use of a designated physician in this regulation is overly restrictive. "Responsible health care staff," as newly defined in these regulations (Section 1006), will provide flexibility by opening up access and services to inmates by utilizing available staff within their scope of practice.

4. What is the operational impact that will result from this revision; how will it change operations?

The use of "health care staff" will provide flexibility by opening up access and services to inmates by utilizing available staff within their scope of practice.

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

The use of "health care staff" may reduce costs because it gives the health authority more options to hire and use staff at varying levels within the appropriate scope of practice.

6. How will BSCC measure compliance with this revision?

The local health authority would review licensing and/or certification credentials, health care policies and procedures, and perform chart reviews.

7. Summary of Workgroup Discussion and Intent

The Medical/Mental Health Workgroup felt that amending this regulation by changing "physician" to "health care staff" will provide flexibility by opening up access and services to inmates by utilizing available staff within their scope of practice and add clarity and consistency to these regulations.

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1205. Medical/Mental Health Care Records.

(a) The health authority shall maintain individual, complete and dated health records in compliance with state statute to include, but not be limited to:

(1) receiving screening form/history;
(2) medical/mental health evaluation reports;
(3) complaints of illness or injury;
(4) names of personnel who treat, prescribe, and/or administer/deliver prescription medication;
(5) location where treated; and,
(6) medication records in conformance with section 1216.

(b) The physician/patient confidentiality privilege applies to the medical/mental health care record. Access to the medical/mental health record shall be controlled by the health authority or designee.

The health authority shall ensure the confidentiality of each inmate’s medical/mental health care record file (paper or electronic) and such files shall be maintained separately from and in no way be part of the inmate’s other jail records. Within the provisions of HIPAA 45 C.F.R., Section 164.512(k)(5)(i), the responsible physician or designee shall communicate information obtained in the course of medical/mental health screening and care to jail authorities when necessary for the protection of the welfare of the inmate or others, management of the jail, or maintenance of jail security and order.

(c) Written authorization by the inmate is necessary for transfer of medical/mental health care record information unless otherwise provided by law or administrative regulations having the force and effect of law.

(d) Inmates shall not be used for medical/mental health care recordkeeping.

Note: Authority cited: Sections 6024 and 6030, Penal Code. Reference: Section 6030, Penal Code.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem?  (What is the rationale?)

"Medical/Mental" was removed to clarify that the records referred to in this regulation pertain to all health records, not just medical records and mental health records.

"Care" was added to make it clear that the records referred to in this regulation pertain to health care.
"Paper or electronic" was added to this regulation to make it clear that the health care record may be in a paper form or electronic form.

"Within the provisions of HIPAA…" was added to describe those occasions when the responsible physician or designee shall share health screening and care information to jail authorities.

4. What is the operational impact that will result from this revision; how will it change operations?

"Medical/Mental" – none.

"Care" – none.

"Paper or electronic" – none.

"Within the provisions of HIPAA…" – this amendment will clarify what health information may be shared and could improve safety and security of the facility.

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

"Medical/Mental" – none.

"Care" – none.

"Paper or electronic" – none.

"Within the provisions of HIPAA…" – none.

6. How will BSCC measure compliance with this revision?

These changes will not affect how compliance is measured.

7. Summary of Workgroup Discussion and Intent

The Medical/Mental Health Workgroup agreed that these changes will bring clarity to these regulations.

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision


The health authority shall, in cooperation with the facility administrator, set forth in writing, policies and procedures in conformance with applicable state and federal law, which are reviewed and updated at least every two years and include but are not limited to:

(a) summoning and application of proper medical aid;
(b) contact and consultation with private other treating health care professionals; physicians;
(c) emergency and non-emergency medical and dental services, including transportation;
(d) provision for medically required dental and medical prostheses and eyeglasses;
(e) notification of next of kin or legal guardian in case of serious illness which may result in death;
(f) provision for screening and care of pregnant and lactating women, including prenatal and postpartum information and health care, including but not limited to access to necessary vitamins as recommended by a doctor, information pertaining to childbirth education and infant care, and other services mandated by statute;
(g) screening, referral and care of mentally disordered and developmentally disabled inmates;
(h) implementation of special medical programs;
(i) management of inmates suspected of or confirmed to have communicable diseases;
(j) the procurement, storage, repackaging, labeling, dispensing, administration/delivery to inmates, and disposal of pharmaceuticals;
(k) use of non-physician personnel in providing medical care;
(l) provision of medical diets;
(m) patient confidentiality and its exceptions;
(n) the transfer of pertinent individualized health care information, or individual documentation that no health care information is available, to the health authority of another correctional system, medical facility, or mental health facility at the time each inmate is transferred and prior notification pursuant to Health and Safety Code Sections 121361 and 121362 for inmates with known or suspected active tuberculosis disease. Procedures for notification to the transferring health care staff shall allow sufficient time to prepare the summary. The summary information shall identify the sending facility and be in a consistent format that includes the need for follow-up care, diagnostic tests performed, medications prescribed, pending appointments, significant health problems, and other information that is necessary to provide for continuity of health care. Necessary inmate medication and health care information shall be provided to the transporting staff, together with precautions necessary to protect staff and inmate passengers from disease transmission during transport.
(o) forensic medical services, including drawing of blood alcohol samples, body cavity searches, and other functions for the purpose of prosecution shall not be performed by medical personnel responsible for providing ongoing care to the inmates.

(p) Provisions for application and removal of restraints on pregnant inmates consistent with Penal Code Section 3407.
(q) Other services mandated by statute.
Note: Authority cited: Sections 6024 and 6030, Penal Code. Reference: Section 6030, Penal Code.

2. ESC Notes/Recommendations

The ESC requested the Medical/Mental Health Workgroup consider the input.

**Rec A**
Add “the prohibitions on restraint of pregnant prisoners in Penal Code Section 3407” and “medical professionals’ authority to order restraints removed”.

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

"Private physicians" was removed and "other treating health care professionals" was added for clarity. Private physicians are not the only health professionals that may be contacted.

"and other services mandated by statute" was removed and placed in the new subsection (q). Beyond statutes pertaining to pregnant and lactating women, there are a number of statutory requirements that the health authority must include in the health care procedures manual.

Subsection (p) was added to assure that this topic is addressed in the health care procedures manual and promote coordination between health care staff and custody staff.

4. What is the operational impact that will result from this revision; how will it change operations?

"Private physicians" was removed and "other treating health professionals" – none.

"and other services mandated by statute" – none.

Subsection (p) – none.

Subsection (q) – none.

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

"Private physicians" was removed and "other treating health professionals" – none.

"and other services mandated by statute" – none.

Subsection (p) – none.

Subsection (q) – none.
6. How will BSCC measure compliance with this revision?

Inspectors will review policies and procedures for compliance.

7. Summary of Workgroup Discussion and Intent

The ESC directed the Medical/Mental Health Workgroup to consider adding "the prohibitions on restraint of pregnant prisoners in Penal Code Section 3407." The workgroup agreed to add a new Section 1058.5 Restraints and Pregnant Inmates to these regulations to capture the statutory prohibitions on restraint of pregnant prisoners as required by Penal Code Section 3407. The phrase “medical professionals’ authority to order restraints removed” is in that regulation.

Additionally, they agreed that the other changes provided clarity.

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1206.5. Management of Communicable Diseases in a Custody Setting.

(a) The responsible physician, in conjunction with the facility administrator and the county health officer, shall develop a written plan to address the identification, treatment, control and follow-up management of tuberculosis and other communicable diseases including, but not limited to, tuberculosis and other airborne diseases. The plan shall cover the intake screening procedures, identification of relevant symptoms, referral for a medical evaluation, treatment responsibilities during incarceration and coordination with public health officials for follow-up treatment in the community. The plan shall reflect the current local incidence of communicable diseases which threaten the health of inmates and staff.

(b) Consistent with the above plan, the health authority shall, in cooperation with the facility administrator and the county health officer, set forth in writing, policies and procedures in conformance with applicable state and federal law, which include, but are not limited to:

   (1) the types of communicable diseases to be reported;
   (2) the persons who shall receive the medical reports;
   (3) sharing of medical information with inmates and custody staff;
   (4) medical procedures required to identify the presence of disease(s) and lessen the risk of exposure to others;
   (5) medical confidentiality requirements;
   (6) housing considerations based upon behavior, medical needs, and safety of the affected inmates;
   (7) provisions for inmate consent that address the limits of confidentiality; and,
   (8) reporting and appropriate action upon the possible exposure of custody staff to a communicable disease.

Note: Authority cited: Section 6030, Penal Code. Reference: Sections 6030, 7501, and 7552, Penal Code.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem?  (What is the rationale?)

This regulation contains redundant language. The redundancy was removed providing clarity to this regulation.

4. What is the operational impact that will result from this revision; how will it change operations?

No operational impact.
5. a.) What is the fiscal impact that will result from this revision?  
   b.) How can it be justified?

No fiscal impact.

6. How will BSCC measure compliance with this revision?

This change will not affect how compliance is measured.

7. Summary of Workgroup Discussion and Intent

The Medical/Mental Health Workgroup agreed that this regulation contained redundant language.

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1207. Medical Receiving Screening.

With the exception of inmates transferred directly within a custody system with documented receiving screening, a screening shall be completed on all inmates at the time of intake. This screening shall be completed in accordance with written procedures and shall include but not be limited to medical and mental health problems, developmental disabilities, and tuberculosis and other communicable diseases, including, but not limited to, tuberculosis and other airborne diseases. The screening shall be performed by licensed health personnel or trained facility staff, with documentation of staff training regarding site specific forms with appropriate disposition based on responses to questions and observations made at the time of screening. The training depends on the role staff are expected to play in the receiving screening process.

The facility administrator and responsible physician shall develop a written plan for complying with Penal Code Section 2656 (orthopedic or prosthetic appliance used by inmates).

There shall be a written plan to provide care for any inmate who appears at this screening to be in need of or who requests medical, mental health, or developmental disability treatment.

Written procedures and screening protocol shall be established by the responsible physician in cooperation with the facility administrator.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

The second sentence contains redundant language. The redundancy was removed providing clarity to this regulation.

The last sentence was revised to better describe the training required of those who are expected to play a role in the receiving screening process.

4. What is the operational impact that will result from this revision; how will it change operations?

Neither amendment will change operations. The regulation currently requires training of facility staff.

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?
Neither amendment will have a fiscal impact. The regulation currently requires training of facility staff.

6. **How will BSCC measure compliance with this revision?**

The inspector would review training records.

7. **Summary of Workgroup Discussion and Intent**

The Medical/Mental Health Workgroup agreed that this regulation required clarity. First, the redundant language was removed, mirroring changes in Section 1206.5 and 1051. Second, the workgroup agreed to add detail to this regulation to clarify what the training should encompass for those who are expected to play a role in the receiving screening process.

8. **ESC Action/Response**

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1207.5. Special Mental Disorder Assessment.

An additional mental health screening will be performed, according to written procedures, on women who have given birth within the past year and are charged with murder or attempted murder of their infants. Such screening will be performed at intake and if the assessment indicates postpartum psychosis a referral for further evaluation will be made.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Medical/Mental Health Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1208. Access to Treatment.

The health authority, in cooperation with the facility administrator, shall develop a written plan for identifying and/or referring any inmate who appears to be in need of medical, mental health or developmental disability treatment at any time during his/her incarceration subsequent to the receiving screening. The written plan shall also include the assessment and treatment of such inmates as described in Section 1207, Medical Receiving Screening. Assessment and treatment shall be performed by either licensed health personnel or by persons operating under the authority and/or direction of licensed health personnel.

Note: Authority cited: Sections 6024 and 6030, Penal Code. Reference: Section 6030, Penal Code.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem?  (What is the rationale?)

No amendments were made by the Medical/Mental Health Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1208.5. Health Care Maintenance.

For inmates undergoing prolonged incarceration, an age appropriate and risk factor based health maintenance visit shall take place within the inmate's second anniversary of incarceration. The specific components of the health maintenance examinations shall be determined by the responsible physician based on the age, gender, and health of the inmate. Thereafter, the health maintenance examinations shall be repeated at reasonable intervals as determined by the responsible physician.

Note: Authority cited: Sections 6024 and 6030, Penal Code. Reference: Section 6030, Penal Code.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

With the advent of Public Safety Realignment, inmates may be held in county jails for extended periods of time. The Title 15, Minimum Standards for Local Detention Facilities do not currently address health care maintenance for these inmates. This regulation will require health care maintenance examinations upon the second anniversary of incarceration.

4. What is the operational impact that will result from this revision; how will it change operations?

This regulation will require appropriate health care staff to perform more frequent health examinations.

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

Increased health care examinations will result in increased costs. Any increased costs will be justified by the improvement in health care for inmates held for prolonged periods of time.

6. How will BSCC measure compliance with this revision?

Inspectors will review policies and procedures and medical charts.

7. Summary of Workgroup Discussion and Intent

The Medical/Mental Health Workgroup discussed the issue of long-term stays in California's county jails. They agreed that due to the length of time inmates could be held, health maintenance examinations should be provided to inmates. This will allow health care staff to monitor the health of the inmates that remain in custody for extended periods of time and ensure preventative care.
8. ESC Action/Response

Accept the workgroup’s recommendation with a modification to the first sentence by replacing “upon” with “within”, to read “…shall take place within…” This was done to avoid having an exact date become the required time for the health maintenance visit.
1. Regulation and Recommended Revision

§ 1209. Mental Health Services and Transfer to Treatment Facility.

