



Expert Monitor's Report

Environmental Health and Safety Report (Fifth Round)

Murray v. County of Santa Barbara
Case No. 2:17-cv-08805-GW-JPR

On-Site Review: June 9-12, 2025

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Executive Summary

This is the fifth Expert Monitoring Review of the Santa Barbara County Jail (SBCJ), Main Jail/Southern Branch Jail (MJ or SBJ), and the third review of the Northern Branch Jail Facility (NBJ) to measure Santa Barbara County's compliance with the *Murray v. Santa Barbara County* Remedial Plan, which addresses Environmental Health and Safety conditions and policies and procedures within Santa Barbara County jails. The on-site Expert Monitoring Review of NBJ was conducted on June 11, 2025, and the review of the MJ was conducted on June 9, 10, and 12, 2025. The document production rating period was from August 1, 2024, through February 28, 2025.

The Expert's Monitoring Review of the MJ included a review of pre-monitoring documents produced by Santa Barbara County, on-site observations of the MJ Northwest housing units, West Module housing units, Intake Release Center (IRC) housing units, South Dorm and South Tank housing units, East Module housing units, New East Restrictive housing unit, recreational yards, clinics, dental treatment room, kitchen, laundry, visiting, and all common areas. The Expert interviewed four (4) Custody Deputies, one (1) Unit Supervisor, and 29 incarcerated persons from various housing units.

The Expert's Monitoring Review of NBJ included on-site observations of housing units A, B, C, D, E, F, G, H, J, K, and M, kitchen, laundry, health care clinics, and most common areas. The Expert interviewed four (4) Custody Deputies, one (1) Unit Supervisor, and six (6) incarcerated persons from various housing units.

On August 14, 2023, the Court approved interim measures for the implementation of the *Murray v. Santa Barbara County* Remedial Plan. The Expert has included the areas of the stipulation applicable to the Americans with Disabilities Act (ADA) portion of the *Murray v. Santa Barbara County* Remedial Plan in this report.

The Expert recognizes the impact staffing shortages continue to have on the operations of SBCJ and the implementation of the *Murray v. Santa Barbara County* Remedial Plan requirements. The Expert recognizes that the County is continuing to implement essential elements of the *Murray v. Santa Barbara County* Remedial Plan. The County has made significant strides in the implementation of the *Murray v. Santa Barbara County* Remedial Plan. Some of these include:

- Designation of Environmental of Care Mangers (ECM) for the MJ and NBJ
- Creation and implementation of the ECM duties
- Developed and implemented a policies and procedures for cleaning, disinfecting, distributing, and repairing mattresses
- Provision of clean outer clothing for kitchen workers daily and replacing soiled, clothing promptly
- Trained staff on the process of submitting work orders
- Testing of Negative pressure cells and gauges by an external contractor on a regular schedule as part of the jail's preventive maintenance schedule
- Continuous updating of policy and procedures related to Environmental Health and Safety

- Providing incarcerated persons with non-scratch microfiber scrub towels and brushes with strong bristles to adequately clean mold, soap, and built-up dirt

Although the Expert's report identifies areas as partial compliance, it is the Expert's position that with sufficient staffing and/or the allocation of other resources, the County will continue to implement the requirements of the *Murray v. Santa Barbara County* Remedial Plan, and areas determined to be in non-compliance will progress into Substantial Compliance.

This report details the pre-monitoring tour document review, on-site monitoring, staff and incarcerated person interviews, and findings and recommendations/actions the County must implement to achieve Substantial Compliance with the *Murray v. Santa Barbara County* Remedial Plan.

Introduction

Murray v. Santa Barbara County is a federal class-action lawsuit challenging facility deficiencies in environmental health and safety, which includes general cleanliness, maintenance, and sanitation matters of concern at SBCJ.

The terms of the *Murray v. Santa Barbara County* Stipulated Judgment include the *Murray v. Santa Barbara County* Remedial Plan, which outlines specific conditions in SBCJ that the County agreed to remedy. Under the Stipulated Judgment, the County agreed to develop implementation plans to reform specific policies, procedures, and practices in the SBCJ.

The Stipulated Judgment also required the County to retain experts to monitor the County's implementation of, and compliance with, the Stipulated Judgment.

The Settlement Monitor's Activities

The Stipulated Judgment describes the duties and responsibilities of the Expert for evaluating and determining Santa Barbara County's compliance with the Santa Barbara County Remedial Plan.

Role of the Expert

The duties of the Remedial Plan Experts are as follows. The Remedial Plan Expert is required to advise the parties on Defendant's compliance or non-compliance with the Remedial Plan, to assist the parties and Court with dispute resolution matters, and to provide testimony, if required, in any proceedings before the Court.

Within 180 days after entry of the Stipulated Judgment, and annually thereafter, during the term of this Stipulated Judgment, the Remedial Plan Experts must complete a review and non-confidential report (Annual Report) to advise the parties on Defendant's compliance or non-compliance with the Remedial Plan.

In the Annual Report, the Remedial Plan Experts must state their opinion as to whether Defendants are or are not in Substantial Compliance with each component of the Remedial Plan within the Remedial Plan Expert's respective area of expertise. These opinions are referred to in the Stipulated Judgment as "Substantial Compliance Determinations."

The Annual Report will provide, to the extent possible, specific recommendations as to how Defendants may reach Substantial Compliance. The parties shall have an opportunity to respond to any finding regarding Defendant's Substantial Compliance with a provision of the Remedial Plan. The parties shall submit any such response to the Remedial Plan Experts and all counsel within 30 calendar days of completion of the Annual Report. Such response(s) shall be appended to the final report.

With appropriate notice, the Remedial Plan Experts shall have reasonable access to all parts of any facility. Access to the facilities will not be unreasonably restricted. The Remedial Plan Experts shall have access to custody and health care staff and persons incarcerated in the jails, including confidential and voluntary interviews, as is reasonable, to complete a report, and, provided it does not jeopardize the security or other privileged information. The Remedial Plan Experts shall also have access to non-privileged documents, including budgetary, custody, and health care documents, and institutional meetings, proceedings, and programs to the extent the Remedial Plan Experts determine such access is needed to fulfill their obligations. The Remedial Plan Experts' tours shall be undertaken in a manner that does not unreasonably interfere with jail operations, as determined by jail administrators. The Remedial Plan Experts shall have reasonable access to individual incarcerated persons' health records, including mental health and custody records.

Monitoring Process

The Expert used the following rating system to determine SBCJ's compliance with the requirements of the Remedial Plan.

The specific definitions of the rating categories the Expert used are as follows:

Substantial Compliance (SC):

Indicates compliance with all or most components of the relevant provision of the Remedial Plan and that no significant work remains to accomplish the goal of that provision.

Partial Compliance (PC):

Indicates compliance with some components of the relevant provision of the Remedial Plan, and work remains to reach Substantial Compliance.

Non-Compliance (NC):

Indicates non-compliance with most or all the components of the relevant provision of the Remedial Plan, and work remains to reach Partial Compliance.

Un-ratable (UR):

Shall be used in cases where the Experts have not been provided data or other relevant material necessary to assess compliance or factual circumstances during the monitoring period, making it impossible for a meaningful review to occur at the present time.

Discontinuation of Monitoring (DOM):

After conferring with Plaintiffs' counsel, Defendant's request a finding by the Remedial Plan Expert(s) that Defendants are in Substantial Compliance with one (1) or more components of the Remedial Plan and have maintained such substantial compliance for a period of at least six (6) months.

Summary of Ratings

Remedial Plan Citation	Requirement	Current Rating	Previous Rating
6.A.1.	Environmental Health and Safety Monitor	DOM	SC
6.B.1.	Establishment of Sanitation Plan	PC	PC
6.B.2.	Orientation	PC	PC
6.B.3.	Incarcerated Persons Who Are Unable or Unwilling to Adequately Clean	SC	SC
6.B.4.	Policy and Procedures for Cleaning, Disinfection, Distribution, and Repair of Mattresses	DOM	SC
6.B.5.	Provision of a Clean and Serviceable Mattress	DOM	SC
6.B.6.	Procedure to Clean Cell Prior to Placement in Cell	PC	PC
6.B.7.	Cleaning and Disinfection of Plastic Beds	DOM	SC
6.C.1.	Weekly Clothing and Linen Exchange	SC	SC
6.C.2.	Chemical Safety Training for Staff and Incarcerated Persons	SC	PC
6.C.3.	Healthcare Referrals for Incarcerated Persons with Possible Mental Health Disability	PC	SC
6.D.1.	Clean Clothing for Kitchen Workers	DOM	SC
6.D.2.	Weekly Kitchen Operation Inspections	PC	PC
6.D.3.	Food Service Policies and Procedures	SC	SC
6.D.4.	Training for Incarcerated Person Kitchen Workers	PC	SC
6.D.5.	Monitoring of Food Temperature	SC	SC
6.E.1.	Staff Training for Submitting Work Orders	DOM	SC
6.E.2.	Work Order Reporting System for Preventative Maintenance and Repairs	PC	PC
6.E.3.	Development and Implementation of Environmental Inspection Policy	SC	SC
6.F.1.	Development and Implementation of Chemical Control Policies and Procedures	DOM	SC
6.F.2.	Development and Implementation of Chemical Safety Training for Staff and Incarcerated Persons	PC	PC
6.F.3.	Communicable Disease Policy	DOM	SC
6.F.4.	Development and Implementation of Policies and Procedures for Cleaning, Handling, Storing, and Disposal of Biohazardous Materials	PC	PC

Remedial Plan Citation	Requirement	Current Rating	Previous Rating
6.F.5.	Personal Protective Equipment for Staff and Incarcerated Person-Workers	SC	PC
6.G.1.	Magnehelic Gauge Checks	PC	PC
6.G.2.	Staff Training for Magnehelic Gauge Readings	SC	SC
6.G.3.	Testing of Negative Pressure Cells and Gauges by External Contractor	DOM	SC
6.H.1.	Monthly Inspection of Fire Extinguishers and Drills	DOM	SC
6.I.1.	Bimonthly Housing Unit Environmental of Care inspections	PC	PC
6.I.2.	System for Class Members to Raise Sanitation Matters of Concern	PC	PC

FINDINGS

6.A. Environmental Health and Safety Monitor

The County shall designate an environmental health and safety monitor (“Environment of Care Monitor”) responsible for ensuring compliance with this Remedial Plan and other environmental health and safety policies and procedures. The duties of the Environment of Care Monitor will be established in writing consistent with this Remedial Plan. The Environment of Care Monitor will have sufficient authority to carry out such duties.

Compliance Rating: Discontinuation of Monitoring

Prior Compliance Rating: Substantial Compliance

Pursuant to Paragraph 52 of the Remedial Plan, the County has been in Substantial Compliance with this provision and has maintained such Substantial Compliance for a period of at least six (6) months. Based on this, the parties conferred, and Class Counsel has no objection to the County's request for discontinuation of monitoring. The provision will therefore be subject to future monitoring only if it is determined that the County is no longer in substantial compliance, consistent with the procedure set forth in Paragraph 53.

6.B. Cleanliness and Sanitation of Jail Facilities

6.B.1. Sanitation Plan

The County shall establish a sanitation plan to ensure that all jail facilities maintain appropriate cleanliness. The plan shall provide for any cleaning issues requiring an established cleaning schedule and written documentation of such cleaning, including, at a minimum:

- a) *Daily access to supplies and equipment for prisoners to conduct cleaning and disinfection of housing units, including floors, toilets, sinks, and showers, with a cleaning chemical that sufficiently eliminates pathogens found in living and common areas;*
- b) *Weekly inspections of housing units, including floors, toilets, sinks, and showers, by jail staff, with prompt steps to address identified cleaning and disinfection needs;*
- c) *Daily cleaning of intake, health care clinics, kitchen, laundry, and other common areas, such as hallways and the tunnel;*
- d) *Weekly cleaning of visitation rooms and classrooms, and more frequently as needed;*
- e) *Biweekly (i.e., every other week) power washing of shower areas;*
- f) *Weekly cleaning of cell bars, windows, and lights;*
- g) *Quarterly cleaning of fans and air vents, and more frequently as necessary to ensure that they are clean and free of mold, mildew, and/or accumulation of dirt and dust.*

On August 14, 2023, the Court approved interim measures for the implementation of the *Murray v. Santa Barbara County* Remedial Plan. The stipulated order states,

Interim Measures: Defendants will ensure compliance with Remedial Plan Environmental Health and Safety requirements to the maximum extent possible while necessary physical plant remediation and/or renovation efforts are being completed, including as follows:

- 1) *Adequate Daily Cleaning Supplies for Class Members. No later than September 1, 2023, Defendants shall fully implement Remedial Plan Section VI.B.1, including with a Sanitation Plan that ensures that:*
 - a) *Class Members have daily access to supplies and equipment to conduct cleaning and disinfection of housing units, including floors, toilets, sinks, and showers, consistent with the findings and recommendations of the Remedial Plan Expert;*
 - b) *Class Members have sufficient access to types and amounts of cleaning supplies necessary to adequately clean and disinfect their living and common areas (including cleaning agents, mop heads, brushes, and sponges), consistent with the findings and recommendations of the Remedial Plan Expert. (Sept. 2022 Envt of Care Monitoring Report at 9-10.)*
- 2) *Required Scheduled Cleaning of Facilities. No later than September 1, 2023, Defendants will ensure, including through adequate Jail staffing (sworn or non-sworn) and inmate-worker crew staffing, that all required facility cleaning procedures (Sections VI.B.1(b)-(g)) are completed consistent with the frequencies set forth in the Remedial Plan. (Sept. 2022 Envt of Care Monitoring Report at 8-17.) Required cleaning in housing units (or other areas) will be completed based on an established schedule and will not be contingent upon when class members are participating in outdoor recreation or other activities outside of their housing unit.*

Main Jail South Dorm Shower/Washing/Toilet Area. No later than February 1, 2024, Defendants shall complete a renovation of the Main Jail South Dorm shower, washing, and toilet areas to remediate environmental health and safety deficiencies identified by the Remedial Plan Experts and the County's General Services Department.

County Response:

Completed. The County has completed a Sanitation Plan that meets the requirements of this provision and was approved by the Environmental Health and Safety Expert. While not specifically required by this Remedial Plan provision, which is limited to the contents of the Sanitation Plan, the County is addressing the Expert's recommendations as follows:

- a) Completed. As previously reported, the County provides daily access to cleaning supplies consistent with this provision. To address the Expert's concerns, the County attempted use of non-scratch scrub sponges, but they still resulted in scratching the tables and mirrors. As such, the County is considering replacing the cleaning sponges issued to incarcerated persons for

cleaning with microfiber towels. The County also addressed the Expert's concerns regarding documentation and access to cleaning supplies at NBJ by issuing a directive regarding this requirement.

- b) Completed. The County conducts weekly inspections as required by the Remedial Plan.
- c) Completed. The County conducts daily cleaning as required by the Remedial Plan. However, to address the Expert's concerns, IRC supervisors are monitoring the completion of observation cell cleaning logs. Additionally, the County implemented a Weekly Recreation Yard Bathroom Cleaning Schedule to address recreation yard cleanliness.
- d) Completed.
- e) Completed. The County hired a utility worker who will conduct power washing in accordance with this provision.
- f) Completed. Documentation of all cell bars, windows, and lights is documented in accordance with this provision.
- g) Completed. The County conducts quarterly cleaning of fans and air vents in accordance with this provision.

Compliance Rating: Partial Compliance

Prior Compliance Rating: Partial Compliance

Analysis/Observations:

Based on the on-site observations as detailed in this report, it is the Expert's position that in order for the County to meet the requirements of the *Murray v. Santa Barbara County* Remedial Plan, the County will need additional utility worker/SST staffing. It is also the Expert's position that creating a hard schedule will delineate responsibilities, expectations and accountability, which will assist the County in ensuring the cleaning is completed as required by the *Murray* Remedial Plan.

6.B.1.a *Did SBCJ establish a Sanitation Plan to ensure all jail facilities maintain appropriate cleanliness?*

The County worked with the Expert and revised the Sanitation Plan to be consistent with the *Murray v. Santa Barbara County* Remedial Plan. The County produced the final revised version of the Santa Barbara County Sheriff's Office, Santa Barbara Jail, and Northern Branch Jail Sanitation Plan 4.10.24. The Sanitation Plan is a 46-page document that includes information on the following:

- Santa Barbara Sheriff's Office Policy and Procedures
- External References
- Definitions
- Procedures
 - General Housekeeping
 - Inmate Responsibilities
 - Inmate Worker Responsibilities
 - Sanitation Facilities
 - Waste Disposal
 - Cleaning Closets and Cleaning Carts

- Vermin Control
- Staff Areas
- Inspections
- Appendix – Mental Health Evaluation Form, Cleaning Schedules, Cleaning Checklists, Inspection Logs

The Sanitation Plan is utilized for both the MJ and NBJ.

6.B.1.b Does the Sanitation Plan provide information for cleaning issues requiring an established cleaning schedule, and the documentation of such cleaning?

The County worked with the Expert to revise the Sanitation Plan to be consistent with the *Murray v. Santa Barbara County* Remedial Plan. The County produced the final revised version of the Santa Barbara County Sheriff's Office, Santa Barbara Jail, and Northern Branch Jail Sanitation Plan 4.10.24.

The Sanitation Plan is a 46-page document that includes information for cleaning issues requiring an established cleaning schedule and documentation of such cleaning.

The Sanitation Plan contains language regarding cleaning schedules, including locations within the MJ and NBJ. The Sanitation Plan's cleaning schedules identify the locations that are required to be cleaned weekly and bi-weekly and list the equipment and supplies/products that are utilized for cleaning. The Sanitation Plan also includes the requirement for staff to document the cleaning.

a) *Does the sanitation plan include a schedule and/or instructions for incarcerated persons' daily access to supplies and equipment to conduct cleaning and disinfection of housing units, including floors, toilets, sinks, and showers, and with a cleaning chemical that sufficiently eliminates pathogens found in living and common areas?*

County Response:

Completed. As previously reported, the County provides daily access to cleaning supplies consistent with this provision. To address the Expert's concerns, the County attempted use of non-scratch scrub sponges, which still resulted in scratching to tables and mirrors. As such, the County is considering replacing the cleaning sponges issued to incarcerated persons for cleaning with microfiber towels. The County also addressed the Expert's concerns regarding documentation and access to cleaning supplies at NBJ by issuing a directive regarding this requirement.

Analysis/Observations:

The Santa Barbara County Sheriff's Office, Santa Barbara Jail, and Northern Branch Jail Sanitation Plan 4.10.24 includes instructions for incarcerated persons' daily access to supplies and equipment to conduct cleaning and disinfection of housing units, and with cleaning chemicals to sufficiently eliminate pathogens found in living and common areas.

MJ

The MJ produced Cleaning Cart Check Off Sheets from August 2024 through February 2025. The Expert noted that Cleaning Cart Check Off Sheets were completed for most days during each month during the rating period. A review of the Cleaning Cart Check Off Sheets for each month during the rating provided the following results.

- August - 2 missing (93% completed)
- September - 5 missing (83% completed)
- October - 4 missing (87% completed)
- November - 3 missing (90% completed)
- December - 6 missing (80% completed)
- January - 0 missing (100% completed)
- February - 4 missing (85% completed)

The County also produced Module Recaps for MJ from August 2024 through February 2025. In a review of five days for each month, the following Recaps do not include documentation that the Module Deputy distributed cleaning supplies:

- East - 12/25/25
- IRC - 8/5/24, 8/10/24, 8/21/24, 10/7/24, 11/10/24, 12/25/24, and 1/1/25
- Northwest - 9/13/24, 1/1/25
- West - 8/10/24, 12/25/25
- South - 8/3/24, 8/20/24, 12/25/24, 1/1/25, and 2/23/25

The MJ cleaning carts include bottles that contain a water-diluted mixture of Virex II 256 cleaner, which is a disinfectant and deodorant, and/or Oxivir Five 16, which is a one-step disinfectant cleaner. The following cleaning supplies are provided: one (1) mop, one (1) broom, one (1) soft hand brush, and microfiber cloths.

The County reported that incarcerated persons are provided two diluted cleaning solutions to conduct cleaning: Virex II 256 and Oxivir Five 16. Both cleaning solutions were chosen based on having the lowest Occupational Safety and Health Administration (OSHA) hazard category, requiring no safety warnings or personal protection equipment when properly diluted. An overview of both cleaning solutions is provided below.

- Virex II 256 - A one-step, quaternary-based disinfectant cleaner concentrate providing broad spectrum disinfection at 1:256 dilution. Use in healthcare and other facilities where cleaning and prevention of cross-contamination are critical. Bactericidal, virucidal, and fungicidal. Kills methicillin-resistant *Staphylococcus aureus* (MRSA)¹ and vancomycin-resistant *enterococcus* (VRE)². Meets bloodborne pathogen standards for decontaminating blood and body fluids.
- Oxivir Five 16 - A one-step disinfectant cleaner based on proprietary Accelerated Hydrogen Peroxide (AHP®) technology to deliver fast, effective cleaning performance. At 1:16 dilution, disinfects in five minutes. Virucide, bactericide, fungicide, mildewcide, and non-food contact sanitizer. Kills MRSA,

¹ Bacteria resistant to many common antibiotics, including methicillin.

² Infection with bacteria resistant to the antibiotic called vancomycin.

Norovirus, and Canine parvovirus. Meets bloodborne pathogen standards for decontaminating blood and body fluids.

During incarcerated person interviews at the MJ, incarcerated persons informed the Expert that cleaning equipment and supplies are provided on most days, including weekends and most holidays. Some incarcerated persons stated that cleaning supplies are not provided on some days. Some incarcerated persons stated the cleaning solutions were not strong enough to properly clean mold, hard water, and soap build-up from the shower walls. During the on-site review, the Expert noted that numerous showers had built-up soap, hard water stains, and what appeared to be mold.

During the rating period, MJ received three (3) Inmate Grievance Forms regarding cleaning supplies. The requests from the incarcerated persons in these Inmate Grievance Forms are detailed below.

- Requested better cleaning supplies to clean and scrub showers.
- Requested and granted to keep microfiber towels for a 24-hour period to maintain living quarters clean.
- Requested cleaning equipment allowed to stay in the housing unit past the evening dinner to clean after eating.

The Expert noted the County replaced soft sponges with microfiber towels. The microfiber towels were chosen as a replacement due to their non-scratch scrubbing and ability to be laundered and reused. Most incarcerated persons stated that although microfiber towels work better and were an improvement over sponges, the microfiber towels cannot scrub or remove hardwater stains or mold, specifically mold in grout. The County reported that as of 2/11/25, MJ incarcerated persons have been receiving shower scrub brushes to clean showers as part of their daily cleaning supplies. The County also reported that every evening, each occupied incarcerated person housing module receives a bottle of Oxivir cleaning solution to use with the microfiber towels to conduct after hours cleaning. The passing of cleaning solution is documented on the Property Recap.

NBJ

The Santa Barbara County Sheriff's Office, Santa Barbara Jail, and Northern Branch Jail Sanitation Plan 4.10.24 states in part, "At NBJ Module, Deputies will open the cleaning closet within the housing module and remove the cleaning cart for inmates to utilize. Absent exigent circumstances, the closet will remain locked while inmates have access to the dayroom. If additional cleaning supplies are requested during the shift, they will be provided and will be documented on the module recap. There are cleaning dispensers with a cleaning chemical that sufficiently eliminates pathogens found in common living areas. After the areas are clean, the equipment and supplies will be removed and inspected by the module deputy. Inmate workers will clean and disinfect all cleaning gear before being properly stored in the sanitation closet."

Incarcerated persons and staff reported that the cleaning carts are taken out of the cleaning closets daily and are available for incarcerated persons to conduct daily cleaning. Incarcerated persons have access to bottles that contain a water-diluted

mixture of Waxie 143 Cleaner/Degreaser, Waxie 730 HP Disinfectant Cleaner, Waxie 210 Neutral Cleaner/Floors, and Waxie 543 Glass and Surface Cleaner. The Expert noted that the housing units were clean without any significant issues, including the showers.

Although there were some instances where there was no documentation the cleaning supplies were provided, the Expert finds the County is in substantial compliance with provision 6.B.1.a of the *Murray v. Santa Barbara County* Remedial Plan.

b) *Does the Sanitation Plan contain a schedule for jail staff to complete weekly inspections of housing units, including floors, toilets, sinks, and showers, and prompt steps to address identified cleaning and disinfection needs?*

County Response:

Completed. The County conducts weekly inspections as required by the Remedial Plan.

Analysis/Observations:

The Santa Barbara County Sheriff's Office, Santa Barbara Jail, and Northern Branch Jail Sanitation Plan 4.10.24, Section I-4, states in part, "The facility supervising staff will inspect the jail facilities on a weekly basis to confirm that housekeeping and sanitation are satisfactory and to look for related issues not already identified by other staff. In the absence of exigent circumstances, this will be done during the weekly linen exchange. The inspection and findings will be recorded in Weekly Housing Unit Inspection logs." The Sanitation Plan Appendix includes the Weekly Housing Inspection Logs for the MJ and NBJ housing units.

