September 9, 2016

The Honorable Rise Jones Pichon
Presiding Judge
Santa Clara County Superior Court
191 North First Street
San Jose, CA 95113

RE: Grand Jury Report: Addressing Mental Illness in Santa Clara County Jails

Dear Judge Pichon:

At the August 30, 2016 meeting of the County of Santa Clara Board of Supervisors (Item No. 57), the Board adopted the response from the County Administration to the Final Grand Jury Report and recommendations relating to Mental Illness in Santa Clara County Jails.

As directed by the Board of Supervisors and on behalf of the Board President, our office is forwarding to you the enclosed certified copy of the response to the Final Grand Jury Report. This response constitutes the response of the Board of Supervisors, consistent with provisions of California Penal Section 933(c).

If there are any questions concerning this issue, please contact our office at 299-5001 or by email at boardoperations@cob.sccgov.org.

Very truly yours,

Michele Neighbors
Deputy Clerk, Board of Supervisors
County of Santa Clara

Enclosures
Laurie Smith
Sheriff

Date: August 23, 2016

To: Jeffrey V. Smith, County Executive
    Miguel Márquez, Chief Operating Officer

From: Carl Neusel, Interim Chief of Correction
       René G. Santiago, Deputy County Executive and Director, Santa Clara Valley Health & Hospital System

Subject: Response to the 2015-2016 Santa Clara County Civil Grand Jury Report: “Addressing Mental Illness in Santa Clara County Jails”

The Civil Grand Jury recently released their 2015 – 2016 report titled: “Addressing Mental Illness in Santa Clara County Jails.” The Sheriff’s Office Custody Bureau would like to thank the Civil Grand Jury for their review of this critical area that is growing in our jail system. The Civil Grand Jury spent countless hours touring our facilities and interviewing staff regarding this growing crisis. We welcome the Civil Grand Jury’s comments and recommendations contained in this report.

The Sheriff’s Office Custody Bureau response to the findings and subsequent recommendations are:

**Finding 1**

Custody Bureau policies and procedures are out of date.

**Recommendation 1**

The Office of the Sheriff should assign personnel whose sole responsibility is to update and maintain all Custody Bureau policies and procedures with priority given to the Medical and Health Care Services chapter and the Security and Control chapter.

**Custody Bureau Response**

The Custody Bureau agrees with this finding. The recommendation is in the process of being implemented.
Beginning Fiscal Year 2017, the Board of Supervisors added five Custody Deputy positions to the jail compliance unit (Office of Standards and Inspection Unit). This is in addition to seven positions added since FY 2016. This unit will be responsible for continuous review of custody policies, revision, updates as well as monitoring staff compliance with these policies. The Department’s goal is to request additional positions in a phased approach as needed.

Finding 2

Interim changes to existing custody Bureau policies and procedures are not explicitly tied to the policies and procedures they affect.

Recommendation 2

The Office of the Sheriff should use a document control method to ensure any interim changes to existing policies and procedures are explicitly tied to the policies and procedures they affect.

Custody Bureau Response

The Custody Bureau agrees with this finding. The recommendation is in the process of being implemented.

The Department has been swiftly affecting change and making reforms within the agency. It was necessary to distribute directives to expedite these changes. With the creation of the Office of Standards and Inspection Unit, our goal is to update all policies and procedures. The Department will review its document control method in light of the Grand Jury finding and recommendation.

Finding 3

Current staffing levels necessitate that correctional deputies typically work alone in a housing unit. This makes it extremely difficult, if not impossible, for the correctional deputies to fulfill their duties and responsibilities.

Recommendation 3

The Office of the Sheriff should increase staffing levels so that at least two correctional deputies are assigned to each housing unit on all shifts to manage the workload, reduce stress, increase security and safety, and allow correctional deputies more flexibility in dealing with the behavior and needs of all inmates, including those with mental health issues.

Custody Bureau Response

The Custody Bureau agrees with this finding. The recommendation requires further analysis.