(a) The health authority, in cooperation with the mental health director and facility administrator, shall establish policies and procedures to provide mental health services. These services shall include but not be limited to:

1. Identification and referral of inmates with screening for mental health needs;
2. Mental health treatment programs provided by qualified staff, including the use of telehealth;
3. Crisis intervention services and management of acute psychiatric episodes;
4. Basic mental health services provided to inmates as clinically indicated;
5. Medication support services;
6. The provision of health services sufficiently coordinated such that care is appropriately integrated, medical and mental health needs are met, and the impact of any of these conditions on each other is adequately addressed.

(b) Unless the county has elected to implement the provisions of Penal Code Section 1369.1, a mentally disordered inmate who appears to be a danger to himself or others, or to be gravely disabled, shall be transferred for further evaluation to a designated Lanterman Petris Short treatment facility designated by the county and approved by the State Department of Mental Health for diagnosis and treatment of such apparent mental disorder pursuant to Penal Code section 4011.6 or 4011.8 unless the jail contains a designated Lanterman Petris Short treatment facility. Prior to the transfer, the inmate may be evaluated by licensed health personnel to determine if treatment can be initiated at the correctional facility. Licensed health personnel may perform an onsite assessment to determine if the inmate meets the criteria for admission to an inpatient facility, or if treatment can be initiated in the correctional facility.

(c) If the county elects to implement the provisions of Penal Code Section 1369.1, the health authority, in cooperation with the facility administrator, shall establish policies and procedures for involuntary administration of medications. The procedures shall include, but not be limited to:

1. Designation of licensed personnel, including psychiatrist and nursing staff, authorized to order and administer involuntary medication;
2. Designation of an appropriate setting where the involuntary administration of medication will occur;
3. Designation of restraint procedures and/or devices that may be used to maintain the safety of the inmate and facility staff;
4. Development of a written plan to monitor the inmate’s medical condition following the initial involuntary administration of a medication, until the inmate is cleared as a result of an evaluation by, or consultation with, a psychiatrist;
5. Development of a written plan to provide a minimum level of ongoing monitoring of the inmate following return to facility housing. This monitoring may be performed by custody staff trained to recognize signs of possible medical problems and alert medical staff when indicated; and

6. Documentation of the administration of involuntary medication in the inmate’s medical record.


2. ESC Notes/Recommendations

The ESC requested the Medical/Mental Health Workgroup consider the input, giving attention to the following:

1. Review the Health and Safety Code and Calif. Code of Regulations with reference to treatment facilities. A treatment facility in a jail needs to be defined. MMHWG clarified that a treatment facility, in the context of this regulation, is a Lanterman Petris Short treatment facility.

Rec A
At a minimum, this section should be revised to include the following:

1. There shall have sufficient numbers and types of qualified, licensed mental health staff sufficient to provide a complete range of mental health services without delay. MMHWG opted not to make this change.

2. Individual and group counseling, psychosocial and psychoeducational programs, and psychotropic medication management should be added to the listed services. With modifications to this language, the MMHWG opted to make this change.

3. Outpatients receiving basic mental health services are seen as clinically indicated, but not less than every 90 days. With modifications to this language, the MMHWG opted to make this change.

4. Mental health, medical, and substance abuse services shall be sufficiently coordinated such that healthcare is appropriately integrated, medical and mental health needs are met, and the impact of any of these conditions on each other is adequately addressed. The MMHWG added this language.


Rec B
Mental Health Services and Transfer to Treatment Facility: A fifth recommendation should be a connection to alternative mental health treatment outside of custody (in-patient or out-patient). MMHWG opted not to make this change.

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)
Subsection (a) 1 describes what is intended by the term "screening" providing clarity to this regulation.

This regulation currently requires the provision of mental health services. Subsection (a) 2 was added to assure that mental health programs are provided by appropriately qualified staff while acknowledging that local resources may dictate the need for the flexibility of telehealth (newly defined in Section 1006).

In subsection (a) 3 the term "services" was added and "and management of acute psychiatric episodes" deleted. This change was made to emphasize that the whole of crisis intervention must be addressed by the health care procedures manual. In addition, the lower case "c" was replaced by an upper case "C" to provide consistency within this list of services.

Subsection (a) 4 was added to make it clear that basic mental health services are to be provided to inmates in local detention facilities.

In subsection (a) 5, the lower case "m" was replaced by an upper case "M" to provide consistency within this list of services.

Subsection (a) 6 was added to assure that mental health services are provided in a coordinated approach with other health care disciplines.

Subsection (b) was amended to clarify that the term "designated treatment facility" means a Lanterman Petris Short treatment facility.

4. What is the operational impact that will result from this revision; how will it change operations?

Adding clarifying language to subsection (a) 1 will not result in an operational impact.

This regulation currently requires the provision of mental health services. Allowing jurisdictions the flexibility to use telehealth in subsection (a) 2, could make it much easier for inmates to receive appropriate mental health care.

The changes in subsection (a) 3 will not result in an operational impact.

This regulation currently requires the provision of mental health services. The change in subsection (a) 4 will not result in an operational impact.

The non-substantive change in subsection (a) 5 will not result in an operational impact.

Subsection (a) 6 was added to assure that mental health services are provided in a coordinated approach with other health care disciplines. The operational impact will vary depending on the level of coordination between health care disciplines. If these efforts are not coordinated policies, procedures and practice will need to be modified.
The change to subsection (b) clarified the intent of this regulation and will not result in an operational impact.

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

The change to subsection (a) 1 will not result in a fiscal impact.

Allowing the use of telehealth in subsection (a) 2 could result in increased up-front costs due to the purchase of video equipment. However, there could be long-term cost savings because the qualified staff providing mental health programs could be providing those services by video camera in lieu of potentially driving long distances to see inmates.

The non-substantive change in subsection (a) 3 will not result in a fiscal impact. Additionally, subsection (a) 3 will not result in a fiscal impact because this regulation already required crisis intervention services.

The new subsection (a) 4 will not have a fiscal impact because this regulation already requires the provision of mental health services.

The non-substantive change in subsection (a) 5 will not result in a fiscal impact.

The change in subsection (a) 6 could result in increased costs depending on the level of coordination between health care disciplines. If these efforts are not coordinated policies, procedures and practice will need to be modified. The costs are justified by the improved quality of inmate health care.

The clarifying change to subsection (b) will not result in a fiscal impact.

6. How will BSCC measure compliance with this revision?

Inspectors will review policies and procedures and medical charts.

7. Summary of Workgroup Discussion and Intent

The Medical/Mental Health Workgroup first discussed the confusing language in subsection (b) and agreed that adding "Lanterman Petris Short" before treatment in the first sentence would provide necessary clarity.

The group agreed that it was important to expand the requirements in subsections (a) 1-4 to better address the types of mental health services that must be addressed by written policies and procedures.

It was felt that the modifications to subsections (a) 1 and 3 better describe what is intended by this regulation. Subsections (a) 2, 4 and 6 expand on the original language of the regulation describing the types of mental health services needed in local detention facilities.
8. ESC Action/Response

Accept the workgroup’s recommendations.
1. Regulation and Recommended Revision

§ 1210. Individualized Treatment Plans.

(a) For each inmate treated by a mental health service in a jail, the treatment responsible health care staff shall develop a written treatment plan. The custody staff shall be informed of the treatment plan when necessary, to ensure coordination and cooperation in the ongoing care of the inmate. This treatment plan shall include referral to treatment after release from the facility when recommended by treatment staff.

(b) For each inmate treated for health conditions for which additional treatment, special accommodations and/or a schedule of follow-up care is needed during the period of incarceration a major medical problem in a jail, the treatment responsible health care staff shall develop a written treatment plan. The custody staff shall be informed of the treatment plan when necessary, to ensure coordination and cooperation in the ongoing care of the inmate. This treatment plan shall include referral to treatment after release from the facility when recommended by treatment staff.


2. ESC Notes/Recommendations

The ESC has accepted the recommendation to revise the language of this regulation, with this exception: strike the word “qualified”.

Rec A
At a minimum, this section should be revised to include language:

1. Specifying that qualified, licensed staff shall develop a written treatment plan.

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

This regulation was amended to delete the term "treatment" and in its place add "responsible health care." As defined in Section 1006, "responsible health care staff" is the appropriate term to describe the individuals qualified to develop a treatment plan and provides consistency and clarity to these regulations.

4. What is the operational impact that will result from this revision; how will it change operations?

No operational impact.

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

No fiscal impact.
6. **How will BSCC measure compliance with this revision?**

This change does not affect how compliance will be measured.

7. **Summary of Workgroup Discussion and Intent**

The Medical/Mental Health Workgroup agreed that deleting the term "treatment" and adding "responsible health care" to describe the staff that are qualified to develop a treatment plan would add clarity and consistency to these regulations.

8. **ESC Action/Response**

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1211. Sick Call.

There shall be written policies and procedures developed by the facility administrator, in cooperation with the health authority, which provides for a daily sick call conducted for all inmates or provision made that any inmate requesting medical/mental health attention be given such attention.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Medical/Mental Health Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1212. Vermin Control.

The responsible physician shall develop a written plan for the control and treatment of vermin-infested inmates. There shall be written, medical protocols, signed by the responsible physician, for the treatment of persons suspected of being infested or having contact with a vermin-infested inmate.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Medical/Mental Health Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1213. Detoxification Treatment.

The responsible physician shall develop written medical policies on detoxification which shall include a statement as to whether detoxification will be provided within the facility or require transfer to a licensed medical facility. The facility detoxification protocol shall include procedures and symptoms necessitating immediate transfer to a hospital or other medical facility.

Facilities without medically licensed personnel in attendance shall not retain inmates undergoing withdrawal reactions judged or defined in policy, by the responsible physician, as not being readily controllable with available medical treatment. Such facilities shall arrange for immediate transfer to an appropriate medical facility.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Medical/Mental Health Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

Based on comments from the field, it appears that there is some confusion between the term "sobering" as used in Section 1056 Use of Sobering Cell and "detoxification" as used in Section 1213 Detoxification Treatment. The Medical/Mental Health Workgroup agreed that adding a definition for "medical detoxification" (in Section 1006) should clarify the intent of both regulations.

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1214. Informed Consent.

The health authority shall set forth in writing a plan for informed consent of inmates in a language understood by the inmate. Except for emergency treatment, as defined in Business and Professions Code Section 2397 and Title 15, Section 1217, all examinations, treatments and procedures affected by informed consent standards in the community are likewise observed for inmate care. In the case of minors, or conservatees, the informed consent of parent, guardian or legal custodian applies where required by law. Any inmate who has not been adjudicated to be incompetent may refuse non-emergency medical and mental health care. Absent informed consent in non-emergency situations, a court order is required before involuntary medical treatment can be administered to an inmate.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Medical/Mental Health Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1215. Dental Care.

The facility administrator shall develop written policies and procedures to ensure emergency and medically required dental care is provided to each inmate, upon request, under the direction and supervision of a dentist, licensed in the state.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Medical/Mental Health Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1216. Pharmaceutical Management.

(a) The health authority in consultation with a pharmacist and the facility administrator, shall develop written plans, establish procedures, and provide space and accessories for the secure storage, the controlled administration, and disposal of all legally obtained drugs. Such plans, procedures, space and accessories shall include, but not be limited to, the following:

(1) securely lockable cabinets, closets, and refrigeration units;
(2) a means for the positive identification of the recipient of the prescribed medication;
(3) procedures for administration/delivery of medicines to inmates as prescribed;
(4) confirming that the recipient has ingested the medication or accounting for medication under self-administration procedures outlined in Section 1216(d);
(5) that prescribed medications have or have not been administered, by whom, and if not, for what reason;
(6) prohibiting the delivery of drugs by inmates;
(7) limitation to the length of time medication may be administered without further medical evaluation; and,
(8) limitation to the length of time required for a physician’s signature on verbal orders.

A written report shall be prepared by a pharmacist, no less than annually, on the status of pharmacy services in the institution. The pharmacist shall provide the report to the health authority and the facility administrator.

(b) Consistent with pharmacy laws and regulations, the health authority shall establish written protocols that limit the following functions to being performed by the identified personnel:

(1) Procurement shall be done by a physician, dentist, pharmacist, or other persons authorized by law.
(2) Storage of medications shall assure that stock supplies of legend medications shall be accessed only by licensed health personnel. Supplies of legend medications that have been dispensed and supplies of over-the-counter medications may be accessed by either licensed or non-licensed personnel.
(3) Repackaging shall only be done by a physician, dentist, pharmacist, or other persons authorized by law.
(4) Preparation of labels can only be done by a physician, dentist, pharmacist or other persons, either licensed or non-licensed, provided the label is checked and affixed to the medication container by the physician, dentist, or pharmacist before administration or delivery to the inmate. Labels shall be prepared in accordance with section 4076, Business and Professions Code.
(5) Dispensing shall only be done by a physician, dentist, pharmacist, or persons authorized by law.
(6) Administration of medication shall only be done by licensed health personnel who are authorized to administer medication acting on the order of a prescriber.
(7) Delivery of medication may be done by either licensed or non-licensed personnel, e.g., custody staff, acting on the order of a prescriber.
(8) Disposal of legend medication shall be done in accordance with pharmacy laws and regulations and requires any combination of two of the following classifications: physician, dentist, pharmacist, or registered nurse. Controlled substances shall be disposed of in accordance with the Drug Enforcement Administration disposal procedures.

(c) Policy and procedures on “over-the-counter” medications shall include, but not be limited to, how they are made available, documentation when delivered by staff and precautions against hoarding large quantities.