The Sanitation Plan, Section A.1, states in part, "Custody Deputies will, while performing daily count and feeding, perform a cursory inspection of each housing unit within their assigned module. However, custody staff must respond to, and act on, immediate needs for cleaning or sanitation. This cursory inspection will be documented in the Daily Module Recap."

The Sanitation Plan provides directions for staff to conduct daily cursory inspections. In addition, the Sanitation Plan includes a standardized weekly inspection process for all housing units, and includes floors, toilets, sinks, and showers with steps to promptly address identified cleaning and disinfection needs. The weekly inspections are required to be completed by facility supervising staff during the weekly linen exchange.

The County produced Weekly Housing Unit Inspection Logs for the MJ and NBJ from August 2024 through February 2025. The Expert selected two weeks in each month to review. The Expert's review noted the following weekly inspection sheets were completed for MJ and NBJ ("X" in the box or housing number indicates completed. Blank in box indicates not completed):

MJ

August	Northwest	West	East	South	IRC
Week 1					100, 200, 300, 400
Week 3					300, 400

September	Northwest	West	East	South	IRC
Week 1					200, 300, 400
Week 3					

October	Northwest	West	East	South	IRC
Week 1		X	X	X	
Week 3				X	

November	Northwest	West	East	South	IRC
Week 1					
Week 3					

December	Northwest	West	East	South	IRC
Week 1					
Week 3					

January	Northwest	West	East	South	IRC
Week 1				X	
Week 3					

February	Northwest	West	East	South	IRC
Week 1				X	200, 300, 400
Week 3				X	100, 200, 300, 400

NBJ

August	A	B	C	D	E	F	G	H	J	K	M
Week 1	X		X								
Week 3						X	X	X	X	X	

September	A	B	C	D	E	F	G	H	J	K	M
Week 1		X	X			X	X	X	X	X	
Week 3	X	X	X	X	X	X	X	X	X	X	

October	A	B	C	D	E	F	G	H	J	K	M
Week 1	X	X	X	X	X	X	X	X	X	X	
Week 3	X	X	X	X	X	X	X	X	X	X	

November	A	B	C	D	E	F	G	H	J	K	M
Week 1	X	X	X	X	X						
Week 3	X	X	X	X	X						

December	A	B	C	D	E	F	G	H	J	K	M
Week 1	X	X	X	X	X	X	X	X	X	X	
Week 3	X	X	X	X	X	X	X	X	X	X	

January	A	B	C	D	E	F	G	H	J	K	M
Week 1	X	X	X	X	X	X	X	X	X	X	X
Week 3	X	X	X	X	X	X	X	X	X	X	X

February	A	B	C	D	E	F	G	H	J	K	M
Week 1		X	X			X	X	X	X	X	
Week 3	X			X		X	X	X	X	X	

During the on-site monitoring tour at MJ, the Expert noted various showers contained some mold, dirty drains, soap, and/or dirt built up. Some cell toilets and sinks contained dirt and hard water build-up. Some baseboards and corners had excess dirt and grime build-up.

During the on-site monitoring tour at NBJ, the Expert noted that almost all housing units toured appeared to be clean with no significant issues or concerns.

The Expert recommends inspections be completed weekly, during the weekly linen exchange, as required by the SBCJ Sanitation Plan. An official and meaningful weekly inspection is essential for maintaining appropriate cleanliness.

To reach substantial compliance with provision 6.B.1.b of the *Murray v. Santa Barbara County* Remedial Plan, the County must:

- Complete weekly inspections of housing units, which include:
 - Floors
 - Toilets
 - Sinks
 - Showers
- Identify and document steps taken to address identified cleaning and disinfection needs.
- Provide proof of practice documentation to the Expert.

c) *Does the Sanitation Plan include a schedule for the daily cleaning of intake, health care clinics, kitchen, laundry, and other common areas, such as hallways and the tunnel?*

County Response:

Completed. The County conducts daily cleaning as required by the Remedial Plan. However, to address the Expert's concerns, IRC supervisors are monitoring the completion of observation cell cleaning logs. Additionally, the County implemented a Weekly Recreation Yard Bathroom Cleaning Schedule to address recreation yard cleanliness.

Analysis/Observations:

The Santa Barbara County Sheriff's Office, Santa Barbara Jail, and Northern Branch Jail Sanitation Plan 4.10.24 includes schedules for the daily cleaning of intake, health care clinics, kitchen, laundry, and other common areas, such as hallways. The tunnel is no longer being used, and therefore, the Expert did not evaluate it. The Sanitation Plan, Section C-2, states in part, "Jail Work Crews assigned to daily, weekly, and bi-weekly sanitation duties will thoroughly clean all areas of the facilities. Duties can include but are not limited to sweeping, mopping, vacuuming, emptying trash cans, cleaning counter areas, restocking supplies, and completing other required tasks, as directed by custody staff."

The Sanitation Plan identifies the following areas that are required to be cleaned daily:

- Intake Trailer (SBJ)
- Cells H-5, H-6, H-7, & H-8 (SBJ) document on module or property recap
- All Treatment Rooms
- SBJ
 - IRC
 - Central
 - East
 - Northwest
 - West
- NBJ
 - All housing units A-K
 - All clinics
- Dental Treatment Room (SBJ and NBJ)
- Hallways and common areas
- Laundry facility
- Kitchen

MJ

The County produced copies of the "SBJ Daily Cleaning Checklists" from August 2024 through February 2025. The checklists include a detailed cleaning schedule and an area for staff to log the day, date, Body#, and Inmate Worker(s) Utilized for the specific locations. The Expert reviewed a random sample of the Daily Cleaning Checklists for various months. The Expert noted that staff are not cleaning or logging the daily cleaning of the locations as listed in the checklist. For example, out of the 31 days in the month of December 2024, twenty-four (24) days documented "Dental, Intake Trailer & Treatment Rooms" were cleaned (77%). Nine (9) days documented "Common Areas – all Hallways, Front & Back Central, South Holding" were cleaned (29%). The remaining months had similar results.

During the rating period, MJ received one (1) Inmate Grievance Form indicating that the tiers/hallways in front of housing units are dirty and no one cleans them on a regular basis. Food falls on the floor and stays on the floor for weeks, attracting insects and rodents.

The MJ produced copies of "Inmate Reception Center H-Cell Cleaning Logs" from August 2024 through February 2025. Each log contains a space to document the Deputy and Body# of the staff member who cleaned each cell during the 0600-1800 shift and/or 1800-0600 shift. In the Expert's review of various logs for each month, the logs document some dates H Cells were cleaned during each month. The Expert reviewed a cleaning log of cell H-1 for the month of December 2024, and noted that staff are not consistently cleaning or logging the daily cleaning. Of thirty-one (31) days in December, staff documented sixteen dates cell H-1 was cleaned (51%). Some dates were left blank, indicated "Occupied" or "Intake," or contained "M" (represents missing) in the space. For cell H-9, staff documented sixteen dates cell H-9 was cleaned (51%). Some dates were left blank, indicated "Occupied," "Intake," or contained "M" in the space.

During the on-site review, the Expert noted H-Cell Cleaning Logs posted adjacent to the cells contained missing entries, and some empty cells were not clean.

The County produced "MJ Weekly Laundry Cleaning Checklists" for the Months of August 2024 through February 2025. The Expert randomly selected three (3) months (August, November, and February) and noted that the checklists reflect that staff cleaned the laundry location daily (100% for the three-month period).

The County produced copies of "SBJ Kitchen Daily Cleaning / Shift Closing – Checklists" logs from August 2024 through February 2025. The Expert randomly selected three (3) months (August, November, and February) for review and noted staff cleaned and completed logs for each day during the three selected months (100% for the three-month period).

The Santa Barbara County Sheriff's Office, Santa Barbara Jail, and Northern Branch Jail Sanitation Plan 4.10.24 includes a schedule for the daily cleaning of the dental/health care clinics, kitchen areas, laundry facilities, and other common areas, such as hallways. As noted above, staff are completing kitchen and laundry cleaning logs daily. However, staff are not completing daily cleaning logs for dental/health care clinics, and other common areas such as hallways.

The Expert recommends that MJ staff complete the daily cleaning and documentation of such cleaning for all locations as required by the *Murray v. Santa Barbara County* Remedial Plan.

The Expert noted that although Kitchen Daily Cleaning Logs are completed daily for the kitchen, the cleaning appears to be superficial and does not involve deep cleaning, and/or pressure washing, scrubbing/painting walls, or repairs (e.g., broken tiles) are not completed. During the on-site review, the Expert noted the following cleaning and repair issues at MJ Kitchen.

- The scullery needs deep cleaning as what appears to be mold, mildew or rust stains were visible on the floor and drains.
- Various walls have dirt or food stains and need cleaning and/or painting.
- Broken and cracked tiles need replacement as required by section VI. I. 1. c of the *Murray v. Santa Barbara County* Remedial Plan.

The County reported that the scullery has been power washed by an outside contractor - Compston Pressure Washing LLC. The County is in the process of purchasing a pressure washer to maintain cleanliness. An email with invoice and pictures were sent on 09/11/25. The Expert reviewed the pictures and the review reflects the scullery has been power washed. The Expert will review the scullery during the next review.



MJ common areas and hallways were not all swept or cleaned of stains, debris, or dirt built up in baseboards and corners. Incarcerated persons reported hallways adjacent to the modules are not cleaned daily. Various walls required cleaning and/or painting.



NBJ

The County produced the "NBJ Lobby Crew Cleaning Logs" (Excel spreadsheet). Each monthly Log includes specific locations with a description of the required cleaning. Some of the areas include Staff Restrooms, Intake, Lobby, Corridors, Medical Clinics, Classrooms, Exam Rooms, and Observation Cells. In a review of the logs for each month during the rating period, the required daily cleaning of health care clinics/exam rooms and common areas, such as hallways, was not completed. For example, the Expert's review of September 2024 cleaning logs noted the Exam Rooms for all units indicate one (1) day of the thirty days documented the Exam Rooms were cleaned, "Clinic (01-06)" document two (2) days of the thirty days were cleaned. Other months during the rating period document a wide range of results.

The County produced NBJ "Weekly Laundry Cleaning Checklists" from August 2024 through February 2025. The Expert randomly selected two (2) weeks per month and noted that the checklists reflect staff cleaned the NBJ laundry daily.

The County produced NBJ "Property Officer Recap" reports from August 2024 through February 2025. The Recaps include Property Officer cleaning duties of the intake, medical corridors, and medical clinics. In review of five (5) days per month (Day 5, 10, 15, 20, and 25), the Property Officers did not consistently clean and log the cleaning of the intake area. Of the thirty-five days reviewed, five (5) days did not indicate that the intake area was cleaned (86%). Additionally, the medical corridors and medical clinics were not consistently cleaned and logged. Of the thirty-five days reviewed during the rating period, four (4) days indicate medical corridors and clinics were not cleaned (89%).

The County produced "NBJ Kitchen Daily Cleaning / Shift Closing – Checklists" from August 2024 through February 2025. In review of the checklists, logs were completed for most days for each month during the rating period.

During the onsite review, the Expert noted the following;

- Laundry facilities appeared clean with no issues observed.
- The intake area appeared clean with no significant issues or problems observed.
- Health Services, medical/mental health housing, and housing unit clinics appeared clean with no significant issues observed.
- The main kitchen is cleaned by incarcerated persons/kitchen workers after meals are cooked and served. The Expert toured the kitchen while meals were being prepared. No significant issues were observed.
- Common areas and hallways were swept and clean. No significant issues were observed.

Although all areas appeared clean without significant issues or concerns, the Expert recommends staff complete daily cleaning and documentation of all locations as required by the *Murray v. Santa Barbara County* Remedial Plan.

To reach substantial compliance with provision 6.B.1.c of the *Murray v. Santa Barbara County* Remedial Plan, the County must:

- Complete daily cleaning of intake, health clinics, and common areas, such as hallways.
- Conduct daily cleaning of the kitchen to remove potential mold, stubborn stains, clean rust, and dirt build-up.
- Provide proof of practice documentation to the Expert.

d. *Does the Sanitation Plan include a schedule for the weekly cleaning of visitation rooms and classrooms, and more frequently as needed?*

County Response:

Completed.

Analysis/Observations:

The Santa Barbara County Sheriff's Office, Santa Barbara Jail, and Northern Branch Jail Sanitation Plan 4.10.24 states in part, the following areas are required to be cleaned weekly (or more frequently as needed):

- All visitation and Court Video (SBJ and NBJ)
- Any classrooms currently in use (SBJ and NBJ)

MJ

The County produced "SBJ Daily Cleaning Checklist" logs from August 2024 through February 2025. The logs include a "Main Jail Cleaning Schedule" with a detailed schedule and an area for staff to log the day, date, Body#, and Inmate Worker(s) Utilized for the specific locations.

A review of the logs for the cleaning of visitation areas weekly indicates that staff are not consistently logging the cleaning of the visitation areas. Each month of the rating

period reveals various results for weekly cleaning. For example, in August, the staff missed one (1) week of cleaning in South Visiting.

In September, staff missed three (3) weeks of cleaning in South Visiting, one (1) week of cleaning in Main Jail visiting, and one (1) week of cleaning in East & West Visitation.

In January, staff missed three weeks of cleaning in Northwest Visitation & Court Video, two (2) weeks of cleaning in East & West Visitation, and one (1) week of cleaning in South Visitation.

The Expert noted the Main Visiting Room appeared clean with no significant issues or concerns. The Northwest Visiting appeared clean, with no significant issues or concerns.

The Expert noted that Professional Visitation (PV) rooms were not all clean. South PV 1 & 2 contained debris and food on the floor. Most PV rooms contained graffiti on the walls, dirty windows, and debris between the glass and the iron grill. Some PV rooms emitted bad odors. During incarcerated person interviews, incarcerated persons indicated that the PV rooms were dirty and unsanitary.

During the rating period, MJ received three (3) Inmate Grievance Forms indicating PV rooms were extremely dirty with debris, bodily fluids, dirty windows, and sometimes stay dirty for months.

The Expert recommends MJ conduct cleaning of all visitation locations weekly and more frequently as necessary, and PV rooms are deep cleaned and frequently cleaned as needed, as required by the *Murray v. Santa Barbara County* Remedial Plan.

NBJ

NBJ contains visiting phones and monitors within each housing unit for incarcerated persons to utilize to conduct visits. Visitors utilize a phone and monitor located in a room at the front entrance of the facility. The housing unit phones and monitors are cleaned by incarcerated persons daily within each housing unit. The Expert reviewed the housing units and noted that all phones and monitors were clean.

The County produced the "NBJ Cleaning Logs" (Excel spreadsheet). Each monthly Log includes specific locations to be cleaned with a description of the required cleaning. The logs include classrooms and Visitation Rooms (PV1-PV6). In the Expert's review of the logs, the required weekly cleaning of visitation rooms and classrooms was not always conducted weekly. For example, classroom cleaning logs did not document cleaning for one (1) week in August, two (2) weeks in November, four (4) weeks in December, two (2) weeks in January, and four (4) weeks in February. Logs for PVs did not document that PVs were cleaned one (1) week in September.

During the onsite review, the Expert noted no issues or concerns in NBJ visitation rooms or classrooms.

To reach substantial compliance with provision 6.B.1.d of the *Murray v. Santa Barbara County* Remedial Plan, the County must:

- Complete weekly and/or more frequently cleaning of visiting rooms, and Personal Visitation rooms. Particular focus and corrective action efforts should be made on the problematic MJ areas noted above.
- Provide proof of practice documentation to the Expert.

e. *Does the Sanitation Plan include a schedule for the bi-weekly power washing of shower areas?*

County Response:

Completed. The County hired a utility worker to conduct power washing in accordance with this provision.

Analysis/Observations:

The Santa Barbara County Sheriff's Office, Santa Barbara Jail, and Northern Branch Jail Sanitation Plan 4.10.24, states in part, "Power washing all showers (SBJ and NBJ) will be documented on the Jail Bi-Weekly Shower Power Washing Checklist (Appendix, SBJ Attachment 6, NBJ Attachment 7). Utility workers will conduct the biweekly cleaning and will document it appropriately."

The Biweekly Shower Power Washing Log identifies the housing units/shower locations that are required to be power-washed bi-weekly each month. The Log contains a space for staff to include the date and Body# when power washing is completed.

MJ

The County produced a "Biweekly Module Shower Power Washing Log" from August 2024 through February 2025. A review of the Biweekly Module Shower Power Washing Logs reflects that in all months, almost all showers listed on the logs were not power washed biweekly. The Expert identified thirty-six housing units that contain one or more showers within the housing unit. The Expert defines power washing "bi-weekly" as every other week, or every two weeks, not to exceed power washing more than 15 days.

The logs documented that some showers were power-washed once a week during the month, while some showers were not power-washed during the month. Below are locations, with the number of documented locations that were power-washed bi-weekly (Twenty-six power washings required during the six-month period).

Month	Housing Unit Locations	Bi-Weekly Shower Power Washing Completed
August	36	0
September	36	1
October	36	3

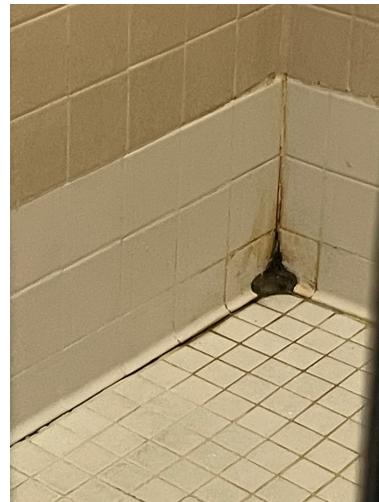
November	36	4
December	36	5
January	36	6
February	36	5

The County is not meeting the court-ordered requirement at the MJ.

During the on-site review, the Expert was informed that the power washing of showers is not being conducted on all showers because of staffing shortages. The County reported that Utility Officer positions are currently being filled and may have sufficient staffing soon. Post tour, the County reported provided the Expert documentation that an additional Utility Worker was hired September 2, 2025, and was assigned to the Northwest Dock Crew. The Duty Statement reflects the Utility Workers duties include, "Supervises inmates or detainees in various work assignments; performs or supervises inmates or detainees performing minor housekeeping tasks such as painting, general cleaning making simple repairs, and performing light building or grounds maintenance; operates yard equipment for grounds maintenance; assists with submission and follow-up of maintenance requests." Additionally, the County reported the Maintenance Supervisor will make power washing of showers a "Priority" for this additional Utility Worker.

The Expert observed showers in various housing units with mold, mildew, and soap or dirt build-up. Some showers appeared as if they had not been power-washed for an extended period (see pictures below).





Incarcerated persons interviewed by the Expert reported that showers are not being power-washed bi-weekly.

During the rating period, MNBJ received two (2) Inmate Grievance Forms requesting that MJ conduct power washing of showers as they contained mold, and the cleaning equipment and solution provided did not adequately clean.

The Expert recommends that showers be power-washed, at a minimum, bi-weekly as required by the *Murray v. Santa Barbara County* Remedial Plan. The Expert also recommends that the County hire sufficient staff to conduct required cleaning and ensure the necessary equipment is available to conduct the required power washing. The Expert previously recommended that the County consider modifying the process for conducting power-washing by allowing incarcerated persons who reside in the module to conduct the power-washing (provide the hose and nozzle through the module grills. However, the Expert notes that it is the County's position that this poses a problem because of security concerns that a power-washing hose and nozzle can be used as a weapon against others or staff. The Expert recognizes the County has discretion in how the power washing is completed and with the hiring of the additional utility worker, the Expert is hopeful the County's compliance with this provision will improve.

The 2023 Stipulation requires that "no later than September 1, 2023, Defendants will ensure, including through adequate Jail staffing (sworn or non-sworn) and inmate-worker crew staffing, that all required facility cleaning procedures (Sections VI.B.1(b)-(g)) are completed consistent with the frequencies set forth in the Remedial Plan." This includes the requirement to conduct bi-weekly power washing of all shower areas. The County is not meeting the requirement at MJ.

NBJ

The County produced a "Biweekly Module Shower Power Washing Log" from August 2024 through February 2025. The Expert identified thirty-three housing units that contain one or more showers within the housing unit. The Expert defines power washing "bi-weekly" as every other week, or every two weeks, not to exceed power washing more than 15 days.

The logs document that most showers are power washed at a minimum of one time each month.

Month	Housing Unit Locations	Bi-Weekly Shower Power Washing Completed
August	31 ³	14
September	33	0
October	33	0
November	33	2
December	29 ⁴	10
January	27 ⁵	0
February	33	0

The Expert recommends that the County conduct and document the bi-weekly power washing of showers as required by the *Murray v. Santa Barbara County* Remedial

³ Two (2) housing units quarantined.

⁴ Four (4) housing units quarantined.

⁵ Six (6) showers sealed.

Plan. Additionally, Class Counsel has indicated that they consider the required power-wash cleaning of the shower to be a top priority for Environmental of Care Remedial Plan implementation.

The County is not meeting the court-ordered requirement at the NBJ.

To reach substantial compliance with provision 6.B.1.e of the *Murray v. Santa Barbara County* Remedial Plan, the County must:

- Complete biweekly power washing of all showers.
- Provide proof of practice documentation to the Expert.
- Hire additional Utility Workers to supervise incarcerated person workers and ensure the required power washing is completed. The County provided proof of practice the hire was completed.

f. *Does the Sanitation Plan include a schedule for the weekly cleaning of cell bars, windows, and lights?*

County Response:

Completed. Documentation of all cell bars, windows, and lights is documented in accordance with this provision.

Analysis/Observations:

The Santa Barbara County Sheriff's Office, Santa Barbara Jail, and Northern Branch Jail Sanitation Plan 4.10.24 includes a schedule for the weekly cleaning of cell bars, windows, and lights.

The Sanitation Plan lists the following areas required to be cleaned weekly:

"SBJ utility workers will conduct cleaning of cell bars, windows, and lights. The cleaning will be documented on the Weekly Cleaning Log of Cell Bars, Windows, and Lights found on (Appendix, Attachment 5). The Schedule for cleaning all housing cell bars, windows, and lights at SBJ is found on (Appendix, Attachment 5a). NBJ inmates will conduct cleaning of the housing unit windows and lights as part of their daily cleaning."

MJ

The County produced a "Weekly Cleaning Log of Cell, Bars, Windows, and Lights" from August 2024 through February 2025. In a review of the logs, the Expert noted that staff do not consistently log the cleaning of cell bars, windows, and lights.

During the onsite review, the Expert noted some cell bars contained food stains and dirt buildup or were dusty. Incarcerated persons interviewed by the Expert stated that they try to clean bars themselves but never see anyone cleaning bars, windows, or lights.

The Expert recommends that the County conduct and document the weekly cleaning of cell bars, windows, and lights as required by the *Murray v. Santa Barbara County* Remedial Plan.

NBJ

The County reports that NBJ does not have cell bars.

The County reports that windows and lights are cleaned by the incarcerated persons when they come out for the dayroom.

To reach substantial compliance with provision 6.B.1.f of the *Murray v. Santa Barbara County* Remedial Plan, the County must:

- Conduct weekly cleaning of cell bars, windows, and lights.
- Provide proof of practice documentation to the Expert.
- Hire additional Utility Workers to ensure the required cell bars, windows, and light cleaning are completed.

g. *Does the Sanitation Plan include a schedule for the quarterly cleaning of fans and air vents, and more frequently as necessary to ensure that they are clean and free of mold, mildew, and/or accumulation of dirt and dust?*

County Response:

Completed. The County conducts quarterly cleaning of fans and air vents in accordance with this provision.

Analysis/Observations:

The Santa Barbara County Sheriff's Office, Santa Barbara Jail, and Northern Branch Jail Sanitation Plan 4.10.24 includes a schedule for the quarterly cleaning of fans and air vents, and more frequently as necessary to ensure that they are clean and free of mold, mildew, and/or accumulation of dirt and dust.

The Sanitation Plan states the following areas are required to be cleaned quarterly and/or more frequently as necessary:

"All fans (SBJ) are cleaned as part of preventative maintenance. Preventative maintenance work orders are generated quarterly by the Maintenance Connection Software. SBJ work orders are assigned to the utility worker to complete the cleaning. The completion of the work order is entered into the Maintenance Connection Software.

All air vents (SBJ and NBJ) are cleaned as part of preventative maintenance. Preventative maintenance work orders are generated quarterly by the Maintenance Connection Software. NBJ air vent work orders and cleaning are completed by General Services. SBJ work orders are assigned to the utility worker to complete the cleaning. The completion of the work order is entered into the Maintenance Connection Software.