While units with higher security level inmates and an increased dorm population should have additional staffing, depending on budget availability, not all dorms with lower level security inmates and decreased population need this additional level of staffing. The Custody Bureau will evaluate this recommendation as it is affected by the vacancy rate, which impacts jail operations. The Sheriff’s Office has increased the number of academies to reduce vacancies.
Finding 4

Supervision of correctional deputies on the housing floors is inadequate. There are not enough sergeants to provide sufficient coaching, support, and remediation where needed. Watch commanders are not on site at all times.

Recommendation 4a

The Office of the Sheriff should increase the number of sergeants on each shift to one sergeant per housing floor in Main Jail and comparable supervision levels at the Elmwood facilities.

Recommendation 4b

The Office of the Sheriff should have a watch commander (lieutenant or above) at both Main Jail and Elmwood at all times.

Custody Bureau & Custody Health Services Response

The Custody Bureau and Custody Health Services agree with these findings. These recommendations require further analysis.

Having adequate management and supervisory staff in place is critical in a 24 hour operation. Sheriff Sergeant positions have been added over the past few years to increase supervisory presence in the facilities. A Lieutenant watch commander position for Main Jail and a Lieutenant watch commander position at Elmwood have also been added in the past few years. In FY 2017 the Sheriff's Office also added a Lieutenant position to oversee the grievance process and increase management presence in the facilities.

Finding 5

The number of mental health clinicians is insufficient to adequately address the needs of mentally ill inmates in the jails.

Recommendation 5

The Santa Clara Valley Health and Hospital System should increase clinician staffing levels in the jails to improve the level of support counseling, therapy, and advocacy for mentally ill inmates.

Custody Health Services Response

Custody Health agrees with this finding. This recommendation is in the process of being implemented.

Custody Health requested and the Board of Supervisors approved the addition of 12 Behavioral Health teams consisting of 12 additional psychiatry positions, 12 additional psychology positions, 12 additional master level clinician positions, and six (6) additional psychiatric nursing positions, and a new management position to oversee the provision of Behavioral Health services to inmates with serious mental illness in the jails. As of August 8, 2016, a total of five (5) of the 12 teams
have been implemented, which has increased access to mental health services to hundreds of inmates with serious mental illness.

Finding 6

There is a need for improvement at all management levels of Custody Health Services.

Recommendation 6

The Santa Clara County Board of Supervisors should commission a thorough independent audit of the Custody Health Services organization to ensure best management practices are identified and employed.

Custody Health Services Response

Custody Health Services respectfully disagrees with this finding. The recommendation will not be implemented because improvement of management within Custody Health Services is already underway; therefore, an additional audit is not needed at this time.

Improvement of management began with appointment of an interim Director of Custody Health and Behavioral Health Services with executive nursing experience from Santa Clara Valley Medical Center to assess, adapt, measure effectiveness of changes, establish comprehensive review process, lead the implementation of the new electronic health record, and recommend changes within Custody Health Services over the next six months. Proposed changes will be reviewed with the County Executive, Deputy County Executive for SCVHHS, County Counsel, Department of Correction senior leadership, Behavioral Health Services Department Director, Santa Clara Valley Health & Hospital System senior leadership, as well as Custody Health medical and behavioral health senior leadership.

The Medical Director of Behavioral Health Services Department provides leadership and oversight for all Behavioral Health services within Custody Health. She works closely with the Executive Director of Custody Health and managers in Custody Health to provide leadership direction to staff.

Additionally, Custody Health Services more than doubled Mental Health supervisory staffing through the addition of three new Health Care Program Manager positions. This will provide 24 hour on-site supervision for all facilities Monday through Friday and 24 hour on-call availability each weekend.

Finding 7

Custody Health Services is unable to facilitate a “warm handoff” of mentally ill inmates to community providers upon release from jail.

Recommendation 7

Custody Health Services should develop a process to ensure discharge planning begins upon incarceration and leads to a “warm handoff” to community support series at time of release.
Custody Health Services Response

Custody Health Services agrees with this finding. This recommendation is in the process of being implemented.