(d) Policy and procedures may allow inmate self-administration of prescribed medications under limited circumstances. Policies and procedures shall include but are not limited to the following considerations:

1. Medications permitted for self-administration are limited to those with no recognized abuse potential. Medications for treatment of tuberculosis, psychotropic medication, controlled substances, injectables and any medications for which documentation of ingestion is essential are excluded from self-administration.
2. Inmates with histories of frequent rule violations of any type, or who are found to be in violation of rules regarding self-administration, are excluded from self-administration.
3. Prescribing health care staff document that each inmate participating in self-administration is capable of understanding and following the rules of the program and instructions for medication use.
4. Provisions are made for the secure storage of the prescribed medication when it is not on the inmate’s person.
5. Provisions are made for the consistent enforcement of self-medication rules by both custody and health care staff, with systems of communication among them when either one finds that an inmate is in violation of rules regarding self-administration.
6. Provisions are made for health care staff to perform documented assessments of inmate compliance with self-administration medication regimens. Compliance evaluations are done with sufficient frequency to guard against hoarding medication and deterioration of the inmate’s health.

5. a.) What is the fiscal impact that will result from this revision?  
   b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1217. Psychotropic Medications.

The responsible physician, in cooperation with the facility administrator, shall develop written policies and procedures governing the use of psychotropic medications. An inmate found by a physician to be a danger to him/herself or others by reason of mental disorders may be involuntarily given psychotropic medication appropriate to the illness on an emergency basis. Psychotropic medication is any medication prescribed for the treatment of symptoms of psychoses and other mental and emotional disorders. An emergency is a situation in which action to impose treatment over the inmate’s objection is immediately necessary for the preservation of life or the prevention of serious bodily harm to the inmate or others, and it is impracticable to first gain consent. It is not necessary for harm to take place or become unavoidable prior to treatment.

If psychotropic medication is administered during an emergency, such medication shall be only that which is required to treat the emergency condition. The medication shall be prescribed by a physician following a clinical evaluation. The responsible physician shall develop a protocol for the supervision and monitoring of inmates involuntarily receiving psychotropic medication.

Psychotropic medication shall not be administered to an inmate absent an emergency unless the inmate has given his or her informed consent in accordance with Welfare and Institutions Code Section 5326.2, or has been found to lack the capacity to give informed consent consistent with the county’s hearing procedures under the Lanterman-Petris-Short Act for handling capacity determinations and subsequent reviews.

There shall be a policy which limits the length of time both voluntary and involuntary psychotropic medications may be administered and a plan of monitoring and re-evaluating all inmates receiving psychotropic medications, including a review of all emergency situations.

The administration of psychotropic medication is not allowed for disciplinary reasons.

Note: Authority cited: Sections 6024 and 6030, Penal Code. Reference: Section 6030, Penal Code.

2. ESC Notes/Recommendations

The ESC requested the Medical/Mental Health Workgroup consider the input.

Rec A

In-text Addition & Change: The responsible physician, in cooperation with the facility administrator, shall develop written policies and procedures governing the use of psychotropic medications. An inmate found by a physician to be a danger to him/herself or others by reason of mental disorders may be involuntarily given psychotropic medication appropriate to the illness on an emergency basis, if there is no less restrictive means of reducing risk to life or bodily harm. Psychotropic medication is any medication prescribed for the treatment of symptoms of psychoses and other mental and emotional disorders. An emergency is a situation in which action to impose treatment over the inmate’s objection is immediately necessary for the preservation of life or the
prevention of serious bodily harm to the inmate or others, and it is impracticable to first gain consent. It is not necessary for harm to take place or become unavoidable prior to treatment. MMHWG agreed to the second change.

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

The phrase "or become unavoidable" in the last sentence of the first paragraph is not needed in this regulation because it is subjective.

4. What is the operational impact that will result from this revision; how will it change operations?

No operational impact.

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

No fiscal impact.

6. How will BSCC measure compliance with this revision?

No impact on facility inspections.

7. Summary of Workgroup Discussion and Intent

The Medical/Mental Health Workgroup agreed that the phrase "or become unavoidable" in the last sentence of the first paragraph is not needed in this regulation because it is subjective.

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1219. Suicide Prevention Program.

The facility administrator and the health authority shall develop a written plan for a suicide prevention program designed to identify, monitor, and provide treatment to those inmates who present a suicide risk.


2. ESC Notes/Recommendations

The ESC requested the Medical/Mental Health Workgroup consider the input, giving attention to the following:

1. These are minimum standards.

Rec A
Also cited in 1055: Instead of the use of Safety Cells for suicide prevention, group housing of suicidal inmates when possible based on level and classification. Isolation only when absolutely necessary. Mental Health professionals complete an objective assessment of suicide risk level to determine which inmate necessitate isolation in a safety cell, and which may be housed in a group setting for a better outcome. Based on a 20 year study by the National Institute of Corrections survey of suicides in all county jails nationwide. That study recommended group housing and isolating only when unavoidable.

Rec B
In-text Addition: …a written plan for a suicide prevention program designed to identify, monitor, and provide treatment, either individually or in a group setting, to those inmates who present a suicide risk.

Rec C
At a minimum, this section should:

1. More fully describe the components of an adequate prevention plan. At a minimum, it should include a program as described in National Commission on Correctional Health Care Standard J-G-05.

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

4. What is the operational impact that will result from this revision; how will it change operations?
5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

*Resulting from the edits to this regulation, it was moved to its new location – Section 1030 within the Administration Workgroup section, where all notes can be located.*
1. Regulation and Recommended Revision

§ 1220. First Aid Kit(s).

First aid kit(s) shall be available in all facilities. The responsible physician shall approve the contents, number, location and procedure for periodic inspection of the kit(s). In Court and Temporary Holding facilities, the facility administrator shall have the above approval authority, pursuant to Section 1200 of these regulations.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Medical/Mental Health Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1230. Food Handlers.

The responsible physician, in cooperation with the food services manager and the facility administrator, shall develop written procedures for medical screening of inmate food service workers prior to working in the facility kitchen. Additionally, there shall be written procedures for education and ongoing monitoring and cleanliness of these workers in accordance with standards set forth in Health and Safety Code, California Retail Food Code.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Medical/Mental Health Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
NUTRITIONAL HEALTH WORKGROUP

Jan Wyatt-Lucha, CHAIR
Dietician and Food Services Manager
Marin County Sheriff’s Department

Michelle Black, Sergeant
Kern County Sheriff’s Department

Paul Godman, Sergeant
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*Bold and italics indicate proposed revision.
1. Regulation and Recommended Revision

§ 1240. Frequency of Serving.

In Temporary Holding, Type I, II, and III facilities, and those Type IV facilities where food is served, food shall be served three times in any 24-hour period. At least one of these meals shall include hot food. Supplemental food must be served to inmates if more than 14 hours pass between meals. Additionally, supplemental food must be served to inmates on medical diets in less than a 14-hour period if prescribed by the responsible physician.

A minimum of fifteen minutes shall be allowed for the actual consumption of each meal except for those inmates on medical diets where the responsible physician has prescribed additional time.

Provisions shall be made for inmates who may miss a regularly scheduled facility meal. They shall be provided with a substitute meal and beverage, and inmates on medical diets shall be provided with their prescribed meal.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Nutritional Health Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

The Nutritional Health Workgroup discussed the potential need to change wording in this regulation so that inmates were not provided with both their breakfast and lunch at the same time.
The concerns were discussed, as well as the impacted operational issues. It was ultimately decided to not make any changes to this regulation.

8. **ESC Action/Response**

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1241. Minimum Diet.

The minimum diet provided shall be based upon the nutritional and caloric requirements found in the 2011 Dietary Reference Intakes (DRI) of the Food and Nutrition Board, Institute of Medicine of the National Academies, the 2008 California Daily Food Guide, and the 2015-2020 Dietary Guidelines for Americans. Facilities electing to providing religious, vegetarian or medical diets, and facilities that provide religious diets, shall also conform to these nutrition standards. The nutritional requirements for the minimum diet are specified in the following subsections. A daily or weekly average of the food group’s requirement is acceptable. A wide variety of food should be served.

(a) Protein Group. Includes beef, veal, lamb, pork, poultry, fish, eggs, cooked dry beans, peas, lentils, nuts, peanut butter and textured vegetable protein (TVP). One serving equals 14 grams or more of protein; the daily requirements shall be equal to three servings (a total of 42 grams per day or 294 grams per week). In addition, there shall be a requirement to serve a fourth serving from the legumes three days a week.

(b) Dairy Group. Includes milk (fluid, evaporated or dry; nonfat, 1% or 2% reduced fat, etc.); cheese (cottage, cheddar, etc.); yogurt; ice cream or ice milk; and pudding. A serving is equivalent to 8 oz. of fluid milk and provides at least 250 mg. of calcium. All milk shall be pasteurized and fortified with Vitamins A and D. The daily requirement is three servings. One serving can be from a fortified food containing at least 250 mg. of calcium. For persons 15-17 years of age, or pregnant and lactating women, the requirement is four servings of milk or milk products.

(c) Vegetable-Fruit Group. Includes fresh, frozen, dried and canned vegetables and fruits. One serving equals: 1/2 cup vegetable or fruit; 6 ounces of 100% juice; 1 medium apple, orange, banana, or potato; 1/2 grapefruit; or 1/4 cup dried fruit. The daily requirement of fruits and vegetables shall be five servings. At least one serving shall be from each of the following three categories:

1. One serving of a fresh fruit or vegetable per day, or seven (7) servings per week.
2. One serving of a Vitamin C source containing 30 mg. or more per day or seven (7) servings per week.
3. One serving of a Vitamin A source, fruit or vegetable, containing 200 micrograms Retinol Equivalents (RE) or more per day, or seven servings per week.

(d) Grain Group. Includes bread, rolls, pancakes, sweet rolls, ready-to-eat cereals, cooked cereals, corn bread, pasta, rice, tortillas, etc. and any food item containing whole or enriched grains. At least three servings from this group must be made with some whole grains. The daily requirements shall be a minimum of six servings.
Providing only the minimum servings outlined in this regulation is not sufficient to meet the inmates’ caloric requirements. Additional servings from the dairy, vegetable-fruit, and bread-cereal groups must be provided in amounts to meet caloric requirements. In keeping with chronic disease prevention goals, total Saturated dietary fat should not exceed 10% of total calories on a weekly basis. Fat shall be added only in minimum amounts necessary to make the diet palatable. Facility diets shall consider the recommendations and intentions of the 2015-2020 Dietary Guidelines of Americans of reducing overall sugar and sodium levels.

Note: Authority cited: Sections 6024 and 6030, Penal Code. Reference: Section 6030, Penal Code.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem?  (What is the rationale?)

The 2015-2020 Dietary Guidelines were released on 01/07/2016. This regulation was updated accordingly, to include:

- The California Daily Food Guide was changed to the California Food Guide. All other changes were made to be consistent.
- Dairy was further defined to allow for flexibility without a change to the regulation.
- Increased grain (by deleting “some”) was done to meet the guidelines.
- Sodium and Sugar intake should be a consideration in determining proper diet.

The revisions were made to correct the verbiage to be consistent with the new guidelines. (Dairy change allows for more flexibility and grain change is to be consistent with the language.)

4. What is the operational impact that will result from this revision; how will it change operations?

Meal planning will need to reflect the updated regulation requirements.

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

The change will be cost effective and is justified as the change reduces the costs of dairy.

6. How will BSCC measure compliance with this revision?

The inspector will measure compliance with the revised regulation language.

7. Summary of Workgroup Discussion and Intent

The Nutritional Health Workgroup discussed the new 2015-2020 Dietary Guidelines and the suggestions for the revisions were ultimately made.
8. ESC Action/Response

Accept the workgroup’s recommendation, with a modification as requested. The workgroup representative requested the ESC disregard the previously recommended changes to the dairy group category, as the workgroup has since learned the resulting food product is not readily available for purchase. The workgroup had previously recommended the following change:

- (b) Dairy Group. Includes milk (fluid, evaporated or dry; nonfat, 1% or 2% reduced fat, etc.); cheese (cottage, cheddar, etc.); yogurt; ice cream or ice milk; and pudding. A serving is equivalent to 8 oz. of fluid milk and provides at least 250 mg. of calcium. All milk shall be pasteurized and fortified with Vitamins A and D. The daily requirement is three servings. One to two servings can be from a fortified food that has the nutrients equivalent to 8 oz. of fluid milk, containing at least 250 mg. of calcium. For persons 15-17 years of age, or pregnant and lactating women, the requirement is four servings of milk or milk products.
1. Regulation and Recommended Revision

§ 1242. Menus.

Menus in Type II and III facilities, and those Type IV facilities where food is served, shall be
planned at least one month in advance of their use. Menus shall be planned to provide a variety of
foods, thus preventing repetitive meals. Menus shall be approved by a registered dietitian before
being used.

If any meal served varies from the planned menu, the change shall be noted in writing on the menu
and/or production sheet.

Menus, as planned, including changes, shall be evaluated by a registered dietitian at least annually.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision
address/fix the problem? (What is the rationale?)

No amendments were made by the Nutritional Health Workgroup.

4. What is the operational impact that will result from this revision; how will it change
operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be
justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1243. Food Service Plan.