New East Restrictive Housing Negative Air Flow Cells (SBJ) are cleaned as part of preventative maintenance. Preventative maintenance work orders are generated quarterly by the Maintenance Connection Software. SBJ work orders are assigned to the utility worker to complete the cleaning. The completion of the work order is entered into the Maintenance Connection Software.

When identified by staff or inmates, more frequent cleaning of air vents and fans will be conducted as necessary to ensure that they are clean and free of mold, mildew, and/or accumulation of dirt and dust."

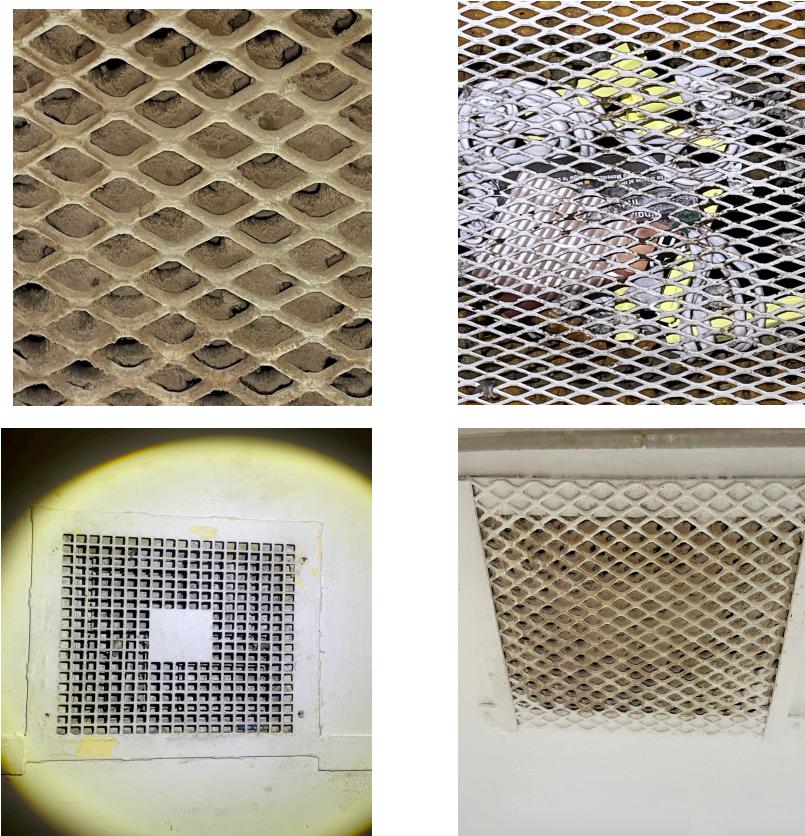
Quarterly cleaning is defined as cleaning to be completed every three months and divides the year into four equal parts.

MJ

MJ provided Santa Barbara County Jail Quarterly Air Vent Cleaning Logs and Quarterly Fan Cleaning Logs for the 4th Quarter of 2024 and the 1st Quarter of 2025. The logs do not reflect that all air vents and fans were cleaned quarterly. The Expert randomly selected 4th Quarter 2024 logs for common areas and MJ Housing Units log and evaluated them with the comparable 3rd Quarter 2024 logs. The Expert identified the following: The common areas identified forty-one locations with air vents. Ten (10) locations documented air vents were cleaned quarterly within a three-month period (24%). MJ Housing Units identified thirty-two locations with air vents. Twenty-one locations documented that air vents were cleaned within a three-month period (66%).

The Expert evaluated the Quarterly Fan Cleaning Log for the 4th quarter with the comparable Quarterly Fan Cleaning Log for the 3rd quarter. The Quarterly Fan Cleaning Logs identify ten (10) locations with fans. Seven (7) locations documented fans were cleaned within a three-month period (70%).

During the tour, the Expert noted some air vents were clean, and some cell vents appeared to be dusty and covered with lint, dust, or paper (see pictures below). Not all hallway fans in the housing units were clean, and some contained dust buildup. During the incarcerated person interviews, incarcerated persons complained that some modules have little circulation, and vents are not cleaned on a quarterly basis. Some incarcerated persons complained of foul orders emitting from vents.



The Expert recommends that the County conduct and document the quarterly cleaning of fans and air vents as required by the *Murray v. Santa Barbara County* Remedial Plan. All fans and vents should be included in a quarterly (every three-month) schedule to ensure each vent and fan is cleaned quarterly.

The Expert will work with the County to develop and implement a process to address persistent deficiencies with respect to the cleaning of the fans and air vents. This includes documentation and quality assurance for required quarterly cleaning and timely action when staff or incarcerated persons identify a need for more frequent cleaning to ensure all fans and air vents are clean and free of mold, mildew, and/or accumulation of dirt and dust.

NBJ

County Response:

The NBJ does not have fans. The air vents are on preventative maintenance that is created by Maintenance Connection for General Services to handle.

Analysis/Observations:

The Sanitation Plan states in part, "All vents (SBJ and NBJ) are cleaned as part of preventive maintenance. Preventive maintenance work orders are generated quarterly by the Maintenance Connection Software. NBJ air vent work orders and

cleaning are completed by General Services." Additionally, the Sanitation Plan does not contain a cleaning schedule for the quarterly cleaning of air vents. The NBJ did not provide documentation for the quarterly cleaning of air vents.

During the onsite review, the Expert did not note or identify issues or concerns with air vents. During interviews, incarcerated persons did not report any issues with air ventilation and cleanliness.

Although air vents are maintained by General Services and in a preventative maintenance program created by Maintenance Connection Software, the Expert is unable to verify if NBJ conducts quarterly cleaning of vents, as no documentation was provided. The Expert recommends NBJ include a schedule in the Sanitation Plan for the quarterly cleaning of all air vents with instructions to document such cleaning. The Expert can only verify quarterly cleaning with documentation of such cleaning.

Interim Measures: Adequate Daily Cleaning Supplies for Class Members

The County is not in compliance with the August 14, 2023, stipulated order, or the Court-approved interim measures for the implementation of the *Murray v. Santa Barbara County* Remedial Plan.

- There is insufficient Jail staffing (utility workers) to ensure the required cleaning, which includes bi-weekly shower power washing, daily cleaning, including hallways and common areas, weekly cleaning, including cell bars, windows, and visiting rooms/private visiting rooms.
- Required weekly and quarterly cleaning of fans and air vents based on established schedules.
- Class members do not have sufficient access to types of equipment or stronger cleaning solutions to adequately clean and disinfect their living and common areas. The solutions, towels, or brushes are not sufficient to clean showers and toilets.

As noted above, the Expert will work with the County to develop and implement a process to address persistent deficiencies with respect to cleaning of the fans and air vents, particularly at MJ.

To reach substantial compliance with provision 6.B.1.g of the *Murray v. Santa Barbara County* Remedial Plan, the County must:

- Complete quarterly cleaning of fans and air vents, and more frequently as necessary to ensure they are clean of mold, mildew, and dust accumulation.
- Provide proof of practice documentation to the Expert.

6.B.2. Orientation

6.B.2. Upon intake, the County shall provide prisoners an orientation regarding the jail's expectations and procedures for cleanliness, elimination of clutter, and proper use of personal property containers.

Compliance Rating: Partial Compliance

Prior Compliance Rating: Partial Compliance

County Response:

The County is in the process of fully implementing this provision. The County issues Inmate Orientation Handbooks to each new incarcerated person prior to housing at both jail facilities and notates in ATIMS when issued. These documents have been provided to the Expert for review. The County is creating an orientation video that reinforces the components of this requirement. The County anticipates completing the orientation video within the next six (6) months.

Analysis/Observations:

As part of document production, the County produced a copy of the "Santa Barbara County Jail Custody Operations Orientation Handbook (Revised August 2023)." The Handbook addresses cleanliness, elimination of clutter, and the proper use of personal property containers. The County also produced a copy of the NBJ Orientation Video. The video does not address cleanliness, the elimination of clutter, and the proper use of personal property containers.

The County also produced the "Custody Operations Orientation Handbook Distribution Reports" from August 2024 through February 2025. The reports include inmate names, classification date, handout date, length since classified, and housing location. During the onsite review, the Expert worked with the MJ ECM and utilized the SBCJ Inmate Tracking System to review and evaluate the Handbook Distribution Report. The Handbook Distribution Report does not accurately identify which incarcerated persons were provided an Orientation Handbook. Various incarcerated persons on the report were released from custody and, therefore, did not need to be issued an Orientation Handbook. Some incarcerated persons on the report indicate they were housed at the SBJ but had been released from custody. Other incarcerated person names on the report were assigned housing, but the Handbook Distribution Report does not indicate if an Orientation Handbook was provided. The ECM utilized the SBCJ Inmate Tracking System to verify if various names on the report received Orientation Handbooks by reviewing the "Orientation Cards" issued at the time of detention and housing. Based on this review, the information within the Custody Operations Orientation Handbook Distribution Report is inaccurate and cannot be used to verify if each detained and housed incarcerated person was issued an Orientation Handbook.

The Expert recommends that the SBCJ improve the Custody Operations Orientation Handbook Distribution Report process to accurately record and monitor the distribution of Orientation Handbooks. The Expert will monitor this process in the next monitoring period.

MJ

During the onsite review, the Expert noted some incarcerated persons continue to have amounts of personal property that they are unable to fit in their issued property box. During the onsite interviews, incarcerated persons state that the property

containers provided are too small and that it is impossible to store all their personal belongings in them, specifically, consumable commissary. The Expert noted that some of the living area rules and the conditions of cells outlined in the "Custody Operations Orientation Handbook" do not appear to be enforced, such as rules related to excessive property, cleanliness, and obstructing vents, lights, and windows.

During interviews, the Expert was informed by most newly arrived incarcerated persons that they were provided an Orientation Handbook. However, most stated they were not provided a verbal or video orientation presentation regarding the expectations and procedures for cleanliness, elimination of clutter, and proper use of personal property containers.

NBJ

During interviews, the Expert was informed by many newly arrived incarcerated persons that they were provided an Orientation Handbook but were not provided a verbal or video orientation presentation regarding the expectations and procedures for cleanliness, elimination of clutter, and proper use of personal property containers.

In previous reports, the Expert recommended SBCJ staff review whether the issued property containers can adequately store the personal and County property issued to incarcerated persons (e.g., clothing, footwear, documents, etc.), including commissary items. This action may foster adequate cleanliness and sanitation in the housing units, particular the dorm units that are quite crowded. The Expert again recommends that the County consider shifting to the use of an adequately sized storage container that will allow incarcerated persons to store County-issued and personal property they are allowed to retain. This change requires minimal financial or staff resources and would be a cost-effective measure towards the successful implementation of the Remedial Plan provisions on cleanliness and sanitation.

The Expert recommends that the County include the Jail's expectations and procedures for cleanliness, elimination of clutter, and proper use of personal property containers in the orientation video.

To reach substantial compliance with provision 6.B.2 of the *Murray v. Santa Barbara County* Remedial Plan, the County must:

- Provide orientation through the Handbook and video presentation regarding expectations and procedures for cleanliness, elimination of clutter, and proper use of personal property containers.
- The County needs to consider purchasing and distributing an adequately sized storage container that would allow incarcerated persons the ability to store both County and personal property.
- Provide proof of practice documentation to the Expert.

6.B.3. Incarcerated Persons Who are Unable or Unwilling to Adequately Clean

6.B.3. The County shall establish a procedure to maintain cleanliness in housing areas where a prisoner is unable or unwilling to adequately clean. Where prisoners are expected to participate in cleaning, staff shall ensure appropriate assistance to people with mental illness, intellectual and developmental disabilities, or other special needs.

Compliance Rating: Substantial Compliance

Prior Compliance Rating: Substantial Compliance

The County is in substantial compliance with this provision and has maintained substantial compliance for a period of at least six (6) months. However, during the onsite review, the Expert observed incarcerated persons' cells that needed cleaning, and it was unclear whether assistance to the incarcerated person was offered, provided, or if a mental health referral was submitted. Additionally, the County did not provide documentation of when staff had provided assistance. Thus, the Expert will continue to monitor this provision during the next round of monitoring.

County Response:

Completed. The Environmental Health and Safety Expert found the County in substantial compliance with this provision.

Analysis/Observations:

6.B.3.a. Did the SBCJ establish procedures to maintain cleanliness in housing areas where an incarcerated person is unable or unwilling to adequately clean?

The Custody Operations Policy and Procedures Manual 362 section titled "Incarcerated Persons Clothing and Personal Hygiene," states in part, "Incarcerated persons who refuse or appear unable to maintain cleanliness of their living areas must be referred to mental health for assessment and services. Deputies shall assist incarcerated persons with cleaning of their cells if the incarcerated persons appear unable or unwilling to adequately clean. Deputies shall ensure appropriate assistance is provided to people with mental illness, intellectual or developmental disabilities or other special needs or who requires accommodations."

Additionally, the SBCJ Sanitation Plan, Section A., General Housekeeping, subsection A-1. Cleaning Responsibilities – Custody Staff states in part, "Where an inmate is expected to clean, staff shall ensure appropriate assistance for those inmates with disabilities. If an inmate refuses or is unwilling and/or unable to clean their cell, and the refusal is believed to be due to a mental health issue, a mental health referral shall be submitted. Staff shall ensure the cell is cleaned and sanitized."

MJ

The County produced (8) Mental Health Evaluation Forms where custody staff referred incarcerated persons to WellPath clinicians based on their unwillingness to adequately clean their person and cell. In three (3) of the eight (8) cases, WellPath staff signed the form and noted that an evaluation was completed. In the other cases, Wellpath simply signed the form and indicated the form had been reviewed.

During the onsite review, the Expert interviewed a WellPath Mental Health Clinician. The Clinician reported that custody staff refer cases for evaluation, and upon receipt or notification of a referral, clinicians conduct a face-to-face encounter/evaluation.

NBJ

The Expert was informed that the NBJ Mental Health Unit did not receive any mental health referral forms during the rating period. .

6.B.3.b Do the procedures provide direction to staff to ensure appropriate assistance is provided to incarcerated persons who are expected to participate in cleaning and have a mental illness, intellectual and developmental disabilities, or other special needs?

MJ

During the onsite review, the Expert interviewed four (4) housing unit staff/Deputies to identify what they would do in cases where an incarcerated person was unable to clean their cell or living area due to the incarcerated person's disability (mental illness, developmental disability, or other special needs). All staff interviewed stated they would either complete a mental health referral, remove the incarcerated person from their cell and clean the cell, or have an incarcerated cleaning crew clean the cell or living area.

NBJ

During the on-site review, the Expert did not observe significant issues or concerns related to dirty and unclean cells.

The Expert interviewed four (4) housing unit staff/Deputies to identify what they would do in cases where an incarcerated person was unable to clean their cell or living area due to the incarcerated person's disability (mental illness, developmental disability, or other special needs). All staff interviewed stated they would either call mental health, complete a mental health referral, remove the incarcerated person from their cell and clean the cell, or have an incarcerated cleaning crew clean the cell or living area.

6.B.4. Policy and Procedures for Cleaning, Disinfection, Distribution, and Repair of Mattresses

6.B.4. The County shall develop and implement a policy and procedure for effective cleaning, disinfection, distribution, and repair of mattresses. The policy shall provide a process

for inspection and replacement of all frayed and cracked mattresses that cannot be disinfected sufficiently to eliminate harmful bacteria.

Compliance Rating: Discontinuation of Monitoring

Prior Compliance Rating: Substantial Compliance

Pursuant to Paragraph 52 of the Remedial Plan, the County has been in substantial compliance with this provision and has maintained such substantial compliance for a period of at least six (6) months. Based on this, the parties conferred, and Class Counsel has no objection to the County's request for discontinuation of monitoring. The provision will therefore be subject to future monitoring only if it is determined that the County is no longer in substantial compliance, consistent with the procedure set forth in Paragraph 53.

6.B.5. Provision of Clean and Serviceable Mattress

6.B.5. The County shall ensure that newly arrived prisoners receive a clean and serviceable mattress. Mattresses shall be cleaned and disinfected anytime they are assigned to a different prisoner or when there is a biohazardous or bloodborne incident involving the mattress.

Compliance Rating: Discontinuation of Monitoring

Prior Compliance Rating: Substantial Compliance

Pursuant to Paragraph 52 of the Remedial Plan, the County has been in Substantial Compliance with this provision and has maintained such Substantial Compliance for a period of at least six (6) months. Based on this, the parties conferred, and Class Counsel has no objection to the County's request for discontinuation of monitoring. The provision will therefore be subject to future monitoring only if it is determined that the County is no longer in substantial compliance, consistent with the procedure set forth in Paragraph 53.

County Response:

Completed. The Environmental Health and Safety Expert found the County in substantial compliance with this provision.

Analysis/Observations:

The Custody Operations – Policy and Procedures Manual 362, Incarcerated Persons Clothing and Personal Hygiene (draft), states in part, "All incarcerated persons will be provided with a clean and serviceable mattress upon housing. Any mattresses in need of repair or replacement shall be replaced with another clean and serviceable mattress upon request. When an inmate is initially housed within a jail facility, they will be provided with a new inmate orientation card in which they will acknowledge they received a clean mattress. If the inmate advises a deputy that their mattress is not clean, the deputy shall ensure a clean and serviceable mattress

is provided. The deputy shall then have the incarcerated person acknowledge they received a clean and serviceable mattress on the new inmate orientation card."

MJ

The County informed the Expert that all mattresses at MJ were replaced with new, thicker four (4) inch mattresses in April 2025. The County indicated the new mattresses meet the requirements for individuals with ADA Medical Treatment Orders (MTO) for a double mattress. During the on-site review, the Expert noted the new mattresses are approximately four (4) inches thick, in contrast with the previous mattresses, which were approximately two (2) inches thick.

The County produced Santa Barbara County Jail New Inmate Orientation Cards from August 2024 through February 2025 (more than 150 per month). The Orientation Card contains a checkbox for the incarcerated person to acknowledge receipt of a serviceable mattress, with the following statement: "I received a clean serviceable mattress." A random sample of 50 or more orientation cards reflects that the incarcerated person acknowledged receipt of a clean, serviceable mattress. However, in some cases, the incarcerated person refused to sign the acknowledgement on the Orientation Card; however, the Deputy noted the refusal to sign on the Orientation Card.

During interviews, most incarcerated persons reported receiving clean and serviceable mattresses during the rating period. All incarcerated persons stated they were recently issued new, thicker mattresses.

NBJ

The NBJ produced approximately 103 Santa Barbara County Jail New Inmate Orientation Cards from August 2024 through February 2025. The Orientation Card contains a checkbox for the incarcerated person to acknowledge receipt of a clean and serviceable mattress, with the following statement: "I received a clean serviceable mattress." A random sample of 50 or more orientation cards reflects the incarcerated person either acknowledged receiving a clean, serviceable mattress or refused to sign the acknowledgement on the Orientation Card. However, in some cases, the Deputy noted the refusal to sign the Orientation Card. On some cards, the boxes were left unchecked.

During on-site interviews, the Expert interviewed six (6) incarcerated persons. Of the six incarcerated persons, five (5) arrived during the rating period, or prior to the on-site tour. All incarcerated persons stated they received a clean mattress; one incarcerated person stated his issued mattress was "flat."

MJ - When an incarcerated person is released from custody, their mattress is taken to the Property Room to be cleaned and inspected for damage by Property Staff. If the mattress is damaged in any way, it is sent to the Laundry Department to be repaired or disposed of.

NBJ - NBJ does not repair mattresses. When an incarcerated person is released from custody or is moved to another housing unit, the mattress is cleaned and inspected in place. If the mattress is damaged in any way, it is disposed of and replaced with a new mattress.

The Expert noted the issuance of new four (4) inch thick mattresses at MJ is a positive development. The Expert recommends the County consider implementing new four (4) inch thick mattresses for incarcerated persons at NBJ. This may reduce incarcerated persons' grievances and disability accommodation requests.

6.B.6. Procedure to clean cell prior to Placement in Cell

6.B.6. The County shall establish procedures so that a cell is cleaned prior to a prisoner's placement in that cell.

Compliance Rating: Partial Compliance

Prior Compliance Rating: Partial Compliance

County Response:

Completed. The County has established procedures to ensure that a cell is cleaned prior to placement in a cell. The County documents and audits this requirement by use of an Inmate Orientation Card at both facilities.

Analysis/Observations:

6.B.6.a. Does the SBCJ establish procedures so that a cell is cleaned prior to an incarcerated person's placement in that cell?

The Custody Operations – Policy and Procedures Manual 362, Incarcerated Persons Clothing and Personal Hygiene (draft), states in part, "All individual cells (to include restrictive housing cells, observation cells, safety cells) shall be cleaned prior to placing another inmate into a cell previously occupied by another inmate. Multiple occupancy cells will be cleaned on an as-needed basis as the occupants routinely maintain cell cleanliness with provided cleaning supplies. Cleaning and sanitation schedules and procedures are located in the Sanitation Plan."

The policy also states, "Incarcerated persons that are housed in non-population (two or more persons per cell) housing units will be provided with a new incarcerated person orientation card that they sign upon receiving a cell that is clean. If an incarcerated person advises a deputy that their cell is not clean, the deputy shall ensure that the cell is cleaned by cleaning the cell themselves, by utilizing an incarcerated person worker(s) to clean the cell, or by providing sufficient cleaning supplies to the incarcerated person if the incarcerated person is amenable to that. Following this, the module deputy shall attempt to obtain a signature on the new incarcerated person orientation card acknowledging that their cell was clean."

MJ

The County produced Santa Barbara County Jail New Inmate Orientation Cards from August 2024 through February 2025 (more than 150 per month). The Orientation Card contains a checkbox for the incarcerated person to acknowledge the cleanliness of the cell, with the following statement: "The cleanliness of my cell was acceptable." A random sample of 50 or more Orientation Cards reflects that the incarcerated person acknowledged that the cleanliness of their cell was acceptable. In some cases, the incarcerated person refused to sign the acknowledgement on the Orientation Card; however, the Deputy noted the refusal to sign on the Orientation Card.

During the on-site review, the Expert interviewed twenty-nine incarcerated persons. Of the twenty-nine (29) incarcerated persons interviewed, five (5) reported their cell was not cleaned prior to their placement in the cell. During the on-site review, the Expert observed various vacant cells that were considered clean and ready for incarcerated person occupancy. The Expert noted some cells were not clean and contained debris.

MJ received two (2) Inmate Grievance Forms during the rating period, indicating two (2) incarcerated persons were moved to a cell that was dirty. One (1) incarcerated person noted the cell was filthy and had an ant infestation.

NBJ

NBJ produced approximately 103 Santa Barbara County Jail New Inmate Orientation Cards from August 2024 through February 2025. The Orientation Cards contain a checkbox for the incarcerated person to acknowledge the cleanliness of the cell, with the following statement: "The cleanliness of my cell was acceptable." A random sample of 50 or more orientation cards reflects the incarcerated person either acknowledged that the cleanliness of their cell was acceptable, or refused to sign the acknowledgement on the Orientation Card. However, in some cases, the Deputy noted the refusal to sign the Orientation Card. In some cases, the boxes were left unchecked.

The County reported that at NBJ, the New Inmate Orientation Card is on a sheet of paper, which is filled out and given to Records. Records staff place it in the incarcerated person's folder. Once the incarcerated person is released, their file is scanned into JMS.

During interviews, the Expert interviewed six (6) incarcerated persons. None of the incarcerated persons reported that their cell was not clean prior to their placement in the cell.

6.B.6.b Does SBCJ have documentation and or verification of cell cleaning prior to an incarcerated person's placement in that cell?

The Custody Operations – Policy and Procedures Manual 362, Incarcerated Persons Clothing and Personal Hygiene (draft) states, "All individual cells (to include

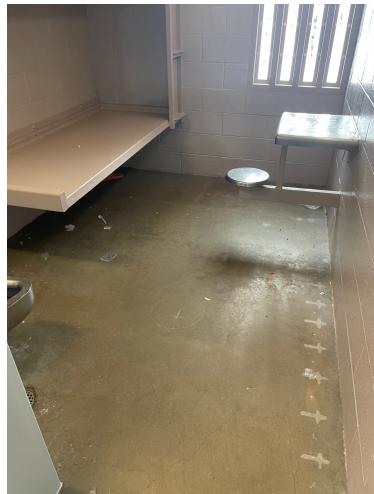
restrictive housing cells, observation cells, safety cells) shall be cleaned prior to placing another incarcerated person into a cell previously occupied by another incarcerated person. Multiple occupancy cells will be cleaned on an as needed basis as the occupants routinely maintain cell cleanliness with provided cleaning supplies. Cleaning and sanitation schedules and procedures are located in the Sanitation Plan." The policy also states, "incarcerated persons that are housed in non-population (two or more persons per cell) housing units will be provided with a new inmate orientation card that they sign upon receiving a cell that is clean. If an incarcerated person advises a deputy that their cell is not clean, the deputy shall ensure that the cell is cleaned by cleaning the cell themselves, by utilizing an incarcerated person worker(s) to clean the cell or by providing sufficient cleaning supplies to the incarcerated person if the incarcerated person is amenable to that. Following this, the module deputy shall attempt to obtain a signature on the new incarcerated person orientation card acknowledging that their cell was clean."

