



January 8, 2026

Amanda Gibbs, Chief Probation Officer  
Napa County Probation Department  
212 Walnut Street  
Napa, CA 93230

**RE: APPROVAL OF CORRECTIVE ACTION PLAN PURSUANT TO WELFARE AND INSTITUTIONS CODE SECTION 209 (d)**

Dear Chief Gibbs,

A Comprehensive Inspection was conducted for the Napa County Probation Department Juvenile Facilities between December 15 and December 19, 2025. Your agency was provided with an Initial Inspection Report (IIR) on December 19, 2025, for noncompliance with Title 15. Your agency's Corrective Action Plan (CAP) is due on February 17, 2026. We received your final CAP on January 7, 2026, addressing the noncompliant areas.

Please note that while I have reviewed and approved your agency's corrective action plan, final approval will be determined by the Board of State and Community Corrections (BSCC) Board during its February 2026 meeting. Please notify the BSCC when the agency has completed all corrective actions and is in full compliance with all related sections of the Title 15 areas referenced in the December 19, 2025 IIR, no later than February 17, 2026. BSCC staff will verify all corrective actions on or after that date. If you have any questions or concerns, please contact Field Representative Eric Raley at [Eric.Raley@bscc.ca.gov](mailto:Eric.Raley@bscc.ca.gov).

Sincerely,

STEVEN WICKLANDER  
Deputy Director  
Facilities Standards and Operations Division

Cc: Eric Raley, Field Representative, BSCC  
Presiding Judge, Napa County Juvenile Court\*  
Chair, Juvenile Justice Commission, Napa County\*  
Chair, Board of Supervisors, Napa County\*  
County Administrator, Napa County\*



A Tradition of Stewardship  
A Commitment to Service

**Napa County Probation**  
Administration

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[www.countyofnapa.org/probation](http://www.countyofnapa.org/probation)

Main: (707) 253-4431  
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**Amanda Gibbs**  
Chief Probation Officer

Date: 01/05/2025

Re: Notice of Non Compliance: Staffing 1321, Room Confinement 1354.5, 1371 Programs, Recreation and Exercise

By: Kamati Calvin, Chief Deputy - Juvenile Hall

On December 19, 2025, an initial inspection report was provided to the department identifying areas of non-compliance outlined in Title 15 Section 1321 Staffing, 1354.5 Room Confinement, and 1371 Programs, Recreation and Exercise.

While each section outlines independent guidelines, staffing is the underlying issue that impacted the other regulations and will be the focus of the corrective action plan.

<b>Title 15. Section</b>	<b>Description</b>	<b>Corrective Action Plan</b>
§ 1321. Staffing.	<p>Subsection (a) states: “Have an adequate number of personnel sufficient to carry out the overall facility operation and its programming, to provide for safety and security of youth and staff and meet established standards and regulations.”</p> <p>Subsection (b) states: “Ensure that no required services shall</p>	<p><b>The facility affirms that Juvenile Hall currently maintains a 0% vacancy rate and is adequately staffed to meet Title 15 requirements. The noncompliance identified was not the result of a lack of authorized staffing positions, but rather communication and timing issues with activating protocol. The facility has multiple built-in staffing redundancies, including on-call extra help staff, DPOs available for overtime, and management staff available to respond at all times. The corrective actions</b></p>

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	<p>be denied because of insufficient numbers of staff on duty absent exigent circumstances.”</p> <p>This section is out of compliance because Section 1354.5 and Section 1371 are impacted due to lack of staffing; see details below.</p>	<p><b>below strengthen communication, documentation, and escalation to ensure these resources are activated in a timely manner to prevent future noncompliance.</b></p> <p><b>1.) Directive Issued:</b></p> <p><b>Description of the steps we will take to correct the noncompliance:</b></p> <p>On December 22, 2025, facility leadership issued a written directive to all institution supervisors, senior staff, and managers reinforcing Title 15 requirements related to youth programming, room confinement limitations, and the required communication chain for shift coverage. The directive emphasizes supervisory accountability for ensuring staffing adequacy, proactive problem-solving, and immediate escalation to management when staffing levels may impact programming or compliance.</p> <p><b>When each step will be completed:</b></p> <p>Completed on December 22, 2025. Ongoing reinforcement occurs during shift briefings, supervisor meetings, and management oversight reviews.</p> <p><b>Description of how each step will remedy the noncompliance:</b></p> <p>This directive ensures supervisors clearly</p>

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		<p>understand their obligation to prioritize Title 15 compliance over operational convenience, immediately address staffing gaps, and engage management early to prevent missed programming or inappropriate room confinement.</p> <p><b>How each step provides a durable and sustainable remedy:</b></p> <p>By formalizing expectations in writing and embedding them into supervisory practice, the directive establishes consistent standards of accountability and communication that support long-term compliance regardless of staffing fluctuations.</p> <p><b>2.) Implementation of Change of Program Log</b></p> <p><b>Description of the steps we will take to correct the noncompliance:</b></p> <p>The facility implemented a <b>Change of Program Log</b> on January 8, 2026, designed to clearly document when staffing or operational issues could impact youth programming. The log requires supervisors to immediately notify management and document all actions taken to resolve the issue, including contacting available extra help staff, offering overtime, and requesting</p>