The Booking workflow has been revised to help ensure mentally ill arrestees are accurately identified and connected with appropriate services while incarcerated. Additionally, psychiatric providers have been incorporated into the Booking process so that medications can be continued or started sooner. The addition of the Behavioral Health Teams has improved the linkage of patients with mental illness to services upon release since each team has a case manager dedicated to treatment planning, including discharge planning. This has freed up existing resources to assist those mentally ill who are not eligible for a Behavioral Health team.

Custody Health has partnered with Behavioral Health Services to streamline connections between jail and the Re-Entry Resource Center. Through a grant from MIOCR, positions have been created for a full time case manager and a full time community worker dedicated to improving the “warm handoff” back to the community; recruitment is underway for these positions. Ambulatory Care’s Valley Homeless Healthcare Program will add two additional community health workers and a Medical Social Worker to help coordinate complex case management for patients on site at the ReEntry Resource Center and transition referrals from Custody Health, such as mental health treatment with no associated post-discharge case management. Custody Health Services has assigned a full time coordinator for those released to treatment programs to help ensure appropriate documentation and prescriptions are in place for optimal continuity of care and preparing case managers at the receiving facility to welcome the client. A Discharge Planning Committee has been convened to assist this work.

Finding 8

Implementation of multi-disciplinary teams approved by the Board of Supervisors has been poorly executed, and the proposed benefits have not been realized.

Recommendation 8

The Board of Supervisors should appoint a project manager to oversee the implementation of the multi-disciplinary teams to ensure their anticipated benefits are fully realized.

Custody Health Response

Custody Health Services disagrees with the finding. The recommendation has already been implemented.

A Health Care Program Manager II was hired in late May to oversee the implementation and management of the Behavioral Health teams. Five Behavioral Health teams are operational to date, with additional teams to launch in the next few months. The teams consist of a psychiatrist, psychologist, psychiatric nurse, and licensed clinician. The Behavioral Health teams are supported by Multi-Support Deputies who assist with custody-related issues. Additionally, a contract with a community-based agency will be brought to the Board of Supervisors for approval on August 30th to provide the substance use counseling component to the teams.
The Behavioral Health teams meet weekly to discuss patients and coordinate care. They also participate in regularly scheduled facility-specific Multi-Disciplinary Team meetings at Elmwood and the Main Jail to discuss inmate-patients who require a more coordinated plan of care by Medical, Mental Health, and Custody.

The Behavioral Health teams are in the process of addressing critical gaps in care for seriously mentally ill (SMI) and intellectually disabled (ID) inmate-patients at Elmwood and the Main Jail. SMI and ID inmate-patients in the BHT units are more quickly identified and their conditions stabilized with a team approach that focuses on ongoing, rather than crisis-driven, care. In the last few months, adherence to treatment has improved as evidenced by an overall reduction in mental health clinic refusals across facilities. Specifically, refusals for outpatient psychiatric appointments have decreased from 23% in January 2016 to 12% in June 2016.

Coordination and collaboration with Behavioral Health Services, Mental Health/Drug Treatment Court, and community-based agencies has increased, resulting in improved discharge planning, smoother transitions back into the community, and “warm handoffs” to community-based providers. The addition of the substance use counselors (expected in September 2016) will also help to initiate and support a recovery process for those inmate-patients with chronic substance use and/or co-occurring disorders.

Finding 9

There is significant opportunity to enhance the quality and training method of Custody Academy courses that deal with mentally ill inmates.

Recommendation 9a

The Office of the Sheriff should increase the use of scripted scenarios and role-playing in Custody Academy courses on mental health to develop and practice de-escalation and critical thinking skills.

Recommendation 9b

The Office of the Sheriff should have mental health classes at the Custody Academy audited for effectiveness annually by subject matter experts and teaching professionals.

Custody Bureau Response

The Custody Bureau agrees with these findings. These recommendations are in the process of being implemented.

The Office of the Sheriff recognizes the importance of enhancing the delivery of training to new Correctional Academy Recruits in the area of inmate mental illness and de-escalation techniques. In addition to the approximate 8 hours of mental health and behavioral health training provided at the academy, the additional 40 hour Crisis Intervention Training is presented by a team of mental health professionals who continuously evaluate the material to ensure it is current, relevant and effective training for the recruits to successfully encounter and mitigate inmate mental health related events.
within the jail environment. The overall academy program is audited by the State on an annual basis to ensure compliance with current curriculum mandates and course delivery concepts.

