



Expert Monitor's Report

Environmental Health and Safety
Report (Third Round),
Murray v. County of Santa Barbara,
Case No. 2:17-cv-08805-GW-JPR

On-Site Review: April 10-14, 2023

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Executive Summary

This is the third Expert Monitoring Review of the Santa Barbara County Jail (SBCJ), Main Jail, and the second 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 April 11, 2023, and the review of the Main Jail was conducted on April 10 and 12-14, 2023. The pre-document production rating period was from July 1, 2022, through December 31, 2022.

The Expert Monitoring Review of the Main Jail included a review of pre-monitoring documents produced by Santa Barbara County, on-site observations of the Northwest housing units, West Module housing units, Intake Release Center (IRC), South Module housing units, East Module housing units, recreational yards, clinics, dental treatment room, kitchen, and main laundry. The Expert interviewed seven (7) Custody Deputies, twenty-two (22) incarcerated persons from various housing units/modules, and group interviews from East Mod 4 and East Mod 6.

The Expert Monitoring Review of NBJ included on-site observations of housing units A, B, C, D, E, F, G, H, and J, Kitchen, Laundry, Visiting, and the Health Care Clinic. The Expert interviewed two (2) Custody Deputies and five (5) incarcerated persons from various housing units.

The Expert recognizes the impact COVID-19 and 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 the process of implementing essential elements of the *Murray v. Santa Barbara County* Remedial Plan. The Expert notes that the County has made significant strides in the implementation of the *Murray v. Santa Barbara County* Remedial Plan. Some of these include:

- The development of the Sanitation Plan
- Continuous updating of policy and procedures related to Environmental Health and Safety
- Environment of Care Monitor bi-monthly inspections, including reports and Corrective Action Plans
- Chemical Safety, Biohazardous and Bloodborne Pathogens, and Personal Protective Equipment (PPE) PowerPoint training presentations.
- Increasing the amount of undergarment linen issued to incarcerated persons

The Expert recommends the County focus on the following areas:

- Update or create clear and effective policies in areas specific to Environmental Health and Safety.
- Establish daily, weekly, bi-weekly, and quarterly cleaning schedules as directed by the *Murray v. Santa Barbara County* Remedial Plan. The County must ensure staff and incarcerated persons adhere to the cleaning schedules. The Expert

recommends the County evaluate the need for additional staff, cleaning crews, equipment, and supplies to meet the mandated cleaning schedules and maintenance such as painting, tile repair, plumbing, etc.

- Provide Chemical Safety, Biohazardous, and Bloodborne Pathogens, and PPE training to all staff and incarcerated persons assigned to cleaning. The Expert recommends the training is provided prior to any cleaning assignment which requires the use of chemicals and cleaning biohazardous materials.
- Complete daily and periodic temperature monitoring of hot foods and take steps to ensure food is served hot by completing temperature checks when food is prepared and at the time food is distributed to incarcerated persons. The County has been considering the need for plug-in electronic powered carts to keep food trays hot during transport and maintain food hot until the staff is available to distribute food trays to incarcerated persons.
- Utilize the Work Order reporting system to establish schedules for cleaning or maintenance, at a minimum, for:
 - Quarterly cleaning of fans and ventilation grills
 - Quarterly replacement of ventilation filters
 - Monthly fire extinguisher inspections
 - Monthly fire and life safety inspections
- Ensure negative airflow cell gauges are monitored, and gauge readings are logged daily by both shifts. Ensure staff perform the necessary steps to correct non-conformities and staff document the actions taken to correct non-conformities.

The Expert's report identifies areas of non-compliance and areas that could not be measured for determination of Substantial Compliance due to the County's inability to provide supporting documents. However, it is the Expert's position that with sufficient staffing and/or allocation of other resources, the County will continue to implement vital components of the *Murray v. Santa Barbara County Remedial Plan*, and the areas that were determined to be in non-compliance and/or could not be measured for compliance will progress into Substantial Compliance.

This report details the pre-monitoring tour document review, on-site monitoring, staff and incarcerated persons' 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 the 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 the 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 then 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 each 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.

Summary of Ratings

Remedial Plan Citation	Requirement	Current Rating	Previous Rating
6.A.1.	Environmental Health and Safety Monitor	SC	PC
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	PC	NC
6.B.4.	Policy and Procedures for Cleaning, Disinfection, Distribution, and Repair of Mattresses	SC	PC
6.B.5.	Provision of Clean and Serviceable Mattress.	PC	PC
6.B.6.	Procedure to clean cell prior to Placement in Cell	PC	NC
6.B.7.	Cleaning and Disinfection of Plastic Beds	SC	PC
6.C.1.	Weekly Clothing and Linen Exchange	SC	PC
6.C.2.	Chemical Safety Training for Staff and Incarcerated Persons	PC	PC
6.C.3.	Healthcare Referrals for Incarcerated Persons With Possible Mental Health disability	PC	PC
6.D.1.	Clean Clothing for Kitchen Workers	SC	SC
6.D.2.	Weekly Kitchen Operation Inspections	PC	PC
6.D.3.	Food Service Policies and Procedures	SC	NC
6.D.4.	Training for Incarcerated Person Kitchen Workers	SC	PC
6.D.5.	Monitoring of Food Temperature	PC	NC
6.E.1.	Staff Training for Submitting Work Orders	SC	PC
6.E.2.	Work Order Reporting System for Preventative Maintenance and Repairs,	PC	PC
6.E.3.	Development and Implementation of Environmental Inspection policy.	PC	NC
6.F.1.	Development and Implementation of Chemical Control Policies and Procedures.	PC	NC
6.F.2.	Development and Implementation of Chemical Safety Training for Staff and Incarcerated Persons	PC	PC

6.F.3.	Communicable Disease Policy.	PC	PC
6.F.4.	Development and Implementation of Policies and Procedures for Cleaning, Handling, Storing and Disposal of Biohazardous Materials.	PC	NC
6.F.5.	Personal Protective Equipment for Staff and Incarcerated Person-Workers	PC	PC
6.G.1.	Magnehelic gauge checks	PC	PC
6.G.2.	Staff Training for Magnehelic Gauge Readings	PC	PC
6.G.3.	Testing of Negative Pressure Cells and Gauges by External Contractor.	SC	PC
6.H.1.	Monthly Inspection of Fire Extinguishers and Drills	PC	PC
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: Substantial Compliance

Prior Compliance Rating: Partial Compliance

Analysis/Observations:

6.A.1.a. Does the Santa Barbara County Jail designate an Environment of Care Monitor?

Main Jail - Sheriff's Service Technician (SST) James Zandona was assigned as the Environment of Care Monitor (ECM) for the Main Jail on July 12, 2021, and has been solely assigned to perform the duties and responsibilities of the ECM, which are required by the *Murray v. Santa Barbara County* Remedial Plan.

NBJ - On July 11, 2022, Administrative Senior Custody Deputy J. Petterson was assigned as the ECM for the NBJ. The Expert interviewed Sr. Custody Deputy Petterson, who stated he also has other various duties and responsibilities; for example, covering staff vacancies as needed. Although Sr. Custody Deputy Petterson is designated as the ECM for NBJ as required by the *Murray v. Santa Barbara County* Remedial Plan, the Expert is unable to determine if he has sufficient time to perform the duties and responsibilities that are required of the ECM. The Expert will continue to review whether Sr. Custody Deputy Petterson has sufficient time to perform the duties and responsibilities of the ECM, as well as other assigned duties, during future monitoring.

6.A.1.b Does the ECM have a Duty Statement?

Main Jail - The Main Jail has an ECM Job Duty Statement in place.

NBJ – The NBJ has an ECM Job Duty Statement in place.

6.A.1.c Are the duties of the ECM established in writing and consistent with the Santa Barbara County Remedial Plan?

Main Jail - The Main Jail ECM Job Duty Statement contains the functions which are required by the *Murray v. Santa Barbara County* Remedial Plan.

NBJ - The NBJ ECM Job Duty Statement contains the functions which are required by the *Murray v. Santa Barbara County Remedial Plan*.

6.A.1.d *Does the ECM have sufficient authority to carry out such duties as outlined in the Remedial Plan?*

Main Jail - The current ECM, SST J. Zandona, reports directly to the Compliance Unit Sergeant, who reports to the Compliance Unit Lieutenant, who reports to the Commander. The Commander reports to the SBCJ Chief. Based on SBCJ's reporting structure, the ECM appears to have sufficient authority to carry out such duties as outlined in the *Murray v. Santa Barbara County Remedial Plan*.

NBJ - The current ECM, Sr. Custody Deputy J. Petterson, has delegated authority from the Compliance Unit Lieutenant, who reports to the Commander. The Commander reports directly to the SBCJ Chief. Based on SBCJ's reporting structure, the NBJ ECM appears to have sufficient authority to carry out such duties as outlined in the *Murray v. Santa Barbara County Remedial Plan*.

6.B. Cleanliness and Sanitation of Jail Facilities

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 prompts 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.*

Compliance Rating: Partial Compliance

Prior Compliance Rating: Partial Compliance

Analysis/Observations:

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

Through document production, the SBCJ provided the Expert with a copy of the "Santa Barbara County Sheriff's Office Santa Barbara Jail and Northern Branch Jail Sanitation Plan." The Sanitation Plan is under development and will be utilized for both the Main Jail and NBJ. The Expert noted the Sanitation Plan is a draft and that SBCJ has made significant improvements in establishing a Sanitation Plan. Both SBCJ staff and the Expert have continued to collaborate in finalizing a Sanitation Plan and will reevaluate any additions or changes to the Sanitation Plan in the next compliance review.

The Expert recommends the County finalize the SBCJ Sanitation Plan.

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 Expert noted the draft SBCJ Sanitation Plan does not contain information for cleaning all areas or established cleaning schedules for the Main Jail or the NBJ.

SBCJ provided the Expert copies of the Dock Crew Sanitation Checklist, Daily Sanitation Checklist, Weekly Sanitation Checklist, Bi-Weekly Sanitation Checklist, Quarterly Sanitation Checklist, Main Jail Cleaning Schedule, Lobby Crew Sanitation Checklist, and the Big Green Cleaning Schedule.