Facilities shall have a written food service plan that shall comply with the applicable California Retail Food Code. In facilities with an average daily population of 100 or more, there shall be employed or available, a trained experienced food services manager to prepare and implement a food service plan. In facilities of less than an average daily population of 100 that do not employ or have a food services manager available, the facility administrator shall prepare a food service plan. The plan shall include, but not limited to, the following policies and procedures:

(a) menu planning;
(b) purchasing;
(c) storage and inventory control;
(d) food preparation;
(e) food serving;
(f) transporting food;
(g) orientation and ongoing training;
(h) personnel supervision;
(i) budgets and food cost accounting;
(j) documentation and record keeping;
(k) emergency feeding plan;
(l) waste management; and

(m) maintenance and repair; and

(n) three-day mainline sample tray.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

Standard practice for many facilities is to prepare and hold a three-day sample tray. This is an industry best practice in the event that a food borne illness occurs, the trays may be tested to either determine the cause or to rule out a food borne illness.

4. What is the operational impact that will result from this revision; how will it change operations?

The operational impact would be reflected in the time it takes for kitchen staff to make and store the tray.
5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

The fiscal impact of this change would be the cost of one additional plate in each of three meals per day, as well as the training to ensure staff accomplish this task. It is justified as it is a best practice in the industry.

6. How will BSCC measure compliance with this revision?

The inspector would determine compliance by reviewing practices in comparison to the regulation.

7. Summary of Workgroup Discussion and Intent

The Nutritional Health Workgroup discussed best practices to ensure food safety/health of inmates. To keep a mainline sample tray ensures better quality of food preparation. This was discussed at length.

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1245. Kitchen Facilities, Sanitation, and Food Storage.

(a) Kitchen facilities, sanitation, and food preparation, service, and storage shall comply with standards set forth in Health and Safety Code, Division 104, Part 7, Chapters 1-13, Sections 113700 et seq. California Retail Food Code.

(b) In facilities where inmates prepare meals for self-consumption or where frozen meals or pre-prepared food from other permitted food facilities (see Health and Safety Code Section 114381) are (re)heated and served, the following applicable California Retail Food Code standards may be waived by the local health officer:

   (1) H & S Sections 114130-114141;
   (2) H & S Sections 114099.6, 114095-114099.5, 114101-114109, 114123, and 114125, if a domestic or commercial dishwasher capable of providing heat to the surface of the utensils of a temperature of at least 165 degrees Fahrenheit, is used for the purpose of cleaning and sanitizing multi-service utensils and multi-service consumer utensils;
   (3) H & S Sections 114149-114149.3 except that, regardless of such a waiver, the facility shall provide mechanical ventilation sufficient to remove gases, odors, steam, heat, grease, vapors and smoke from the kitchen;
   (4) H & S Sections 114268-114269; and,
   (5) H & S Sections 114279-114282.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Nutritional Health Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?
7. **Summary of Workgroup Discussion and Intent**

The Nutritional Health Workgroup discussed and agreed that this section had more of an environmental impact than a nutrition impact and determined no change, and to refer to the Environmental Health Workgroup for review. The Environmental Health Workgroup reviewed the regulation and determined no change was necessary.

8. **ESC Action/Response**

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1246. Food Serving and Supervision.

Policies and procedures shall be developed and implemented to ensure that appropriate work assignments are made and food handlers are adequately supervised. Food shall be prepared and served only under the immediate supervision of a staff member.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Nutritional Health Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1247. Disciplinary Isolation-Separation Diet.

(a) A disciplinary isolation-separation diet which is nutritionally balanced may be served to an inmate. No inmate receiving a prescribed medical diet is to be placed on a disciplinary isolation-separation diet without review by the responsible physician or pursuant to a written plan approved by the physician. Such a diet shall be served twice in each 24 hour period and shall consist of one-half of the loaf (or a minimum of 19 oz. cooked loaf) described below or other equally nutritious diet, along with two slices of whole wheat bread and at least one quart of drinking water if the cell does not have a water supply. The use of disciplinary isolation-separation diet shall constitute an exception to the three-meal-a-day standard. Should a facility administrator wish to provide an alternate disciplinary diet, such a diet shall be submitted to the Board for approval.

(b) The disciplinary diet loaf shall consist of the following:

- 2-1/2 oz. nonfat dry milk
- 4-1/2 oz. raw grated potato
- 3 oz. raw carrots, chopped or grated fine
- 1-1/2 oz. tomato juice or puree
- 4-1/2 oz. raw cabbage, chopped fine
- 7 oz. lean ground beef, turkey or rehydrated, canned, or frozen Textured Vegetable Protein (TVP)
- 2-1/2 fl. oz. oil
- 1-1/2 oz. whole wheat flour
- 1/4 tsp. salt
- 4 tsp. raw onion, chopped
- 1 egg
- 6 oz. dry red beans, pre-cooked before baking (or 16 oz. canned or cooked red kidney beans)
- 4 tsp. chili powder

Shape into a loaf and bake at 350-375 degrees for 50-70 minutes.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

In order to be consistent with the definition title change in Section 1006 Definitions, from “disciplinary isolation” to “disciplinary separation”, the same change is carried into this regulation. The change to the definition title was done for the purpose of more closely defining the condition of confinement.
4. What is the operational impact that will result from this revision; how will it change operations?

There is no operational impact.

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

There is no fiscal impact.

6. How will BSCC measure compliance with this revision?

These changes will not affect how compliance is measured.

7. Summary of Workgroup Discussion and Intent

No amendments were made by the Nutritional Health Workgroup.

8. ESC Action/Response

Modify the workgroup’s recommendation and change “disciplinary isolation” to read “disciplinary separation” to be consistent with the change to the definition title in Section 1006 Definitions.
1. Regulation and Recommended Revision

§ 1248. Medical Diets.

The responsible physician, in consultation with the facility administrator, shall develop written policies and procedures that identify the individual(s) who are authorized to prescribe a medical diet. The medical diets utilized by a facility shall be planned, prepared and served with consultation from a registered dietitian. The facility manager shall comply with any medical diet prescribed for an inmate.

The facility manager and responsible physician shall ensure that the medical diet manual, which includes sample menus of medical diets, shall be available in both the medical unit and the food service office for reference and information. A registered dietitian shall review, and the responsible physician shall approve, the diet manual on an annual basis.

Pregnant women shall be provided a balanced, nutritious diet approved by a doctor.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Medical/Mental Health Workgroup nor the Nutritional Health Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroups’ recommendation.
# Environmental Health Workgroup

<table>
<thead>
<tr>
<th>Name</th>
<th>Title</th>
<th>Organization</th>
</tr>
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<tbody>
<tr>
<td>Nader Shatara, CHAIR</td>
<td>Senior Environmental Health Inspector</td>
<td>San Francisco Department of Public Health</td>
</tr>
<tr>
<td>Robert Thayer, CO-CHAIR</td>
<td>Assistant Sheriff</td>
<td>Kings County Sheriff’s Office</td>
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<td>Jangbir Singh, REHS</td>
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<td>Los Angeles County Environmental Health</td>
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<td>Greta Robinson, Lieutenant</td>
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<td>Kern County Sheriff’s Office</td>
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<tr>
<td>Leslye Choate, Program Manager</td>
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<td>Sonoma County Environmental Health</td>
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<tr>
<td>Ryan Sullivan, Custody Lieutenant</td>
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<td>Santa Barbara County Sheriff’s Office</td>
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<td>Andrew Strader, Environmental Health Program Manager</td>
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<td>Santa Cruz County Public Health</td>
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<td>Allison Giannini, Program Manager</td>
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*Bold and italics indicate proposed revision.
1. Regulation and Recommended Revision


The standard issue of climatically suitable clothing to inmates held after arraignment in all but Court Holding, Temporary Holding and Type IV facilities shall include, but not be limited to:

(a) clean socks and footwear;
(b) clean outergarments; and,
(c) clean undergarments;
   (1) for males - shorts and undershirt, and
   (2) for females - bra and two pairs of panties.

The inmates’ personal undergarments and footwear may be substituted for the institutional undergarments and footwear specified in this regulation. This option notwithstanding, the facility has the primary responsibility to provide the personal undergarments and footwear.

Clothing shall be reasonably fitted, durable, easily laundered and repaired.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Environmental Health Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent
The Environmental Health Workgroup had some discussion about transgender clothing requests. It was noted and agreed, however, that the regulations still applied regardless of their gender identity, and that they could be issued clothing that matched their request.

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1261. Special Clothing.

Provision shall be made to issue suitable additional clothing, essential for inmates to perform such special work assignments as food service, medical, farm, sanitation, mechanical, and other specified work.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Environmental Health Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1262. Clothing Exchange.

There shall be written policies and procedures developed by the facility administrator for the scheduled exchange of clothing. Unless work, climatic conditions, illness, or California Retail Food Code necessitates more frequent exchange, outer garments, except footwear, shall be exchanged at least once each week. Undergarments and socks shall be exchanged twice each week.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Environmental Health Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

The Environmental Health Workgroup had some discussion regarding more frequent undergarment change, however, all agreed to leave the regulation as it is written.

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1263. Clothing Supply.

There shall be a quantity of clothing, bedding, and linen available for actual and replacement needs of the inmate population.

Written policy and procedures shall specify handling of laundry that is known or suspected to be contaminated with infectious material.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?   b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Environmental Health Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?   b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1264. Control of Vermin in Inmates’ Personal Clothing.

There shall be written policies and procedures developed by the facility administrator to control the contamination and/or spread of vermin in all inmates’ personal clothing. Infested clothing shall be cleaned, disinfected, or stored in a closed container so as to eradicate or stop the spread of the vermin.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Environmental Health Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1265. Issue of Personal Care Items.

There shall be written policies and procedures developed by the facility administrator for the issue of personal hygiene items. Each female inmate shall be issued sanitary napkins and/or tampons as needed. Each inmate to be held over 24 hours who is unable to supply himself/herself with the following personal care items, because of either indigency or the absence of an inmate canteen, shall be issued:

   (a) toothbrush,
   (b) dentifrice,
   (c) soap,
   (d) comb, and
   (e) shaving implements.

Inmates shall not be required to share any personal care items listed in items “a” through “d.”

Inmates will not share disposable razors. Double edged safety razors, electric razors, and other shaving instruments capable of breaking the skin, when shared among inmates, must be disinfected between individual uses by the method prescribed by the State Board of Barbering and Cosmetology in Sections 979 and 980, Division 9, Title 16, California Code of Regulations.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Environmental Health Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?
7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1266. Showering.

There shall be written policies and procedures developed by the facility administrator for inmate showering/bathing. Inmates shall be permitted to shower/bathe upon assignment to a housing unit and at least every other day or more often if possible.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Environmental Health Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1267. Hair Care Services.

(a) Hair care services shall be available.

(b) Inmates, except those who may not shave for reasons of identification in court, shall be allowed to shave daily and receive hair care services at least once a month. The facility administrator may suspend this requirement in relation to inmates who are considered to be a danger to themselves or others.

(c) Equipment shall be disinfected, after each use, by a method approved by the State Board of Barbering and Cosmetology to meet the requirements of Title 16, Division 9, Sections 979 and 980, California Code of Regulations.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Environmental Health Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision


The standard issue of clean suitable bedding and linens, for each inmate entering a living area who is expected to remain overnight, shall include, but not be limited to:

   (a) one serviceable mattress which meets the requirements of Section 1272 of these regulations;
   (b) one mattress cover or one sheet;
   (c) one towel; and,
   (d) one blanket or more depending upon climatic conditions.

Two blankets or sleep bag may be issued in place of one mattress cover or one sheet.

Temporary Holding facilities which hold persons longer than 12 hours shall meet the requirements of (a), (b) and (d) above.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

The Environmental Health Workgroup added a section to the regulation as some agencies issue sheets or blankets in lieu of a mattress cover. Sleep bags are also used as an alternative. By expanding the ability to substitute, facilities are able to meet the standard.

4. What is the operational impact that will result from this revision; how will it change operations?

This change would allow more flexibility for the facility operators. There is no additional operational impact as this would allow facilities to utilize bedding from existing inventory.

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

No fiscal impact as the added flexibility would allow issue and exchange based on facility inventory.

6. How will BSCC measure compliance with this revision?

The inspectors will review facility practices in light of the regulation requirements.
7. **Summary of Workgroup Discussion and Intent**

The Environmental Health Workgroup felt the clarity and flexibility added to this regulation would allow facilities to issue linens based on their inventory at time of issue.

8. **ESC Action/Response**

Accept the workgroup’s recommendation, with the modification of adding “or sleep bag” to the new regulation language in order to be consistent with the change proposed in Section 1271 Bedding and Linen Exchange.
1. Regulation and Recommended Revision


There shall be written policies and procedures developed by the facility administrator for the scheduled exchange of laundered and/or sanitized bedding and linen issued to each inmate housed. Washable items such as sheets, mattress covers, and towels shall be exchanged for clean replacement at least once each week. If a top sheet is not issued, blankets or sleep bags shall be laundered or dry cleaned at least once a month or more often if necessary. If a top sheet is issued, blankets shall be laundered or dry cleaned at least every three months.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

The Environmental Health Workgroup added the word “sleep bag” to address agencies that use this as a substitute for the mattress pad, sheet and/or blanket. The sleep bag is a bottom and top covering that is not detachable.

4. What is the operational impact that will result from this revision; how will it change operations?

There is no change to the operations other than allowing the flexibility of issuing a sleep bag as referenced in these regulations.

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

There may be a fiscal impact for counties that choose to use the sleep bag as it relates to laundering, due to the weight of the bag and the wear to washing machines.

6. How will BSCC measure compliance with this revision?

The inspectors will review facility practices in light of the regulation requirements and flexibility.