MJ

The County produced Santa Barbara County Jail New Inmate Orientation Cards (see review in section 6.B.6.a. above).

During the on-site review, the Expert interviewed twenty-nine incarcerated persons. Of the twenty-nine incarcerated persons interviewed, five (5) reported their cell was not clean prior to their placement in the cell. During the on-site review, the Expert viewed various vacant cells that were considered clean and ready for incarcerated person occupancy. The Expert noted some cells were not clean and contained debris (see pictures below).





The Expert recommends that staff ensure cells/living quarters are properly cleaned prior to incarcerated persons placement.

As noted in section B.6.a., MJ received two (2) Inmate Grievance Forms during the rating period, indicating two (2) incarcerated persons were moved into a cell that was dirty. One (1) incarcerated person noted the cell was filthy and had an ant infestation.

NBJ

NBJ produced approximately 103 Santa Barbara County Jail New Inmate Orientation Cards (see review in section 6.B.6.a. above).

During interviews, the Expert interviewed six (6) incarcerated persons. Of the six (6) incarcerated persons interviewed, none reported that their cell was not clean prior to their placement in the cell.

To reach substantial compliance with provision 6.B.6 of the *Murray v. Santa Barbara County* Remedial Plan, the County must:

- Clean cells prior to housing an incarcerated person.
- Provide proof of practice documentation to the Expert.
- The Expert would need to evaluate during the next on-site review.

6.B.7. Cleaning and Disinfection of Plastic Beds

6.B.7. The County has committed to ensuring that each prisoner is assigned and provided a bed, as set forth in the Custody Operations/Segregation Remedial Plan. Until such remedial provision is fully implemented, where the County uses plastic beds, or "boats," the County shall ensure that they are cleaned and disinfected anytime they are assigned to a different prisoner or when there is a biohazardous or bloodborne incident involving the mattress or boat.

Compliance Rating: Discontinuation of Monitoring

Prior Compliance Rating: Substantial Compliance

Pursuant to Paragraph 52 of the Remedial Plan, the County has been in substantial compliance with this provision and has maintained such substantial compliance for a period of at least six (6) months. Based on this, the parties conferred, and Class Counsel has no objection to the County's request for discontinuation of monitoring. The provision will therefore be subject to future monitoring only if it is determined that the County is no longer in substantial compliance, consistent with the procedure set forth in Paragraph 53.

6.C. Laundry**6.C.1. Weekly Clothing and Linen Exchange**

6.C.1. Clothing and linen exchange shall occur for all prisoners at least weekly and more frequently when circumstances warrant. Kitchen workers shall be provided a clean kitchen uniform daily. Whenever a prisoner presents to jail staff clothing or linen that is soiled and/or reasonably requests a clothing/linen exchange, jail staff will ensure a prompt exchange, in all cases, by the end of the shift.

On August 14, 2023, the Court approved interim measures for the implementation of the *Murray v. Santa Barbara County* Remedial Plan. The stipulated order states,

Adequate Clothing/Linen Exchange. No later than September 1, 2023, Defendants will modify their Jail clothing/linen provision and exchange policies and procedures by (1) increasing the amount of clothing (including undergarments) provided to each Class Member at each clothing exchange and (2) ensuring that whenever a Class Member reasonably requests a clothing or linen exchange, such exchange is completed promptly, and in all cases by the end of the shift, consistent with the findings and recommendations of the Remedial Plan Expert. (Sept. 2022 Envt of Care Monitoring Report at 25-27) Further, as of May 15, 2023, sweatshirts have been issued to all class members and may be exchanged based on regular clothing exchange procedures and upon reasonable request.

Compliance Rating: Substantial Compliance**Prior Compliance Rating:** Substantial Compliance

Although the County has received substantial compliance with this provision and has maintained substantial compliance for a period of at least six (6) months, MJ continues to experience problematic concerns with laundry not being properly cleaned. Multiple incarcerated persons reported receiving laundry that appeared unclean, torn, unusable, or emitted bad odors. During the on-site review, the Expert noted problematic concerns in the Laundry Department, as noted in this section. The Expert will continue to monitor this provision during the next round of monitoring.

County Response:

Completed. The Environmental Health and Safety Expert found the County in substantial compliance with this provision.

Analysis/Observations:***6.C.1.a Is clothing and linen exchange completed for all incarcerated persons at least weekly and more frequently when circumstances warrant?***

The Custody Operations – Policy and Procedures Manual 362, Inmate Clothing and Personal Hygiene (draft), states in part, “The standard issue of clothing and bedding is as follows:

- Two pairs of pants with outer shirt or a jumpsuit (dependent on Classification);
- Four white t-shirts;
- Four pairs of underwear consistent with their gender identity;
- Four pairs of socks;
- One sweatshirt;
- Two blankets;
- One bed sheet;

The Policy further states in part, “Standard issued bedding linen (excluding mattress and blankets) and clothing shall be exchanged once a week; however, blankets shall be exchanged once per month or more often when necessary. Incarcerated persons on work crews will be permitted more frequent exchanges of clothing as needed.”

MJ

The MJ Linen Exchange Schedule does not indicate the items incarcerated persons can exchange. However, based on the linen exchange schedules, interviews with laundry staff, and incarcerated person interviews, linen exchange is conducted weekly for clothing and monthly for blankets.

The County purchased and now maintains a sufficient inventory of different colored sweatshirts for issuance to incarcerated persons. Incarcerated persons are offered the opportunity to exchange the sweatshirt weekly based on regular clothing exchange procedures. The distribution of sweatshirts is as follows.

- General Population incarcerated persons, gray sweatshirt stenciled in blue letters in front and back.
- Protective Custody incarcerated persons, gray sweatshirt stenciled in orange in front and back.
- BHU and Restrictive Housing incarcerated persons, light blue sweatshirt stenciled in white in front and back.

During on-site interviews, all incarcerated persons stated they are offered a clothing exchange weekly. However, many incarcerated persons complained that the laundry is not properly cleaned. Incarcerated persons stated that some clothing, sheets, and towels contain stains, emit odors, and in some cases are torn or damaged. Some

incarcerated persons stated they keep certain linen or clothing that fits properly or is newer and has little wear, and they prefer to wash clothing themselves to avoid exchanging for items that do not fit, are stained, or are ripped/damaged. One incarcerated person claimed and displayed an undergarment he claims was recently issued to him. The undergarment appears to contain brown and rust stains, as noted in the picture below.



During the on-site review at MJ, the Expert toured the laundry room. The Expert observed bins of white clothing soaking in water and cleaner to remove stains and whiten undergarments. The Expert was informed that some stained linens are soaked in OxyClean to remove stubborn stains. Washed clothing that had been sorted and folded by incarcerated laundry workers mostly appeared to be clean and in fair condition. Many white undergarments were off-white in color. The Expert unfolded a bundle of clothing that was loaded in a laundry cart to be delivered to a housing unit for linen exchange. Within the bundle, one bed sheet was torn and did not appear to be usable. Laundry staff removed the sheet and replaced it.

The Expert observed a washing machine in the middle of a washing cycle, which appeared to be overloaded. Overloading washing machines can lead to various problems, including ineffective cleaning. Overloading restricts the free movement of clothes within the drum and can prevent the detergent from circulating properly and reaching all areas of the laundry, resulting in ineffective cleaning. The Expert recommends laundry staff refer to the manufacturer's guidelines and recommended load capacity. The Expert further recommends staff use a bleach product to soak whites with stubborn stains.

During the on-site review, the Expert was informed that two (2) MJ Laundry Coordinator staff members had recently retired. The current Laundry Coordinator was recently appointed and is new to the position. After the on-site review, the Expert was informed that a second Laundry Coordinator had been assigned to the MJ Laundry.

When circumstances warrant, staff are required to exchange clothing on non-laundry days. Incarcerated persons at MJ stated that staff do not always exchange clothing, and the clothing exchange is dependent on the staff member(s) they ask.

In a 6/19/25 inquiry, Class counsel noted concerns with inappropriate mattress sleeves/sheets as several class members had bed sheets that were meant for the

older, thinner/smaller mattress, such that the sheets did not fit on the new thicker mattress. On 7/11/25, the County reported "Correctly sized mattress sleeves have been ordered. Awaiting arrival."

NBJ

NBJ Linen Exchange Schedule offers incarcerated persons the opportunity to exchange the following items:

- One (1) outer uniform per week
- Three (3) t-shirts per week
- Three (3) boxer/underwear per week
- Three (3) pairs of socks per week
- One (1) nightgown per week
- Three (3) bras per week
- One (1) sweatshirt per week
- One (1) blanket per month
- One (1) mattress cover per week
- One (1) towel per week

The Expert toured the NBJ laundry room. NBJ does not store or maintain clothing/linen within the laundry room. All clothing collected is delivered to the laundry room, washed, and returned to the housing units on the same day to prevent storage within the laundry room.

During incarcerated person interviews at NBJ, three (3) of the six (6) incarcerated persons interviewed stated that the clothing comes back unclean and emits an odor. Incarcerated persons at NBJ stated that staff do not always exchange clothing, and the exchange is completed dependent on the staff member(s) you ask.

6.C.1.b Are kitchen workers provided clean kitchen uniforms daily?

The Custody Operations – Policy and Procedures Manual 362, Inmate Clothing and Personal Hygiene (draft) states, "Inmates assigned to work in the kitchen shall be provided with clean outer clothing daily. If during an inmate's work shift their clothing becomes soiled, it should be replaced promptly." The policy states, "Inmates on work crews will be permitted more frequent exchanges of clothing as needed."

MJ

Kitchen staff and the incarcerated person/kitchen workers interviewed reported that kitchen workers are provided with washed and clean uniforms daily.

The incarcerated person/kitchen workers who were interviewed stated they are provided clean, washed uniforms daily, and upon return from their job assignment, they exchange the soiled uniforms for a clean one.

Incarcerated person/kitchen workers and kitchen staff also reported that if their uniforms become dirty or soiled during work hours, staff will issue them clean uniforms promptly.

The MJ Food Services Supervisor stated that clean uniforms are stored in the kitchen for emergency needs. Staff also reported that in the event the worker's uniform size is not available in the kitchen, staff would obtain the clean uniform from the laundry.

NBJ

Kitchen staff and the incarcerated person/kitchen workers interviewed reported that kitchen workers are provided with washed and clean uniforms daily.

The incarcerated person/kitchen workers who were interviewed stated they are provided two clean, washed kitchen uniforms, and upon return from their job assignment, they exchange the soiled uniforms for a clean one.

Incarcerated person/kitchen workers and kitchen staff also reported that if their uniforms become dirty or soiled during work hours, staff will issue them clean uniforms promptly.

6.C.1.c *When an incarcerated person presents to jail staff clothing or linen that are soiled and/or reasonably requests a clothing/linen exchange, does jail staff ensure a prompt exchange, and in all cases, by the end of the shift?*

The Custody Operations – Policy and Procedures Manual 362, Inmate Clothing and Personal Hygiene (draft) states, “*Whenever a prisoner presents to jail staff clothing or linen that are soiled and/or reasonably requests a clothing/linen exchange, jail staff will ensure a prompt exchange, in all cases by the end of the shift.*”

MJ and NBJ

As the Expert previously noted in 6.C.1.a above, in situations where an incarcerated person requests clothing or linen that is soiled or they need an urgent exchange of clothing/linen, certain staff will exchange the items. Incarcerated persons stated that it depends on which staff member you ask, as some Custody Deputies will complete the exchange, while other Custody Deputies will not. Incarcerated persons stated that in some cases, the clothing is exchanged on the same day, while in other cases, the exchange may take one day.

During staff interviews, all Deputies stated they would exchange clothing or linen under certain conditions, such as those that have been damaged or have become soiled.

6.C.2. Chemical Safety Training for Staff and Incarcerated Persons

6.C.2. *The County shall provide, document and maintain records of training provided to prisoner workers and staff assigned laundry duties on chemical safety, biohazardous and bloodborne contaminated clothing and linens, use of personal protective equipment, and Material Safety Data Sheets.*

Compliance Rating: Substantial Compliance

Prior Compliance Rating: Partial Compliance

County Response:

Completed. The County provides all inmate workers assigned to work within the Laundry Department with personal protective equipment. The Laundry Coordinator instructs these workers as to how to recognize and handle possible biohazardous and bloodborne contaminated laundry and the proper use of personal protective equipment. The County has provided training for all inmate workers, Custody Deputies, Sheriff Service Technicians, and Utility Workers. Per the Expert's recommendation, the County will document the completion date of the incarcerated person's training and the start date of the incarcerated person's job assignment on the training rosters.

Analysis/Observations:

The County produced the following training materials:

- Santa Barbara County Sheriff's Office Bloodborne Pathogens Training PowerPoint
- Santa Barbara County Sheriff's Office Chemical Safety Training

The training materials provide basic and necessary information on chemical safety training, Material Safety Data Sheets, and Bloodborne Pathogen safety training, including the proper use of Personal Protective Equipment.

MJ

The County produced copies of "Santa Barbara County Sheriff's Office Incarcerated Persons Laundry Dept. Worker Tracker" Forms, which contain the incarcerated person's name, CID#, date of training, start date, and end date. Based on the forms provided, a total of thirty-nine incarcerated persons were assigned to work in the Laundry Department from October 2024 through February 2025. The County also provided copies of "Laundry Department Blood Borne Pathogens Training Rosters" and "Laundry Department Chemical Safety Training Rosters." The Expert cross-referenced the training rosters with the tracker forms and confirmed that thirty-seven of the thirty-nine incarcerated persons received both Chemical Safety Training and Bloodborne Pathogens training (95%). Thirty-three incarcerated persons attended training on the day of assignment or within one week of assignment. Six (6) incarcerated persons attended training approximately one week or more after assignment.

The County also produced "Laundry Department Inmate Worker Orientation" acknowledgment of training forms for thirty-seven of thirty-nine laundry workers. The form provides basic Laundry Department duties, instructions, and responsibilities, notification of the Material Safety Data Sheet book and eyewash station in the Laundry Department, and what to do with red and yellow biohazardous contaminated color bags. The second page contains an acknowledgment that the form was read by

the incarcerated person and an area for the incarcerated person and the Laundry Coordinator to sign and date the form.

During the on-site review, the Expert interviewed one (1) Laundry Department staff member, and three (3) incarcerated person laundry workers.

The three (3) incarcerated person laundry workers interviewed stated they were provided training on chemical safety, biohazardous and bloodborne pathogens, and the proper use of personal protective equipment. The Expert reviewed the "Laundry Department Inmate Worker Orientation" acknowledgment forms and the Santa Barbara County Sheriff's Custodial Facilities Laundry Department Bloodborne Pathogen Training Rosters to confirm that the incarcerated persons had received training. The rosters reflect that all three (3) incarcerated persons received the Chemical Safety, Bloodborne Pathogens, and Personal Protective Equipment training.

During the interviews, the incarcerated persons reported that when they receive clothing contaminated with blood and feces, the clothing is in yellow and red biohazardous bags. Incarcerated persons also stated that when handling biohazardous and bloodborne contaminated clothing and linen, they are provided personal protective equipment and follow the training on biohazardous material. The Expert noted that red biohazardous bags should not be taken to the Laundry Department. Based on Policy and Procedure Manual 362, all red biohazardous bags should be deposited in the biohazard storage located in the IRC Treatment Room closet. The ECM stated that, in some cases, red biohazardous bags are accidentally taken to the Laundry Department. However, the bags are transferred to the biohazard storage located in the IRC Treatment Room closet.

During the on-site review, the Expert observed a Material Safety Data Sheet binder in the laundry room, which is easily accessible to all employees, staff, and incarcerated persons.

NBJ

The County produced copies of "Santa Barbara County Sheriff's Office Incarcerated Persons Laundry Dept. Worker Tracker" Forms. Based on the forms provided, a total of eight (8) incarcerated persons were assigned to work in the Laundry Department from August 2024 through February 2025. The County also provided copies of "Laundry Department Blood Borne Pathogens Training Rosters" and "Laundry Department Chemical Safety Training Rosters." The Expert cross-referenced the training rosters with the tracker forms and confirmed all eight (8) incarcerated persons received both Chemical Safety Training and Bloodborne Pathogens training (100%). Four (4) of the eight (8) incarcerated persons commenced work in the Laundry Department during the rating period. All four (4) incarcerated persons received training on the day of assignment.

During the on-site review, the Expert interviewed one (1) Laundry Department staff member and two (2) incarcerated person laundry workers. The staff member stated he attended training on chemical safety, biohazardous and bloodborne contaminated

clothing, proper use of personal protective equipment, and Material Safety Data Sheets. In previous compliance reviews, the staff member was confirmed as attending all required training.

Two (2) incarcerated persons stated they had attended training on chemical safety, biohazardous and bloodborne contaminated clothing, proper use of personal protective equipment, and Material Safety Data Sheets. The Expert reviewed the training records and confirmed that both incarcerated persons attended training.

During the on-site review, the Expert observed a Material Safety Data Sheet binder in the laundry room, easily accessible to all employees, staff, and incarcerated persons.

To continue achieving substantial compliance with provision 6.C.2. of the *Murray v. Santa Barbara County* Remedial Plan, the County must:

- Provide chemical safety, biohazardous and bloodborne pathogens, and PPE training to staff and incarcerated persons. The training must be provided prior to assignment and working with chemicals or items contaminated with biohazards or bloodborne pathogens.
- Provide proof of practice documentation to the Expert.

6.C.3. Healthcare Referrals for Incarcerated Persons With Possible Mental Health Disability

6.C.3. *Staff shall make reasonable efforts to ensure that all prisoners have clean linens at all times. Staff will make a health care referral for any prisoner refusing to exchange linens if there is reason to believe such refusal relates to the person's mental health condition. Mental health staff shall assist in resolving the situation as appropriate.*

Compliance Rating: Partial Compliance

Prior Compliance Rating: Substantial Compliance

County Response:

Completed. The Environmental Health and Safety Expert found the County in substantial compliance with this provision.

Analysis/Observations:

6.C.3.a *Do staff make health care referrals for any incarcerated person refusing to exchange linen if there is reason to believe such refusal relates to the person's mental health condition?*

The Santa Barbara County Sheriff's Office, Santa Barbara Jail, and Northern Branch Jail Sanitation Plan 4.10.24, Section A-1, states in part, "Where an inmate is expected to clean, staff shall ensure appropriate assistance for those inmates with disabilities. If an inmate refuses to participate in cleaning, or is unwilling or unable, and the refusal

is believed to be due to a mental health issue, a mental health referral shall be submitted, and staff shall ensure the cell is cleaned and sanitized."

The County produced a Mental Health Evaluation Request Form, which was created for Deputies to make mental health evaluation referrals. The County also provided thirteen completed Mental Health Evaluation Request Forms submitted by staff for cases where the incarcerated person refused linen exchange, and the refusal was believed to be related to the incarcerated person's mental health condition. One (1) Mental Health Evaluation Request Form reflects that the incarcerated person was evaluated by the Mental Health staff. Twelve forms do not indicate if the incarcerated person was evaluated, and if not evaluated, they do not provide an explanation.

The Mental Health Evaluation Request Forms reflect that the incarcerated persons were housed at MJ.

There was no Mental Health Evaluation Request Forms generated at the NBJ during the rating period.

MJ

The Expert interviewed four (4) Custody Deputies and one (1) Mental Health Clinician to evaluate the process for cases where incarcerated persons refuse to exchange linen or clothing, and the reason for the refusal may be related to the incarcerated person's mental health. Three (3) Custody Deputies stated they would refer the cases to mental health and complete a Mental Health Evaluation Request Form. One (1) Custody Deputy stated they would call mental health for a referral. The Mental Health Clinician stated they have received phone calls for mental health referrals but have not received Mental Health Evaluation Request Forms when incarcerated persons are experiencing hygiene or cleanliness issues. The Mental Health Clinician stated he would interact with the patient and conduct a mental health evaluation.

During the on-site tour, the Expert toured various housing units, including the Restrictive Housing Unit, and did not observe cases where incarcerated persons were not maintaining proper hygiene/or who were wearing undergarments that appeared severely dirty and needed to be exchanged, or whose linen needed to be exchanged due to being dirty.

NBJ

The Expert interviewed four (4) Custody Deputies to evaluate the process for cases where incarcerated persons refuse to exchange linen or clothing, and the reason for the refusal may be related to the incarcerated person's mental health. Three (3) staff stated they would refer the cases to mental health and complete a Mental Health Evaluation Request Form. One (1) staff member stated they would call mental health for referral.

During the tour, the Expert toured all housing units and did not observe incarcerated persons who were not maintaining proper hygiene and/or who were wearing

undergarments that appeared dirty and needed to be exchanged or whose linen needed to be exchanged due to being dirty.

6.C.3.b Does Mental Health staff assist in resolving the situation, as appropriate?

MJ

MJ provided thirteen Mental Health Evaluation Request Forms completed during the rating period and submitted by staff for cases where the incarcerated person refused linen exchange, and the refusal was believed to be related to the incarcerated person's mental health condition. One (1) Mental Health Evaluation Request Form reflects that the incarcerated person was evaluated by the Mental Health staff. Twelve forms do not indicate if the incarcerated person was evaluated, and if not evaluated, they do not provide an explanation.

The Mental Health Evaluation Request Forms reflect that the incarcerated persons were housed at MJ.

NBJ

No Mental Health Evaluation Request Forms were produced for NBJ. Due to time constraints, the Expert was unable to interview NBJ Mental Health staff.

The Expert recommends that WellPath Mental Health staff thoroughly complete all Mental Health Evaluation Request Forms submitted by staff. If a mental health evaluation is not completed when a request is submitted, an explanation or reason for not completing a mental health evaluation should be documented. Mental Health staff are required to assist in resolving the situation, as appropriate.

To reach substantial compliance with provision 6.C.3. of the *Murray v. Santa Barbara County* Remedial Plan, the County must:

- Ensure staff make health care referrals for prisoners refusing to exchange linens if there is reason to such refusal relates to the person's mental health condition, and mental health staff assist in resolving the situation as appropriate.
- Mental health staff thoroughly complete all mental health evaluation request forms submitted by staff.
- Provide proof of practice documentation to the Expert.

6.D. Food Service and Kitchen Operations

6.D.1. Clean Clothing for Kitchen Workers

6.D.1. Prisoners assigned to kitchen duties shall be provided with clean outer clothing daily. If during a prisoner's work shift the clothing becomes soiled, it should be replaced promptly.

Compliance Rating: Discontinuation of Monitoring

Prior Compliance Rating: Substantial Compliance

Pursuant to Paragraph 52 of the Remedial Plan, the County has been in substantial compliance with this provision and has maintained such substantial compliance for a period of at least six (6) months. Based on this, the parties conferred, and Class Counsel has no objection to the County's request for discontinuation of monitoring. The provision will therefore be subject to future monitoring only if it is determined that the County is no longer in substantial compliance, consistent with the procedure set forth in Paragraph 53.

6.D.2. Weekly Kitchen Operation Inspections

6.D.2. The County shall perform a weekly inspection of kitchen operations, with a report submitted to the Environment of Care Monitor and shall ensure actions are taken to correct any identified issues.

Compliance Rating: Partial Compliance

Prior Compliance Rating: Partial Compliance

County Response:

Completed. The County hired a full-time Kitchen Supervisor who completes weekly inspection of kitchen operations, submits a report to the Environment of Care Monitor, and ensures that identified issues are corrected.

Analysis/Observations:

6.D.2.a Does SBCJ perform weekly inspections of kitchen operations, and submit a report to the ECM to ensure actions are taken to correct any identified issues?

The Santa Barbara County Sheriff's Office, Santa Barbara Jail, and Northern Branch Jail Sanitation Plan 4.10.24, Section I-2, states in part, "The Kitchen Manager or designee will inspect the kitchen facilities on a daily, weekly, and monthly basis. If issues cannot be remedied at the lowest level, sanitation problems will be immediately reported by use of the Facilities Work Order System."

MJ

The County produced "Main Jail Kitchen Weekly Inspection Checklists" for the rating period. MJ completed weekly inspection checklists for the rating period (100%).

- August 2024 - Completed
- September 2024 - Completed
- October 2024 - Completed
- November 2024 - Completed
- December 2024 - Completed
- January 2025 - Completed
- February 2025 - Completed

The “Main Jail Kitchen Weekly Inspection Checklist” includes an area titled “Notes and Work Order Info” for staff to document actions taken to correct the identified issues. The checklist consistently includes actions taken to correct identified issues and submission of work orders.