An additional 10 hours has been built into the academy curriculum schedule under Module 8 — Defensive Tactics to allow additional time to facilitate practical scenarios involving simulated mentally ill inmate behaviors which incorporate critical thinking and de-escalation techniques as an increased emphasis for recruit knowledge and competency. An additional enhanced training which is in the process of being incorporated for academy recruits and current Correctional Deputies is an interactive jail specific video simulation training involving mental illness related incidents. The use of this technology will allow Correctional Deputies to demonstrate appropriate de-escalation and response techniques in lieu of utilizing traditional force options to resolve incidents involving mentally ill inmates.

**Finding 10**

While the Custody Bureau has expanded its curriculum to include Crisis Intervention Team training, some of that training is not relevant to the custody environment.

**Recommendation 10**

The Office of the Sheriff should develop or select a custody-centric Crisis Intervention Team training program for the Custody Bureau by December 31, 2016, for immediate implementation.

**Custody Bureau Response**

The Custody Bureau agrees with the finding. The recommendation is in the process of being implemented.

The Office of the Sheriff has had a long standing partnership with the Santa Clara County Mental Health Department in presenting a 40 hour Crisis Intervention Training (CIT) for deputies and law enforcement officers throughout the bay area. This state certified curriculum provides deputies and officers the skills and knowledge to recognize individuals with mental health issues, identify potential disorders, and minimize escalations in contacts with individuals suffering from mental health related issues.

Training focuses on developing techniques for approaching persons with mental health issues (including individuals with developmental disabilities), communication skills, de-escalation techniques, suicide risk factors, cultural issues, case study presentation, and officer wellness.

While the majority of the case study presentations are derived from incidents involving mentally ill individuals within the community, the recognition skills and knowledge attained by officers and deputies on how to communicate and de-escalate incidents involving mentally ill individuals is very relevant to what Correctional Deputies will encounter within the inmate population.

However, the Office of the Sheriff has recognized the need to develop a custody specific course for our Correctional Deputies which incorporates case study presentations derived from incidents within
a custodial environment, and the Office of the Sheriff is currently in the process of identifying appropriate vendors to deliver a train-the-trainer course.

Until a custody specific CIT course can be implemented, a 16 hour Behavioral Health/De-Escalation course specific for Custody Operations has been developed in partnership with subject matter experts and is currently a mandatory training now being provided to all Correctional Deputies. This course began in May 2016 and will continue to supplement the 40 hour CIT training for our Correctional Deputies. Approximately 140 Correctional Deputies have been trained in this new Custody Specific course and there are currently approximately 300 Correctional Deputies enrolled in this course already scheduled for future dates being presented multiple times per month.

Finding 11

There is no content specific to dealing with mentally ill inmates in the Probationary On-The-Job Training Manual.

Recommendation 11

The Office of the Sheriff should add content on dealing with mentally ill inmates to the Probationary On-The-Job Training Manual. Evaluation criteria should include interaction with mentally ill inmates and those with developmental disabilities, de-escalation techniques, and appropriate use of force.

Custody Bureau Response

The Custody Bureau agrees with this finding. The recommendation is in the process of being implemented.

The Probationary On-The-Job training program for newly hired Correctional Deputies entering the jail facilities after completion of the Academy is currently being evaluated and amended to reflect a variety of enhanced philosophical and procedural job criteria that measures essential skills for Correctional Deputies. Some of these included criteria will be in the areas of Use of Force, De-Escalation techniques and identification of mental illness signs and symptoms along with appropriate communication and response to incidents involving mentally ill inmates. The newly created Office of Standards and Inspection Unit within the Custody Bureau will be working closely with the Training Unit to ensure this amended Training Manual and Training Officer Update is completed and implemented. The goal is to ensure that the increased training received in the academy in the areas of mental illness and de-escalation is further supported and emphasized to new Correctional Deputies in real life situations once assigned to the actual jail facilities.