7. Summary of Workgroup Discussion and Intent

The Environmental Health Workgroup determined a sleep bag is a single item that does not have a detachable cover, therefore, the inmate would sleep in the bag. The change was made for those agencies that have begun to utilize this bedding, and to identify how often they would need to be exchanged for laundering. The regulation currently indicates if there is no top sheet, then the “blanket” would be laundered once a month or more often as necessary. Consultation with a Public
Health Officer revealed this type of bedding should be laundered the same, at least one time per month or more frequently if necessary.

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1272. Mattresses.

Any mattress issued to an inmate in any facility shall be enclosed in an easily cleaned, non-absorbent ticking, and conform to the size of the bunk as referenced in Title 24, Part 2, Section 1231.3.5, Beds. Any mattress purchased for issue to an inmate in a facility which is locked to prevent unimpeded access to the outdoors shall be certified by the manufacturer as meeting all requirements of the State Fire Marshal and the Bureau of Home Furnishings’ test standard for penal mattresses at the time of purchase.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Environmental Health Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

§ 1280. Facility Sanitation, Safety, and Maintenance.

The facility administrator shall develop written policies and procedures for the maintenance of an acceptable level of cleanliness, repair and safety throughout the facility. Such a plan shall provide for a regular schedule of housekeeping tasks and inspections to identify and correct unsanitary or unsafe conditions or work practices which may be found.

Medical care housing as described in Title 24, Part 2, Section 1231.2.14, shall be cleaned and sanitized according to policies and procedures established by the health authority.


2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Environmental Health Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

The Environmental Health Workgroup had discussion about including language regarding the “disinfection of restraint devices after each use.” Even though no changes were made to this section, the discussion was in reference to a similar section referenced in the Juvenile Title 15, Section 1510. This section, 1280, deals more with the facility sanitation rather than the cleanliness of restraint equipment. The main request for consideration dealt with the cleanliness of restraint devices used when adults are booked into the jail, as it relates to officers in the field, not in the facilities.

8. ESC Action/Response

Accept the workgroup’s recommendation.
TITLE 24 – PHYSICAL PLANT WORKGROUP

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*Bold and italics indicate proposed revision.*
1. Regulation and Recommended Revision

TITLE 24
Part 1, Section 13-102
Minimum Standards for Local Detention Facilities

(a) Definitions. The following definitions shall apply:

ADMINISTERING MEDICATION, as it relates to managing legally obtained drugs, means the act by which a single dose of medication is given to a patient. The single dose of medication may be taken either from stock (undispensed) or dispensed supplies.

ADMINISTRATIVE SEGREGATION means the physical separation of different types of inmates from each other as specified in Penal Code Sections 4001 and 4002, and Section 1053 of Title 15, C.C.R. Administrative segregation is accomplished to provide that level of control and security necessary for good management and the protection of staff and inmates.

ALTERNATE MEANS OF COMPLIANCE means a process for meeting or exceeding standards in an innovative way, after a pilot project evaluation, approved by the Corrections Standards Authority pursuant to an application.

AVERAGE DAILY POPULATION means the average number of inmates housed daily during the last fiscal year.

BOARD OF STATE AND COMMUNITY CORRECTIONS means the Board of State and Community Corrections, whose board acts by and through its executive director, deputy directors and field representatives.

CLINICAL EVALUATION means an assessment of a person's physical and/or mental health condition conducted by licensed health personnel operating within recognized scope of practice specific to their profession and authorized by a supervising physician or psychiatrist.

CONCEPT DRAWINGS means, with respect to a design-build project, any drawings or architectural renderings that may be prepared, in addition to performance criteria, in such detail as the agency determines necessary to sufficiently describe the agency's needs.

CONTACT means any physical or sustained sight or sound contact between juveniles in detention and incarcerated adults. Sight contact is clear visual contact between adult inmates and juveniles within close proximity to each other. Sound contact is direct oral communication between adult inmates and juvenile offenders.

COURT HOLDING FACILITY means a local detention facility constructed within a court building after January 1, 1978, used for the confinement of persons solely for the purpose of a court appearance for a period not to exceed 12 hours.
**CUSTODIAL PERSONNEL** means those officers with the rank of deputy, correctional officer, patrol persons or other equivalent sworn or civilian rank whose duties include the supervision of inmates.

**DELIVERING MEDICATION**, as it relates to managing legally obtained drugs, means the act of providing one or more doses of a prescribed and dispensed medication to a patient.

**DESIGN-BID-BUILD** means a construction procurement process independent of the design process and in which the construction of a project is procured based on completed construction documents.

**DESIGN-BUILD** means a construction procurement process in which both the design and construction of a project are procured from a single entity.

**DEVELOPMENTALLY DISABLED** means those persons who have a disability which originates before an individual attains age 18, continues, or can be expected to continue indefinitely, and constitutes a substantial disability for that individual. This term includes mental retardation, cerebral palsy, epilepsy and autism, as well as disabling conditions found to be closely related to mental retardation or to require treatment similar to that required for mentally retarded individuals.

**DIRECT VISUAL OBSERVATION** means direct personal view of the inmate in the context of his/her surroundings without the aid of audio/video equipment. Audio/video monitoring may supplement but not substitute for direct visual observation.

**DISCIPLINARY ISOLATION** means that punishment status assigned an inmate as the result of violating facility rules and which consists of confinement in a cell or housing unit separate from regular jail inmates.

**DISPENSING**, as it relates to managing legally obtained drugs, means the interpretation of the prescription order, the preparation, repackaging and labeling of the drug based upon a prescription from a physician, dentist or other prescriber authorized by law.

**DISPOSAL**, as it relates to managing legally obtained drugs, means the destruction of medication or its return to the manufacturer or supplier.

**EMERGENCY** means any significant disruption of normal facility procedure, policies, or activities caused by a riot, fire, earthquake, attack, strike or other emergent condition.

**EMERGENCY MEDICAL SITUATIONS** means those situations where immediate services are required for the alleviation of severe pain, or immediate diagnosis and treatment of unforeseeable medical conditions are required, if such conditions would lead to serious disability or death if not immediately diagnosed and treated.

**EXERCISE** means activity that requires physical exertion of the large muscle group.
FACILITY/SYSTEM ADMINISTRATOR means the sheriff, chief of police, chief probation officer or other official charged by law with the administration of a local detention facility/system.

FACILITY MANAGER means the jail commander, camp superintendent or other comparable employee who has been delegated the responsibility for operating a local detention facility by a facility administrator.

FACILITY WATCH COMMANDER means the individual designated by the facility manager to make operational decisions during his/her tour of duty.

HEALTH AUTHORITY means that individual or agency that is designated with responsibility for health care policy pursuant to a written agreement, contract or job description. The health authority may be a physician, an individual or a health agency. In those instances where medical and mental health services are provided by separate entities, decisions regarding mental health services shall be made in cooperation with the mental health director. When this authority is other than a physician, final clinical decisions rest with a single designated responsible physician.

HEALTH CARE means medical, mental health and dental services.

JAIL, as used in Article 8, means a Type II or III facility as defined in the “Minimum Standards for Local Detention Facilities.”

LABELING, as it relates to managing legally obtained drugs, means the act of preparing and affixing an appropriate label to a medication container.

LAW ENFORCEMENT FACILITY means a building that contains a Type I Jail or Temporary Holding Facility or Lockup. It does not include a Type II or III jail, which has the purpose of detaining adults, charged with criminal law violations while awaiting trial or sentenced adult criminal offenders.

LEGEND DRUGS are any drugs defined as “dangerous drugs” under Chapter 9, Division 2, Section 4211 of the California Business and Professions Code. These drugs bear the legend, “Caution Federal Law Prohibits Dispensing without a Prescription.” The Food and Drug Administration (FDA) has determined, because of toxicity or other potentially harmful effects, that these drugs are not safe for use except under the supervision of a health care practitioner licensed by law to prescribe legend drugs.

LIVING AREAS means those areas of a facility utilized for the day-to-day housing and activities of inmates. These areas do not include special use cells such as sobering, safety, and holding or staging cells normally located in receiving areas.
**LOCAL DETENTION FACILITY** means any city, county, city and county, or regional jail, camp, court holding facility or other correctional facility, whether publicly or privately operated, used for confinement of adults or of both adults and minors, but does not include that portion of a facility for confinement of both adults and minors which is devoted only to the confinement of minors.

**LOCAL DETENTION SYSTEM** means all of the local detention facilities that are under the jurisdiction of a city, county or combination thereof, whether publicly or privately operated. Nothing in the standards are to be construed as creating enabling language to broaden or restrict privatization of local detention facilities beyond that which is contained in other statute.

**LOCAL HEALTH OFFICER** means that licensed physician who is appointed pursuant to Health and Safety Code Section 101000 to carry out duly authorized orders and statutes related to public health within their jurisdiction.

**LOCKUP** means a locked room or secure enclosure under the control of a peace officer or custodial officer that is primarily used for the temporary confinement of adults who have recently been arrested; sentenced prisoners who are inmate workers may reside in the facility to carry out appropriate work.

**MAY.** “May” is permissive; “shall” is mandatory.

**MENTAL HEALTH DIRECTOR** means that individual who is designated by contract, written agreement or job description, to have administrative responsibility for the facility or system mental health program.

**NONSECURE CUSTODY** means that a minor’s freedom of movement in a law enforcement facility is controlled by the staff of the facility; and

(1) the minor is under constant direct visual observation by the staff;
(2) the minor is not locked in a room or enclosure; and,
(3) the minor is not physically secured to a cuffing rail or other stationary object.

**NONSENSENTENCED INMATE** means an inmate with any pending local charges or one who is being held solely for charges pending in another jurisdiction.

**OVER-THE-COUNTER (OTC) DRUGS**, as it relates to managing legally obtained drugs, are medications which do not require a prescription (non-legend).

**PEOPLE WITH DISABILITIES** includes, but is not limited to, persons with a physical or mental impairment that substantially limits one or more of their major life activities or those persons with a record of such impairment or perceived impairment that does not include substance use disorders resulting from current illegal use of a controlled substance.
**PERFORMANCE CRITERIA** means, with respect to a design-build project, the information that fully describes the scope of the proposed project and includes, but is not limited to, the size, type and design character of the buildings and site; the required form, fit, function, operational requirements and quality of design, materials, equipment and workmanship; and any other information deemed necessary to sufficiently describe the agency's needs; including documents prepared pursuant to paragraph (1) of subdivision (d) of Section 20133 of the Public Contract Code.

**PILOT PROJECT** means an initial short-term method to test or apply an innovation or concept related to the operation, management or design of a local detention facility pursuant to application to, and approval by, the Corrections Standards Authority.

**PRELIMINARY DRAWINGS** means, with respect to a design-build project, a site plan, architectural floor plans, elevations, outline specifications and a cost estimate for each utility, site development, conversion and remodeling project. The drawings shall be sufficiently descriptive to accurately convey the location, scope, cost and the nature of the improvement being proposed.

**PROCUREMENT**, as it relates to managing legally obtained drugs, means the system for ordering and obtaining medications for facility stock.

**PSYCHOTROPIC MEDICATION** means any medication prescribed for the treatment of symptoms of psychoses and other mental and emotional disorders.

**RATED CAPACITY** means the number of inmate occupants for which a facility’s single- and double-occupancy cells, or dormitories, except those dedicated for medical or disciplinary isolation housing, were planned and designed in conformity to the standards and requirements contained herein and in Title 15, C.C.R.

**REGIONAL CENTER FOR DEVELOPMENTALLY DISABLED** means those private agencies throughout the state, funded through the Department of Developmental Services which assure provision of services to persons with developmental disabilities. Such centers will be referred to as regional centers in these regulations.

**REMODEL** means to alter the facility structure by adding, deleting, or moving any of the building’s components, thereby affecting any of the spaces specified in Title 24, Section 1231.

**REPACKAGING**, as it relates to managing legally obtained drugs, means the transferring of medications from the original manufacturer's container to another properly labeled container.

**REPAIR** means to restore to original condition or replace with like-in-kind.

**SAFETY CHECKS** means direct, visual observation performed at random intervals within timeframes prescribed in these regulations to provide for the health and welfare of inmates.
SECURE CUSTODY means that a minor being held in temporary custody in a law enforcement facility is locked in a room or enclosure and/or physically secured to a cuffing rail or other stationary object.

SECURITY GLAZING means a glass/polycarbonate composite glazing material designed for use in detention facility doors and windows and intended to withstand measurable, complex loads from deliberate and sustained attacks in a detention environment.

SENTENCED INMATE means an inmate that is sentenced on all local charges.

SHALL is mandatory; “may” is permissive.

SOBERING CELL as referenced in Section 1056, refers to an initial “sobering up” place for arrestees who are sufficiently intoxicated from any substance to require a protected environment to prevent injury by falling or victimization by other inmates.

STORAGE, as it relates to legally obtained drugs, means the controlled physical environment used for the safekeeping and accounting of medications.

SUPERVISION IN A LAWENFORCEMENT FACILITY means that a minor is being directly observed by the responsible individual in the facility to the extent that immediate intervention or other required action is possible.

SUPERVISORY CUSTODIAL PERSONNEL means those staff members whose duties include direct supervision of custodial personnel.

TEMPORARY CUSTODY means that the minor is not at liberty to leave the law enforcement facility.

TEMPORARY HOLDING FACILITY means a local detention facility constructed after January 1, 1978, used for the confinement of persons for 24 hours or less pending release, transfer to another facility or appearance in court.