During the on-site review, the Expert identified several areas at the MJ Kitchen which require deep cleaning, paint, and tile repairs as noted in section 6.B.1.c. The Expert recommends MJ complete all cleaning and repairs in the MJ Kitchen to achieve substantial compliance.

NBJ

The County produced "NBJ Kitchen Weekly Inspection Checklist" forms for the rating period. NBJ completed twenty-nine weekly inspections out of thirty-one weeks (94%). The following weekly inspection checklists were completed for the rating period.

- August 2024 - Completed
- September 2024 - Completed
- October 2024 - Completed
- November 2024 - Two weeks Completed
- December 2024 - Completed
- January 2024 - Completed
- February 2024 - Completed

The “NBJ Kitchen Weekly Inspection Checklist” includes an area titled “Notes and Work Order Info” for staff to document actions taken to correct the identified issues. The checklist consistently includes actions taken to correct identified issues and submission of work orders.

The Expert determined the County is conducting most of the weekly inspections as required. However, based on the on-site review observations, the Expert noted areas that required deep cleaning, paint, and tile repairs. Based on this, the Expert recommends that MJ and NBJ continue to complete and document the weekly inspections and ensure actions are taken to correct any identified issues as required by the *Murray* Remedial Plan.

6.D.2.b Is a report of the weekly inspections of kitchen operations submitted to the ECM (on a weekly basis)?

The Expert was informed that the kitchen inspection reports are being provided to the ECM on a weekly basis.

6.D.2.c Does SBCJ/ECM ensure actions are taken to correct any identified issues on the weekly inspection of kitchen operations?

MJ

The County produced “Main Jail Kitchen Weekly Inspection Checklist.” Refer to section 6.D.2.a above.

NBJ

The County produced “NBJ Kitchen Weekly Inspection Checklist” forms, as noted in section 6.D.2.a above.

MJ and NBJ checklists are completed consistently and include actions taken to correct the identified issues and submission of work orders. However, the in order for the provision to move to substantial compliance the cleaning and repairs in the MJ Kitchen identified in the Weekly Inspection Checklists must be completed timely. It is not the Expert’s expectation that all pending actions be completed. Refer to section 6.B.C., for problematic and identified cleaning conditions.

To reach substantial compliance with provision 6.D.2. of the *Murray v. Santa Barbara County* Remedial Plan, the County must:

- Ensure actions are taken to correct the cleaning and repairs at the MJ Kitchen identified in the Weekly Inspection Checklists. Refer to section 6.B.1.c., for identified problematic cleaning conditions.
- Perform weekly inspections of kitchen operations.
- Provide proof of practice documents to the Expert.

6.D.3. Food Service Policies and Procedures

6.D.3. The County shall develop and implement policies and procedures for food service and kitchen operation as required in Section 1246 of California Code of Regulations Title 15. The policy shall include provisions for tool control, roles and responsibilities of jail staff and the food service Contractor, employee and prisoner-worker training in food safety, and temperature monitoring. The policy shall provide that prisoner-workers are medically screened prior to being assigned to work in the kitchen.

Compliance Rating: Substantial Compliance

Prior Compliance Rating: Substantial Compliance

The Expert recognizes that the County developed and implemented policies and procedures for food service and kitchen operations as required in Section 1246 of the California Code of Regulations Title 15. However, discontinuation of monitoring for this provision is not recommended as the County needs to provide the Expert with the names and hire dates of the incarcerated persons hired during the rating period and the date including proof-of-practice that all Food Service workers assigned to the kitchen, were medically screened.

County Response:

Completed. The Environmental Health and Safety Expert found the County in substantial compliance with this provision.

Analysis/Observations:

6.D.3.a Does SBCJ develop and implement policies and procedures for food services and kitchen operations as required in Section 1246 of California Code of Regulations Title 15?

The County produced the Santa Barbara County Sheriff's Office Custody Operations – Policy and Procedures Manual 384 Food Service. The policy has listed in the section titled “Related Orders,” Title 15 § 1246. *California Code of Regulations (CCR), Title 15, § 1246 states, "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."*

The Santa Barbara County Sheriff's Office Custody Operations – Policy and Procedures Manual 384 Food Service states in part, “The purpose of this policy is to provide guidelines for the safe preparation and distribution of staff and incarcerated person meals.” The policy includes policies and procedures for the operation of the food services at SBCJ as required by CCR, Title 15, section 1246.

Based on the Santa Barbara County Sheriff's Office Custody Operations – Policy and Procedures Manual 384 Food Service, SBCJ developed and implemented food services and kitchen operations policies and procedures, as required in section 1246 of CCR, Title 15.

6.D.3.b Does the food services and kitchen operations policy include provisions for;

- *tool control,*
- *roles and responsibilities of Jail staff,*
- *food services Contractor,*
- *employee and incarcerated person worker training in food safety,*
- *temperature monitoring.*

The County produced the Santa Barbara County Sheriff's Office Custody Operations – Policy and Procedures Manual 384 Food Service. The policy includes sections for tool control, roles and responsibilities of jail staff, food services, Contractors, employees, and incarcerated person worker training in food safety and temperature monitoring.

6.D.3.c Does the policy provide that incarcerated person workers are medically screened prior to being assigned to work in the kitchen?

The County produced the Santa Barbara County Sheriff's Office Custody Operations – Policy and Procedures Manual 384 Food Service. The policy states in part, “Incarcerated person workers assigned to work in the kitchen or assigned the responsibility of food handling/delivery shall be medically cleared prior to working in that capacity. Classification staff shall refer all prospective kitchen/food workers to the contracted healthcare provider for medical clearance prior to assigning them. Documentation of medical clearance will be retained in the incarcerated persons jail medical file.”

M.J.

The County produced 37 emails transmitted during the rating period between Classification staff and WellPath. The emails reflect numerous incarcerated person kitchen worker's medical clearance status.

NBJ

The County produced eight (8) emails transmitted during the rating period between Classification staff and WellPath. The emails reflect the medical clearance status of numerous incarcerated person kitchen workers.

As noted in previous compliance reviews, for the Expert to determine if the County is in compliance with this provision, the County will need to produce a roster of all Food Service workers assigned to the kitchen during the rating period, which includes their date of assignment and the date of the medical screening.

To maintain substantial compliance with provision 6.D.3. of the *Murray v. Santa Barbara County* Remedial Plan, the County must:

- Provide rosters of incarcerated workers assigned to work in the kitchen during the rating period, which include the date of assignment and the date of medical clearance.
- Provide proof of practice documentation to the Expert.

6.D.4. Training for Incarcerated Person Kitchen Workers

6.D.4. The County shall provide prisoner-workers with training and education regarding kitchen operations.

Compliance Rating: Partial Compliance

Prior Compliance Rating: Substantial Compliance

During the on-site review, the County notified the Expert that Santa Barbara City College was no longer providing "ServSafe California Food Handler Assessment" training to SBCJ kitchen workers. The County is in the process of creating a lesson plan to provide incarcerated person kitchen workers with training and education regarding SBCJ kitchen operations. The County will need to create a lesson plan and provide incarcerated workers with training and education regarding kitchen operations to obtain substantial compliance.

County Response:

Completed. The Environmental Health and Safety Expert found the County in substantial compliance with this provision.

Analysis/Observations:

The County produced the Santa Barbara County Sheriff's Office Custody Operations – Policy and Procedures Manual 384 Food Service. The policy states in part, "All incarcerated persons assigned to work in the kitchen are required to complete ServSafe training prior to working in the kitchen. This training is offered at both facilities through Incarcerated Person Services or the contracted food services vendor. Once completed, the incarcerated person receives their ServSafe food handlers' card."

MJ and NBJ

Incarcerated persons assigned to work in the main kitchen have been required to attend and complete a course titled "ServSafe California Food Handler Assessment" provided by Santa Barbara City College. Participants are provided a ServSafe California Food Handler Guide Workbook. The course syllabus reflects that the course contents consist of the following:

- Personal Hygiene
- The Importance of Sanitization and Pest Control
- Identify Proper Serving Practices, Preventing Cross Contamination, Time/Temperature Control
- Cleaning and Sanitizing

The course is two (2) hours per day, provided two (2) days per week, for a total of eight (8) weeks. Upon completing the training, participants take a written test. Upon passing the written test, participants are provided a certificate of achievement from the ServSafe National Restaurant Association. The County reported that in cases an incarcerated person fails the test, they continue to work in the kitchen but are assigned to a non-food handling position until they can remediate the class and retake the test. The County reported the class is also taught in Spanish.

MJ

The County provided a kitchen worker list containing the names of twenty-three incarcerated persons assigned to the MJ Kitchen. The start dates for the listed kitchen workers ranged from October 6, 2024, through February 7, 2025.

The County also produced twenty-eight ServSafe Certificates of Achievement for incarcerated persons who have completed the "ServSafe California Food Handler Assessment" training.

The Expert cross-referenced the kitchen worker names with the certificates of achievements provided. The Expert identified seven (7) of the twenty-three incarcerated persons who completed the ServSafe training and received certificates of completion (30%).

During the on-site review, the Expert interviewed two (2) incarcerated kitchen workers. Both incarcerated workers stated they attended kitchen operations training and had ServSafe California Food Handler Assessment certificates.

NBJ

The County provided a kitchen worker list containing the names of thirteen incarcerated persons assigned to NBJ Kitchen. The start dates for the listed workers ranged from October 28, 2024, through February 24, 2025.

The County also produced thirty-eight ServSafe Certificates of Achievement for incarcerated persons who have completed the "ServSafe California Food Handler Assessment" training.

The Expert cross-referenced the kitchen worker names with the certificates of achievements provided. The Expert identified seven (7) of the thirteen incarcerated persons who completed the ServSafe training and received certificates of completion (54%).

During the on-site review, the Expert interviewed two (2) incarcerated kitchen workers. Both incarcerated workers stated they attended kitchen operations training. However, the Expert located one (1) certificate indicating only one (1) incarcerated person attended the ServSafe California Food Handler Assessment training.

During the tour, the Expert was notified that the Santa Barbara City College instructor who provides the "ServSafe California Food Handler Assessment" training had recently retired, and the Santa Barbara City College would no longer be providing this training. The Expert was informed that the County Food Services Supervisor was in the process of developing a new lesson plan specific to SBCJ kitchen operations to comply with this requirement.

The Expert recommends that the County complete a lesson plan which provides training and education regarding kitchen operations for MJ and NBJ. Once a lesson plan is completed and approved, the Expert recommends that the training be provided to all assigned kitchen workers prior to assignment of duties and responsibilities.

To reach substantial compliance with provision 6.D.4. of the *Murray v. Santa Barbara County* Remedial Plan, the County must:

- Create a lesson plan/training and education regarding kitchen operations.
- Provide incarcerated workers with training and education regarding kitchen operations.
- Provide proof of practice documentation to the Expert.

6.D.5. Monitoring of Food Temperature

6.D.5. The County shall conduct periodic temperature monitoring of food and take steps to ensure that food prepared as hot is served hot to the greatest extent practicable.

Serving of Hot Food that Is Prepared Hot. No later than February 1, 2024, Defendants will ensure full implementation Section VI.D.5 of the Remedial Plan, such that "food prepared as hot is served hot to the greatest extent practicable." Remedial measures will include utilization of warming carts and equipment to keep food warm during

transport to the housing units and modifications to serving procedures at Main Jail, as consistent with recommendations of the Remedial Plan Expert. (Sept. 2022 Envt of Care Monitoring Report at 38-39)

Compliance Rating: Substantial Compliance

Prior Compliance Rating: Substantial Compliance

The County remains in substantial compliance with this provision; however, discontinuation of monitoring is not recommended as the County will need to demonstrate that food prepared as hot is served hot to the greatest extent practicable. The Expert recommends that the MJ Meal Temperature Tracker logs be completed weekly to verify if food traying times and tray serving times are improved and adequate, and food traying temperature and tray serving temperatures are improved and adequate. The Expert notes other jurisdictions (CDCR) have been required to conduct daily food temperature checks (every meal).

County Response:

Completed. Per the Environmental Health and Safety Expert's recommendation, the County purchased and began utilizing electric food warming carts to ensure food is kept warm and meets the required serving temperature for the Northwest and IRC modules. Current temperature checks conducted by the Food Services Manager illustrate serving temperatures that are within acceptable serving ranges throughout both facilities. The County also updated the Custody Operations Food Service Policy (384) to require temperature monitoring to occur at least once a month at each facility.

Analysis/Observations:

6.D.5.a. Does the SBCJ conduct periodic temperature monitoring of food?

The County produced the Santa Barbara County Sheriff's Office Custody Operations – Policy and Procedures Manual 384 Food Service. The policy states in part, "Staff cooks will monitor and record temperatures of food prepared hot during the plating process. Food temperature logs shall be maintained in each kitchen. The Food Services Manager shall also ensure that temperatures of food served hot are checked at least once per month in each facility at the time of serving/delivery to each housing unit and shall record these temperatures to ensure that food prepared hot is served as hot to the greatest extent possible. If significant deviations in temperature occur, the Food Services Manager shall meet with the Operations Lieutenants to remedy the problem."

MJ

During the previous compliance review, the County reported MJ kitchen staff made modifications to the time dinner is cooked, removed from the food warmers, trayed, and sent to each housing module, with the housing modules furthest from the kitchen being served first. MJ recognized through regular food temperature checks, there are two housing modules (Northwest and IRC), which, due to their location being farthest

from the kitchen, the food served to these modules does not meet the safe food temperature requirements. The MJ has since purchased and begun using two new electric food warming carts to ensure food is kept warm and meets the required serving temperature for these two housing modules.

The County produced a “Hot Meal Temperature Tracker” that includes food temperature checks for the following dates:

Date	Location	Time Trayed	Traying Temp.	Time Served	Serving Temp.
8/14/2024	IRC	1742	162.1	1755	141.1
8/29/2024	East	1755	153.1	1801	142
9/12/2024	IRC	1747	162.1	1757	148.1
9/27/2024	West	1753	157.1	1801	147.2
10/15/2024	IRC	1739	172.4	1750	165.01
10/29/2024	NW	1742	164.2	1754	148.2
11/5/2024	IRC	1740	158.1	1752	142.3
11/22/2024	West	1743	161.2	1757	150.1
12/2/2024	NW	1744	152.7	1749	138.9
12/30/2024	IRC	1735	143.2	1802	108.7
1/8/2025	IRC	1746	152.6	1751	144.1
1/15/2025	IRC	1803	167.3	1809	146.01
2/5/2025	East	1752	157.2	1805	151.3
2/26/2025	NW	1747	159.1	1810	141.3

The longest “trayed time” to “serving time” recorded was from 1735 to 1802 hours, or twenty-seven minutes, on December 30, 2024.

The largest temperature loss difference from “traying temperature” to “serving temperature” was 143.2 degrees to 108.7 degrees, a 34.5-degree loss on December 30, 2024.

During the on-site review, the Expert observed the kitchen staff conduct the temperature checks of the dinner meal to determine if the food prepared as hot is served hot to the greatest extent practicable. The meal consisted of beans, a meat patty, rice, and green beans. At the time of traying, the temperature of the beans was 140 degrees, the temperature of the meat patty was 130 degrees, the temperature of the rice was 129 degrees, and the temperature of the green beans was 148 degrees. Kitchen staff commenced serving trays and loading food carts at approximately 1745 hours. Once food carts were loaded, they were rolled to the designated housing units by custody staff. The Expert proceeded to the housing unit to monitor tray distribution and serving temperature. At approximately 1840 hours, the Expert observed a food cart in the West housing unit without the sliding doors. The food cart sliding doors are installed to keep food trays hot while they are transported from the kitchen to the housing units. At approximately 1900 hours, staff began transferring the food trays from the cart with missing sliding doors into another food cart, which was going to be taken to distribute within the West housing units. The Expert selected a random tray for temperature checks and noted that the beans were at 105 degrees, and the green beans were at 121 degrees. It was unclear why

staff needed to transfer the food trays from one food cart to another identical food cart for distribution. The Expert noted it took approximately twenty minutes for staff to transfer the food trays from one cart to another cart, which was going to be taken to the housing unit for distribution.



NBJ

NBJ produced a "Meal Temperature Tracker," which includes food temperature checks for the following dates:

Date	Location	Time Trayed	Traying Temp.	Time Served	Serving Temp.
8/15/2024	C Mod	1538	161	1541	158
8/22/2024	D Mod	1536	151.8	1539	140.6
9/11/2024	B Unit	1533	157	1536	149.4
9/28/2024	D Mod	1545	149.2	1549	143.4
10/16/2024	G Unit	1540	165.5	1543	155.9
10/28/2024	J & K	1544	162.1	1548	151.4
11/4/2024	B Unit	1533	145.5	1536	133.2
11/21/2024	D Unit	1541	157.2	1544	152.3
12/3/2024	H Unit	1546	142.3	1550	137.4
12/17/2024	H Unit	1604	165.1	1607	151.3
1/9/2025	D Unit	1539	164.3	1542	155.1
1/14/2025	C Unit	1522	154.1	1526	152.1
2/4/2025	J & K	1620	154.7	1631	138.2
2/27/2025	F & G	1613	152.2	1624	139.4

The longest "trayed time" to "serving time" was eleven minutes on February 4 and 27, 2025.

The largest temperature loss difference from “traying temperature” to “serving temperature” was from 165.1 degrees to 151.3 degrees, a 13.8-degree loss on December 17, 2024.

6.D.5.b *Does the SBCJ take steps to ensure that food prepared as hot is served hot to the greatest extent practicable?*

MJ

During the previous compliance review, the County reported that MJ kitchen staff made modifications to the time dinner is cooked, removed from the food warmers, trayed, and sent to each housing module, with the housing modules furthest from the kitchen being served first. MJ recognized through regular food temperature checks, there are two housing modules (Northwest and IRC), which, due to their location being farthest from the kitchen, the food served to these modules does not meet the safe food temperature requirements. The MJ has since purchased and begun using two new electric food warming carts to ensure food is kept warm and meets the required serving temperature for these two housing modules.

During the on-site review, the Expert interviewed twenty-nine incarcerated persons from various housing units and modules. All incarcerated persons stated that food temperatures varied from day to day. Nine (9) incarcerated persons stated that sometimes the food is served hot to warm, while twenty incarcerated persons stated that most times the food is served warm to cold. Four (4) incarcerated persons stated they receive Kosher diets, and the food is served mostly warm to cold.

One (1) incarcerated person stated that the Kosher trays are still being placed on top of the cart. One (1) incarcerated person stated he receives a medical diet, and his food is mostly cold and is always on top of the food cart. This issue was raised during previous visits and needs to be addressed: all meals (including for special diets) should be served at appropriate temperatures.

Based on the Meal Temperature Tracking logs that were provided and incarcerated persons' interviews, the Expert believes MJ has made improvements serving prepared hot food as hot to the greatest extent possible. The Expert recommends MJ conduct weekly Meal Temperature Tracker checks and encourages all housing units to distribute hot trays as soon as they are received in each housing unit. If the food tray distribution time is decreased, the food temperatures would be served at a hotter temperature.

During the on-site review, the Expert interviewed the Food Services Supervisor (FSS). The FSS stated that electric food warming carts are used to deliver food trays to the Northwest and IRC housing units, which are farthest from the kitchen. The FSS stated food temperature checks are taken and recorded daily to ensure food is prepared hot during the traying process, and food temperatures are also taken periodically (two times per month) to ensure prepared hot food is served hot to the greatest extent practicable. The Expert further noted that Kosher food trays were being prepared and placed inside the food carts.

Additionally, during the rating period, two (2) Inmate Grievance Forms were submitted by incarcerated persons indicating they received cold dinner trays.

NBJ

NBJ produced "Meal Temperature Tracker" logs, which include food temperature checks and tray serving times. Based on the information provided, the time food is trayed and trays are served averaged 4.4 minutes on the dates tracked. Food temperatures recorded from the time food is trayed and the time food trays are served averaged a temperature drop of 9.5 degrees on the dates tracked.

During the on-site review, the Expert interviewed six (6) incarcerated persons from various housing units and modules. Three (3) incarcerated persons stated food is served hot; two (2) incarcerated persons stated food is served hot to warm; and one (1) incarcerated person stated food is served warm to cold.

To continue achieving substantial compliance with provision 6.D.5. of the *Murray v. Santa Barbara County* Remedial Plan, the County must:

- Conduct periodic temperature monitoring of food to ensure that food (including special dietary meals) prepared hot is served hot to the greatest extent practicable. Random temperature checks should be completed at a minimum of weekly.
- Ensure food trays are distributed to incarcerated persons as soon as food carts arrive in the housing unit.
- Provide proof of practice documentation to the Expert.

6.E. Work Order System and Preventative Maintenance

6.E.1. Staff Training for Submitting Work Orders

6.E.1. The County shall train staff on the process of submitting work orders.

Compliance Rating: Discontinuation of Monitoring

Prior Compliance Rating: Substantial Compliance

Pursuant to Paragraph 52 of the Remedial Plan, the County has been in substantial compliance with this provision and has maintained such substantial compliance for a period of at least six (6) months. Based on this, the parties conferred, and Class Counsel has no objection to the County's request for discontinuation of monitoring. The provision will therefore be subject to future monitoring only if it is determined that the County is no longer in substantial compliance, consistent with the procedure set forth in Paragraph 53.

6.E.2. Work Order Reporting System for Preventative Maintenance and Repairs

6.E.2. The County shall utilize the work order reporting system to schedule preventative maintenance and repairs. The system shall provide for any cleaning or maintenance requiring an established schedule, including, at a minimum

- a) Regular maintenance of plumbing;
- b) Quarterly Cleaning of fans and ventilation grills;
- c) Quarterly replacement of ventilation filters;
- d) Regular external contractor monitoring of negative pressure cells and gauges;
- e) Monthly fire extinguisher inspection; and
- f) Monthly fire and life safety inspections.

Compliance Rating: Partial Compliance

Prior Compliance Rating: Partial Compliance

County Response:

Completed. The County utilizes the work order reporting system to schedule preventative maintenance as required by this provision.

Analysis/Observations:

6.E.2.a. *Does the SBCJ utilize the work order reporting system to schedule preventive maintenance and repairs?*

The County produced the Santa Barbara County Sheriff's Office Custody Operations – Policy and Procedures Manual 102 Inspections and Operations Review. The policy states, “In order to maintain sanitary conditions within the jail, daily cleaning schedules and routine maintenance procedures have been established with periodic inspections to ensure that sanitary conditions are maintained throughout the jail at all times.”

MJ

MJ produced the following documents:

- (a) Preventive Maintenance Work Orders for regular maintenance of plumbing. Boiler/HVAC hot water boiler for August 2024 provided. Additional maintenance of plumbing Work Orders were not available.
- (b) Preventive Maintenance Work Orders for quarterly cleaning of fans and ventilation. Provided 4th Quarter 2024 and 1st Quarter 2025 Wall Fan maintenance. Ventilation System Work Orders were not available.
- (c) Preventive Maintenance Work Orders for quarterly replacement of ventilation filters. Provided 4th Quarter 2024 and 1st Quarter 2025 replacement of ventilation filters.
- (d) Preventive Maintenance Work Orders for regular external monitoring of negative pressure cells and gauges. Work Orders for 8/2024 and 2/2025 provided (Completed 10/7/2024 and 4/8/2025).
- (e) Preventive Maintenance Work Orders for monthly fire extinguisher inspections. Provided all months during the rating period.
- (f) Preventive Maintenance Work Orders for monthly fire and life safety inspections. Provided January and February 2025. Unable to obtain the 2024 rating period (August through December).

MJ utilizes the Work Order Reporting System to schedule preventive maintenance and work order repairs for most requirements. However, as noted above, the following Preventive Maintenance Work Orders were not available:

- (a) Additional maintenance of plumbing work orders
- (b) Quarterly ventilation system work orders
- (f) Monthly fire and life safety inspections

NBJ

NBJ produced the following documents:

- NBJ Closed Work Order Reports from August 2024 through February 2025. Within the Closed Work Order Reports, the following work orders were identified.
 - (a) Regular maintenance of plumbing is completed for all months during the rating period.
 - (b) Quarterly cleaning of fans and ventilation grills. Per NBJ staff, ventilation grill cleaning is completed when "Quarterly Exhaust Fans" work orders are released.
 - (c) Quarterly replacement of ventilation filters. Per NBJ staff, replacement of ventilation filters is completed under "Quarterly HVAC Contr"ls" work orders.
 - (d) Regular external monitoring of negative pressure cells and gauges is completed biannually, per NBJ Closed Work Order Reports; completed dates are December 2024 and June 2025.
 - (e) Monthly fire extinguisher inspections are not included in the NBJ Closed Work Order List reports.
 - (f) Monthly fire and life safety inspections are not included in the NBJ Closed Work Order List reports.

The NBJ utilizes the Work Order Reporting System to schedule preventive maintenance and work order repairs for most requirements. However, as noted above, the following Preventive Maintenance Work Orders were not all available:

- (e) Monthly fire extinguisher inspections
- (f) Monthly fire and life safety inspections

The Expert recommends that the County incorporate all scheduled maintenance, cleaning, and inspections within the MJ and NBJ Work Order Reporting System.