Although SBCJ maintains copies of cleaning checklists and certain cleaning schedules, the SBCJ Sanitation Plan does not contain language regarding cleaning schedules for locations within the Main Jail and NBJ. The SBCJ Sanitation Plan cleaning schedules should identify which locations are specifically cleaned weekly, bi-weekly, and quarterly. For example, per the *Murray v. Santa Barbara County Remedial Plan*, SBCJ is required to power wash housing unit shower areas bi-weekly. The Expert was informed that housing unit showers are power washed when incarcerated persons are participating in yard activities. The Expert noted most housing unit showers were not power washed bi-weekly and that cell bars, windows, and lights were not cleaned weekly during the rating period because of yards being canceled or incarcerated persons refusing to participate in yard activities. The Expert noted that weekly, bi-weekly, and quarterly cleaning is completed based on incarcerated person's yard schedules and not on the Sanitation Plan schedule.

The Expert recommends SBCJ include information in the Sanitation Plan regarding established detailed cleaning schedules for all locations at the Main Jail and NBJ requiring weekly, bi-weekly, and quarterly cleaning. The Sanitation Plan must also identify the equipment and supplies/products that

are utilized to achieve each task. The Sanitation Plan should ensure documentation is maintained of such 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?*

The SBCJ Sanitation Plan includes instructions for incarcerated person's 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. The Sanitation Plan identifies two (2) cleaning solutions that are provided to incarcerated persons at the Main Jail; however, it does not identify the cleaning solutions that are provided to incarcerated persons at NBJ.

The Main Jail also provided copies of various Cleaning Cart Check Off Sheets that were completed during the rating period. The Expert noted an average of twenty (20) sheets were completed during each month of the rating period. The Expert noted Cleaning Cart Check Off Sheets were not completed for most weekends during the rating period.

During incarcerated person interviews at the Main Jail and staff interviews, the Expert was informed that cleaning equipment and supplies are not always provided to incarcerated persons during most weekends or holidays. Based on this information and the Cleaning Cart Check-Off Sheet documentation provided, it appears incarcerated persons are not provided daily access to cleaning equipment and supplies to conduct daily cleaning and disinfection of housing units at the Main Jail.

The Main Jail 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 Expert also noted the following cleaning supplies are provided; one (1) mop, broom, soft hand brush, and soft sponge, which measures approximately four (4) inches by six (6) inches.

During interviews at the Main Jail, most incarcerated persons stated they do not receive enough cleaning solution, or the solution is watered down and does not properly clean tough stains or mold. The cleaning solutions are provided once in the morning for cleaning and sometimes again in the evening for sanitizing.

The Expert recommends the SBCJ Sanitation Plan include a schedule with clear and specific instructions for incarcerated persons' access to cleaning supplies and equipment for cleaning and disinfection of housing units daily,

including weekends and holidays. The Sanitation Plan must also include the type and amount of cleaning disinfectant each incarcerated person and/or dormitory must be provided to adequately clean and disinfect their living and common areas.

The Expert noted the soft sponges which are provided are incapable of scrubbing or cleaning mold, stubborn stains, soap, or built-up dirt.

The Expert recommends that incarcerated persons be provided non-scratch scrub sponges or scouring pads and/or bristle brushes, which can adequately clean mold, soap, and built-up dirt. The Sanitation Plan should also include information with instructions to accomplish these tasks, including a procedure for periodic checking of equipment to determine the need for replacement.

NBJ incarcerated persons are provided access to cleaning supplies and equipment daily. Based on the SBCJ Sanitation Plan, Modular Deputies open the cleaning closets, which are located within the housing modules, and cleaning carts are available for inmates to utilize daily.

Based on the NBJ incarcerated person and staff interviews, as well as the Expert's observations, incarcerated persons are provided access to cleaning supplies and equipment. Incarcerated persons are provided one (1) or more 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. Most housing units appeared clean without any significant issues.

- 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?*

A review of the SBCJ Sanitation Plan, under Section IV.A.1., states Shift Commanders, Lead Supervisors, or Senior Custody Deputies will conduct a daily (per shift) walk-through of the facility to ensure the overall sanitary status, safety, and cleanliness of the facility. The Sanitation Plan also states Custody Deputies will perform daily cursory inspections of their assigned housing unit/module. Section I.1., Inspections, states Modular Deputies will inspect cells and common living areas at least once each day as part of normal shift security checks.

Although the SBCJ Sanitation Plan provides directions for various staff to conduct daily walk-through cleanliness reviews, daily cursory inspections, and daily sanitary inspections, there is not an official standardized and effective weekly inspection of housing units, which includes floors, toilets, sinks, and showers, with steps to promptly address identified cleaning and disinfection needs.

During the on-site monitoring tour at the Main Jail, the Expert noted various showers contained mold, rust, dirty drains, soap, and/or dirt built-up. Some toilets and sinks contained dirt, mold, or soap build-up. Some walls had graffiti and what appeared to be food or dirt stains. Baseboards and corners required cleaning to remove excess dirt and grime build-up. Various items appeared to have been in an unclean condition for a period of time. An official and meaningful weekly inspection of floors, toilets, sinks, and showers are essential requirements for maintaining appropriate cleanliness.

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

The Expert recommends the SBJC Sanitation Plan contain a schedule and identify staff positions that are assigned to complete official and effective weekly inspections for the Main Jail and NBJ, with clear instructions to inspect each housing unit, including floors, toilets, sinks, and showers. The Sanitation Plan should also contain the steps which should be promptly taken to address identified cleaning and disinfection needs and instructions on documenting these tasks.

- 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?*

Since the tunnel is no longer being used, the Expert did not review/evaluate the tunnel.

Section C.3. of the SBCJ Sanitation Plan states, "Inmate workers require direct supervision while providing daily cleaning for the following areas:

- a. All medical examinations/treatment rooms
- b. Dental Treatment rooms
- c. Pre-booking areas (NBJ Pre-Book and SBJ Intake Trailer)
- d. Booking and Intake areas
- e. Kitchen areas
- f. Staff bathrooms
- g. Common areas-all hallways
- h. Laundry Facilities"

Main Jail - The Main Jail provided a copy of the "Main Jail Cleaning Schedule," which identifies the various cleaning groups assigned to clean various locations throughout the Main Jail. For example, based on the schedule, Dental, Intake Trailer, five (5) Treatment Rooms, hallways, Front & Back Central, and South Holding are cleaned by either the Northwest Dock crew, Big Green Cleaning Company, Property Staff, and the Inmate Lobby Crew on different days of the week.

Through document production, the Main Jail also provided the following documents/logs for the rating period:

- A total of thirteen (13) "Lobby Crew Cleaning Checklist" completed for the month of July 2022, thirteen (13) were completed for the month of August, thirteen (13) were completed for the month of September, nine (9) were completed for the month of November, and eight (8) were completed for the month of December 2022
- Copies of the "Laundry Department Weekly Cleaning Checklist," which contains daily checks/cleaning of areas within the laundry room. Based on these logs, it appears daily cleaning of the Laundry Department was completed for the rating period.
- Copies of "Weekly Cleaning-Checklist" and "Daily Cleaning/Shift Closing-Checklist" logs for the Main Kitchen. A total of five (5) logs were completed for July 2022. A total of six (6) logs were completed for August 2022, a total of four (4) logs were completed for September 2022, a total of twelve (12) logs were completed for October 2022, a total of five (5) logs were completed for November 2022, and a total of twelve (12) logs were completed for December 2022. The Expert noted the Main Kitchen Daily Cleaning/Shift Closing Checklists logs were not completed daily for the rating period.

Based on the SBCJ Sanitation Plan and the Main Jail Cleaning Schedule, it appears the Main Jail has a schedule for the daily cleaning of certain intake locations, five (5) dental/health care clinics, kitchen areas, laundry facilities, and other common areas, such as hallways. However, the Expert recommends the Main Jail incorporate the Main Jail Cleaning Schedule into the SBCJ Sanitation Plan and not maintain separate documents.

Additionally, due to the Main Jail not completing cleaning logs for the daily cleaning of all intake locations (dental and medical treatment rooms, kitchen areas, and other common areas), the Expert recommends the Main Jail clean and maintain daily cleaning logs for all locations.

The Expert also noted the following discrepancies during the on-site monitoring tour. The Main Jail Kitchen daily cleaning appears to be superficial and does not involve deep cleaning. For example, various locations within the kitchen appeared to have mold and rust. The walls appeared to have dirt or food stains on them and needed cleaning and/or painting. Many areas, such as storage rooms, refrigerators, and freezers, contained debris under or behind racks, tables, or stored items/boxes. Various areas needed repairs, such as broken tiles and paint.

The Main Jail IRC common areas and rooms, such as holding cells and the dress-in/dress-out room, were not clean, contained bad odors, and appeared to only receive superficial cleaning. These areas require deep cleaning.

The Main Jail West Treatment Room, East Treatment Room, Central Treatment Room, IRC Medical Clinic, and Dental Treatment Room appeared to receive only superficial cleaning. Certain treatment rooms are in need of deep cleaning. Some rooms appeared to have floors and/or walls with minor stains or built-up dirt and dusty equipment; some vents had minor dust; and some sinks were dirty and had hard water build-up. Based on the cleaning logs provided, it appears treatment rooms are not cleaned daily.

The Main Jail Common Areas and Hallways were mostly swept, but some had debris or dirt built-up in baseboards and corners. Some walls contained what appeared to be food stains and required cleaning and/or painting. Common areas, such as recreational yards, needed sweeping and power washing.

The Expert noted the Main Jail Laundry Facilities appeared clean, with no major discrepancies noted. Logs of daily checks/cleaning of areas within the laundry were also provided for the entire rating period.