TYPE I FACILITY means a local detention facility used for the detention of persons, for not more than 96 hours, excluding holidays, after booking. Such a Type I facility may also detain persons on court order either for their own safekeeping or sentenced to a city jail as an inmate worker, and may house inmate workers sentenced to the county jail provided such placement in the facility is made on a voluntary basis on the part of the inmate. As used in this section, an inmate worker is defined as a person assigned to perform designated tasks outside of his/her cell or dormitory, pursuant to the written policy of the facility, for a minimum of four hours each day on a five-day scheduled work week.

TYPE II FACILITY means a local detention facility used for the detention of persons pending arraignment, during trial and upon a sentence of commitment.
TYPE III FACILITY means a local detention facility used only for the detention of convicted and sentenced persons.

TYPE IV FACILITY means a local detention facility or portion thereof designated for the housing of inmates eligible under Penal Code Section 1208 for work/education furlough and/or other programs involving inmate access into the community.

WORKING DRAWINGS means, with respect to a design-build project, a complete set of plans and specifications showing and describing all phases of a project, architectural, structural, mechanical, electrical, civil engineering and landscaping systems to the degree necessary for the purpose of accurate bidding by contractors and for the use of artisans in constructing the project.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem?  (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

(b) Exclusions. Title 24 of the California Code of Regulations, Sections 13-102 and 2-1013 which pertain to planning and design of detention facilities shall be applicable to facilities for which architectural drawings have been submitted to the Board for review. These requirements shall not be applicable to facilities which were constructed in conformance with the standards of the Board in effect at the time of initial architectural planning. When any facility, designed and constructed under earlier standards, can comply with a more recently adopted requirement, the least-restrictive regulation shall apply.

If, in the course of inspection of local detention facilities, the Board determines that a facility planned or built prior to these regulations does not meet the appropriate, applicable standards in effect at the time of initial architectural planning, the local governing body shall submit to the Board for their approval within one year of such inspection a plan for causing that facility to meet current standards. Such a plan shall include the specific building areas which need to be remodeled and/or constructed, a definite time period over which the proposed modifications are planned, and a cost estimate including a description of the method of financing.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

(c) Initial planning for a local detention facility.
   1. Letter of intent. A city, county, city and county, or any combination thereof which has an intent to build or remodel any local detention facility shall immediately file a letter of intent with the Board.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

2. Needs assessment study. Any city, county, city and county, or region intending to construct a new Type I, II, III or IV facility or add 25 or more beds to an existing facility shall complete a needs assessment study. One copy of the needs assessment study shall be submitted to the Board prior to contracting for plans and specifications. The needs assessment shall include, but not be limited to, a description of:
   A. The elements of the system;
   B. The department’s operational and design philosophy;
   C. The current inmate population;
   D. The classification system;
   E. Program needs, including planned academic programs to include special education programs and an analysis of performance in using programs that can reduce secure facility requirements;
   F. An analysis of the local trends and characteristics which influence planning assumptions about future corrections' systems change, including population projections, current and projected inmate populations, and program costs based on continuation of current policies and projections of alternative policies or programs on inmate population growth and program costs;
   G. The adequacy of staffing levels;
   H. The ability to provide visual supervision;
   I. The adequacy of record keeping;
   J. A history of the system’s compliance with standards; and
   K. Any unresolved issues.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?
7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

3. Operational program statement. Unless the construction or remodeling is of a minor nature, not affecting the capacity or flow of the facility, an operational program statement shall be developed by the facility administrator and submitted to the Board or the purpose of providing the basis upon which architectural plans are drawn. The operational program statement must be submitted with the schematic architectural plans required by Section 13-102 (c) 5 of these regulations for design-bid-build construction projects. The operational program statement must be submitted with the performance criteria or performance criteria and concept drawings for design-build construction projects. The operational program statement must include a description of the following:

   A. Intended capacity of facility.
   B. Security and classification of inmates to be housed.
   C. Inmate movement within the facility and entry and exit from security areas.
   D. Food preparation and serving.
   E. Staffing.
   F. Booking.
   G. Visiting and attorney reviews.
   H. Exercise.
   I. Programs.
   J. Medical services, including the management of communicable diseases.
   K. Cleaning and/or laundering.
   L. Inmate segregation as specified in Penal Code Sections 4001 and 4002 and Article 5 of Title 15, C.C.R.
   M. Court holding and inmate movement.
   N. Mental health services.
   O. Facilities for jail administration and operations staff.
   P. Staff to staff communications system.
   Q. Management of disruptive inmates.
   R. Management and placement of persons with disabilities, with provisions for wheelchairs, gurney access and for evacuation during emergencies.
   S. Architectural treatment of space relative to preventing suicides by inmates.
   T. Method of implementing Penal Code Section 4030 relating to the holding of misdemeanor arrestees.
   U. Intended type of facility.
   V. Sobering cell(s) as referenced by Title 15, Section 1056, with the ability to segregate.
W. Safety cell(s) as referenced by Title 15, Section 1055.

X. If minors describe how to enter the security area for processing and/or secure custody or housing, how will movement within the facility and entry and exit from security areas be accomplished pursuant to separation requirements of Welfare and Institutions Code Section 208(a) and Section 1144 of these regulations.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem?  (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

4. Type III and Type IV facilities in existing buildings. Wherever a city, county or combination thereof, intends to establish a Type III or Type IV facility in an existing building or buildings, notice shall be given to the Board whose staff shall complete a survey to determine capacity of such buildings and shall make recommendations for necessary modifications. The proposing local government shall secure the appropriate clearance from the health authority, building official, and State Fire Marshal.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

5. Submittal of plans and specifications. All plans and specifications shall be submitted to the Board in compliance with Penal Code Section 6029.
   
   1. For design-bid-build projects, one set of plans and specifications shall be submitted at the schematic design phase, at the design development phase and the construction document phase.
   
   2. For design-build projects, one set of performance criteria or performance criteria and concept drawings shall be submitted before the county issues a request for proposals for the services of a design-build entity. One set of construction document drawings shall be submitted. Board staff shall respond in writing indicating compliance or noncompliance with these regulations.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem?  (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

6. Design requirements.

A. The design of a local detention facility shall comply with provisions of California Code of Regulations, Title 24, Part 2, Section 2-1013.

B. The design of a Type I, Type II, Type III or Type IV facility, shall provide the following:

   (1) **Fire safety.** The provisions of Title 19 and Title 24, Part 2 as they relate to detention facilities shall be incorporated into the facility design.

   (2) **Suicide hazards.** Architectural plans shall be reviewed by the Board for the purpose of reducing hazards posed by fixtures and equipment which could be used for an act of suicide by an inmate. The facility design shall avoid any surfaces, edges, fixtures or fittings that can provide an attachment for self-inflicted injury. The following features shall be incorporated in the design of temporary holding cells, temporary staging cells, sobering cells, safety cells, single occupancy cells and any other area where an inmate may be left alone:

      a. plumbing shall not be exposed. Operation of control valves shall use flush buttons or similar. The drinking fountain bubbler shall be without curved projections;
      b. towel holders shall be ball-in-socket or indented clasp, not pull-down hooks or bars;
      c. supply and return grilles and any other vent or security cover shall have openings no greater than 3/16 inch or have 16-mesh per square inch;
      d. beds, desk surfaces and shelves shall have no sharp edges and be configured to prevent attachment;
      e. light fixtures shall be tamper resistant;
      f. fixtures such as mirrors shall be mounted using tamper-resistant fasteners; and
      g. fire sprinkler heads inside rooms shall be designed to prevent attachment.
      h. telephone cords shall be at a length that reduces the potential for use as a ligature.

   (3) **Health and sanitation.** Provisions of Subchapter 4, Title 15, California Code of Regulations, and of the California Retail Food Code as they relate to detention facilities shall be incorporated into the facility design.

   (4) **Single- and/or double-occupancy cells.** In any local detention system, the number of single and/or double-occupancy cells shall be that number, determined by the facility/system administrator in conjunction with the Board, necessary to safely manage the population of the facility/system based on a comprehensive needs assessment which accounts for those inmates projected to be:

      a. administrative segregation cases,
      b. persons with disabilities,
      c. custodial problems, and/or
d. likely to need individual housing for other specific reasons as determined by the facility/system administration. The total number of single- and/or double-occupancy cells shall not be less than 10 percent of the system’s Corrections Standards Authority rated capacity. The local detention facility/system shall comply with all other design requirements contained in these regulations.

(5) **Staff and inmate safety.** Facilities shall be designed and/or equipped in such a manner that staff and inmates have the ability to summon immediate assistance in the event of an incident or an emergency.

(6) **Heating and cooling.** Provision shall be made to maintain a living environment in accordance with the heating, ventilating, and air conditioning requirements of Parts 2 and 4, and the energy conservation requirements of Part 6, Title 24, California Code of Regulations.

(7) **Acoustics.** Housing areas shall be designed and constructed so that the average noise level does not exceed 70 decibels during periods of activity and 45 decibels during sleeping hours.

(8) **Living areas.** Living areas shall be separated from the area for reception and booking.

(9) **Spaces for persons with disabilities.**

a. Housing cell or room. A cell or room for an inmate with a disability using a wheelchair must have an appropriate entry and toilet, washbasin and drinking fountain which the inmate can use without personal assistance.

b. Other spaces within the security perimeter such as day rooms and activity areas shall be located such that persons with disabilities will not be excluded from participating in any program for which he or she would otherwise be eligible. Accessible showers for inmates with disabilities shall be available.

eb. All spaces outside the security perimeter. Public areas of a local detention facility shall comply with the applicable chapters of Title 24, Part 2 of the California Code of Regulations.

(10) **Security.** The design should facilitate security and supervision appropriate to the level of inmate custody.

(11) **Glazing.** Internal and external facility glazing shall be appropriate to the security level of the detention area or room.

(12) **Hair care space.** Space and suitable equipment must be provided in all Type II or Type III facilities for men’s haircuts and/or female hair-dressing.

(13) Floor drains shall be provided where operationally and mechanically appropriate.

(14) A sewage system design capable of addressing items that could potentially impact waste water systems.

(15) Medical/mental health care housing shall be designed in consultation with the health authority. Medical/mental health areas may contain other than single occupancy rooms.
C. The design of a Court Holding or Temporary Holding facility must include and comply with the following subsections of Section 13-102(c)6B: (1), (2), (3), (5), (6), (7), (9), (10) and (13). Court holding facilities shall have separate paths of travel for inmates from those used by the public.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

Regarding (9) Spaces for persons with disabilities, clarification was provided with the changes to reflect current ADA requirements. In doing so, (9) (a) was deleted as it was no longer needed and was redundant with the change to (c). (9) (c) has been changed to reflect all spaces, which includes the space addressed in (a).

4. What is the operational impact that will result from this revision; how will it change operations?

This change brings the regulation in line with current ADA requirements for a secure area.

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

No fiscal impact.

6. How will BSCC measure compliance with this revision?

Local inspectors will review for ADA compliance.

7. Summary of Workgroup Discussion and Intent

The workgroup reviewed the regulation and elected to change the language from “all public spaces” to “all spaces” which complies with ADA regulations. The change made paragraph “a” redundant and it was eliminated.

The workgroup discussed implications in cell design (specifically turning radius) and resolved that ADA standards should not be mingled with Title 24 regulations. Each county is liable to address non-Title 24 requirements.

The workgroup discussed the need to specify security calking and gap sealants in the Design Requirements as a suicide prevention standard. The group discussed the existing limitations (3/16” space, etc.) and determined that the existing regulation adequately addressed the topic.
The State Fire Marshal stated that there is conflict with emergency access as it relates to inmate movement in Court Holding facilities. Facilities shall have separate paths of travel for inmates from those used by the public. The workgroup discussed the configuration of emergency egress and any conflicts between this definition and applicable SFM code. The SFM noted that elevators are a convenience and should not be counted as exit methods. The SFM notes that an elevator is not an acceptable method of emergency exit. An exit method that moves inmates through the public courtroom as a step towards evacuation does not comply with this language. The workgroup noted the phrase “path of travel” exists in differing state codes with differing meanings. In the end, the workgroup decided this issue was not a Title 24 issue for this group but an operational issue.

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

7. Pilot projects. The pilot project is the short-term method used by a local detention facility/system, approved by the Board, to evaluate innovative programs, operations or concepts which meet or exceed the intent of these regulations.

The Board may, upon application of a city, county, or city and county, grant pilot project status to a program, operational innovation or new concept related to the operation and management of a local detention facility. An application for a pilot project shall include, at a minimum, the following information:

A. The regulations which the pilot project will affect.
B. Review of case law, including any lawsuits brought against the applicant's local detention facility, pertinent to the proposal.
C. The applicant’s history of compliance of noncompliance with standards.
D. A summary of the “totality of conditions” in the facility or facilities, including but limited to:
   (1) Program activities, exercise and recreation;
   (2) Adequacy of supervision;
   (3) Types of inmates affected; and,
   (4) Inmate classification procedures.
E. A statement of the goals the pilot project is intended to achieve, the reasons a pilot project is necessary and why the particular approach was selected.
F. The projected costs of the pilot project and projected cost savings to the city, county, city and county, if any.
G. A plan for developing and implementing the pilot project, including a time line where appropriate.
H. A statement of how the overall goal of providing safety to staff and inmates will be achieved.

The Board shall consider applications for pilot projects based on the relevance and appropriateness of the proposed project, the completeness of the information provided in the application and staff recommendations.