6.E.2.b Does the work order reporting system provide for any cleaning or maintenance requiring an established schedule, including, at a minimum for;
a. Regular maintenance of plumbing.

MJ

MJ provided a Boiler/HVAC hot water boiler work order for August 2024. However, additional work orders should be produced for cleaning and/or preventive maintenance of plumbing (water and sewage).

During the on-site review, the Expert was informed that MJ is attempting to identify and correct a hot water shortage in various housing units. The General Services Supervisor stated that a local company was scheduled to conduct a cleaning and inspection of the hot water boiler tanks. The General Services Supervisor was awaiting the results of the inspection to determine if it would identify and correct the problem. Post tour, the County produced an Equipment Repair from McCall & MM that reflects repairs/cleaning of coils was conducted on Tank #2 on 7/22/25. The County also produced Daily AM/PM Tank Temp log for August 2025 Tank #2 that reflects a gain of 35 to 40 degrees since the coil was cleaned.

During the on-site review, numerous incarcerated persons in the East Housing Units reported problems with no hot water. Some incarcerated persons in the South Dorm stated hot water was only available in the early morning or after 10:00 p.m. Some incarcerated persons stated that the water has a pungent odor and foul taste.

NBJ

The Work Order Reporting System provides for scheduled cleaning and maintenance of various plumbing items and locations such as water management controls, mixing valve and circulation pump, eye washing/shower stations, clean sewer hooks, and other plumbing maintenance items.

During the rating period, NBJ received four (4) Inmate Grievance Forms indicating they did not have hot water, or the hot water would run out and not last through the day, or sometimes the water is cold/warm.

NBJ also received seven (7) Inmate Grievance Forms indicating cells/housing units were cold and the heating was not working.

b. Quarterly cleaning of fans and ventilation grills.

MJ

The Work Order Reporting System provides for scheduled cleaning and maintenance of fans; however, the scheduled cleaning and maintenance of ventilation grills is not included.

As previously noted in section 6.B.1.g., the MJ ventilation grills (intake and exhaust) require more frequent cleaning. During incarcerated person interviews, the Expert received numerous complaints of ventilation grills not being cleaned, being extremely dusty, and emitting odors.

During the rating period, MJ received one (1) Inmate Grievance Form indicating vents were blowing dust and requested that vents/ducts be cleaned.

NBJ

The Work Order Reporting System provides for scheduled cleaning and maintenance of fans and ventilation.

- c. Quarterly replacement of ventilation filters.

MJ

Documents provided by MJ indicate that HVAC Preventive Maintenance and replacement of air filters are completed quarterly.

NBJ

Documents provided by NBJ indicate HVAC Controls are completed quarterly. Per the ECM, NBJ completes ventilation filter replacements during the HVAC Controls work order assignment.

- d. Regular external contractor monitoring of negative pressure cells and gauges.

MJ

The Work Order Reporting System provides for scheduled external contractor monitoring of negative pressure cells and gauges. Per the documents provided, the external contractor monitoring of negative pressure cells is completed bi-annually.

NBJ

The Work Order Reporting System provides for scheduled external contractor monitoring of negative pressure cells and gauges. Per the documents provided, the external control monitoring of negative pressure cells and gauges is completed biannually.

- e. Monthly fire extinguisher inspections.

MJ

The Work Order Reporting System provides for scheduled monthly fire extinguisher inspections. MJ conducts and documents monthly inspections of fire extinguishers.

NBJ

Although not included in the preventative maintenance schedule, NBJ conducts monthly inspections and documentation of fire extinguishers.

- f. Monthly fire and life safety inspections.

MJ

The Work Order Reporting System provides for scheduled monthly fire and life safety drills.

NBJ

Although not included in the preventative maintenance schedule, the NBJ conducts fire and life safety drills.

The Expert recommends that MJ and NBJ implement the Work Order Reporting System to schedule cleaning, maintenance, and inspections as required by the *Murray v. Santa Barbara County* Remedial Plan.

To reach substantial compliance with provision 6.E.2. of the *Murray v. Santa Barbara County* Remedial Plan, the County must:

- Utilize the work order reporting system to schedule preventive maintenance and repairs for:
 - a) Regular maintenance and plumbing.
 - b) Quarterly cleaning of fans and ventilation grills.
 - c) Quarterly replacement of ventilation filters.
 - d) Regular external contractor monitoring of negative pressure cells and gauges.
 - e) Monthly fire extinguisher inspections
 - f) Monthly fire and life safety inspections
- Provide proof of practice documentation to the Expert.

6.E.3. Development and Implementation of Environmental Inspection policy

6.E.3. The County shall develop and implement an environmental inspection policy with procedures that include an assessment of maintenance issues for every housing unit, including for plumbing, electrical, ventilation, painting, cleanliness, lighting, and storage of personal belongings.

Compliance Rating: Substantial Compliance

Prior Compliance Rating: Substantial Compliance

The Expert recognizes that the County developed and implemented an environmental inspection policy with procedures that include an assessment of maintenance issues for every housing unit, including plumbing, electrical, ventilation, painting, cleanliness, lighting, and storage of personal belongings. However, discontinuation of monitoring is not recommended due to specific findings of concern and unimplemented recommendations set forth in this report, the Expert will continue to monitor this provision and evaluate the cleanliness and storage of personal belongings.

County Response:

Completed. The Environmental Health and Safety Expert found the County in substantial compliance with this provision.

Analysis/Observations:

6.E.3.a Does SBCJ develop and implement an environmental inspection policy with procedures that include an assessment of maintenance issues for every housing unit?

The Custody Operations – Policy and Procedures Manual Section 102, Inspection and Operations Review states in part, “In order to maintain sanitary conditions within the jail, daily cleaning schedules and routine maintenance procedures have been established with periodic inspections to ensure that sanitary conditions are maintained throughout the jail at all times.” The policy also states in part, “Cleaning schedules have been set up as to not conflict with other jail activities or mass movements of incarcerated persons. Any unsafe condition or maintenance requirement will be reported to the Lead Supervisor and a work order completed and submitted to General Services. An Environment of Care Monitor (ECM) has been assigned to the Sheriff’s Main Jail Maintenance Staff who is responsible for ensuring adequate environmental health and safety conditions in the jail facilities, including as set forth in the remedial plan in the *Murray v. County of Santa Barbara* case. The job duties are enumerated in a separate document which is maintained by the ECM’s supervisor and division Commander. This ECM will be responsible for conducting inspections relative to cleanliness and sanitation and submit written reports with corrective action plans. The ECM’s duties include an assessment of every housing unit, including for plumbing, electrical, ventilation, painting, cleanliness, lighting, and storage of personal belongings and submit written bi-monthly reviews with corrective action plans.”

6.E.3.b Does the environmental inspection policy contain procedures for every housing unit that include an assessment of maintenance issues for;

- *Plumbing,*
- *Electrical,*
- *Ventilation,*
- *Painting,*
- *Cleanliness,*
- *Lighting,*
- *Storage of personal belongings.*

The Custody Operations – Policy and Procedures Manual Section 102, Inspection and Operations Review states in part, “The ECM’s duties include an assessment of every housing unit, including for plumbing, electrical, ventilation, painting, cleanliness, lighting, and storage of personal belongings and submit written bi-monthly reviews with corrective action plans.”

In previous reports, the Expert recommended SBCJ staff review whether the issued property containers could adequately store the personal and County property issued to incarcerated persons (e.g., clothing, footwear, documents, etc.), including commissary items. Such a step is important and even essential to facilitating

adequate cleanliness and sanitation in the housing units, in particular, dorm units that are quite crowded. The County has not provided any information as to progress in this area.

The Expert again recommends that the County consider shifting to the use of an adequately sized storage container that will allow incarcerated persons to store the County and personal property they are allowed to retain. This change requires minimal financial or staff resources and would be a cost-effective measure towards the successful implementation of the Remedial Plan provisions on cleanliness and sanitation.

The Expert will re-evaluate this issue in future on-site reviews.

6.F. Chemical Control and Biohazardous Materials

6.F.1. Development and Implementation of Chemical Control Policies and Procedures

6.F.1. The County shall develop and implement chemical control policies and procedures for safe storage, dilution, and distribution of chemicals used at the jail.

Compliance Rating: Discontinuation of Monitoring

Prior Compliance Rating: Substantial Compliance

Pursuant to Paragraph 52 of the Remedial Plan, the County has been in Substantial Compliance with this provision and has maintained such Substantial Compliance for a period of at least six (6) months. Based on this, the parties conferred, and Class Counsel has no objection to the County's request for discontinuation of monitoring. The provision will therefore be subject to future monitoring only if it is determined that the County is no longer in substantial compliance, consistent with the procedure set forth in Paragraph 53.

County Response:

Completed. The Custody and Operations Policy Bloodborne Pathogens and Biohazard Control Policy (228) includes language as required by this provision.

Analysis/Observations:

The Custody Operations – Policy and Procedures Manual Section 228, Chemical Safety, with a revision date of 05/2025, includes policies and procedures for chemical control, safe storage, dilution, and distribution of chemicals used at the jail. The policy includes the following sections:

- Definitions
- Inventories
- Label and Labeling
- Safety Data Sheets
- Location of Safety Data Sheets
- Purchasing of Chemicals

- Storage of Purchased Chemicals
- Chemical Requests
- Chemical Waste Disposal
- Protection From Chemical Hazards
- Chemical Exposure & First Aid
- Employee and Worker Training

The Expert reviewed a copy of Custody Operations – Policy and Procedures Manual 228, Chemical Safety, which contained a revision date of 05/2025, and contains revisions and recommendations provided by the Expert.

The Expert recommends that the County finalize and implement the Custody Operations – Policy and Procedures Manual 228, Chemical Safety.

6.F.2. Development and Implementation of Chemical Safety Training for Staff and Incarcerated Persons

6.F.2. The County shall develop and implement a chemical safety training for all staff and prisoners assigned the responsibility of cleaning. The County or Cou'ty's contract provider shall maintain documentation that demonstrates evidence of training for all staff and prisoner-workers involved in cleanup.

Compliance Rating: Partial Compliance

Prior Compliance Rating: Partial Compliance

County Response:

Completed. The County provides all inmate workers assigned to work within the Laundry Department with personal protective equipment. The Laundry Coordinator instructs these workers as to how to recognize and handle possible biohazardous and bloodborne contaminated laundry and the proper use of personal protective equipment. The County has provided training for all inmate workers, Custody Deputies, Sheriff Service Technicians (SSTs), and Utility Workers.

Analysis/Observations:

6.F.2.a Did SBCJ develop and implement a chemical safety training for all staff and incarcerated persons assigned the responsibility of cleaning?

The County produced the Santa Barbara County Sheriff's Office Chemical Safety Program video slide presentation. The training outlines the basic chemical safety requirements under CAL-OSHA. The County also produced training rosters for staff and incarcerated persons assigned to the responsibilities of cleaning, who attended the training.

6.F.2.b Does the SBCJ or the SBCJ contract provider maintain documentation that demonstrates evidence of training for all staff and incarcerated person workers involved in cleanup?

MJ

The MJ produced the Santa Barbara County Sheriff's Custodial Facilities Chemical Safety PowerPoint Training Rosters for staff and incarcerated persons who have attended training.

The MJ also produced a housing roster of incarcerated workers who were assigned to work in the Laundry Department during the rating period. The roster contained the name, number, housing, and date the incarcerated workers were assigned to the East-23 Housing Unit. Based on the information provided by MJ, each incarcerated person is assigned to the East-23 housing unit on the same date they are assigned to work in the Laundry Department or Northwest Dock. The housing roster provided indicates seventy-one incarcerated persons were assigned to the Laundry Department and Northwest Dock during the rating period. The Expert randomly selected thirty-four (34) incarcerated workers from the East-23 housing unit roster and compared the selected names with the Chemical Safety PowerPoint Training Rosters. The Expert was able to locate training records for thirty-two (32) incarcerated persons assigned to the Laundry Department or Northwest Dock. Eight (8) of the thirty-two incarcerated workers received training seven (7) or more days after assignment.

The MJ also provided housing rosters for incarcerated workers who were assigned to work in the kitchen during the rating period. The rosters contain the name, number, housing, and date the incarcerated workers were assigned. The County also provided copies of the Santa Barbara County Sheriff's Custodial Facilities Kitchen Department Chemical Safety Training Rosters. The Expert randomly selected twenty names from the kitchen workers' list and compared the selected names with the Chemical Safety Training Rosters. The Expert located Chemical Safety Training Rosters for five (5) kitchen workers. Four (4) of the five (5) incarcerated workers received Chemical Safety training seven (7) or more days after assignment.

The Expert noted that in many cases, MJ is providing Chemical Safety training to incarcerated workers several days or weeks after assignment to the Laundry Department, Northwest Dock, and/or Kitchen. The incarcerated workers may be utilizing chemicals to conduct cleaning duties without having attended Chemical Safety training.

MJ provided copies of a "CorrectionsOne Acronym" report with the names of fifteen Sheriff's Custody Deputies who were employed during the rating period. The report documents that all fifteen staff members received Chemical Safety Training and Bloodborne Pathogens Training.

The Expert interviewed one (1) staff member assigned as a Utility Worker, and one (1) staff member assigned as an SST. Both staff conduct cleanup and or supervise incarcerated persons assigned to perform cleanup. The Expert reviewed the training records produced by the County and noted that both staff attended Chemical Safety training.

The Expert interviewed three (3) incarcerated workers assigned to the Northwest Dock cleaning crew, two (2) incarcerated workers assigned to the Laundry Department who conduct cleanup, and two (2) incarcerated persons assigned to the kitchen who conduct cleanup. All incarcerated persons stated they have received Chemical Safety training. The Expert reviewed the training records provided by the MJ and noted that one (1) incarcerated person's training records were not found.

The Expert recommends incarcerated workers receive Chemical Safety training on the date of assignment or provide documentation that verifies the training was provided before being assigned to perform cleanup duties.

NBJ

NBJ produced a "Chemical Safety Training Sign-In" sheet with names, signatures, and dates of training. Based on the information provided, NBJ provided Chemical Safety training to seven (7) incarcerated workers during the rating period; however, the document does not indicate the assignments for each incarcerated worker.

During the on-site review, NBJ provided a list of thirteen incarcerated workers assigned to the kitchen and copies of the "Santa Barbara County Sheriff's Office Incarcerated Persons Kitchen Workers "racker" forms, and Kitchen Department Chemical Safety Training Rosters. A review of the list of incarcerated workers assigned to the kitchen indicates twelve of the thirteen incarcerated workers attended Chemical Safety training.

A review of the Santa Barbara County Sheriff's Office Incarcerated Persons Kitchen Workers "Tracker" forms and Kitchen Department Chemical Safety Training Rosters indicates most incarcerated workers were not provided training upon assignment, and in many cases received Chemical Safety training months after assignment.

The Expert interviewed two (2) incarcerated persons assigned to the kitchen. The Expert reviewed the training records produced by the County and noted that both incarcerated persons attended the Chemical Safety training.

The Expert interviewed one (1) staff member assigned to the kitchen, one (1) staff member assigned as a Utility Worker, and one (1) staff member assigned to the Laundry Department. The Expert reviewed the training records and noted that all staff attended Chemical Safety training.

The Expert recommends that all staff and incarcerated persons assigned to cleaning be provided with Chemical Safety training, and the training is provided upon assignment prior to utilizing the chemicals used to conduct cleaning.

To reach substantial compliance with provision 6.F.2. of the *Murray v. Santa Barbara County* Remedial Plan, the County must:

- Ensure all incarcerated person workers and staff assigned to cleaning are provided chemical safety training. The training needs to be provided prior to assigned cleaning duties.

- Maintain a list of incarcerated person workers and staff assigned to cleaning during the rating period.
- Provide proof of practice documentation to the Expert.

6.F.3. Communicable Disease Policy

6.F.3. The County shall revise and ensure implementation of its Communicable Disease policy, including to ensure appropriate use and concentration of pyrethrum spray.

Compliance Rating: Discontinuation of Monitoring

Prior Compliance Rating: Substantial Compliance

Pursuant to Paragraph 52 of the Remedial Plan, the County has been in Substantial Compliance with this provision and has maintained such Substantial Compliance for a period of at least six (6) months. Based on this, the parties conferred, and Class Counsel has no objection to the County's request for discontinuation of monitoring. The provision will therefore be subject to future monitoring only if it is determined that the County is no longer in substantial compliance, consistent with the procedure set forth in Paragraph 53.

County Response:

Completed. The Environmental Health and Safety Expert found the County in substantial compliance with this provision.

Analysis/Observations:

The County produced Santa Barbara County Sheriff's Office Custody Operations Policy and Procedures Manual 244, Communicable Diseases. The policy states in part, "Any cell or location identified to be contaminated by a communicable disease and/or biohazardous material(s) shall be thoroughly cleaned and cleansed with Permethrin spray in a concentration of at least 1% (permethrin to water) and a maximum of 10% (permethrin to water). Staff and/or incarcerated person workers cleaning a cell or location shall be provided with appropriate protective equipment to include latex gloves, face shield, and/or eye protection. N95 mask and gown. Laundry workers will disinfect mattresses marked "infectious" with permethrin spray in accordance with Custody Policy 362."

In the previous compliance review, the County advised the Expert that the policy references the use of permethrin spray rather than pyrethrum spray, which the County reported is consistent with the Assessment of Environmental Health and Safety Operations Report and was the basis for this provision. Class Counsel did not oppose the use of permethrin spray. The County was unable to verify if there were incidents where permethrin spray was used during the rating period.

6.F.4. Development and Implementation of Policies and Procedures for Cleaning, Handling, Storing and Disposal of Biohazardous Materials

6.F.4. *The County shall develop and implement policies and procedures for cleaning, handling, storing, and disposing of biohazardous materials, including waste. The County shall ensure that Material Safety Data Sheets are accessible anywhere chemicals are stored, mixed, or diluted.*

Compliance Rating: Partial Compliance

Prior Compliance Rating: Partial Compliance

County Response:

Completed. The Environmental Health and Safety Expert found the County in substantial compliance with this provision.

Analysis/Observations:

6.F.4.a *Did SBCJ develop and implement policies and procedures for cleaning, handling, storage, and disposing of biohazardous materials, including waste?*

The County produced Santa Barbara County Sheriff's Office Custody Operations Policy and Procedures Manual 362, Incarcerated Persons Clothing and Personal Hygiene, revision dated 05/2025. The policy has not been finalized. The draft policy states, "Any clothing item, sandals or linen that has been contaminated with blood or other potentially infectious materials (semen, vaginal secretions, cerebrospinal fluid, synovial fluid, pleural fluid, peritoneal fluid, amniotic fluid, saliva in dental procedures, and any bodily fluid that is visibly contaminated with blood or any human tissue) shall be placed in a plastic red biohazard bag and deposited in biohazard storage located in the IRC Treatment Room closet within the Main Jail and in the soiled linen room near the medical clinic at the Northern Branch Jail. Only staff and/or inmate workers trained to clean biohazardous materials shall be utilized to clean areas that have been contaminated with biohazardous material."

As noted by the Expert, the policy addresses biohazard collections and removal of any clothing item; however, the policy does not address the collection and removal of non-clothing items such as incarcerated persons' personal property and/or other non-clothing County property.

Post tour the County produced revision to Santa Barbara County Sheriff's Office Custody Operations Policy and Procedures Manual 362, Incarcerated Persons Clothing and Personal Hygiene. The revisions state, "Any personal items (books, tablets, medical devices, etc.) that are found to be contaminated will be promptly exchanged by Custody Staff. Contaminated personal items will be properly disposed of following the guidelines listed above." The Expert recommends that the County, finalize, and implement the revised policy.

6.F.4.b *Does SBCJ ensure that Material Safety Data Sheets (MSDS) are accessible anywhere chemicals are stored, mixed, or diluted?*

Analysis/Observations:

MJ

The MJ reports that the locations where chemicals are stored, mixed, or diluted include:

- Northwest Dock Chemical Storage
- Northwest Dock
- Lobby Crew Cleaning Closet
- Laundry Dept.
- IRC Cleaning Closet
- Property Room

The MJ produced photos of the 24" x 36" OSHA Compliant Chemical Safety Training Posters. The County reported the posters are in the following locations:

- Laundry Department
- Nurses Offices
- Property Room
- Northwest Dock
- Lobby Crew Cleaning Closet
- MSF Office
- Kitchen Office

The MJ also produced photos of the location of the Material Safety Data Sheets books. The MJ reported the MSDS books are in the following areas:

- Central Treatment Room
- IRC Cleaning Closet
- Kitchen Office
- Laundry Department
- Lobby Crew Cleaning Closet
- MSF Office
- Northwest Dock
- Northwest Dock Storeroom
- Northwest Treatment
- Nurses Office
- Property Room

The MJ also produced photos of eyewash stations. The County reported that eyewash stations are in place in the following locations:

- Northwest Treatment Room
- Northwest Dock
- Laundry Department
- Central Treatment Room

During the on-site review, the Expert confirmed the Material Safety Data Sheets books were in these locations.

NBJ

The NBJ produced photos of the location of the Material Safety Data Sheets books. The NBJ reported that the Material Safety Data Sheets books are in the following areas:

- Intake
- Jail Administration
- A-Unit and A-Unit #2
- B-Unit and B-Unit #2
- C-Unit and C-Unit #2
- D-Unit and D-Unit #2
- E-Unit and E-Unit #2
- F-Unit and F-Unit #2
- G-Unit and G-Unit #2
- H-Unit and H-Unit #2
- J/K-Unit
- M-Unit
- Main Corridor by Central Control
- Maintenance
- Kitchen
- Transportation Corridor
- Lobby Closet
- M-Unit Soiled Linen Closet
- Janitor next to M-11

During the on-site review, the Expert confirmed various locations where Material Safety Data Sheets binders are located.

To reach substantial compliance with provision 6.F.4. of the *Murray v. Santa Barbara County* Remedial Plan, the County must:

- Update, finalize, and implement the revisions to the policy.
- Provide proof of practice documentation to the Expert.

6.F.5. Personal Protective Equipment for Staff and Incarcerated Person-Workers

6.F.5. The County shall ensure that staff and prisoner-workers responsible for cleaning biohazardous materials or areas suspected of being contaminated by pests (e.g., lice or scabies) are outfitted with protective equipment and receive appropriate supervision.

Compliance Rating: Substantial Compliance

Prior Compliance Rating: Partial Compliance

County Response:

Completed. The County ensures staff and inmate workers responsible for biohazardous clean-ups are outfitted with appropriate protective equipment and are provided appropriate supervision when conducting biohazardous clean-ups.

Analysis/Observations:

MJ

The Expert requested copies of documentation of when staff and incarcerated workers responsible for cleaning biohazardous materials or areas suspected of being contaminated by pests were provided and outfitted with protective equipment and supervised. The County produced seven (7) Property Office Recaps. The Recaps include the following biohazardous waste cleanup information:

- 8/18/2024 – An incarcerated worker used a suit, gloves, goggles, and cleaning solutions to clean up biohazards in the intake trailer.
- 8/22/2024 – Staff used gloves and cleaning solutions to clean up biohazards in SC-4.
- 9/23/2024 – Staff used gloves and cleaning solutions to clean up biohazards in H-6.
- 9/23/2024 – Staff used gloves, eye protection, and cleaning solutions to clean up biohazards in SC-2.
- 10/4/2024 – An incarcerated worker used a suit, gloves, goggles, and cleaning solutions to clean up biohazards in H-06.
- 10/17/2024 – An incarcerated worker used a suit, gloves, goggles, a face mask, and cleaning solutions to clean up biohazards in H-2.
- 1/5/2025 – Two incarcerated workers used goggles, masks, gloves, and cleaning solutions to clean up biohazards in H-2.
- 2/2/2025 – Staff used gloves and cleaning solutions to clean up biohazards in SC-2.

The Expert reviewed training records for staff and incarcerated workers identified on the housing unit Recap reports who were involved in biohazardous waste cleanups. The Expert identified four (4) incarcerated workers who were involved in biohazardous waste cleanups; however, three (3) received Personal Protective Equipment and Biohazardous/Bloodborne Pathogens training. One (1) incarcerated worker had no training documentation. Four (4) staff were involved with the biohazardous waste cleanups. All four (4) staff received Personal Protective Equipment and Biohazardous/Bloodborne Pathogens training.

The Expert interviewed two (2) incarcerated workers assigned to the Northwest Dock Workers and Lobby Crew. Both incarcerated workers were asked if they are provided with personal protective equipment when cleaning biohazardous materials or areas contaminated with pests. Both incarcerated workers stated they are always provided full personal protective equipment, which includes a gown, gloves, a face mask, and shoe covers when assigned to clean biohazard materials or areas and articles contaminated with pests. They also stated they are supervised by staff when conducting biohazardous material cleanup by a Deputy, Property Officer, or Utility Worker. A review of training records indicates that both incarcerated workers received Personal Protective Equipment and Biohazardous/Bloodborne Pathogens training.