NBJ - During the onsite review, the Expert noted the following:

NBJ provided copies of cleaning logs for the months of August, September, October, November, and December of the rating period. The logs are titled "Lobby Crew Cleaning Logs." The Expert noted certain locations that are required to be cleaned daily are not clearly noted on the log. For example, the log lists "Medical Administration, Medical Restrooms, and Staff Restroom in Intake." The logs do not identify clinic/medical examination rooms, dental rooms, and/or booking and intake locations. Additionally, the Expert noted the logs do not indicate intake, medical/clinic and common areas were cleaned daily throughout the rating period. However, the Expert was provided cleaning logs after the tour that identify Intake & Prebook, Dental Clinic, J&K Exam Room, and Medical Clinic. The Expert recommends the locations are cleaned and logged daily.

Cleaning logs for the NBJ kitchen and laundry facilities were not provided. The Expert recommends NBJ establish daily cleaning logs for the kitchen and laundry facilities.

NBJ Intake appeared clean, with no significant issues or problems observed.

NBJ Health Services and medical/mental health housing appeared clean, with no significant issues observed.

The NBJ kitchen is cleaned by incarcerated persons/kitchen workers after meals are cooked and served. No significant issues or problems were observed in this area.

The NBJ Laundry room is cleaned by incarcerated persons/laundry workers. The laundry room appeared clean and organized. No issues or problems were noted by the Expert.

NBJ common areas and hallways were swept and clean. No significant issues or problems were observed.

While no significant cleanliness or sanitation issues were observed at NBJ, the Expert recommends the SBCJ Sanitation Plan include a schedule for the daily cleaning of intake, health services/medical housing, kitchen, laundry, and other common areas. The cleaning logs should contain (and provide for separate documentation of) each location that requires daily cleaning, as outlined in the Remedial Plan. The Sanitation Plan should also contain the steps which should be promptly taken to address identified cleaning and disinfection needs and how to document findings and results.

Further, as recommended above, the County must ensure that areas receive deep cleaning as needed to maintain proper cleanliness.

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

Section C.4 of the SBCJ Sanitation Plan states, "Inmate workers require direct supervision while providing weekly cleaning for the following areas:

- a. All Visitation & Court Video booths (both sides)
- b. Main Jail Visitation Area (both sides)
- c. Any Classroom currently in use
- d. All Housing Cell Bars (SBJ)
- e. All Housing Cell Windows (SBJ and NBJ)
- f. All Cell & Visitation lights."

The Main Jail provided a document titled "Main Jail Cleaning Schedule," which states the following:

The Downstairs Visitation area (inmate side) is cleaned once a week (Monday)

Northwest Visitation & Court Video (Both sides) is cleaned once a week (Wednesday)

East & West Visitation & Court Video are cleaned once a week (Tuesday)

South Visitation 1 & 2 (Both sides) & South Court Video are cleaned once a week (Sunday)

Downstairs Visitation Lobby and Bathrooms are cleaned twice a week (Tuesday & Thursday)

East & West Visitation & Court Video (Inmate side) – Transportation staff (Once per week)

Main Jail - The Main Jail also provided thirteen (13) copies of the "Lobby Crew Cleaning Checklist" for the month of July, which identifies two (2) visiting locations on the form (Visitation & Visitation area). Based on information provided by the ECM, the "Visitation & Visitation area" are all visiting locations within the Main Jail. The Expert noted no copies of Lobby Crew Cleaning Checklists were provided for the remainder of the rating period. The Expert reviewed the thirteen (13) Lobby Crew Cleaning Checklists for July 2022 and was unable to clearly identify which visiting rooms, Professional Visitor (PV) rooms, and or Court Video rooms were cleaned. For July 2022, the form indicates "Visitation" was cleaned thirteen (13) times, and the "Visitation Area" was cleaned two (2) times.

The Expert recommends the Main Jail clean all visitation locations weekly and more frequently as necessary, as required by the *Murray v. Santa Barbara County* Remedial Plan to maintain visitation locations clean. The cleaning should be documented at least weekly and more frequently as necessary.

Post tour, the Expert was provided a copy of the "Main Jail Cleaning Schedule." The schedule identifies the Northwest Visitation & Court Video rooms, East & West Visitation & Court Video rooms, South Visitation 1 & 2, & South Court Video room, and Downstairs Main Jail visitation. Based on the schedule, all visitation locations are scheduled to be cleaned weekly by specific work crews. The schedule is hyperlinked to the SBCJ Sanitation Plan. The Expert will be able to verify the hyperlink to the schedule, and cleaning documentation during the next scheduled tour.

During the on-site monitoring review, the Expert was informed the Main Jail does not utilize any classrooms, and as such, the Expert did not evaluate any classrooms. The Expert noted the Main Visiting Room appeared clean with no significant issues or problems. The Northwest Visiting appeared clean, with some debris between the windows and grill and some graffiti on visiting dividers.

The Expert noted significant cleaning problems in certain PV rooms. The East Side PV 3 had urine on the floor and severe odors, graffiti, and dirty walls. Most all PV rooms had debris between the glass and bars/grill and needed a deep cleaning and/or painting.

NBJ - The Expert was unable to locate a cleaning schedule for the NBJ visitation or classrooms within the SBCJ Sanitation Plan. The Expert recommends NBJ include a cleaning schedule for visitation and classrooms in the SBCJ Sanitation Plan. The Sanitation Plan should also include instructions to document such cleaning weekly.

Through document production, NBJ provided copies of the "Lobby Crew Cleaning Logs" for the months of August, September, October, November,

and December 2022. Each log identifies "Visitation Rooms (PV1-PV6)" and "Classrooms." The logs contain a checkmark on the date a visitation room or classroom was cleaned and a four-digit numeric code to identify the person/group who conducted the cleaning. The Expert reviewed each monthly log and noted the following results:

- August – Visitation cleaned two (2) weeks out of a four (4) week period. Classrooms cleaned three (3) weeks out of a four (4) week period.
- September – Visitation cleaned two (2) weeks out of a four (4) week period. Classrooms cleaned four (4) weeks out of a four (4) week period.
- October – Visitation cleaned four (4) weeks out of a four (4) week period. Classrooms cleaned four (4) weeks out of a four (4) week period.
- November – Visitation cleaned three (4) weeks out of a (4) week period. Classrooms cleaned three (3) weeks out of four (4) week period.
- December - Visitation cleaned four (4) weeks out of a four (4) week period. Classrooms cleaned four (4) weeks out of a four (4) week period.

The Expert noted that although the July Lobby Crew Cleaning Logs were not available, NBJ completed a majority of weekly cleaning for visitation and classrooms during the rating period.

During the on-site review, the Expert noted no problems or issues in the NBJ visiting rooms or classrooms.

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

Section C.4 of the SBCJ Sanitation Plan states, "Inmate workers require direct supervision while providing bi-weekly cleaning for the following areas:

- a. Power washing of housing unit shower areas."

The Main Jail provided a separate document titled "Cleaning Schedule." The Cleaning Schedule document states, in part, "Bi-Weekly, Power-wash all showers." The Expert noted that neither the SBCJ Sanitation Plan nor the Cleaning Schedule document contains a cleaning schedule for the bi-weekly power washing of all showers in the Main Jail.

Main Jail – Through document production, the Main Jail provided copies of a "Biweekly Module Shower Power Washing Log" for each month during the rating period. The Expert reviewed the Biweekly Module Shower Power Washing Logs and noted in July 2022, all showers listed on the document were power washed once during the month. In August, September, October, November, and December 2022, some showers were washed bi-weekly, some were washed once in a three-week period, and some showers were power washed once in a four-week period. Based on this review, the Expert noted most showers were not power washed bi-weekly.

During the on-site review, the Expert was informed that power washing of showers is completed when incarcerated persons are participating in yard/recreational activities and dorms/tanks are empty. As a result of weather conditions and COVID-19 restrictions, the yard/recreational activities were sometimes canceled; therefore, power washing of showers was not completed bi-weekly as required.

During the on-site review, the Expert observed showers in various housing units with some mold or mildew, soap or dirt build-up, and hair or debris. Some showers contained odors emitting from the drain. Certain showers appeared as if they had not been power washed for an extended period of time.

Post tour, the Expert was provided a copy of the "Main Jail Module Cleaning Schedule". Based on this schedule, each housing location shower(s) are scheduled to be power washed and scrubbed weekly. The schedule is hyperlinked to the SBCJ Sanitation Plan. The Expert will be able to verify the hyperlink to the schedule and cleaning documentation during the next scheduled tour.

The Expert recommends showers be washed at a minimum bi-weekly as required by the *Murray v. Santa Barbara County* Remedial Plan, and not based on when yard or recreational activities are conducted. As previously noted, many showers appeared unclean and required power washing or frequent deep cleaning. The Expert also noted as seasonal weather conditions warm up, the need for more frequent power washing will increase.

NBJ – Through document production, NBJ provided logs titled "Bi-Weekly Module Shower Power Washing Log" for the months of August, September, October, November, and December 2022. Each log identifies thirty-three (33) locations which contain a total of forty-five (45) showers. The Expert noted the following results for each month:

- August – Thirty-four (34) out of 45 showers were power washed bi-weekly.
- September – 34 out of 45 showers were power washed bi-weekly.
- October - 33 out of 45 showers were power washed bi-weekly.
- November – Twenty-two (22) out of 45 showers were power washed bi-weekly.
- December – 34 out of 45 showers were power washed bi-weekly.

The Expert noted NBJ is completing the power washing of most showers, but will need to ensure that at least bi-weekly power washing is *consistently* completed for *all* housing unit shower areas in order to establish Substantial Compliance. The Expert recommends the SBCJ Sanitation Plan include a schedule for the bi-weekly power washing of all NBJ shower areas. The

schedule should identify which showers are power washed on an alternate bi-weekly schedule to ensure all showers are washed bi-weekly.

The Expert noted most all NBJ showers appeared clean and had no issues or problems.

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

Section C.4 of the SBCJ Sanitation Plan states, in part, "Inmate workers require direct supervision while providing weekly cleaning for the following areas:

- d. All Housing Cell Bars (SBJ)
- e. All Housing Cell Windows (SBJ and NBJ)
- f. All Cell & Visitation lights."