Within 10 working days of receipt of the application, Board staff will notify the applicant, in writing, that the application is complete and accepted for filing, or that the application is being returned as deficient and identifying what specific additional information is needed. This does not preclude the Board members from requesting additional information necessary to make a determination that the pilot project proposed actually meets or exceeds the intent of the regulations at the time of the hearing. When complete, the application will be placed on the agenda for the Board’s consideration at a regularly scheduled meeting. The written notification from the Board to the applicant shall also include the date, time and location of the meeting at which the application will be considered. (The Board meeting schedule for the current calendar year is available through its office in Sacramento.)
When an application for a pilot project is approved by the Board, the Board staff shall notify the applicant, in writing within 10 working days of the meeting, of any conditions included in the approval and the time period for the pilot project. Regular progress reports and evaluative data on the success of the pilot project in meeting its goals shall be provided to the Board. If disapproved, the applicant shall be notified in writing, within 10 working days of the meeting, the reasons for said disapproval. This application approval process may take up to 90 days from the date of receipt of a complete application.

Pilot project status granted by the Board shall not exceed twelve months after its approval date. When deemed to be in the best interest of the application, the Board may extend the expiration date for up to an additional twelve months. Once a city, county, or city and county successfully completes the pilot project evaluation period and desires to continue with the program, it may apply for an alternate means of compliance as described in Section 13-102(c)8 of these regulations.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

8. Alternate means of compliance. The alternate means of compliance is the long-term method used by a local detention facility/system, approved by the Board, to encourage responsible innovation and creativity in the operation of California's local detention facilities. The Board may, upon application of a city, county, or city and county, consider alternate means of compliance with these regulations after the pilot project process has been successfully evaluated [as defined in Section 13-102(c)7]. The city, county, or city and county must present the completed application to the Board no later than 30 days prior to the expiration of its pilot project.

Applications for alternate means of compliance must meet the spirit and intent of improving jail management, shall be equal to or exceed the existing standard(s) and shall include reporting and evaluation components. An application for alternate means of compliance shall include, at a minimum, the following information:

A. Review of case law, including any lawsuits brought against the applicant local detention facility, pertinent to the proposal.

B. The applicant's history of compliance or noncompliance with standards.

C. A summary of the “totality of conditions” in the facility or facilities, including but not limited to:
   (1) Program activities, exercise and recreation;
   (2) Adequacy of supervision;
   (3) Types of inmates affected; and
   (4) Inmate classification procedures.

D. A statement of the problem the alternate means of compliance is intended to solve, how the alternative will contribute to a solution of the problem and why it is considered an effective solution.

E. The projected costs of the alternative and projected cost savings to the city, county, city and county, if any.

F. A plan for developing and implementing the alternative, including a time line where appropriate.

G. A statement of how the overall goal of providing safety to staff and inmates was achieved during the pilot project evaluation phase [Section 13-102(c)7].

The Board shall consider applications for alternative means of compliance based on the relevance and appropriateness of the proposed alternative, the completeness of the information provided in the application, the experiences of the jurisdiction during the pilot project, and staff recommendations. Within 10 working days of receipt of the application, Board staff will notify the applicant, in writing, that the application is complete and accepted for filing, or that the application is being returned as deficient and identifying what specific additional information is needed. This does not preclude the Board members from requesting additional information necessary to make a determination that the alternate means of compliance proposed meets or exceeds the intent of these regulations at the time of the hearing. When complete, the application will be placed on the agenda for the Board’s consideration at a regularly scheduled meeting.
The written notification from the Board to the applicant shall also include the date, time and location of the meeting at which the application will be considered. (The Board meeting schedule for the current calendar year is available through its office in Sacramento.)

When an application for an alternate means of compliance is approved by the Board, Board staff shall notify the applicant, in writing within 10 working days of the meeting, of any conditions included in the approval and the time period for which the alternate means of compliance shall be permitted.

The Board may require regular progress reports and evaluative data as to the success of the alternate means of compliance. If disapproved, the applicant shall be notified in writing, within 10 working days of the meeting, the reasons for said disapproval. This application approval process may take up to 90 days from the date of receipt of a complete application. The Board may revise the minimum jail standards during the next biennial review (reference Penal Code Section 6030) based on data and information obtained during the alternate means of compliance process. If, however, the alternate means of compliance does not have universal application, a city, county, city and county, may continue to operate under this status as long as they meet the terms of this regulation.

2. ESC Notes/Recommendations
n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

PART 2, SECTION 1231
Minimum Standards for Local Detention Facilities

1231.1 Definitions.

BOARD OF STATE & COMMUNITY CORRECTIONS means the Board of State & Community Corrections, which acts by and through its executive officer, deputy directors and field representatives.

LIVING AREAS means those areas of a facility utilized for the day-to-day housing and activities of inmates. These areas do not include special-use cells such as sobering, safety and holding or staging cells normally located in receiving areas.

LOCAL DETENTION FACILITY is any city, county, city and county, or regional jail, camp, court holding facility or other correctional facility, whether publicly or privately operated, and court holding facility used for the confinement of adults or of both adults and minors, but does not include that portion of a facility for the confinement of both adults and minors which is devoted only to the confinement of minors. The types of local detention facilities are as follows:

Court holding facility means a local detention facility constructed within a court building after January 1, 1978, used for the confinement of persons solely for the purpose of a court appearance for a period not to exceed 12 hours.

Temporary holding facility means a local detention facility constructed after January 1, 1978, used for the confinement of persons for 24 hours or less pending release, transfer to another facility or appearance in court.

Type I facility means a local detention facility used for the detention of persons usually pending arraignment for not more than 96 hours, excluding holidays, after booking. Such a Type I facility may also detain persons on court order either for their own safe-keeping or sentenced to a city jail as an inmate worker, and may house inmate workers sentenced to the county jail provided such placement in the facility is made on a voluntary basis on the part of the inmate. As used in this section, an inmate worker is defined as a person assigned to perform designated tasks outside of his or her cell or dormitory, pursuant to the written policy of the facility, for a minimum of four hours each day on a five-day scheduled work week.

TYPE II FACILITY means a local detention facility used for the detention of persons pending arraignment, after arraignment, during trial and upon a sentence of commitment.

TYPE III FACILITY means a local detention facility used only for the detention of convicted and sentenced persons.
TYPE IV FACILITY means a local detention facility or portion thereof designated for the housing of inmates eligible, under Penal Code Section 1208, for work/education furlough and/or other programs involving inmate access into the community.

RATED CAPACITY means the number of inmate occupants for which a facility's single-and double-occupancy cells or dormitories, except those dedicated for medical or disciplinary isolation housing, were planned and designed in conformity to the standards and requirements contained herein and in Title 15, C.C.R.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.2 Design criteria for required spaces.

1231.2.1 Reception and booking. Facilities where booking and housing occur shall have the following space and equipment:

1. Weapons locker as specified in Section 1231.3.12.
2. A cell or room for the confinement of inmates pending their booking, complying with Section 1231.2.2.
3. A sobering cell as described in Section 1231.2.4 if intoxicated, inmates who may pose a danger to themselves or others are held. For those facilities that accept male and female intoxicated inmates two sobering cells shall be provided.
4. Access to a shower within the secure portion of the facility.
5. Provide access to a secure vault or storage space for inmate valuables.
6. A safety cell or cells as described in Section 1231.2.5 if the program statement identifies the need for such a cell.
7. Telephones which are accessible to the inmates.
8. Unobstructed access to hot and cold running water for staff use.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?
7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.2.2 Temporary holding cell or room. A temporary holding cell or room shall:
1. Contain a minimum of 10 square feet (0.93 m²) of floor area per inmate;
2. Be limited to no more than 16 inmates;
3. Be no smaller than 40 square feet (3.7 m²) and have a clear ceiling height of 8 feet (2438 mm) or more;
4. Contain seating to accommodate all inmates as required in Section 1231.3;
5. Contain a toilet, wash basin and drinking fountain as specified in Section 1231.3;
6. Maximize visual supervision of inmates by staff; and
7. When located in a temporary holding facility, the cell or room shall be equipped with a bunk if inmates are to be held longer than 12 hours.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

The workgroup discussed security enclosures. BSCC staff informed the workgroup that the ESC had decided not to put this forward for discussion. However, the workgroup along with the Chair decided it was an item that needed to be discussed since there are counties that continue to use
them in their facilities. BSCC staff reminded the workgroup that security enclosures are not rated space and are not inspected. The workgroup elected not to proceed with recommending a security enclosure regulation, but stated that facilities who choose to use them should have strict policies on the use of them.

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.2.3 Temporary staging cell or room. A temporary staging cell or room shall:

1. Be constructed for the purpose of holding inmates who have been classified and segregated in accordance with Sections 1050 and 1053 of Title 15, Division 1, California Code of Regulations.
2. Be limited to holding inmates up to four hours.
3. Be limited to no more than 80 inmates.
4. Contain a minimum of 10 square feet (0.93 m²) of floor area per inmate and a clear ceiling height of 8 feet (2438 mm) or more.
5. Be no smaller than 160 square feet (14.9 m²).
6. Contain seating to accommodate all inmates as required in Section 1231.3.
7. Contain toilet, wash basin and drinking fountain as specified in Section 1231.3.
8. Maximize visual supervision of inmates by staff.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.2.4 Sobering cell. A sobering cell shall:
   1. Contain a minimum of 20 square feet (1.9 m$^2$) of floor area per inmate;
   2. Be limited to eight inmates;
   3. Be no smaller than 60 square feet (5.6 m$^2$) and have a clear ceiling height of 8 feet (2438 mm) or more;
   4. Contain a toilet, wash basin and drinking fountain as specified in Section 1231.3;
   5. Have padded partitions located next to toilet fixture in such a manner that they provide support to the user;
   6. Maximize visual supervision of inmates by staff;
   7. Be padded on the floor as specified in Section 1231.3; and,
   8. Have accessible a shower in the secure portion of the facility.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.2.5 Safety cell. A safety cell shall:

1. Contain a minimum of 48 square feet (4.5 m²) of floor area with no one floor dimension being less than 6 feet (1829 mm) and a clear ceiling height of 8 feet (2438 mm) or more;
2. Be limited to one inmate;
3. Contain a flushing ring toilet, capable of accepting solid waste, mounted flush with the floor, the controls for which must be located outside of the cell;
4. Be padded as specified in Section 1231.3;
5. Be equipped with a variable intensity, security-type lighting fixture which is inaccessible to the inmate occupant, control of which is located outside of the cell;
6. Provide one or more vertical view panels not more than 4 inches (102 mm) wide nor less than 24 inches (610 mm) long which shall provide a view of the entire room;
7. Provide a food pass with lockable shutter, no more than 4 inches (102 mm) high, and located between 26 inches (660 mm) and 32 inches (813 mm) as measured from the bottom of the food pass to the floor; and,
8. Any wall or ceiling mounted devices must be inaccessible to the inmate occupant.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?
7.Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.2.6 Single-occupancy cells. Single-occupancy cells shall:

1. Have a maximum capacity of one inmate;
2. Contain a minimum of 60 square feet (5.6 m$^2$) of floor area in Type I facilities and 70 square feet (6.5 m$^2$) of floor area in Type II and Type III facilities;
3. Have a minimum clear ceiling height of 8 feet (2438 mm) and a minimum width of 6 feet (1829 mm);
4. Contain a toilet, wash basin and drinking fountain as specified in Section 1231.3; and
5. Contain a bunk, desk and seat as specified in Section 1231.3.

Exception: A Type I facility does not require a desk and seat.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem?  (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

**1231.2.7 Double-occupancy cells.** Double-occupancy cells shall:

1. Have a maximum capacity of two inmates;
2. Contain a minimum of 60 square feet (5.6 m²) of floor area in Type I facilities and 70 square feet (6.5 m²) of floor area in Type II and Type III facilities;
3. Have a minimum clear ceiling height of 8 feet (2438 mm) and a minimum width of 6 feet (1829 mm);
4. Contain a toilet, wash basin and drinking fountain as specified in Section 1231.3; and
5. Contain two bunks, and at least one desk and seat as specified in Section 1231.3.

**Exception:** A Type I facility does not require a desk and seat.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.2.8 Dormitories. Dormitories shall:

1. Contain a minimum of 50 square feet (4.7 m²) of floor area per inmate for a single-bed unit; a minimum of 70 square feet (7 m²) for a double-bed unit; and a minimum of 90 square feet (9.3 m²) for triple-bed unit and have a minimum ceiling height of 8 feet (2438 mm);

2. Be designed for no more than 64 inmates and no fewer than four inmates;

3. Provide access to water closets separate from the wash basin and drinking fountains as specified in Section 1231.3; and

4. In other than Type I facilities, provide storage space for personal items and clothing for each occupant.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.2.9 Dayrooms. Dayrooms or dayroom space shall:

1. Contain 35 square feet (3.3 m$^2$) of floor area per inmate in width in front of cells/rooms;
2. Contain tables and seating to accommodate the maximum number of inmates;
3. Provide access to water closets, wash basins and drinking fountains as specified in Section 1231.3;
4. Provide access to a shower or showers as specified in Section 1231.3; and
5. Be provided to all inmates in Type II and Type III facilities (except those housed in special-use cells) and to inmate workers in Type I facilities. Dayroom space as described in this section may be a part of a single occupancy cell used for administrative segregation or a dormitory, in which case the floor area of the cell or a dormitory must be increased by the square footage required for the dayroom.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.2.10 Exercise area. An outdoor exercise area or areas must be provided in every Type II and Type III facility. The minimum clear height must be 15 feet (4572 mm) and the minimum number of square feet of surface area will be computed by multiplying 80 percent of maximum rated population by 50 square feet (4.7 m²) and dividing the result by the number of one-hour exercise periods per day.