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		<p>management support.</p> <p><b>When each step will be completed</b></p> <p>Implemented in a Supervisor Meeting on January 8, 2026, requiring use whenever a program change or staffing concern arises.</p> <p><b>Description of how each step will remedy the noncompliance</b></p> <p>This process ensures potential compliance issues are identified early, management is notified in real time, and available staffing resources are promptly activated to maintain required programming and services.</p> <p><b>How each step provides a durable and sustainable remedy</b></p> <p>The log provides a clear, standardized process that is easy to understand and review, allowing both staff and external reviewers to verify that reasonable and timely steps were taken to maintain compliance.</p> <p><b>3.) Implementation of Daily Shift Report</b></p> <p><b>Description of the steps we will take to correct the noncompliance</b></p> <p>A <b>Daily Shift Report</b> was implemented to ensure continuity and communication between shifts. The report documents staffing levels and programming delivery</p>

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		<p>and is reviewed by incoming supervisors so they understand what programming occurred on the prior shift and what remains required.</p> <p><b>When each step will be completed</b> Implemented January 8, 2025, and completed at the end of every shift.</p> <p><b>Description of how each step will remedy the noncompliance</b> This report ensures the incoming shift (particularly night shift) has clear direction and accountability to complete remaining programming, preventing gaps of information between supervisors.</p> <p><b>How each step provides a durable and sustainable remedy</b> The report formalizes shift-to-shift communication, reinforces supervisory accountability, and ensures youth programming remains continuous regardless of staffing changes.</p> <p><b>4.) Activation of Mandatory Overtime Policy</b></p> <p><b>Description of the steps we will take to correct the noncompliance</b> The facility utilizes its <b>Mandatory Overtime Policy</b> when necessary to ensure minimum staffing levels are maintained after documented attempts to</p>

<b>Title 15. Section</b>	<b>Description</b>	<b>Corrective Action Plan</b>
		<p>secure voluntary coverage, extra help staff, and management response.</p> <p><b>When each step will be completed</b> Activated January 1, 2026.</p> <p><b>Description of how each step will remedy the noncompliance</b> Mandatory overtime ensures sufficient staffing to deliver required programming and services and prevents denial of services or room confinement due to staffing availability.</p> <p><b>How each step provides a durable and sustainable remedy</b> This policy serves as a final safeguard, ensuring staffing adequacy at all times and reinforcing the facility's layered staffing infrastructure.</p>
§ 1354.5. Room Confinement.	<p>Subsection (a) (2) states:</p> <p>“Room confinement shall not be used for the purposes of punishment, coercion, convenience, or retaliation by staff.”</p> <p>During the inspection, multiple dates were identified where youth remained in their respective locked rooms to eat their meals; this was attributed in interviews by both youth in custody and Probation Department staff to</p>	<p><b>1.) Directive Issued:</b></p> <p><b>Description of the steps we will take to correct the noncompliance:</b> On December 22, 2025, facility leadership issued a written directive to all institution supervisors, senior staff, and managers reinforcing Title 15 requirements related to youth programming, room confinement limitations, and the required communication chain for shift coverage. The directive emphasizes supervisory accountability for ensuring staffing</p>

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	<p>insufficient staffing.</p> <p>Additional documentation reviewed stated that “due to staffing limitations, (youth were) not able to get their full time out.” A sample of Room Tracking Forms reviewed stated that “due to limited staffing levels … youth had time in (their) rooms.” Alternate phrasings used in documentation included “due to insufficient staffing” and “due to low staffing”. Sample documentation reviewed showed dates when youth remained in or returned to their rooms inconsistent with the Daily Schedule and with the bedtimes provided in the Youth Handbook and youth orientation.</p> <p>This constitutes room confinement; no indication was provided that other less restrictive options were attempted, or that there was an articulated threat to the safety and security of youth or staff. To the contrary, documentation included the statement that “due to staffing issues, the youth did not come out of their rooms. Staff reported no behavior</p>	<p>adequacy, proactive problem-solving, and immediate escalation to management when staffing levels may impact programming, or compliance.</p> <p><b>When each step will be completed:</b> Completed on December 22, 2025. Ongoing reinforcement occurs during shift briefings, supervisor meetings, and management oversight reviews.</p> <p><b>Description of how each step will remedy the noncompliance:</b> This directive ensures supervisors clearly understand their obligation to prioritize Title 15 compliance over operational convenience, immediately address staffing gaps, and engage management early to prevent missed programming or inappropriate room confinement.</p> <p><b>How each step provides a durable and sustainable remedy:</b> By formalizing expectations in writing and embedding them into supervisory practice, the directive establishes consistent standards of accountability and communication that support long-term compliance regardless of staffing fluctuations.</p> <p><b>2.) Implementation of Change of</b></p>