Main Jail - The Main Jail provided a separate document titled "Cleaning Schedule." The Cleaning Schedule document states, in part, "Weekly, All Housing Cell Bars, All Housing Cell Windows, All Cell & Visitation lights." The Expert noted that neither the SBCJ Sanitation Plan nor the Cleaning Schedule document contains a schedule for the weekly cleaning of all cell bars, windows, and lights. The Expert was informed the cleaning of cell bars, windows, and lights are conducted when incarcerated persons are participating in yard or recreational activities. If incarcerated persons are not participating in yard or recreational activities, cell bars, windows, and lights cannot be cleaned.

The Main Jail also provided a document titled "Weekly Cleaning Log of Cell, Bars, Windows, and Lights" for July 2022 through December 2022. The weekly cleaning document identifies various housing/cell/modular locations that have cell bars, doors, windows, and lights. The weekly cleaning logs contain a section to document when the location was cleaned. The Expert reviewed the Weekly Cleaning Logs and noted that from July 2022 through December 2022, weekly cleaning of cell bars, windows, and lights was not completed on a weekly basis. Many weeks indicate "No yard due to COVID-19 Quarantine," "No Yard," "Refused Yard," or "Yard Closed."

Post tour, the Expert was provided a copy of the "Main Jail Module Cleaning Schedule". Based on this schedule, all housing units/modules cell bars, windows and light fixtures are scheduled to be wiped down and cleaned weekly. The schedule is hyperlinked to the SBCJ Sanitation Plan. The Expert will be able to verify the hyperlink to the schedule and cleaning documentation during the next scheduled tour.

The Expert recommends cleaning is completed weekly and *cannot* be contingent when incarcerated persons are participating in yard or recreational

activities. During the on-site review, the Expert noted some housing unit/modular bars, shower bars, or windows contained dust or debris.

NBJ – The NBJ did not provide the Expert with a schedule or cleaning logs for the weekly cleaning of windows and lights.

During the on-site review, the Expert did not note or identify issues or problems with the cleaning of windows or lights.

The Expert recommends the NBJ create a schedule for the weekly cleaning of windows and lights. The schedule and instructions to provide written documentation of such cleaning should be incorporated into the SBCJ Sanitation Plan.

- 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?*

Section C.5 of the SBCJ Sanitation Plan states, in part, "Inmate workers require direct supervision while providing quarterly cleaning for the following areas:

- a. All Fans
- b. Air Vents
- c. New East Restricted Housing Negative Airflow Cells."

Main Jail - The Main Jail provided a separate document titled "Cleaning Schedule." The Cleaning Schedule document states, in part, "Quarterly, All Fans, All Air Vents, New East Restricted Housing Negative Airflow Cells."

Post tour, the Expert was provided a copy of the "Main Jail Module Cleaning Schedule". Based on this schedule, all housing units/modules air vents are scheduled to be vacuumed and wiped down on a weekly basis. Additionally, the Main Jail provided Work Orders for completed quarterly cleaning of fans. The dates when cleaning was completed were May 5, 2022, November 14, 2022, and February 7, 2023. The Expert noted only one quarterly cleaning of fans was completed during the rating period. The "Main Jail Module Cleaning Schedule" is hyperlinked to the SBCJ Sanitation Plan. The Expert will be able to verify the hyperlink to the schedule and cleaning documentation during the next scheduled tour.

The Main Jail also provided cleaning logs titled "Santa Barbara County Jail, Quarter #3 (July-Sept. 2022), Air Vent and Fan Cleaning Log" and "Santa Barbara County Jail, Quarter #4 (Oct. - Dec. 2022), Air Vent and Fan Cleaning Log." Each log contains columns identifying a location, area, quantity, and date cleaned. Based on the *Murray v. Santa Barbara County* Remedial Plan requirements, a fan or air vent should be cleaned within a three (3) month period to encompass a quarter or cleaned once every three (3) months to

ensure they are clean and free of mold, mildew, and or accumulation of dirt and dust as stated in the *Murray v. Santa Barbara County Remedial Plan*.

The Expert reviewed the air vent and fan cleaning logs and noted that all air vents and fans were cleaned once during the third quarter. During the fourth quarter, some vents were cleaned within one (1) month of the last cleaning, some were cleaned within two (2) months of the last cleaning, some were cleaned within three (3) months of the last cleaning, and some were cleaned within a four (4), or more than four (4) months of the last cleaning, which is more than the required quarterly cleaning.

The Expert recommends the SBCJ Sanitation Plan, or addendum/attachment to the Sanitation Plan, identify each housing unit which contains a fan at the Main Jail, and create a schedule to ensure each fan is cleaned quarterly (at least every three [3] months).

During the tour, the Expert noted some air vents were clear or clean; some cell vents appeared to be dusty, covered with paper, or covered with what appeared to be toilet paper. Hallway fans in the housing units appeared to be clean. During interviews, incarcerated persons complained some buildings/modules have little or no circulation, while some complained of bad odors emitting from the vents. The Expert noted some vents were dirty and appeared they had not been cleaned for a time. The Expert further noted no Inmate Grievance Forms for low air circulation or bad odors emitting from vents were submitted during the rating period.

NBJ - The SBCJ Sanitation Plan does not include a schedule for the quarterly cleaning of air vents or did not provide documentation for the quarterly cleaning of air vents and more frequent cleaning as necessary to ensure that they are clean and free of mold, mildew, and/or accumulation of dirt and dust.

During the on-site review, the Expert did not note or identify issues or problems with f air vents. During interviews, incarcerated persons did not report any problems with air ventilation.

The Expert recommends NBJ include a schedule in the SBCJ Sanitation Plan for the quarterly cleaning of air vents and more frequent cleaning as necessary to ensure that they are clean and free of mold, mildew, and/or accumulation of dirt and dust. The SBCJ Sanitation Plan should also include directions to fully document such cleaning.

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

Analysis/Observations:

Does the SBCJ provide incarcerated people orientation upon intake regarding the jail's expectations and procedures for cleanliness, elimination of clutter, and proper use of personal property containers?

As part of document production, the SBCJ provided a copy of the "Custody Operations Orientation Handbook," which was dated March 2022. The Expert noted the Handbook does address cleanliness, elimination of clutter, and the proper use of personal property containers.

Main Jail - During the on-site review, the Expert noted that many incarcerated persons continue to own excessive amounts of personal property, which they are unable to fit in their issued property box. During interviews, some incarcerated persons complained the property boxes provided are too small and that it is impossible to store all their personal belongings in them, which includes consumable commissary. The Expert noted many of the living area rules and conditions of cells outlined in the "Custody Operations Orientation Handbook" appear to not be enforced, such as rules related to excessive property, cleanliness, and obstructing vents, lights, and windows.

During interviews, the Expert was informed by newly arrived incarcerated persons that they were not provided an orientation regarding expectations and procedures for cleanliness, elimination of clutter, and proper use of personal property containers. Most incarcerated persons stated they did receive an Orientation Handbook. Some incarcerated persons stated that cleanliness expectations are provided in a video on television. The Expert was informed by the Main Jail staff that an orientation video is played at least once per day on television; however, the Expert was unable to view or confirm the contents of the video.

NBJ - During the on-site review, the Expert noted minor problems with clutter and excessive property in "E" Unit upper tier, and "C" Unit.

The Expert recommends that newly arrived incarcerated persons be provided orientation regarding the jail's expectations and procedures for cleanliness, elimination of clutter, and proper use of personal property containers (Main Jail and NBJ). The orientation should be provided in a manner that provides incarcerated persons the opportunity to ask questions about the expectations if needed. The Expert recommends staff conduct daily and weekly inspections and the enforcement of established rules to assist with the reduction of clutter and help keep living areas clean. It is also recommended that the Main Jail staff be more proactive in enforcing the rules, policies, and procedures regarding expectations for cleanliness, elimination of clutter, and the proper use of personal property containers. Additionally, the Expert recommends that SBCJ staff review

whether the issued property containers can adequately store the County property issued to incarcerated persons (e.g., clothing, footwear, documents, etc.) and the amount of personal property, including commissary items. The SBCJ may need to consider a more adequately sized storage container that will effectively allow incarcerated persons to store personal property amounts/items they are allowed to retain.

- 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: Partial Compliance

Prior Compliance Rating: Non-Compliance

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?*

Main Jail and NBJ - Through document production, SBCJ provided the Expert a copy of "Custody Operations – Policy and Procedures Manual 362, Inmate Clothing and Personal Hygiene." The Expert noted the policy and procedures manual states, in part, "*Inmates who refuse or appear unable to maintain cleanliness of their living areas must be referred to mental health for assessment and services.*"

- 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?*

Main Jail and NBJ – The "Custody Operations - Policy and Procedures Manual 362, Inmate Clothing and Personal Hygiene" states, in part, "*Inmates who refuse or appear unable to maintain cleanliness of their living areas must be referred to mental health for assessment and services.*" After the tour, the Expert was provided a revised "Custody Operations – Policy and Procedures Manual 362, Inmate Clothing and Personal Hygiene" which states in part, "*Deputies shall assist inmates with cleaning of their cells if the inmate appears 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. Further direction regarding this is provided in the Sanitation Plan.*"

Main Jail - During the on-site review, the Expert interviewed six (6) housing unit staff/Deputies and one (1) Custody Operations Deputy 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). Six (6) Deputies stated they would remove the incarcerated person from their cell and clean the cell or have an incarcerated cleaning crew clean the cell or living area. One (1) Deputy stated they do not go into incarcerated person's housing but would refer to classification.

During the on-site review, the Expert observed some cells in Northwest B, Northwest Restrictive Housing Unit, New East Restrictive Housing, and IRC were exceptionally dirty and contained excessive amounts of clutter and garbage, and had dirty floors and toilets. Some IRC cells had multiple food containers throughout the cell. It appeared some cells had not been cleaned for a period of time, or food containers had not been collected after multiple meals. While observing some incarcerated persons in these cells, the Expert noted cell conditions might be related to the incarcerated person's mental health.