The Expert interviewed two (2) staff members assigned as Utility Workers. Both staff members are assigned to clean biohazardous materials or areas suspected of being contaminated by pests, and/or supervise incarcerated workers assigned to clean biohazardous materials or contaminated areas. The staff members stated that when cleaning biohazardous materials, they wear or provide personal protective equipment, which consists of gloves, a suit/gown, goggles, a mask, and shoe covers. Both staff members stated they only utilize incarcerated workers who have received Personal Protective Equipment and Biohazardous/Bloodborne Pathogens training. A review of training records provided indicates both staff members received Personal Protective Equipment and Biohazardous/Bloodborne Pathogens training.

NBJ

The Expert requested copies of documentation where staff and incarcerated workers responsible for cleaning biohazardous materials or areas suspected of being contaminated by pests were provided and outfitted with protective equipment and supervised. However, no documents were produced, and information was provided that no biohazard cleanup occurred during the rating period.

The Expert interviewed one (1) staff member assigned as a Utility Worker. The staff member is assigned to clean and supervise incarcerated workers assigned to clean biohazardous materials or contaminated areas. The staff member stated that when cleaning biohazardous materials, they wear or provide personal protective equipment, which consists of gloves, a suit/gown, goggles, a mask, and shoe covers. Based on records previously provided, the staff member has attended Personal Protective Equipment and Biohazardous/Bloodborne Pathogens training.

As a result of time limitations, the Expert was unable to interview incarcerated persons assigned to the Lobby Cleaning Crew at NBJ. However, after the on-site review, information about the two Lobby Cleaning Crew incarcerated workers was provided. Documentation provided indicated that both incarcerated workers received Personal Protective Equipment and Biohazardous/Bloodborne Pathogens training.

NBJ has indicated that no biohazard cleanups occurred during the previous rating period (2023 – 2024) or during the current rating period (2024 – 2025). However, considering that a jail environment is highly susceptible to biohazardous events or contaminants such as blood, other bodily fluids, or chemical spillages, NBJ may be classifying such events as normal cleaning encounters. The Expert recommends the NBJ review and research if such events are being incorrectly classified as normal cleaning encounters.

6.G. Negative Pressure Monitoring and Recording

6.G.1. Magnehelic gauge checks

6.G.1. The magnehelic gauges located outside the housing area to any negative airflow cell shall be checked once per shift to ensure the cells remain in a negative airflow state. When non-conformities are identified, the cell shall not be used for people with

circumstances requiring a negative airflow cell, and a work order shall be submitted for prompt repair.

Compliance Rating: Partial Compliance

Prior Compliance Rating: Partial Compliance

County Response:

The County is in the process of fully implementing this provision. The County has trained Module Deputies to complete work orders when negative airflow gauges are out of range and the Deputy is unable to correct the issues. Over the next six (6) months, the County will be monitoring the documentation and will initiate corrective action for process deviations. Proof of practice will be submitted to the Environment of Health and Safety Expert for review.

Analysis/Observations:

6.G.1.a Are the magnehelic gauges to negative airflow cells checked once per shift to ensure the cells remain in a negative airflow state?

The Policy and Procedures Manual 244 titled "Santa Barbara County Sheriff's Office Custody Operations, Communicable Diseases," states in part, "The gauges located at any negative airflow cell will be checked, once each shift, by a deputy to ensure these cells remain in a negative airflow state. These checks will be documented on the Daily Module Recap. If a deputy observes any cells that are outside of the ranges provided above or that display red, they shall follow the following procedures:

- a. The staff member shall confirm that any incarcerated person housed in that cell is not under airborne precautions for a confirmed or suspected communicable disease. If the incarcerated person is under airborne precautions, the staff member shall immediately contact medical staff and the Lead Supervisor to ensure that the incarcerated person is moved to another appropriate negative airflow cell as soon as possible.
- b. The staff member shall visually inspect the intake and exhaust ducts within the cell which is not in a negative airflow state. If either air duct appears to be blocked, staff shall have the item(s) removed from the duct(s);
- c. The staff member shall confirm that the door(s) are secured, including any ante rooms;
- d. The staff member shall recheck the negative airflow gauge ten minutes after completing the previous steps to determine if it became compliant;
- e. If not in compliance following these measures, the issue will be reported immediately to Maintenance by submitting a work order."

MJ

The Santa Barbara County Sheriff's Office Custody Operations 244, Communicable Diseases, reflects that negative pressure cells in MJ are located on the New East Restrictive Housing Addition (NERH 25 - 38). The policy states, "These gauges should read between 0.25 and 0.070."

The County provided 24-hour Post Recap reports from the MJ East Module from August 2024 through February 2025. The Post Recap reports reflect that the Negative Airflow Cell gauge checks are conducted at 0600 and 1800 hours. The Post Recap reports have a checkbox that indicates the gauge checks were completed, and staff also note the condition of the gauges. The report also includes the cell number and the gauge check reading for each cell/gauge.

The Expert randomly selected four (4) Post Recap reports for each month of the rating period and identified the following discrepancies.

- 8/3/24 – Gauges not checked at 0600 hours. 1800 hours, seven (7) gauges were below .25, and no indication that staff attempted to clear the ventilation screens or if a work order was submitted to restore negative airflow in cells.
- 8/7/24 – 0600 hours, seven (7) gauges were below .25, and no indication that staff attempted to clear the ventilation screens or if a work order was submitted to restore negative airflow in cells. 1800 hours, six (6) gauges were below .25, and no indication that staff attempted to clear the ventilation screens or if a work order was submitted to restore negative airflow in cells.
- 8/19/24 – 0600 hours, (7) gauges were below .25, one (1) gauge was above .70. 1800 hours, (7) gauges were below .25, one (1) gauge was above .70, and no indication that staff attempted to clear the ventilation screens or if a work order was submitted to restore negative airflow in cells.
- 8/25/24 – 0600 hours, (7) gauges were below .25, one (1) gauge was above .70. 1800 hours, (7) gauges were below .25, one (1) gauge was above .70, and no indication that staff attempted to clear the ventilation screens or if a work order was submitted to restore negative airflow in cells.
- 9/7/24 – 0600 hours, four (4) gauges were below .25, one (1) gauge was above .70. 1800 hours, four (4) gauges were below .25, two (2) gauges were above .70, and no indication that staff attempted to clear the ventilation screens or if a work order was submitted to restore negative airflow in cells.
- 9/11/24 – 0600 hours, three (3) gauges below .25, two (2) above .70.
- 1800 hours, three (3) gauges below .25, two (2) above .70, and no indication that staff attempted to clear the ventilation screens or if a work order was submitted to restore negative airflow in cells.
- 9/24/24 – 0600 hours, one (1) gauge above .70. 1800 hours, three (3) gauges above .70, and no indication that staff attempted to clear the ventilation screens or if a work order was submitted to restore negative airflow in cells.
- 9/29/24 – 0600 hours two (2) gauges above .70. 1800 hours, two (2) gauges above .70, and no indication that staff attempted to clear the ventilation screens or if a work order was submitted to restore negative airflow in cells.
- 10/1/24 – 0600 hours three (3) gauges below .25, four (4) gauges above .70. 1800 hours, two (2) gauges above .70, and no indication that staff attempted to clear the ventilation screens or if a work order was submitted to restore negative airflow in cells.
- 10/12/24 – 0600 hours, eight (8) gauges below .25. 1800 hours, eight (8) gauges below .25, and no indication that staff attempted to clear the ventilation screens or if a work order was submitted to restore negative airflow in cells.

- 10/16/24 – 0600 hours, nine (9) gauges below .25. 1800 hours, eight (8) gauges below .25, and no indication that staff attempted to clear the ventilation screens or if a work order was submitted to restore negative airflow in cells.
- 10/27/24 – 0600 hours seven (7) gauges below .25. 1800 hours, six (6) gauges below .25, and no indication that staff attempted to clear the ventilation screens or if a work order was submitted to restore negative airflow in cells.
- 11/1/24 – 0600 hours, four (4) gauges below .25. 1800 hours, four (4) gauges below .25, and no indication that staff attempted to clear the ventilation screens or if a work order was submitted to restore negative airflow in cells.
- 11/6/24 – 0600 hours, three (3) gauges below .25. 1800 hours, three (3) gauges below .25, and no indication that staff attempted to clear the ventilation screens or if a work order was submitted to restore negative airflow in cells.
- 11/16/24 – All gauges within range.
- 11/24/24 – 0600 hours two (2) gauges below .25. 1800 hours, two (2) gauges below .25, and no indication that staff attempted to clear the ventilation screens or if a work order was submitted to restore negative airflow in cells.
- 12/5/24 – All gauges within range.
- 12/14/24 – 0600 hours one (1) gauge below .25. 1800 hours, one (1) gauge below .25, and no indication that staff attempted to clear the ventilation screens or if a work order was submitted to restore negative airflow in cells.
- 12/25/24 – 0600 hours one (1) gauge below .25. 1800 hours, one (1) gauge below .25, and no indication that staff attempted to clear the ventilation screens or if a work order was submitted to restore negative airflow in cells.
- 12/29/24, 1/2/25, 1/11/25, 1/13/25, 1/26/25, and 2/2/25 – All gauges within range.
- 2/15/25 – 0600 hours, all gauges within range. 1800 hours, three (3) gauges above .70, and no indication that staff attempted to clear the ventilation screens or if a work order was submitted to restore negative airflow in cells.
- 2/18/25 – 0600 hours, three (3) gauges above .70. 1800 hours, three (3) gauges above .70, and no indication that staff attempted to clear the ventilation screens or if a work order was submitted to restore negative airflow in cells.
- 2/28/25 – 0600 hours gauge checks not completed. 1800 hours, one (1) gauge above .70, and no indication that staff attempted to clear the ventilation screens or if a work order was submitted to restore negative airflow in cells.

During the on-site review, the Expert noted that numerous gauges were outside the required range. The Expert asked the Deputy what action had been taken to correct the gauge abnormalities. The Deputy stated he had submitted a work order and logged the action on the Post Recap. The Expert reviewed the Post Recap and confirmed the report contained documentation of the work order being submitted. The Expert further noticed various cells had ventilations covered with paper, which may have contributed towards the abnormal gauge readings.

NBJ

The Santa Barbara County Sheriff's Office Custody Operations 244, Communicable Diseases, reflects that negative pressure cells in NBJ are in the Medical Clinic; Cells

M-01 through M-05. The policy states in part, "These gauges should display green when cells are in negative airflow state and display red when cells are not in negative airflow state." The Custody Operations Negative Airflow Cells PowerPoint presentation training produced by the County reflects that NBJ Clinic gauges should read between 0.050 and 0.001, and any other readings will require staff to act. Staff from each shift (0600 and 1800 hours) are required to review the light, ensure the screen is green and reads "Normal," and document the numerical range reading on the daily recap report. If the color code is red and does not read normal, staff are required to check the intake and exhaust ducts within the cell for blockage. If blocked, clear the blockage, and recheck the gauge in 10 minutes. If the gauge still reads above the limits, then submit a work order to General Service. If a gauge reads below -0.05, submit a work order to General Services.

The County provided J/K/M - Unit Recaps reports from August 2024 through February 2025.

The Expert randomly selected four (4) Post Recap reports for each month of the rating period and identified the following discrepancies.

- 8/19/24 – 0600 hours readings not recorded.
- 9/7/24 – 0600 hours readings not recorded.
- 11/24/24 – 0600 hours readings not recorded.
- 12/31/24 – 0600 hours readings not recorded.
- 2/15/25 – 0600 hours readings not recorded.

The Expert recommends SBCJ retrain staff assigned to monitor negative air pressure cells on the requirements to follow when the magnehelic gauges are outside the required reading range. The Expert also recommends that supervisors monitor staff to ensure all magnehelic gauge checks are completed and properly documented on the Post Recap reports daily, and that all actions taken to correct discrepancies are documented.

6.G.1.b When non-conformities are identified, are cells not used for people with circumstances requiring a negative airflow cell?

The County produced the Santa Barbara County Sheriff's Office Custody Operations 244, Communicable Diseases, which states in part, "The gauges located at any negative airflow cell will be checked, once each shift, by a deputy to ensure these cells remain in a negative airflow state. These checks will be documented on the Daily Module Recap. If a deputy observes any cells that are outside of the ranges provided above or that display red, they shall follow the following procedures:

- a. The staff member shall confirm that any incarcerated person housed in that cell is not under airborne precautions for a confirmed or suspected communicable disease. If the incarcerated person is under airborne precautions, the staff member shall immediately contact medical staff and the Lead Supervisor to ensure that the incarcerated person is moved to another appropriate negative airflow cell as soon as possible."

MJ

Based on staff not documenting what actions were taken when non-conformities were noted on the Post Recap reports, the Expert was unable to evaluate if staff performed the mandated steps to clear abnormal gauge readings, and if the issues identified required the submission of a work order and/or the relocation of the incarcerated person.

The Expert recommends that Post Recap reports, or other forms of documentation, be used to document when non-conformities are identified and cells are not used for people requiring negative airflow cells, and the actions taken by staff to relocate the incarcerated person to a suitable housing location as required by the policy and the *Murray v. Santa Barbara County* Remedial Plan.

NBJ

The Expert notes there were no non-conformities identified in the documents reviewed. However, the Expert also noted that there were dates when reading results were not recorded. The Expert recommends that all work shifts document gauge reading results.

6.G.1.c When non-conformities are identified, is a work order submitted for prompt repairs?

MJ

The MJ provided a copy of one (1) work order that was submitted during the rating period when a non-conformity was identified. Work Order FAC-21059 was submitted on 2/24/2025 for New East Restrictive Housing – cells 33, 34 & 35, which had negative air flow readings too high. The Work Order was assigned for repairs; however, the Work Order does not indicate when the repairs were completed. A review of East Module 24-Hour Post Recap reports documented that one or more gauge readings were above the required range through March 4, 2025.

The Expert recommends that MJ staff promptly submit work orders when non-conformities are identified. Copies of such work orders should be routed to the ECM for tracking and proof of practice. Based on the review of Post Recap reports, as noted in section 6.G.1.a, additional work orders should have been submitted.

NBJ

No discrepancies were noted in the review of Unit Recaps for NBJ J/K/M during the rating period that would have required the submission of a work order.

To reach substantial compliance with the provision 6.G.1. of the *Murray v. Santa Barbara County* Remedial Plan, the County must:

- Check magnehelic gauges for any negative airflow cell daily, once per shift, to ensure the cells remain in a negative airflow state.
- When non-conformities are identified, staff must conduct the air vent clearing process as mandated by policy and procedures.

- When non-conformities are identified and the air vent clearing process does not correct the non-conformities, staff must submit a work order and document the problem on the 24-hour Recap Report.
- Provide proof of practice documentation to the Expert.

6.G.2. Staff Training for Magnehelic Gauge Readings

6.G.2. *The County shall provide and document training regarding acceptable gauge readings and the steps to take if the readings are outside the acceptable range for all staff assigned to housing areas with negative airflow cells.*

Compliance Rating: Substantial Compliance

Prior Compliance Rating: Substantial Compliance

Pursuant to Paragraph 52 of the Remedial Plan, the County has been in Substantial Compliance with this provision and has maintained such Substantial Compliance for a period of at least six (6) months. Based on this, the parties conferred, and Class Counsel has no objection to the County's request for discontinuation of monitoring. The provision will therefore be subject to future monitoring only if it is determined that the County is no longer in substantial compliance, consistent with the procedure set forth in Paragraph 53.

County Response:

Completed. The Environmental Health and Safety Expert found the County in substantial compliance with this provision.

Analysis/Observations:

Policy and Procedures Manual 244, Communicable Diseases, states in part, "Custody staff shall be trained in the reading of negative airflow gauges during the Custody Academy Additional Training."

The County produced the Custody Operations Negative Airflow Cells Review, Training, and Discussion PowerPoint presentation training. The training includes eight (8) slides and includes information on Santa Barbara County Sheriff's Office Custody Operations 244, Communicable Diseases, location of the negative pressure cells, acceptable gauge readings, actions to take if the gauge readings are above and below the acceptable readings.

MJ

The MJ provided copies of "Negative Airflow Cell Training Rosters" dated April 2024. The logs noted a total of seventy staff members from A, B, C, and D squads received training.

The Expert inquired if Sheriff Deputy staff employed after April 2024 have received Negative Airflow Cell training. The County reported that newly hired Custody

Deputies are provided the Custody Operations Negative Airflow Cells Review, Training, and Discussion PowerPoint presentation training during the DRC introduction training day before beginning their assignments at the MJ. All new Custody Deputies attending the one-day orientation also receive a copy of the Negative Airflow Monitoring training materials for reference. The County reports that a total of 15 Sheriff Deputy staff were hired during the rating period and received the training.

NBJ

During the previous review, the NBJ produced Negative Airflow Cell Training Rosters for A, B, C, and D Squads and Administration, which reflect a total of 58 staff were provided Negative Airflow Cell training during the month of March 2023. Newly hired Custody Deputies are provided the Custody Operations Negative Airflow Cells Review, Training, and Discussion PowerPoint presentation training during the DRC introduction training day before beginning their assignments at the NBJ.

The Expert recommends that all SBCJ staff assigned to monitor negative air pressure cells receive Negative Airflow Cell training, and current staff receive additional/refresher training and clear guidance as to the expectations and requirements for this job duty.

6.G.3. Testing of Negative Pressure Cells and Gauges by External Contractor

6.G.3. Negative pressure cells and gauges shall be tested by an external contractor on a regular schedule as part of the jail's preventive maintenance schedule.

Compliance Rating: Discontinuation of Monitoring

Prior Compliance Rating: Substantial Compliance

Pursuant to Paragraph 52 of the Remedial Plan, the County has been in substantial compliance with this provision and has maintained such substantial compliance for a period of at least six (6) months. Based on this, the parties conferred, and Class Counsel has no objection to the County's request for discontinuation of monitoring. The provision will therefore be subject to future monitoring only if it is determined that the County is no longer in substantial compliance, consistent with the procedure set forth in Paragraph 53.

6.H. Emergency Response and Fire/Life Safety

6.H.1. Monthly Inspection of Fire Extinguishers and Drills

6.H.1. The County shall inspect fire extinguishers monthly and hold drills to ensure all jail staff are trained consistent with NCCHC (National Commission on Correctional Health Care) standards on emergency response. Drill documentation shall include start and stop times, the number and location of any prisoners moved as part of the drill, and noted deficiencies, and any corrective actions taken.

Compliance Rating: Discontinuation of Monitoring**Prior Compliance Rating:** Substantial Compliance

The County is in substantial compliance with this provision and has maintained substantial compliance for a period of at least six (6) months. Based on this, Based on this, the parties conferred, and Class Counsel has no objection to the County's request for discontinuation of monitoring. The provision will therefore be subject to future monitoring only if it is determined that the County is no longer in substantial compliance, consistent with the procedure set forth in Paragraph 53.

County Response:

Completed. The Environmental Health and Safety Expert found the County in substantial compliance with this provision.

Analysis/Observations:*6.H.1.a. Does the SBCJ inspect fire extinguishers monthly?*

The Santa Barbara County Sheriff's Office Custody Operations 222, Fire Suppression/Natural Disaster and Evacuation Plan, states in part, "The facility commander shall ensure that fire extinguishers, fire alarm pull stations, smoke detectors, emergency fire response equipment, exterior fire hydrants, facility exit routes/doors are inspected monthly and documented on the "monthly fire prevention inspection log." Any noted deficient or missing items shall be documented on the form and a work order or purchase order submitted for replacement/repair. Any items removed for replacement/repair shall be replaced with a suitable replacement if available."

MJ

The MJ provided copies of Santa Barbara County Sheriff's Office Monthly Fire Extinguisher Checks from August 2024 to February 2025. The Monthly Fire Extinguisher Check identifies the fire extinguisher locations (building and location in building), type of fire extinguisher, size of extinguisher, date of inspection, and an area to document who completed the inspection. The checklist includes eighty-seven extinguishers. The document's inspection procedures include:

1. Make sure it is located in its designated place.
2. Make sure the extinguisher is visible or that there is signage indicating where the extinguisher is located.
3. Make sure you can easily access the extinguisher.
4. Ensure the pressure gauge is in the operable range or position.
5. Make sure the pull plug is in place.
6. Make sure it is full; this can be done by just lifting the extinguisher, or you can weigh it.
7. Make sure the condition of the tank, hose, and nozzle is acceptable.

The Expert reviewed the Monthly Fire Extinguisher Checks and noted MJ conducted the required fire extinguisher inspections for each month during the rating period.

NBJ

The NBJ produced Santa Barbara County Sheriff's Office Monthly Fire Extinguisher Checks from August 2024 to February 2025. The Monthly Fire Extinguisher Check identifies the fire extinguisher locations (building and location in building), type of fire extinguisher, size of extinguisher, date of inspection, and an area to document who completed the inspection. The checklist includes twenty-eight extinguishers. The document's inspection procedures are the same as for SBJ (see above).

The Expert reviewed the Monthly Fire Extinguisher Checks and noted NBJ conducted the required fire extinguisher inspections for each month during the rating period.

6.H.1.b Does the SBCJ hold/conduct drills to ensure all jail staff are trained consistent with the National Commission on Correctional Health Care (NCCHC) standards on emergency response?

The Santa Barbara County Sheriff's Office Custody Operations 222, Fire Suppression/Natural Disaster and Evacuation Plan, states in part, "The Facility Commander shall ensure that mass disaster drills are conducted so that each shift has participated over a 3-year period, including satellites. A health emergency man-down drill shall be practiced at least once a year on each shift. A section or sections of the jail should be evacuated regularly during a simulated emergency. The scenario used in the drills should allow for the use and testing of the SCBA/iEvac, evacuation routes, and locations, utility shutdowns, and security measures during emergencies.

The Jail Operations Division Commander or designee will schedule these drills and coordinate them with the Santa Barbara County Fire Department or other fire authority, if available.

All emergency response drills shall include a debrief with staff, medical personnel, mental health personnel (if applicable), and local fire or emergency response personnel (if applicable). The lead supervisor shall be responsible for completing a 'Santa Barbara County Jail Emergency Response Drill Evaluation Form' following each emergency response drill and forwarding it to the Health Services Administrator, Operations Lieutenant, and Facility Commander for review. This review shall include the start/stop time, the number and location of any incarcerated persons moved as part of the drill, any noted deficiencies, and any corrective actions taken."

MJ

MJ provided copies of the Santa Barbara County Jail Emergency Response Drill Evaluation Forms for drills conducted on 10/25/2024 and 3/31/2025. The forms include detailed information for the drill, responders, evaluators, debriefs, deficiencies, and recommendations. The drills were conducted by A and C Squads.

NBJ

NBJ provided copies of the Santa Barbara County Jail Emergency Response Drill Evaluation Forms for drills conducted on 10/8/2024 and 1/22/2025. The forms include detailed information for the drill, responders, evaluators, debriefs, deficiencies, and recommendations. The drills were conducted by A and C Squads.

6.H.1.c Does the drill documentation include the start and stop times?

MJ

The MJ Santa Barbara County Jail Emergency Response Drill Evaluation Forms for drills conducted on 10/25/2024 and 3/31/2025 include the start and end times of the drills.

NBJ

The NBJ Santa Barbara County Jail Emergency Response Drill Evaluation Forms for drills conducted on 10/8/2024 and 1/22/2025 include the start and end times of the drills.

6.H.1.d Does the drill documentation include the number and location of any incarcerated persons moved as part of the drill?

MJ

The MJ Santa Barbara County Jail Emergency Response Drill Evaluation Forms for drills conducted on 10/25/2024 and 3/31/2025 include a location for staff to document if incarcerated persons were moved. However, during the drills conducted on 10/25/2024 and 3/31/2025, no incarcerated persons were moved.

NBJ

The NBJ Santa Barbara County Jail Emergency Response Drill Evaluation Forms for drills conducted on 10/8/2024 and 1/22/2025 include the number of incarcerated persons moved.

6.H.1.e Does the drill documentation include any noted deficiencies?

MJ

The MJ Santa Barbara County Jail Emergency Response Drill Evaluation Forms for drills conducted on 10/25/2024 and 3/31/2025 include a section to document deficiencies. The drill dated 10/25/2024 noted deficiencies.

NBJ

The NBJ Santa Barbara County Jail Emergency Response Drill Evaluation Forms for drills conducted on 10/8/2024 and 1/22/2025 include a section to document deficiencies. The drill dated 1/22/2025 noted deficiencies.

6.H.1.e Does the drill documentation include any corrective actions taken?

MJ

The MJ Santa Barbara County Jail Emergency Response Drill Evaluation Forms for drills conducted on 10/25/2024 and 3/31/2025 include a section for documenting recommendations. No recommendations were noted for the drills conducted.