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	issue.”	<p><b>Program Log</b></p> <p><b>Description of the steps we will take to correct the noncompliance:</b>  The facility implemented a <b>Change of Program Log</b> on January 8, 2026, designed to clearly document when staffing or operational issues could impact youth programming. The log requires supervisors to immediately notify management and document all actions taken to resolve the issue, including contacting available extra help staff, offering overtime, and requesting management support.</p> <p><b>When each step will be completed</b>  Implemented in a Supervisor Meeting on January 8, 2026, requiring use whenever a program change or staffing concern arises.</p> <p><b>Description of how each step will remedy the noncompliance</b>  This process ensures potential compliance issues are identified early, management is notified in real time, and available staffing resources are promptly activated to maintain required programming and services.</p> <p><b>How each step provides a durable and sustainable remedy</b>  The log provides a clear, standardized process that is easy to understand and</p>

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		<p>review, allowing both staff and external reviewers to verify that reasonable and timely steps were taken to maintain compliance.</p> <p><b>3.) Implementation of Daily Shift Report</b></p> <p><b>Description of the steps we will take to correct the noncompliance</b></p> <p>A <b>Daily Shift Report</b> was implemented to ensure continuity and communication between shifts. The report documents staffing levels and programming delivery and is reviewed by incoming supervisors so they understand what programming occurred on the prior shift and what remains required.</p> <p><b>When each step will be completed</b></p> <p>Implemented January 8, 2026, and completed at the end of every shift.</p> <p><b>Description of how each step will remedy the noncompliance</b></p> <p>This report ensures the incoming shift (particularly night shift) has clear direction and accountability to complete remaining programming, preventing gaps of information between supervisors.</p> <p><b>How each step provides a durable and sustainable remedy</b></p> <p>The report formalizes shift-</p>

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		<p>to-shift communication, reinforces supervisory accountability, and ensures youth programming remains continuous regardless of staffing changes.</p> <p><b>4.) Activation of Mandatory Overtime Policy</b></p> <p><b>Description of the steps we will take to correct the noncompliance</b></p> <p>The facility utilizes its <b>Mandatory Overtime Policy</b> when necessary to ensure minimum staffing levels are maintained after documented attempts to secure voluntary coverage, extra help staff, and management response.</p> <p><b>When each step will be completed</b></p> <p>Activated January 1, 2026.</p> <p><b>Description of how each step will remedy the noncompliance</b></p> <p>Mandatory overtime ensures sufficient staffing to deliver required programming and services and prevents denial of services or room confinement due to staffing availability.</p> <p><b>How each step provides a durable and sustainable remedy</b></p> <p>This policy serves as a final safeguard, ensuring staffing adequacy at all times and reinforcing the facility's layered staffing infrastructure.</p>

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<p>§ 1371. Programs, Recreation, and Exercise.</p>	<p>Section states: “Juvenile facilities shall provide the opportunity for programs, recreation, and exercise a minimum of three hours a day during the week and five hours a day each Saturday, Sunday or other non-school days, of which one hour shall be an outdoor activity, weather permitting.”</p> <p>In a sample review of the documentation regarding program, recreation and exercise hours, staff documented dates when “due to low staffing” or “due to limited staffing”, less than the required amount of activity or “free time” was received.</p> <p>In interviews, both the youth in custody and Probation Department staff indicated that instances of the facility being short-staffed had resulted in youths not receiving the time required for programming, recreation, and/or exercise.</p>	<p><b>1.) Directive Issued:</b></p> <p><b>Description of the steps we will take to correct the noncompliance:</b></p> <p>On December 22, 2025, facility leadership issued a written directive to all institution supervisors, senior staff, and managers reinforcing Title 15 requirements related to youth programming, room confinement limitations, and the required communication chain for shift coverage. The directive emphasizes supervisory accountability for ensuring staffing adequacy, proactive problem-solving, and immediate escalation to management when staffing levels may impact programming, or compliance.</p> <p><b>When each step will be completed:</b></p> <p>Completed on December 22, 2025. Ongoing reinforcement occurs during shift briefings, supervisor meetings, and management oversight reviews.</p> <p><b>Description of how each step will remedy the noncompliance:</b></p> <p>This directive ensures supervisors clearly understand their obligation to prioritize Title 15 compliance over operational convenience, immediately address staffing gaps, and engage</p>

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		<p><b>noncompliance</b>  Mandatory overtime ensures sufficient staffing to deliver required programming and services and prevents denial of services or room confinement due to staffing availability.</p> <p><b>How each step provides a durable and sustainable remedy</b>  This policy serves as a final safeguard, ensuring staffing adequacy at all times and reinforcing the facility's layered staffing infrastructure.</p>