NBJ - During the on-site review, the Expert noted a cell in Modular J, Medical and Mental Health Housing, was dirty and had severe odors emitting from the cell. However, based on staff interviews and a review of the J-Unit Recap Report dated April 10, 2023, which was one (1) day before the Expert's on-site review, it was noted the cell was partially cleaned by a work crew and staff had attempted to work with the incarcerated person to clean his cell. The Expert noted staff documented the partial cleaning and staff attempts to clean cell as required. The Expert did not observe other significant problems or concerns in the remaining housing units.

The Expert noted SBCJ updated "Custody Operations - Policy and Procedures Manual 362, Inmate Clothing and Personal Hygiene" to include procedures for staff to provide appropriate assistance to incarcerated persons who are expected to participate in cleaning, and have a mental illness, intellectual and developmental disabilities, or other special needs. The Expert will evaluate the implementation of policy and procedures, observations of cell conditions for incarcerated persons with mental health conditions, and documentation of staff assistance at the Main Jail and NBJ to determine if Substantial Compliance is appropriate.

- 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: Substantial Compliance

Prior Compliance Rating: Partial Compliance

Analysis/Observations:

6.B.4.a *Did the SBCJ develop and implement a policy and procedure(s) for effective cleaning, disinfection, distribution, and repair of mattresses?*

Post tour, SBCJ provided the Expert an updated copy of the "Custody Operations – Policy and Procedures Manual 362, Inmate Clothing and Personal Hygiene."

The Expert reviewed the Mattress Cleaning section of the policy and procedures manual, which requires all inmates be provided with a clean and serviceable mattress upon housing. Based on policy, 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.

Main Jail – Policy and Procedures Manual 362 states in part, *"Mattresses shall be stored in the mattress room with mattresses needing to be cleaned stored in an identifiable location marked [needs cleaning]. The Property Officer shall be responsible for collecting mattresses from the [need cleaning] location and ensuring that mattresses needing cleaned are cleaned daily, or more often as necessary by being sprayed down with a disinfectant and allowed to air dry for a period of time noted by the disinfectant manufacturer. For restricted housing units, the module deputy shall notify the property officer whenever an inmate is rehoused or released, and a mattress requires cleaning."*

Through document production, the Expert was also provided a copy of procedures titled "Cleaning of Mattresses, Property Boxes, and Empty Cells," and a PowerPoint presentation titled "Cleaning of Mattresses, Property Boxes." The Expert reviewed the procedures and PowerPoint presentation and noted that a Property Officer is responsible for inspecting mattresses for damage and cleaning used mattresses utilizing disinfecting wipes. Clean mattresses will then be placed in the mattress room for later use. Damaged mattresses are to be taken to the laundry department and given to the Laundry Coordinator for repair or replacement. The mattresses located in Restricted Housing units in "South, East, West, 100 unit of the IRC, or Northwest Restricted housing" are to remain in the cell to be cleaned on-site.

NBJ – Policy and Procedures Manual 362, states in part *"NBJ Deputies assigned to the housing units are responsible for ensuring that mattresses are cleaned and remain serviceable when an inmate is rehoused or released from the housing unit. Deputies may utilize inmate workers to clean mattresses, provided the inmate workers have been trained to effectively clean mattresses."*

The Expert noted Policy and Procedures Manual 362, and training material contain the policy and procedures for cleaning, disinfection, and distribution of mattresses.

6.B.4.b *Does the policy provide a process for inspection and replacement of all frayed and cracked mattresses or mattresses that cannot be disinfected sufficiently to eliminate harmful bacteria?*

A review of the Mattress Cleaning section of the "Custody Operations – Policy and Procedures Manual 362, Inmate Clothing and Personal Hygiene," states the Laundry Coordinator is responsible for the inspection and repair of any frayed or cracked mattress that cannot be disinfected sufficiently to eliminate harmful bacteria.

Main Jail - The procedures in "Cleaning of Mattresses, Property Boxes, and Empty Cells" and the PowerPoint presentation titled "Cleaning of Mattresses, Property Boxes" indicate Property Officers inspect used mattresses and take damaged mattresses to the Laundry Department and give them to the Laundry Coordinator for repair or replacement.

During the on-site review, the Expert noted the Main Laundry Room contains a location to repair mattresses. Torn or frayed mattress covers are removed and replaced with newly sown vinyl covers.

NBJ – A review of the Mattress Cleaning section of the "Custody Operations – Policy and Procedures Manual 362 states in part, *“For mattresses that are in need of repair or replacement, the Property Officer will deliver the affected mattresses to the Laundry Coordinator. The Laundry Coordinator will inspect and repair or replace any frayed or cracked mattresses that cannot be disinfected sufficiently to eliminate harmful bacteria.”*

The Expert noted "Custody Operations – Policy and Procedures Manual 362, Inmate Clothing and Personal Hygiene contains a process for inspection and replacement of all frayed and cracked mattresses or mattresses that cannot be disinfected sufficiently to eliminate harmful bacteria.

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: Partial Compliance

Prior Compliance Rating: Partial Compliance

Analysis/Observations:

Post tour, SBCJ provided the Expert with an updated copy of the "Custody Operations – Policy and Procedures Manual 362, Inmate Clothing and Personal Hygiene." Per policy and procedures, 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.

Main Jail - During interviews, the Expert interviewed twenty-two (22) incarcerated persons at the Main Jail. Of the 22 incarcerated persons, nine (9) incarcerated persons arrived during the rating period, or prior to the tour. Six (6) of nine (9) incarcerated persons stated their mattress was clean, and three (3) of nine (9) stated their mattress was dirty, torn, was too thin or contained body odors.

NBJ – During interviews, the Expert interviewed five (5) incarcerated persons. Of the five (5) incarcerated persons, two (2) arrived during the rating period, or prior to the tour. Both incarcerated persons stated they received a clean mattress.

The Expert noted the SBCJ policy and procedures have been updated and includes a process for incarcerated persons to be provided a clean and serviceable mattress. Per policy, 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 Expert will evaluate the implementation of the new inmate orientation card during the next tour to evaluate if the process provides incarcerated persons clean and serviceable mattresses, and if new process meets Substantial Compliance.

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: Non-Compliance

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?

Post tour, SBCJ provided the Expert with an updated copy of the "Custody Operations – Policy and Procedures Manual 362, Inmate Clothing and Personal Hygiene." Per policy and procedures, all individual cells shall be cleaned prior to placing another inmate into a cell previously occupied by another inmate. Per policy, *"Inmates that are housed in non-population (two or more persons per cell) housing units will be provided a new inmate orientation card they will sign upon receiving a cell that is clean, the deputy shall ensure that the cell is cleaned by cleaning the cell themselves, by utilizing an inmate worker(s) to clean the cell or by providing sufficient cleaning supplies to the inmate, if the inmate is amenable to that. Following this, the module deputy shall attempt to obtain a signature on the new inmate orientation card acknowledging that their cell was clean."*

Based on Custody Operations – Policy and Procedures Manual 362, Inmate Clothing and Personal Hygiene, SBCJ established procedures so that a cell is cleaned prior to an incarcerated person's placement in that 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?

Per policy, Inmates that are housed in non-population (two or more persons per cell) housing units will be provided a new inmate orientation card they will sign upon receiving a cell that is clean. Based on this process, SBCJ will be able to document and provide verification an incarcerated person was placed in a clean cell.

Main Jail - During interviews, some incarcerated persons informed the Expert they were assigned to a clean cell, while other incarcerated persons stated their cell was dirty.

NBJ - During interviews, most incarcerated persons informed the Expert they were assigned to a clean cell.

The Expert will evaluate the implementation of the new inmate orientation card during the next tour to evaluate if the process provides incarcerated persons placement in a clean cell.

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: Substantial Compliance

Prior Compliance Rating: Partial Compliance

Analysis/Observations:

SBCJ indicated they were committed to discontinuing the use of plastic beds or "boats." The County reports the plastic bed or "boats" have not been utilized since the onset of the COVID-19 pandemic. However, SBCJ drafted a policy on the use of "boats" if unforeseen circumstances require their use.

Per SBCJ Custody Operations-Policy and procedures Manual 305. Cell Bed Assignments, it states in part, *"At the main jail, there are plastic temporary bunks which may only be utilized in the case of emergency or an unforeseen situation in which additional temporary housing is needed. If a plastic bunk is utilized, the bunk must be cleaned and disinfected prior to being issued to any inmate or placed in any area and must be cleaned/disinfected prior to being transferred from one inmate to another, or when there is a biohazardous or bloodborne incident involving the mattress or plastic bunk, and upon being stored. Any staff member who utilizes a plastic bunk for any inmate must complete the [Inmate Plastic Bed No Bed Assignment Form]" that is stored with the plastic bunks. All inmates that are provided with a plastic bunk must also be provided with a clean and serviceable mattress in accordance with Custody Policy 362."*

The Expert was also provided a document titled "Inmate Plastic Bed, No Bed Assignment Form." The form is designed to be completed by the Classification staff to provide an explanation of when a plastic bed is issued and the condition of the plastic bed upon issuance. The form indicates plastic beds must be sanitized by being wiped clean with Purell Disinfecting Surfaces Wipes or sprayed with Lysol and wiped clean.

During the on-site review, the Expert did not observe any incarcerated persons assigned to a plastic bed or "boat."

The Expert noted SBCJ established a policy and procedure, and document titled "Inmate Plastic Bed, No Bed Assignment Form" which provide direction in the use, cleaning and disinfection of plastic beds or "boats" when they are assigned to incarcerated persons during emergency or unforeseen situation in which additional temporary housing is needed. The Expert is unable to fully evaluate the new process and procedures until a situation requires the use of plastic beds or "boats."

6.C. Laundry

6.C.1. Clothing and lined 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 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.

Compliance Rating: Substantial Compliance

Prior Compliance Rating: Partial Compliance

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?

Main Jail and NBJ – Through document production, the Main Jail and NBJ provided a clothing and linen exchange schedule for all Main Jail and NBJ housing units. Based on the “Linen Exchange Schedule” provided by NBJ, incarcerated persons are offered the opportunity to submit one (1) outer uniform, one (1) t-shirt, one (1) boxer/underwear, one (1) pair of socks, nightgown, and bra per week.