NBJ

The NBJ Santa Barbara County Jail Emergency Response Drill Evaluation Forms for drills conducted on 10/8/2024 and 1/22/2025 include a section for documenting recommendations. The drill completed on 1/22/2025 noted recommendations.

6.I. Environment of Care Monitor Inspections, Corrective Action, and Process for Incarcerated Persons to Raise Concerns

6.I.1. Bimonthly Housing Unit Environmental of Care inspections

6.I.1. The Environment of Care Monitor shall conduct bimonthly (i.e., every other month) Environmental Health and Safety inspections in every housing unit. The inspections shall include a documented assessment of and (as needed) corrective action plans for:

- a) Cleanliness of floors, walls, ceilings, bed and bedding, toilet and lavatory, cells and dayrooms surfaces;*
- b) Cleanliness and disinfection of common areas and furnishings, including showers, shower chairs, plastic chairs, wheelchairs, stretchers, beds/bunks, and personal property containers.*
- c) Cleanliness of fans, exhaust, and return ventilation grills, and the need for any maintenance repairs, such as painting, broken tiles, blocked lighting, and plumbing.*

Compliance Rating: Partial Compliance

Prior Compliance Rating: Partial Compliance

County Response:

Completed. At the Expert's recommendation, the County is now utilizing the Correction Action Plan utilized at the Main Jail at the Northern Branch Jail.

Analysis/Observations:

6.I.1.a. Does the Environment of Care Manager conduct bi-monthly (i.e., every other month) Environmental Health and Safety inspections in every housing unit?

The Santa Barbara County Sheriff's Office Custody Operations – Policy and Procedures Manual 102 Inspections and Operations Review states in part, "An Environment of Care Monitor (ECM) has been assigned to the Sheriff's Main Jail Maintenance Staff who is responsible for ensuring adequate environmental health and safety conditions in the jail facilities, including as set forth in the remedial plan in the *Murray v. County of Santa Barbara* case. The job duties are enumerated in a separate document which is maintained by the ECM's supervisor and division Commander. This ECM will be responsible for conducting inspections relative to cleanliness and sanitation and submit written reports with corrective action plans. The ECM's duties include an assessment of every housing unit, including for plumbing, electrical, ventilation, painting, cleanliness, lighting, and storage of personal belongings and submit written bi-monthly reviews with corrective action plans."

The Santa Barbara County Sheriff's Office, Santa Barbara Jail and Northern Branch Jail Sanitation Plan 4.10.24, states in part, "An Environment of Care Monitor is assigned to each facility and will perform a walk-through inspection of the jail facilities, minimum of twice per week, noting any cleanliness issues. Upon performing an inspection of all housing modules and common areas, any deficiencies found will be brought to the attention of the Continual Quality Assurance ("CQA") Sergeant, Lieutenant, or designee, and noted in the bimonthly inspection report. The CQA Sergeant, Lieutenant, or designee will notify shift supervisors. A Facilities Work Order will be completed for any deficiencies found that cannot be immediately corrected."

MJ

MJ provided four (4) copies of Environment of Care Inspections reports conducted by the ECM for the months of July-August 2024, September-October 2024, November-December 2024, and January-February 2025.

The cover page of each Environment of Care Inspections report states, "This environment of care inspection was conducted over the two months of (July and August of 2024). My inspections encompass all locations inmates may reside, work, and or have access to during their incarceration here at the Santa Barbara County Jail.

ITEMS INSPECTED FOR CLEANLINESS

Floors, walls, ceilings, bed and bedding, toilet and lavatory, cells and dayroom surfaces, common areas and furnishings (including showers, shower chairs, plastic chairs, wheelchairs, stretchers, beds/bunks, and personal property containers), fans, exhaust and return ventilation grills, and the need for any maintenance repairs such as painting, broken tiles, blocked lighting, and plumbing."

The MJ ECM conducted bimonthly Environmental Health and Safety inspections of every housing unit, and the inspections included all areas required by the *Murray V. Santa Barbara County* Remedial Plan.

NBJ

NBJ provided four (4) Excel documents for the Environment of Care Inspections conducted by the ECM for the months of July-August 2024, September-October 2024, November-December 2024, and January-February 2025.

The County also produced a document titled, Items Inspected for Cleanliness, that states, "Cleanliness of floors, walls, ceilings, bed and bedding, toilet and lavatory, cells and dayroom surfaces, common areas and furnishings (including showers, shower chairs, plastic chairs, wheelchairs, stretchers, beds/bunks, and personal property containers), fans, exhaust and return ventilation grills, and the need for any maintenance repairs such as painting, broken tiles, blocked lighting, and plumbing." The inspections include inspections of every housing unit and all areas required by the *Murray V. Santa Barbara County* Remedial Plan.

The NBJ ECM conducted bimonthly Environmental Health and Safety inspections of every housing unit, and the inspections included all areas required by the *Murray V. Santa Barbara County* Remedial Plan.

6.I.1.b Do the inspections include a documented assessment of and (as needed) corrective action plans for;

- a. Cleanliness of floors, walls, ceilings, bed and bedding, toilet and lavatory, cells, and dayroom surfaces?*
- b. Cleanliness and disinfection of common areas and furnishings, including showers, shower chairs, plastic chairs, wheelchairs, stretchers, beds/bunks, and personal property containers?*
- c. Cleanliness of fans, exhaust, and return ventilation grills, and the need for any maintenance repairs, such as painting, broken tiles, blocked lighting, and plumbing?*

MJ

MJ provided Corrective Action Plans (CAP) in Excel spreadsheets titled "2024 Bi-Monthly Inspection Corrective Action Plan for Plumbing & Lighting" and "2025 Bi-Monthly Inspection Corrective Action Plan for Plumbing & Lighting." Each report contains a tab for each bi-monthly inspection conducted during the rating period. The report identifies the date the work order was submitted, the location where the problem was identified, a brief description of the issue, the work order number, the status of the work order (pending or completed), the date the work order was completed, and a description of the action taken. The Expert reviewed the reports and noted that many work orders indicate "completed," but in some cases, the work orders were still "pending," and based on the CAP, the issue remained unresolved.

The Expert recommends that each remaining "pending" work order be tracked on the CAP until the issue is resolved. The CAP needs to contain an area to document the completion/resolution of all work orders.

NBJ

NBJ provided Corrective Action Plans (CAP) in an Excel spreadsheet titled "2024 Bi-Monthly Inspection Corrective Action Plan for Plumbing & Lighting." The report

contains a tab for each bi-monthly inspection conducted during the rating period. The report identifies the date a work order was submitted, the location where the problem was identified, a brief description of the issue, the work order number, the status of the work order (pending or completed), the date the work order was completed, and a description of the action taken. A review of the 2024 CAP identified that one work order remained unresolved for the September and October inspection. A CAP for the 2025 bi-monthly inspection (January & February) was not provided.

The Expert recommends that a CAP be created for each bi-monthly inspection and that each remaining "pending" work order be tracked on the CAP until the issue is resolved. The CAP needs to contain an area to document the completion/resolution of all work orders.

To reach substantial compliance with the provision 6.I.1. of the *Murray V. Santa Barbara County* Remedial Plan, the County must:

- Maintain a CAP for the bi-monthly inspection, and any work orders that remain pending should continue to be tracked within the CAP until the issue is resolved.
- Provide proof of practice documentation to the Expert.

6.I.2. System for Class Members to Raise Sanitation Matters of Concern

6.I.2. *The County shall provide a system through which class members are able to raise sanitation matters of concern. The grievances shall be reviewed by the housing unit supervisors before each shift change. Where a maintenance issue identified, a work order shall be submitted before the end of the following shift.*

Compliance Rating: Partial Compliance

Prior Compliance Rating: Partial Compliance

County Response:

The County is in the process of fully implementing this provision. The County is currently in the process of re-training shift supervisors to carefully review grievances, and where a maintenance issue is identified, to submit a work order before the end of the following shift as required by this provision. The County anticipates completing this requirement in the next four months.

Analysis/Observations:

6.I.2.a *Does SBCJ provide a system through which class members are able to raise sanitation matters of concern?*

The Santa Barbara County Sheriff's Office Custody Operations – Policy and Procedures Manual Section 361 Grievance Procedures, states in part, "Custody Operations shall provide incarcerated persons a procedure through which they can appeal, and have resolved, grievances relating to any conditions of confinement, included but not limited to: medical/mental health care; classification actions; disciplinary actions; program participation; telephone, mail, and visiting procedures;

sanitation, facility defects, food, clothing, bedding and any ADA related accommodations, denial of accommodations or to report any disability-based discrimination or violation of the ADA, the *Murray v. County of Santa Barbara* Remedial Plan, or Jail ADA-related policy. This policy will apply to any grievances submitted electronically should such a system become available."

Incarcerated persons use the Santa Barbara County Sheriff's Office Custody Operations–Inmate Grievance Form to file grievances and/or raise sanitation matters of concern.

MJ

MJ provided twenty Inmate Grievance Forms for the rating period. The Expert reviewed the grievances and noted the following:

1. Log number 23143 received 8/3/2024. Housing NW-A-5. An incarcerated person requested that the cleaning carts remain in the unit after the evening meal (1800 hours) to clean up any spills and food droppings.

Reviewed on 8/3/2024. Response – Cleaning supplies are picked up by end of shift (1800 hours) because they need to be refilled and prepared for the next day. In the event of a spill, feel free to ask staff for a broom and dustpan, and one will be provided.

2. Log number 23148 received 8/4/2024. Housing 400/417. An incarcerated person stated they turned in two blankets for exchange and had not received them back. It was cold in the cell, and I would like two blankets.

Reviewed on 8/4/2024. Response – Incarcerated person received two blankets.

3. Log number 23147 received 8/4/2024. Housing NW-A-5. An incarcerated person stated housing unit showers should be power-washed bi-weekly as per the *Murray v. Santa Barbara County* Remedial Plan. The housing unit showers have mold, and he has not seen anyone complete shower power washing.

Reviewed on 8/4/2024. Response – New staff has been hired and is being trained for that job. You should see a return of power washing in the near future. Keep the inmate handbook in mind (section 302), which states you are responsible for the cleanliness of your cell and living areas, and keep showers clean at all times.

4. Log number 23270 received 8/21/24. Housing 417. An incarcerated person stated she was transferred from NBJ to SBJ and was booked into cell 400, which was infested with debris, and the living condition was "unmanageable." She scrubbed and cleaned with her own cleaning supplies to avoid confrontation with a staff member. She further stated her water was shut off for four (4) days, and a staff member explained that they had no key.

Reviewed on 9/1/24. Response – When first housed, you completed a checklist. On the list is whether the cell is dirty or not. What did you check as cells are cleaned after inmates are removed? You were given cleaning supplies as requested. You had working water at the time of placement.

5. Log number 23198 received 8/14/24. East 6. An incarcerated person stated, "Yesterday I went to visit and again they (visiting) were filthy and the phone didn't work." The incarcerated person stated they also grieved it last month and requested to use IRC visiting to avoid using dirty windows, dirty rooms, and having broken phones. The window has had dried mucus for two weeks, which is unsanitary and disgusting.

Reviewed on 8/14/24. Response – This is an unfortunate event that has now come to light. We consider your grievance and are looking into the matter. This is a lapse in our protocol. Module deputies will ensure they are clean before the visit begins.

6. Log number 23415. Received 9/25/24. East 1. An incarcerated person stated he was only provided one blanket. When he asked the officer on duty for a second blanket, as it clearly states in the jail handbook that each inmate will be provided with two blankets, he was told no, and the officer stated he had never given out two blankets.

Reviewed on 10/4/24. Response – I understand your concerns about the number of blankets you are entitled to according to the jail handbook. We have looked into the matter and spoken with the deputy responsible for providing blankets. While the deputy does not recall the specific incident, he has assured us that he will ensure you receive the correct amount of blankets as per the handbook. We apologize for any inconvenience this may have caused and thank you for bringing this to our attention.

7. Log number 23378. Received 9/29/24. Housing 215. An incarcerated person stated he was moved to a cell at night with a severe ant infestation and a filthy cell. The incarcerated person stated he asked for a mop, broom, or cleaning supplies and was still waiting at 6:40 p.m.

Reviewed on 10/6/24. Response – From what the deputies remember, the cell wasn't dirty. Nonetheless, you are allowed cleaning supplies when you move cells. We'll make sure your cleaning closet is stocked in the event of future moves and that cleaning supplies are needed.

8. Log number 23486. Received date not noted. Housing East 1. An incarcerated person stated that for the last three weeks, he has been putting in kites asking for maintenance to pressure wash the shower and replace the shower curtain. The shower has excessive black mold inside and, on the curtain, as well. The cleaning supplies provided are not strong enough to remove mildew or mold, and it keeps getting worse. The incarcerated person

stated that it is a health hazard to be in the shower and breathe in the bacteria and mold.

Reviewed on 10/7/24. Response – Upon investigation, it has been determined that cleaning schedules are structured around specific times when the housing area is unoccupied. These times typically align with yard time when inmates are expected to leave their housing unit. Unfortunately, if inmates choose not to go to the yard, which has been the case in your specific housing unit several times over the past several weeks, our cleaning staff cannot access and properly clean the housing and shower area without compromising security or privacy. For the safety of everyone, it is essential that housing areas be vacant during cleaning hours.

9. Log number 23525. Received 10/28/24. Housing W-16. An incarcerated person stated that the sponges were replaced with rags, and they are not allowed to keep the rags to keep areas clean. They are requesting to keep the towels through the day and exchange them daily for a clean rag to keep them clean and sanitary.

Reviewed on 10/28/24. Response – After receiving feedback, it was decided that incarcerated persons will be allowed to keep microfiber towels for 24-hour periods and exchange them for clean towels.

10. (Original grievance not available.). Grievance Report date 11/21/24. Housing W-16. An incarcerated person grieved the temperature inside the cell, which had no heating. The maintenance unit resolved the issue. Date resolved unknown.

11. Log number 23656. Received 12/3/24. Housing S Dorm. An incarcerated person stated the dorm is colder than normal and requested that the temperature be increased in the evening and mornings. Also stated the shower water is cold/lukewarm throughout the day and asked if the temperature can be increased.

Reviewed on 12/8/24. Response – A work order was submitted to check the heat in the south dorm.

12. Log number 23684. Received 12/10/24. Housing W-6. An incarcerated person stated they need bleach, Ajax, or Comet cleaner at least once a week to clean black dirt in the shower. Also requested a separate brush or scrubber for the toilet and shower to avoid cross-contamination. The incarcerated person also stated that the cleaner that is provided is so diluted that it is like water.

Reviewed on 12/10/24. Response – Work order #207640 was issued to clean the shower. In response to the cleaning solution, Oxivir is mechanically diluted to the manufacturer's specification and is adequate for cleaning and disinfecting the shower. The Maintenance Department ordered shower scrub brushes and will be available within a few weeks.

13. Log number 23823. Received 1/19/25. Housing E-24. An incarcerated person stated that it has been extremely cold since November 2024, especially at night, and it has been hard to fall asleep.

Reviewed on 1/24/25. Response – A work order was submitted to general services on 1/22/2025 and completed on 1/22/2025. The temperature was turned up.

14. Log number 23839. Received 1/22/25. Housing S-Dorm. An incarcerated person stated there was no hot water for over two weeks in the shower or sinks. Additionally, they have three sinks, and cold water only works in one sink.

Reviewed on 1/22/25. Response – Work order submitted, Request # 208902.

15. Log number 23835. Received 1/22/25. Housing S-Dorm. An incarcerated person stated that the hot water does not last throughout the day. In the morning, they only have warm water, and they live in a medical dorm and need hot water for safety and health.

Reviewed on 1/23/25. Response – General services has been checking water temperature daily, and water (temperature) is in compliance. A work order was submitted on 1/23/25 and was completed on 1/23/25, stating all temperatures were within the compliant range.

16. Log number 23851. Received 1/26/25. Housing S Dorm. An incarcerated person stated they had a water leak in the ceiling.

Reviewed on 1/26/25. Response – A work order was completed, and general services will look into the leak. General services are scheduled to work on the leak on 1/27/25.

17. Log number 23863. Received 1/26/25. Housing Dorm S. An incarcerated person stated they only have hot water in the morning, and after lunch, the water is warm and stays warm through the day and night. Additionally, only one of three sinks works correctly and has cold water. Also, the front and side doors slam shut.

Review date not provided. Response – Work order #209018 was submitted to General Services on 1/26/25.

18. Log number 23856. Received 1/27/25. Housing S Dorm. An incarcerated person stated that during the night, about every hour, the front door makes a buzzing sound, it pops, and then is slammed with great force. The incarcerated person asked if there was anything that could be done to fix the door or ask deputies to close the door slowly.

Reviewed on 1/30/25. Response – The shift commander stated he would let the deputies know to be more aware of door slamming and to close the door with less force. According to General Services, the door is electronically operated through a transformer, and the buzzing sound can be adjusted.

Note: The County reports the door was worked on to lessen noise issues. Additional sound deadening materials were installed, door parts were tightened, and the transistor was insulated. As a result of these upgrades, the door is now nearly silent.

19. Log number 23924. Received 2/13/25. Housing West 16. An incarcerated person stated that all visiting booths were extremely filthy, and the same trash and dirt had been on the floor for over a month. The phones are grimy, and the glass is blurry with grime. Some visiting booths don't have chairs or stools to sit, and some phone cords are too short.

Reviewed on 2/20/25. Response – The lobby crew cleans these areas approximately every Tuesday and Thursday. The lobby crew lead is aware of your request and will continue to work to keep the cleaning demands in the facility.

20. Log number 23936. Received 2/18/25. Housing East 4. An incarcerated person stated East 4 is extremely cold and freezing. The heating was working fine the last few weeks, but now the air coming out of the vents is ice cold.

Reviewed on 2/24/25. Response – A work order was submitted on 2/20/25 to check the temperature. Individuals in East 4 said the temperatures were now comfortable. A circulation pump had to be reset. Work order was closed on 2/24/25.

The Expert reviewed the August 2024 through February 2025 documents within "Grievance Trackers" and "Grievance Copies" and identified eight (8) grievances related to sanitation matters of concern that were not produced by the County.

The Expert reviewed the grievances and noted the following:

1. Log number 23145. Received 8/2/24. Housing 325 (IRC). An incarcerated person stated dinners are frozen, no main course, and cold vegetables. His special diet dinners were always cold and had been cold for three weeks.

Reviewed on 8/5/24. Response – I have been personally tracking your dinners. They are being sent hot. Only items that aren't heated are apple sauce and peanut butter, and jelly. The concerns were brought to (unable to read), and the response was that they follow the diet assigned by the dietitian. They are unable to change diets without medical approval.

2. Log number 23156. Received 8/5/24. Housing 325 (IRC). An incarcerated person stated they did not agree to response (grievance #23145), and none

of his dinners have been hot. Diet meals are cold. Breakfast, lunch, and dinner are cold.

Reviewed on 8/8/24. Response – Staff confirmed with the kitchen supervisor that you are receiving the correct diet.

3. Log number 23173. Received 8/9/24. Housing BC-4. An incarcerated person stated that the ducts have been releasing a lot of dust and asked to have them cleaned. He has been experiencing a sore throat due to fan extreme dust blown out of dusty vents.

Reviewed on 8/12/24. Response – The maintenance department received the grievance, and an inspection of vents and fans approximate to your housing unit was found to be dusty. Maintenance issued two work orders to have them cleaned. Work orders 203546 and 23550.

4. Log number 23656. Received 12/3/24. Housing S Dorm. An incarcerated person stated the air in the dorm is colder than normal and asked to have the temperature increased in the evening, at night, and mornings. Additionally, the water in the shower is cold/lukewarm all day, and I asked if the temperature could be increased.

Reviewed on 12/8/24. Response – Work order #207116 was submitted to check the HVAC in South Dorm.

5. Log number 23694. Received 12/12/24. Housing E-24. An incarcerated person stated East 24 drops in temperature to 50 degrees at night, and it is too cold to sleep. In addition, there is no hot water, showers are cold, and they go without showers for days.

Reviewed on 12/13/24. Response – Maintenance staff confirmed the air temperature and water temperature are currently within range. Maintenance will recheck on Monday, 12/16/24.

6. Log number 23690. Received 12/11/24. Housing E-24. An incarcerated person stated that on December 10, 2024, he was escorted to a "Zoom meeting" and stepped in a puddle of urine and soaked his socks. The incarcerated person stated this has not been the first issue while attending Zoom meetings and has been an ongoing problem getting locked into a "phone booth" for hours.

Reviewed on 12/11/24. Response – It is unfortunate that another inmate chose to urinate on the floor. When the officer realized and tried to warn you, it was too late. The video shows you had no socks, and the urine was not in the Private Visitation booth, but in the hallway. Staff returned to clean the mess. The video shows you were in the booth for 1.5 hours but were unsure how long your meeting was. Staff will continue to maintain the facility as clean as possible.

7. Log number 23747. Received 12/20/24. Housing E-24. An incarcerated person stated the temperature has been 50 degrees inside and colder on the low side of the bunks. The water is freezing cold, and I can't take warm showers. He has made several requests to get maintenance in there. Please fix this ongoing issue.

Reviewed on 12/20/24. Response – A temperature gun was used to gauge the temperature in your housing unit. The temperature read 62 degrees. You also want the fans to roam on which can cause the temperatures to go down.

8. Log number 23807. Received 1/14/24. Housing W-16. An incarcerated person stated that the tiers and hallways are dirty and are not cleaned on a regular basis. It is unsanitary as leftover food falls to the floor and stays on the tier for weeks. The dirt buildup attracts insects and rodents. A system needs to be created to sweep and mop the tier on a regular basis.

Reviewed on 1/15/25. Response – Supervisors spoke with staff and reminded them of the importance of cleanliness. Staff will do a much better job of cleaning the hallways.

NBJ

NBJ did not provide copies of grievances for the rating period. The Expert reviewed copies of the 2024 and 2025 "NBJ Grievance Tracker," "NBJ Grievance Report," and NBJ grievances and was unable to locate grievances related to sanitation matters of concern.

MJ and NBJ - During incarcerated person interviews, almost all incarcerated persons stated they are aware of how to use the grievance process and raise sanitation matters of concern; however, they also stated that many issues are not completely resolved. Some incarcerated persons stated they submit "kites" to report sanitation matters of concern.

Based on the grievances reviewed and incarcerated person interviews, the SBCJ provides a system through which incarcerated persons can raise sanitation matters of concern. However, the Expert recommends that the SBCJ develop a method to track and categorize all grievances related to sanitation matters of concern to ensure issues are resolved as soon as possible. It is further recommended that SBCJ identify whether the current system can track and provide real-time reports for sanitation-related grievances from the time of submission to resolution.

6.I.2.b *Are grievances (sanitation matters of concern) reviewed by the housing unit supervisors before each shift change?*

MJ

Of the twenty-eight grievances, fourteen were reviewed by a supervisor before shift change (50%).

NBJ

No grievances were submitted by incarcerated persons during the rating period.

The Expert recommends that grievances containing issues related to sanitation matters be reviewed by the housing unit supervisors before each shift change.

6.I.2.c When a maintenance issue is identified, are work orders submitted before the end of the following shift?

MJ

Of the 28 grievances reviewed, based on the issue being grieved, eleven required staff to submit a work order. In ten (10) cases, the grievance response referenced that staff submitted a work order. One (1) case did not indicate if a work order was submitted. MJ provided eight (8) work orders of the ten (10) cases that required a work order. In two (2) cases, the grievance stated that a work order was submitted; however, the work orders were not provided. In most issues, a work order was provided; however, the work order does not indicate if the matter was resolved. In summary, the documentation suggests that a work order was completed in 8 of 11 cases where one was required (73%).

NBJ

No grievances were submitted by incarcerated person during the rating period.

The Expert recommends that SBCJ provide copies of all work orders submitted when a grievance is received with a maintenance issue identified, with documentation that includes if and when the work order was completed and the issue resolved. It is further recommended that staff submit all work orders before the end of the following shift when a maintenance issue is identified. All grievances that lead to a work order should have the work order number documented as part of the response.

To reach substantial compliance with the provision 6.I.2. of the *Murray V. Santa Barbara County* Remedial Plan, the County must:

- Ensure grievances are reviewed by the housing unit supervisor before each shift change.
- When a maintenance issue is identified, a work order shall be submitted before the end of the following shift.
- SBCJ develop a method to track and categorize all grievances related to sanitation matters of concern.
- Provide proof of practice documentation to the Expert.



Signature

Submitted on behalf of Sabot Technologies, Inc. dba Sabot Consulting to the County of Santa Barbara, and Santa Barbara County Sheriff's Office

A handwritten signature in black ink, appearing to read "Julian Martinez".

Julian Martinez
Director
Sabot Consulting

November 10, 2025

Date