The exercise area must contain or provide free access to a toilet, wash basin, and drinking fountain as provided in Section 1231.3.

There must be at least one exercise area of not less than 600 square feet (55.7 m²). The design shall facilitate security and supervision appropriate to the level of custody.

Type IV facilities shall have an outdoor recreation area or access to community recreation facilities.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

The workgroup discussed whether there should be a minimum requirement for outdoor exercise space. After a short discussion, the workgroup elected not to take action.

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.2.11 Correctional program/multipurpose space. An area for correctional programming must be provided in every Type II and Type III facility. The program area and furnishings shall be designed to meet the needs specified by the facility’s program statement.

Type IV facilities shall have multipurpose space for games and activities, dining, visiting, TV meetings and quiet space for study and reading, such that activities do not conflict with each other.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

The workgroup discussed the need to establish a clear ceiling height in all inmate-occupied areas, not simply the housing areas as currently required. In the end the workgroup elected not to take action.

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.2.12 Medical examination room. There must be a minimum of one suitably equipped medical examination room in every facility which provides on-site health care. The examination room shall be designed in consultation with the responsible physician/health authority. Such a medical examination room shall:

1. Be located within the security area and provide for privacy of the inmates;
2. Provide not less than 100 square feet (9.3 m$^2$) of floor space with no single dimension less than 7 feet (2134 mm);
3. Provide hot and cold running water;
4. Provide lockable storage for medical supplies; and
5. Provide an examination table;
6. Provide adequate lighting; and
7. Any room where medical procedures are provided must be equipped with hot and cold running water.

2. ESC Notes/Recommendations

The ESC requested the Title 24 Workgroup consider the input, giving attention to the following:

1. An assessment room is different from an exam room.

Rec A
At a minimum, this section should be revised such that medical examination rooms include an examination table and adequate lighting. PPWG agreed with the recommendation.

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

Currently, the medical examination rooms do not include a requirement for an examination table or adequate lighting, although these are typical features.

4. What is the operational impact that will result from this revision; how will it change operations?

In planning for medical exam rooms, it will be necessary to plan for the provision of an exam table and adequate lighting which will likely already be considered.

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?
The fiscal impact is negligible, as exam tables and adequate lighting are typical in an exam room.

6. **How will BSCC measure compliance with this revision?**

Local inspectors will review for adequacy.

7. **Summary of Workgroup Discussion and Intent**

The workgroup agreed to add the recommendation.

8. **ESC Action/Response**

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

**1231.2.13 Pharmaceutical storage space.** Provide lockable storage space for medical supplies and pharmaceutical preparations as referenced by Title 15, California Code of Regulations, Section 1216.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  
   b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  
   b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.2.14 Medical care housing. There shall be some means to provide medical care and housing of ill and/or infirm inmates. When the program statement for a Type II or Type III facility indicates that medical care housing is needed, such housing must provide lockable storage space for medical instruments and must be located within the security area of the facility accessible to both female and male inmates, but not in the living area of either. The medical care housing unit shall be designed in consultation with the health authority. Medical/mental health areas may contain other than single occupancy cells.

If negative pressure isolation rooms are being planned, they shall be designed to recognized industry standards.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.2.16 Commissary. In all Type II, III and IV facilities, except where community access is available, there shall be provisions made for inmates to purchase items (such as candy, toilet articles, stationery supplies, books, newspapers and magazines, etc.). An area shall be provided for the secure storage of the stock for such inmate canteen items.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.2.17 Dining facilities. In all Type II, III and IV facilities which serve meals, dining areas shall be provided which will allow groups of inmates to dine together. Such dining areas shall not contain toilets, wash basins or showers in the same room without appropriate visual barrier. Wherever the facility contains a central dining room or rooms, it shall contain a minimum of 15 square feet (1.4 m$^2$) of floor space and sufficient tables and seating for each inmate being fed.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.2.18 Visiting space. Space shall be provided in all Types I, II, III and IV facilities for visiting.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.2.19 Safety equipment storage. A secure area shall be provided for the storage of safety equipment such as fire extinguishers, self-contained breathing apparatus, wire and barcutters, emergency lights, etc.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem?  (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.2.20 Janitors’ closet. In Type II facilities, at least one securely lockable janitors’ closet with sufficient area for the storage of cleaning implements and supplies must be provided within the security areas of the facility. A mop sink shall also be available within the security area of the facility. In court holding, temporary holding, Types I, III and IV facilities, the closet need not be in the security area.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.2.21 Storage rooms. One or more storage rooms shall be provided to accommodate a minimum of 80 cubic feet (2.3 m³) of storage area per inmate for inmate clothing and personal property, institutional clothing, bedding and supplies. Court holding, temporary holding and Type I facilities may be excluded from the storage space requirement for personal and institutional clothing unless clothing is issued.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.2.22 Audio monitoring system. In court holding, temporary holding, Type I, Type II and Type II facilities there shall be an inmate- or sound-actuated audio monitoring system in temporary holding cells or rooms, temporary staging cells or rooms, sobering cells, safety cells, single and double occupancy cells, dormitories, dayrooms, exercise areas and correctional program/multipurpose space, which is capable of alerting personnel who can respond immediately.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.2.23 Laundry facilities. In Type IV facilities, provision shall be made for washing and drying personal clothing by machines, either in the facility or in the community, if access is permitted for same.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

**1231.2.24 Emergency power.** There shall be a source of emergency power in all detention facilities capable of providing minimal lighting in all housing units, activities areas, corridors, stairs and central control points, and to maintain fire and life safety, security, communications and alarm systems. Such an emergency power source shall conform to the requirements specified in Title 24, Part 3, Article 700, California Electrical Code, California Code of Regulations.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.2.25 Confidential interview rooms. There must be a minimum of one suitably furnished interview room for confidential interviews in every facility which provides onsite health care. The interview room shall be designed in consultation with responsible custodial staff and health care staff. Such an interview room shall:

1. Be located within the security area accessible to both female and male inmates; and
2. Provide not less than 70 square feet (6.5 m²) of floor space with no single dimension less than 6 feet (1829 mm).

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.2.26 Attorney interview space. All facilities except Type IV facilities shall include attorney interview areas which provide for confidential consultation with inmates.

   Exception: The design of court holding and temporary holding facilities shall include the following required spaces from Sections 1231.2.2, 1231.2.19, 1231.2.20, 1231.2.21, 1231.2.22, 1231.2.24 and 1231.2.26.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.3 Design criteria for furnishings and equipment. Furnishings and equipment shall be as follows:

1231.3.1 Toilets/urinals.

1. Toilets/urinals must be provided in single-occupancy cells and double-occupancy cells.
2. In dormitories, toilets/urinals must be provided in a ratio to inmates of 1:10.
3. Toilets/urinals must be accessible to the occupants of day-rooms and exercise areas.
4. In temporary holding cells and temporary staging cells toilets/urinals must be provided in a ratio to inmates of 1:16.
5. In sobering cells toilets/urinals must be provided in a ratio to inmates of 1:8.
6. One urinal or 2 feet (610 mm) of urinal trough may be substituted for each toilet up to one third of the total number of toilets required, except in those facilities or portions thereof used for females.
7. Toilet areas shall provide modesty for inmates with staff being able to visually supervise.

Note: Toilet areas shall provide modesty for inmates with staff being able to visually supervise.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

The previous language presented this mandate as a “note” which lacks authority. The workgroup agreed to include the “note” as a numbered component.

4. What is the operational impact that will result from this revision; how will it change operations?

No operational impact.

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

No fiscal impact.

6. How will BSCC measure compliance with this revision?

Compliance will be determined during the pre-opening inspection and completion of the Living Area Space Evaluation.
7. **Summary of Workgroup Discussion and Intent**

The workgroup discussed clarification on the protected body parts described by PREA and implied by “modesty”. If the intent of either standard is to prevent incidental views of sides and hips, the modesty shield will be large and may impact cell size. Staff commented on the commonly installed modesty panel dimensions, construction and installation.

The workgroup elected to incorporate the “note” as an item (7) of the regulation to add clarity.

8. **ESC Action/Response**

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.3.2 Wash basins.
   1. Wash basins must be provided in single occupancy cells and double occupancy cells.
   2. In dormitories, wash basins must be provided in a ratio to inmates of 1:10.
   3. Wash basins must be accessible to the occupants of day-rooms and exercise areas.
   4. In temporary holding cells and temporary staging cells, wash basins must be provided in a ratio to inmates of 1:16.
   5. In sobering cells, wash basins must be provided in a ratio to inmates of 1:8.
   6. Wash basins must be provided with hot and cold or tempered water.
   7. Two feet (610 mm) of wash basin trough may be substituted for each basin required.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

**1231.3.3 Drinking fountains.** There must be a minimum of one drinking fountain in every single-occupancy cell, double-occupancy cell, dormitory, temporary holding cell, temporary staging cell, sobering cell, and be accessible to the occupants of day rooms and exercise areas. Additional drinking fountains shall be located in other areas of the facility so that drinking water will be available to inmates and staff. Such drinking fountains must meet the following minimum health requirements:

1. The drinking fountain bubbler shall be on an angle which prevents waste water from flowing over the drinking fountain bubbler.
2. Water flow shall be actuated by mechanical means.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.3.4 Showers must be available to all inmates on a ratio of at least one shower to every 20 inmates or fraction thereof and must provide hot and cold water or tempered water. Shower stalls/shower areas must be designed and constructed of materials which are impervious to water and soap so they may be easily cleaned. **Shower areas shall provide modesty for inmates with staff being able to visually supervise.**

Note. Shower areas shall provide modesty for inmates with staff being able to visually supervise.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

The previous language presented this mandate as a “note” which lacks authority. The workgroup decided to include the “note” in the paragraph to make it mandatory.

4. What is the operational impact that will result from this revision; how will it change operations?

No operational impact.

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

No fiscal impact.

6. How will BSCC measure compliance with this revision?

Compliance will be determined during the facility pre-opening inspection and completion of the Living Area Space Evaluation.

7. Summary of Workgroup Discussion and Intent

The workgroup elected to incorporate the “note” into the paragraph of the regulation to add clarity.

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

**1231.3.5 Beds** must be elevated off the floor, have a solid bottom, and a sleeping surface of at least 30 inches (762 mm) wide and 76 inches (1930 mm) long. Multiple beds must have a minimum of 21 inches (533 mm) between bed pans. Except in minimum security areas, beds must be securely fastened to the floor or the wall.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.3.6 Lighting. Lighting in housing units, dayrooms and activity areas must be sufficient to permit easy reading by a person with normal vision, and shall not be less than 20 footcandles (215.2 lux) at desk level and in the grooming area. Lighting shall be centrally controlled and/or occupant controlled in housing cells or rooms. Night lighting in these areas shall be sufficient to give good visibility for purposes of supervision. In minimum-security areas, lighting may be supplied by ordinary lighting fixtures, and in areas of higher security, light fixtures must be of secure design.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.3.7 Windows. In housing areas of higher than minimum security, exterior windows which are constantly accessible to inmates for escape must be designed and constructed so that if broken out, the net area accessible for escape is no greater than 5 inches (127 mm) in one dimension.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.3.8 Cell padding. In sobering cells, the floor and partition shall be padded. In safety cells, padding must cover the entire floor, doors, and walls and everything on them to a clear height of 8 feet (2438 mm). All such padded cells must be equipped with a tamper resistant fire sprinkler as approved by the State Fire Marshal. All padding must be:

1. Approved for use by the State Fire Marshal;
2. Nonporous to facilitate cleaning;
3. At least 1/2-inch (12.7 mm) thick;
4. Of a unitary or laminated construction to prevent its destruction by teeth, hand tearing or small metal objects;
5. Firmly bonded to all padded surfaces to prevent tearing or ripping; and
6. Without any exposed seams susceptible to tearing or ripping.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision? b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision? b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.3.9 Mirrors. A mirror of a material appropriate to the level of security must be provided near each wash basin specified in these regulations.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. **Regulation and Recommended Revision**

**1231.3.10 Seating.** In temporary holding and temporary staging cells, seating must be securely fixed to the floor and/or wall. When bench seating is used, 18 inches (457 mm) of bench is seating for one person.

2. **ESC Notes/Recommendations**

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. **Summary of Workgroup Discussion and Intent**

8. **ESC Action/Response**

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

1231.3.11 Table/seat. In single- and double-occupancy cells, a table and seat for the purpose of writing and dining shall be provided.

   Exception: A Type I facility does not require a table and a seat.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.
1. Regulation and Recommended Revision

**1231.3.12 Weapons locker.** A secure weapons locker shall be located outside the security perimeter of the facility. Such weapons lockers shall be equipped with individual compartments, each with an individual locking device. Weapons lockers are required in temporary and court holding facilities and in all facilities of higher than minimum security.

**Exception:** The design of court holding and temporary holding facilities shall include the design criteria for furnishings and equipment from Sections 1231.3.1, 1231.3.2, 1231.3.3, 1231.3.6, 1231.3.10 and 1231.3.12.

2. ESC Notes/Recommendations

n/a

3. a.) What existing problem is being addressed by this revision?  b.) How will this revision address/fix the problem? (What is the rationale?)

No amendments were made by the Physical Plant Workgroup.

4. What is the operational impact that will result from this revision; how will it change operations?

5. a.) What is the fiscal impact that will result from this revision?  b.) How can it be justified?

6. How will BSCC measure compliance with this revision?

7. Summary of Workgroup Discussion and Intent

8. ESC Action/Response

Accept the workgroup’s recommendation.