Based on the linen exchange schedules, interviews with laundry staff, and incarcerated person interviews, linen exchange is mandatory in certain housing units, while other housing units offer weekly one-for-one clothing and linen exchange.

Based on the Custody Operations – Policy and Procedures Manual 362 titled “Inmate Clothing and Personal Hygiene,” dated January 2023, incarcerated persons are issued the following clothing items:

- Two (2) pairs of socks
- Two (2) sets of clean undergarments
- Two (2) white T-shirts
- One (1) set of clean outer garments
- One (1) clean mattress cover or sheet
- One (1) clean towel
- Two (2) blankets

However, based on an email dated April 10, 2023, authored by “SBJ Opt’s Lt’s,” effective April 14, 2023, SBCJ increased the undergarments linen issued to incarcerated persons to the following items:

- Female - four (4) bras, four (4) panties, four (4) pairs of socks, four (4) t-shirts, and two (2) nightgowns.
- Male - four (4) boxers, four (4) T-shirts, and four (4) pairs of socks.

The Expert noted the increase of undergarments issued to incarcerated persons for the week should assist them in having clean clothing until the next scheduled weekly linen exchange.

Further, as of May 15, 2023, sweatshirts have been issued to all incarcerated persons, and may be exchanged based on regular clothing exchange procedures and upon reasonable request.

Once per week, based on the assigned housing unit, incarcerated persons are offered the opportunity to exchange one-for-one clothing and sheets. Blankets are exchanged once per month.

During incarcerated person interviews, all incarcerated persons stated they are either required or offered (based on housing unit) clothing exchange weekly. 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, have stains or are ripped/damaged.

When circumstances warrant, the Main Jail staff are required to exchange clothing on non-laundry days. However, incarcerated persons at the Main Jail stated staff does not always exchange clothing, and clothing exchange is dependent on the staff member(s) they ask. The Expert believes the increase of undergarments issued to incarcerated persons should decrease the demand for laundry exchange during non-laundry days. Due to time constraints, the Expert was only able to interview five (5) incarcerated persons at NBJ. No issues or problems were noted in the exchange of clothing on non-laundry days at NBJ.

Some incarcerated persons stated due to the number of clothing items issued, they needed to wash clothing in their cell or modular to ensure they had sufficient clean clothing for the week. However, the Expert noted this problem should decrease based on the increase of undergarments issued to incarcerated persons.

While touring the Main Jail laundry, the Expert observed bins of white clothing soaking in bleached water to remove stains and whiten undergarments. Washed clothing that had been sorted and folded by incarcerated person laundry workers appeared to be clean and in fair condition. The Expert toured the NBJ laundry room and noted no clothing/linen is stored or maintained in the laundry room. The Laundry Manager informed the Expert all clothing is delivered to the laundry room, washed the same day, then returned to housing units the same day to prevent storage within the laundry room.

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

Main Jail - The Expert noted that based on kitchen staff and the incarcerated person/kitchen worker interviews, kitchen workers are provided washed and clean uniforms daily.

Incarcerated kitchen workers that were interviewed stated they are provided clean, washed kitchen uniforms daily.

Incarcerated persons stated if their uniform becomes dirty or soiled during work hours, staff will issue them clean uniforms promptly.

NBJ - The Expert noted that, unlike Main Jail incarcerated person kitchen workers who wear dark green/blue uniforms, NBJ kitchen workers wear white uniforms. Some kitchen workers' uniforms appeared stained and unclean. The Expert interviewed two (2) NBJ kitchen workers. Both kitchen workers stated they are provided with washed clothing daily for work. The Expert was provided a washed kitchen uniform; however, the uniform contained stubborn stains and appeared unclean. The Expert recommends the laundry department bleach or soaks the uniforms to remove stubborn stains.

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?

Main Jail – As the Expert previously noted in 6.C.1.1 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 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 up to a couple of days. The Expert believes the increase of undergarments issued to incarcerated persons for the week should decrease the demand for laundry exchange during non-laundry days.

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.

NBJ - In situations where an incarcerated person presents to jail staff clothing or linen that is soiled, or they need an urgent exchange of clothing/linen, incarcerated persons stated staff would exchange clothing.

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 lines, use of personal protective equipment, and Material Safety Data Sheets.

Compliance Rating: Partial Compliance

Prior Compliance Rating: Partial Compliance

Analysis/Observations:

Main Jail – Through document production, the Main Jail provided a copy of the Chemical Safety Training PowerPoint presentation obtained from the Occupational Safety and Health Administration (OSHA) website. The presentation provides basic and necessary information on chemical safety

training. The Main Jail also provided a copy of the "Bloodborne Pathogens and The Proper Use of Personal Protective Equipment" PowerPoint presentation lesson plan.

The Main Jail also provided a copy of the Santa Barbara County Sheriff's Custodial Facilities Chemical Safety PowerPoint Training Roster. The roster identified six (6) staff members, five (5) Northwest Dock Inmate Workers, and nine (9) Laundry Department Inmate Workers as participating in the "Chemical Safety PowerPoint Training." The training roster did not contain the date(s) when the training was provided.

The Main Jail also provided three (3) sheets of the Santa Barbara County Sheriff's Custodial Facilities Bloodborne Pathogens PowerPoint Training Rosters. The training rosters identified five (5) staff members, nine (9) Laundry Department Inmate Workers, and five (5) Northwest Dock Inmate Workers as participating in Bloodborne Pathogens PowerPoint Training. One (1) staff member participated in the training in February 2023. It is unclear when the remaining staff members and incarcerated persons attended training, as no training date was noted.

The Main Jail also provided the Expert with a copy of the "Laundry Department Inmate Worker Orientation" document. The document provides basic Laundry Department duties and responsibilities, notification of a Material Safety Data book in the Laundry Department, notification of an eyewash station in the Laundry Department, and what to do with red and yellow biohazardous contaminated color bags. The second page contains an acknowledgment of reading the document and a place for both the incarcerated person and the Laundry Coordinator to sign and date. The document is written in English and Spanish. The Main Jail also provided nine (9) copies of acknowledgment forms signed by incarcerated persons assigned to the laundry room. All nine (9) copies were signed and dated February 21, 2023.

During the on-site review, the Expert interviewed two (2) Laundry Department staff members and two (2) incarcerated laundry workers. One (1) staff member stated he did not attend chemical safety training. However, based on the Chemical Safety PowerPoint Training Roster, both staff members' names appear on the roster as attending training. Both staff members stated they attended biohazardous and bloodborne pathogens and PPE training. Both staff members' names are on the roster as attending training.

Both incarcerated laundry workers stated they work with laundry washing and cleaning chemicals. Both stated they were provided training on chemical safety, biohazardous and bloodborne pathogens, and the proper use of PPE. The Expert searched for "Laundry Department Inmate Worker Orientation" acknowledgment forms for the two (2) incarcerated persons who were interviewed but was only able to locate one (1) acknowledgment form. The Expert reviewed the incarcerated person's training rosters to confirm if both incarcerated persons had received training. According to the rosters, one (1) incarcerated person received

Chemical Safety training but not Bloodborne Pathogens and PPE training. One (1) incarcerated person received Bloodborne Pathogens and PPE training but not Chemical Safety training.

During the on-site review, the Expert noted an incarcerated person assigned to work in the laundry room claimed they received clothing contaminated with blood and feces mixed in with the regular dirty laundry. The incarcerated person claimed he was instructed by the laundry staff to put the clothing aside to be sorted and washed. Clothing, linen, or other materials contaminated with blood or feces should be in biohazardous red bags and properly disposed of. The Expert recommends staff and incarcerated persons assigned to the Laundry Department are trained in handling biohazardous and bloodborne contaminated clothing and linens, use of PPE, and be familiar with the policies and procedures for handling biohazardous materials.

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

NBJ – The NBJ also provided copies of the Chemical Safety PowerPoint Training and Bloodborne Pathogens and The Proper Use of Personal Protective Equipment PowerPoint lesson plan. NBJ provided copies of the "Admin Bloodborne Pathogens Training Sign In" sheet with fourteen (14) staff member signatures dated February 1 and 2, 2023, and a "Laundry Crew Bloodborne Pathogens Training Sign In" sheet with six (6) incarcerated person signatures dated March 1, 2023. NBJ also provided copies of an "Admin Chemical Safety Sign In" sheet with fourteen (14) signatures dated February 1 and 2, 2023, and "Laundry Crew Chemical Safety Training Sign In" sheet with six (6) incarcerated person's signatures dated March 1, 2023.

NBJ provided the Expert with a copy of the "Laundry Department Inmate Worker Orientation" document, which is the same document used at the Main Jail. NBJ also provided six (6) copies of acknowledgment forms signed by incarcerated persons assigned to the laundry room. All six (6) copies were signed and dated February 22, 2023.

During the on-site review, the Expert interviewed one (1) Laundry Department staff member and one (1) incarcerated laundry worker. The staff member stated he attended training on chemical safety, biohazardous and bloodborne contaminated clothing, proper use of PPE, and MSDS. The Expert reviewed the training records and noted the staff member attended all training on February 1, 2023. The incarcerated person laundry worker stated he attended training on chemical safety, biohazardous and bloodborne contaminated clothing, proper use of PPE, and MSDS. The Expert reviewed the training records and noted the incarcerated person attended training on February 22, 2023, and March 1, 2023. The Expert also noted the incarcerated person signed a copy of the Laundry Department Inmate Worker Orientation form on February 22, 2023.

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

Based on the sign-in sheets and documentation provided by SBCJ (Main Jail and NBJ), the Expert recommends staff and incarcerated workers are provided training in laundry duties, chemical safety, biohazardous and bloodborne contaminated clothing and linens, use of PPE, and MSDS training before or on the date of assignment. Based on the dates training was provided, it appears most all training was provided prior to the upcoming compliance review. The Expert recommends each staff member and the incarcerated person assigned to work in the Laundry Department are provided with all required training before or on the date of assignment to ensure all workers are aware of the health and safety risks and requirements before performing tasks associated with their work assignment. Additionally, all training should be provided in a classroom setting for staff and incarcerated persons to participate and ask questions to ensure they understand the information presented. The instructor should be prepared to provide the training in a manner that is conducive to the participants; for example, the lesson plan may need to be created in an alternate language, such as Spanish, to target the audience.

Moving forward, to demonstrate proof of practice as to timely training, the jail's training logs should clearly document (1) the completion date of the incarcerated person's training, and (2) the start date of the incarcerated person's job assignment.

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: Partial Compliance

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?

Main Jail and NBJ - Through document production, the Main Jail and NBJ provided the Expert with a copy of a form titled "Mental Health Evaluation Request Form." The form was created for Deputies to make mental health evaluation referrals.

The Expert requested copies of documentation for any health care referrals submitted by staff or documentation from clinical staff on addressing and/or resolving an incarcerated person's refusal to exchange linens if there was reason to believe such refusal related to the incarcerated person's mental health condition. The Main Jail and NBJ could not locate documentation to prove that mental health evaluation requests were made during the rating period of July 1, 2022, through December 31, 2022.

During the on-site review at the Main Jail, the Expert interviewed seven (7) Custody Deputies and one (1) mental health staff to evaluate what is done to address incarcerated persons who refuse to exchange linen or clothing, and that the reason for the refusal may be related to the incarcerated persons mental health. Two (2) Deputies stated they would call mental health and were aware of submitting the Mental Health Evaluation Request Form. Both Deputies demonstrated how to access the form through the SBCJ intranet. Five (5) Custody Deputies were not aware of the mental health referral policies or procedures or aware of the Mental Health Evaluation Request Form, but two (2) Custody Deputies did indicate they would try to contact mental health. The mental health professional stated he has received calls from Custody Deputies when incarcerated persons are experiencing hygiene or cleanliness issues and has received some referral forms within the last four (4) or five (5) months. The mental health professional stated they complete assessments and can place incarcerated persons on mental health observation.

During the tour, the Expert observed housing units and Restrictive Housing Unit cells, where it appeared the incarcerated persons were not maintaining proper hygiene and were wearing undergarments that appeared dirty and needed to be exchanged.

NBJ – During the on-site review at NBJ, the Expert was able to interview two (2) Custody Deputies to evaluate what is done to address incarcerated persons who refuse to exchange linen or clothing and that the reason for the refusal may be related to the incarcerated persons mental health. Both Deputies stated they would call mental health and were aware of submitting the Mental Health Evaluation Request Form. Both Deputies demonstrated how to access the form through the SBCJ intranet. The Expert was unable to tour all the cells or dormitories at NBJ, but the ones he was able to review, he did not observe incarcerated persons who appeared not to be maintaining proper hygiene or wearing undergarments that appeared dirty and needed to be exchanged.

The Expert recommends SBCJ develop procedures for all staff to contact mental health staff when an incarcerated person refuses to exchange linen/clothing, and there is reason to believe such refusal relates to the incarcerated person's mental health condition. The Expert further recommends the procedures include a process to document these referrals for tracking and compliance purposes. Further training of staff is necessary to ensure adequate implementation of these required procedures.

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

Main Jail – As noted in section 6.C.3.(1), the mental health professional stated he has received calls from Custody Deputies when incarcerated persons are experiencing hygiene or cleanliness issues and has received some referral forms within the last four or five months. The mental health professional stated they complete assessments and can place incarcerated persons on mental health observation.

NBJ - Due to limited time constraints, the Expert was unable to interview NBJ mental health staff.

The Expert was informed the SBCJ is in the process of creating a tracking process to provide proof of practice by the next rating period. The Expert recommends the tracking process document all contacts received by custody staff for any incarcerated person refusing to exchange linen if there is reason to believe such refusal relates to the person's mental health conditions and the actions taken in resolving the situation.

6.D. Food Service and Kitchen Operations

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: Substantial Compliance

Prior Compliance Rating: Substantial Compliance

Analysis/Observations:

6.D.1.a Are incarcerated persons assigned to kitchen duties provided clean outer clothing daily?

Main Jail – During the on-site review, the Expert noted the Main Jail incarcerated person's kitchen worker uniforms are dark green/dark blue in color, and all workers appeared to be wearing clean outer clothing/uniforms.

The Expert interviewed three (3) incarcerated persons/kitchen workers. All three (3) kitchen workers stated a clean kitchen uniform is provided daily before reporting to work. If the uniform becomes soiled during work or they make a request for a clean uniform, the kitchen staff will provide a clean uniform.

NBJ – During the on-site review, the Expert noted all NBJ incarcerated kitchen workers were wearing white-colored uniforms. Some uniforms appeared off-white in color or had stains.

The Expert interviewed two (2) incarcerated person kitchen workers. Both workers stated a clean kitchen uniform is provided daily before reporting to work. Although they have not asked or experienced a situation when their uniform has become soiled or dirty, both stated they would be allowed to get or exchange a dirty uniform for a clean uniform. The Expert noted both sets of uniforms worn by the kitchen workers appeared off-white in color and/or had stains. The Expert was able to review a washed uniform that had been delivered to a kitchen worker from the laundry room. The uniform was off-white in color, had stubborn stains, and did not appear clean. The Expert recommends the NBJ laundry department bleach or soaks the white uniforms to remove stubborn stains and ensure kitchen uniforms are and appear clean.

6.D.1.b If during an incarcerated person's work shift the clothing becomes soiled, is it replaced promptly?

Main Jail – The Expert interviewed three (3) incarcerated persons/kitchen workers. All three (3) workers stated a clean kitchen uniform is provided daily before reporting to work. If the uniform becomes soiled during work or they make a request for a clean uniform, the kitchen staff will provide a clean uniform.

NBJ – The Expert interviewed two (2) incarcerated person kitchen workers. Both workers stated a clean kitchen uniform is provided daily before reporting to work. Although they have not asked or experienced a situation when their uniform has become soiled or dirty, both stated they would be allowed to get or exchange a dirty uniform for a clean uniform.

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

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?

Main Jail – Through document production, the Main Jail provided copies of forms titled "Weekly Cleaning – Checklist & Monthly Cleaning – Checklist" and forms titled "SB Kitchen Daily Cleaning/Shift Closing – Checklist." During the rating period, one (1) or both forms were mostly provided to the ECM on a weekly basis. Both forms appear to be checklists of cleaning tasks to be conducted on a daily, weekly, or monthly basis. The forms contain a space for staff to initial but do not

provide space for additional information to be documented, such as problematic issues or actions taken to correct identified issues.

The Expert reviewed both forms provided for the rating period and identified the following results:

- July – A total of eight (8) forms were submitted during a three (3)-week period, missing one (1) weekly inspection.
- August – Eleven (11) forms were submitted during a five (5)-week period.
- September – Eight (8) forms submitted during a four (4)-week period.
- October – Fifteen (15) forms submitted during a four (4)-week period.
- November – Nine (9) forms were submitted during a three (3)-week period, missing one (1) weekly inspection.
- December – Twelve (12) forms submitted during a three (3)-week period, missing one (1) weekly inspection.

Post tour, SBCJ provided five (5) copies of the “Main Jail Kitchen Weekly Inspection Checklist.” A total of five (5) reports dated 2/12/23, 3/6/23, 3/13/23, 3/24/23, and 3/30/23 were provided. The Expert noted a new form to document weekly inspections commenced in February 2023. The inspection sheets contain the location/room/area inspected, result of inspection, and allows space for staff to document what action was taken to correct deficiencies.

NBJ – The NBJ submitted copies of the form titled "NBJ Kitchen Daily Cleaning / Shift Closing – Checklist." NBJ commenced completing daily cleaning/shift closing checklist forms on November 19, 2022. The forms appear to be a checklist of cleaning tasks to be conducted daily. The forms contain a space for staff to initial but does not provide space for additional information to be documented, such as problematic issues or actions taken to correct identified issues.

The Expert reviewed the forms provided and identified the following results.

- November – Nine (9) forms were submitted during a two (2)-week period, missing two (2) weekly inspections.
- December – Thirty (30) forms submitted during a four (4)-week period.

Post tour, SBCJ provided four (4) copies of the “NBJ Kitchen Weekly Inspection Checklist.” A total of four (4) reports dated 6/3/23, 6/10/23, 6/17/23, and 6/24/23 were provided. The Expert noted a new form to document weekly inspections commenced in June 2023. The inspection sheets contain the location/room/area inspected, result of inspection, and allows space for staff to document what action was taken to correct deficiencies.

The Expert recommends the Main Jail and NBJ continue to document weekly inspections. The Expert will be able to review of the weekly inspections and results during the next tour.

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

During the on-site review, the Expert interviewed the ECM at the Main Jail and NBJ. The Expert was informed the kitchen inspection reports are being provided to the ECM on a weekly basis. As previously indicated, the report does not appear to be an inspection form but a checklist of daily, weekly, and monthly tasks to complete.

Although a weekly inspection report is provided to the ECM on a weekly basis, the Expert recommends the Main Jail create a "Weekly Inspection" form that lists/identifies all rooms, locations, equipment, or items within the main kitchen operations. The form should contain a location for staff to address *in narrative format*, identified issues and what actions were taken to correct identified issues. Copies of the inspection forms should be 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?

Main Jail – A review of the documentation provided identified various issues that were noted on the daily, weekly, and monthly checklists. During the on-site review, the Expert interviewed the ECM. The ECM stated if a kitchen operation issue is identified on the report, he will contact the Kitchen Supervisor to find out if a work order was submitted.

NBJ – A review of the documentation provided no issues or actions taken noted on the NBJ Kitchen Daily Cleaning checklists submitted during the rating period.

The Expert recommends the Main Jail and NBJ create a "Weekly Inspection Report," which includes the actions taken to correct identified issues. The Expert further recommends the weekly inspection report contains an ongoing tracking method to monitor any actions taken or work orders submitted because of the weekly inspections.

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: Non-Compliance

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?*

Main Jail and NBJ - Through document production, SBCJ provided a copy of "Santa Barbara County Sheriff's Office Custody Operations – Policy and Procedures Manual 384 Food Service," dated January 2023. Policy and Procedures 384 Food Service identifies Section 1246 of California Code of Regulations (CCR), Title 15, under "Related Orders," excerpted below:

Per CCR Title 15, section 1246. Food Serving and Supervision. Policies and procedures shall be developed and implemented to ensure that appropriate work assignments are made, and food handlers are adequately supervised. Food shall be prepared and served only under the immediate supervision of a staff member.

Policy and Procedures 384 Food Service states, in part, "The Sheriff's Office employs a Food Services Manager who oversees the operation of the kitchen in both the Main Jail and Northern Branch Jail. The Food Services Manager is responsible for supervising the staff cooks and ensuring that those cooks are supervising the preparation of the food, following relevant policies and procedures, and preparing meals in accordance with nutritional and legal guidelines. The Food Services Manager will assist the contracted food services representative with inventory and orders when necessary. The Food Services Manager shall coordinate with the Continuous Quality Assurance Unit and the contracted healthcare provider regarding the inmate's requests for "religious diets or medically designated diets." The staff cooks are responsible for overseeing the preparation of food by inmate workers assigned to the kitchen and ensuring that inmates are utilizing kitchen equipment and utensils safely. The Kitchen Deputy is responsible for supervising the Inmate Workers for safety and security purposes...."

Based on Policy and Procedures 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.*

Main Jail and NBJ - A review of Policy and Procedures 384 Food Service indicates that provisions for tool control, roles and responsibilities of Jail staff, food services

Contractor, employee, and incarcerated person worker training in food safety and temperature monitoring are included.

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

Main Jail and NBJ - A review of Policy and Procedures 384 Food Service, Section III., Procedures, Subsection 1., provides that incarcerated person workers are medically screened prior to being assigned to work in the kitchen.

During the on-site review, the Expert received numerous email notifications from Wellpath Health Care to SBCJ staff with medical screening results for incarcerated person Main Kitchen candidates. Based on the review of Policy and Procedures 384 Food Service and these email notifications, the Expert was able to determine the policy provides direction for incarcerated person workers to be medically screened prior to being assigned to work in the kitchen and medical clearance for assignment to work in the kitchen is provided to SBCJ staff.

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

Compliance Rating: Substantial Compliance

Prior Compliance Rating: Partial Compliance

Analysis/Observations:

Main Jail and NBJ - Incarcerated persons assigned to work in the main kitchen are 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.

A course syllabus states the course contents consist of Personal Hygiene, The Importance of Sanitization and Pest Control, Identify Proper Serving Practices, Preventing Cross Contamination, Time/Temperature Control, and 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 Expert was informed that if an incarcerated person fails the test, they will 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 Expert was informed the course is also taught bilingually.

Through document production and email, the Main Jail provided forty-three (43) certificates for incarcerated kitchen workers who completed the course.

The Main Jail provided a list of twenty-three (23) names of incarcerated kitchen workers assigned to work at the Main Jail Kitchen. Of the twenty-three (23) workers assigned to work during the on-site review, nine (9) incarcerated workers completed the ServSafe California Food Handler Assessment course, and fourteen (14) did not have ServSafe California Food Handler Assessment certificates.

During the on-site review, the Expert interviewed three (3) incarcerated kitchen workers. All three (3) stated they attended kitchen operations training. All three (3) incarcerated kitchen workers had ServSafe California Food Handler Assessment certificates.

NBJ – Through document production, NBJ provided a copy of the ServSafe California Food Handler Assessment course syllabus. NBJ also provided a list of twenty nine (29) incarcerated kitchen workers assigned to work at 7:00 a.m., 3:00 p.m., and G-Unit weekend workers. Post tour, the NBJ provided forty two (42) ServSafe California Food Handler Assessment certificates. Of the twenty nine (29) workers assigned to work during the on-site review, sixteen (16) had obtained ServSafe certificates. .

During the on-site review, the Expert interviewed two (2) incarcerated kitchen workers. One incarcerated kitchen worker stated he has not yet attended kitchen operations training. One incarcerated kitchen worker stated he was rescheduled to attend training. Post tour, both incarcerated kitchen workers completed training and obtained ServSafe California Food Handler Assessment certificates in May 2023.

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.

Compliance Rating: Partial Compliance

Prior Compliance Rating: Non-Compliance

Analysis/Observations:

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

Main Jail and NBJ - The Expert requested documentation of food temperature checks from July 1, 2022, through December 31, 2022. Documentation of temperate checks was not provided.

During the on-site review, the Expert was informed the Main Jail and NBJ kitchens began logging food temperatures on the “Daily Cleaning / Shift Closing – Checklist.” The Expert reviewed various Main Jail and NBJ “Daily Cleaning / Shift Closing-Checklist” forms that were provided as the “Weekly Inspections” sheets for the rating period. The Expert noted and identified the forms list “Dinner Main

Course (Patties, Casserole, Etc.), Dinner Vegetable, Dinner Beans, and Dinner Starch" on all forms. The Main Jail commenced logging food temperatures on October 11, 2022. NBJ commenced logging food temperatures on November 19, 2022.

The Expert recommends the Main Jail and NBJ kitchens conduct ongoing periodic temperature monitoring of food and maintain records to provide verification of the temperature checks. The Expert also recommends the temperature logs include each food item served each day.

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

Main Jail and NBJ - The Expert requested documentation of food temperature checks from July 1, 2022, through December 31, 2022. Documentation of temperate checks was not provided. The Expert was unable to evaluate if food prepared hot is served hot to the greatest extent possible.

During the on-site review, the Expert interviewed twenty-two (22) incarcerated persons from various housing units and modules at the Main Jail. Some incarcerated persons stated the food was hot to warm on some days. Most all incarcerated persons stated the hot food is warm, lukewarm, or cold. Some incarcerated persons stated the food trays/containers get delivered to the building but would remain on the cart between thirty (30) minutes to more than one (1) hour before being distributed.

NBJ - During the on-site review, the Expert interviewed five (5) incarcerated persons from various housing units at NBJ. All five (5) incarcerated persons stated the food was hot or warm.

During the on-site review on April 14, 2023, a directive was issued via email to all SBCJ staff, informing them that that same day, the dinner tray food serving line in the kitchen will not start until 1715 hours (5:15 p.m.). The directive also stated that all food carts will be filled and sent to the housing units no sooner than 1750 hours (5:50 p.m.). Incarcerated person evening dinner trays will only be passed out by the night shift staff (1800-0600 hours [6:00 p.m. to 6:00 a.m.]). Adequate implementation of this directive will help to facilitate hot food trays being served hot to incarcerated persons on a more frequent basis; however, the Expert recommends temperature checks are recorded at the time food trays/containers are distributed to the incarcerated persons to determine if prepared hot food is served hot to the greatest extent practicable.

The Expert was unable to evaluate or determine if hot food prepared as hot is served hot to the greatest extent practicable as periodic temperature checks were not provided. Reports indicate that there have been continued deficits in this area at the Main Jail. The Expert recommends that Main Jail kitchen staff conduct and record temperature checks when meals are prepared and conduct temperature

checks at the time food trays/containers are distributed to the incarcerated persons. Recording food temperatures at the time food is prepared and recording food temperatures again when trays/containers are served will provide information to determine if prepared hot food is served hot to the greatest extent practicable.

To ensure that "food prepared as hot is served hot to the greatest extent practicable," the Main Jail should implement use of warming carts or similar equipment to keep food warm during transport to the housing units.

6.E. Work Order System and Preventative Maintenance

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

Compliance Rating: Substantial Compliance

Prior Compliance Rating: Partial Compliance

Analysis/Observations:

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Main Jail - The Expert requested copies of the training curriculum on the process for submitting work orders and/or training records. The Main Jail and the NBJ provided a document titled "Work Order Request Training PowerPoint," which included seven (7) slides with instructions on submitting work orders through the Santa Barbara County intranet. The Main Jail also provided 126 staff acknowledgments of training, and NBJ provided 107 staff acknowledgments of training.

During the on-site review, the Expert asked the Main Jail ECM to access the County Links program utilizing the step-by-step instructions on the Work Order Request Training PowerPoint to evaluate the process of submitting a work order. It was discovered that the Work Order Request Training PowerPoint contained a discrepancy on Slide 7. It was unclear whether the correct "department" was identified in the slide. The Expert was informed the work order would still be processed regardless of what department was identified.

During the on-site review at the Main Jail, the Expert interviewed seven (7) housing unit building Deputies. All Deputies were familiar with the process of submitting work orders through the Santa Barbara County intranet site.

During the on-site review at NBJ, the Expert interviewed two (2) housing unit building Deputies. Both Deputies were familiar with the process of submitting work orders through the Santa Barbara County intranet site.

The Expert was unable to obtain the total number of employees assigned to work at the Main Jail and at NBJ to evaluate if all SBCJ employees received training on the process of submitting work orders. However, the Expert also noted he did

not encounter an employee who was unable to demonstrate or explain how to submit a work order.

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

Analysis/Observations:

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

Main Jail – Through document production, the Main Jail provided a copy of the November 2022 Preventive Maintenance Work Order for Fans and a document titled "Santa Barbara County Jail Circulation Fan Bimonthly Inspection," dated November 17, 2022. The Expert reviewed both documents and noted the following. One work order to conduct the cleaning of wall fans was processed on October 26, 2022. The work was completed on November 14, 2022.

Post tour, the Main Jail provided copies of preventive maintenance work orders for the following:

- (a) Regular Maintenance of Plumbing dated 12/9/22, 1/13/23, 2/8/23, 2/12/23, 4/6/23,
- (b) Quarterly Fan Cleaning dated 5/5/22, 11/14/22, and 2/7/23,
- (b) Quarterly Cleaning of Negative Airflow Vents dated 5/9/22,
- (d) External Contractor for Negative Pressure Cells dated 4/11/23,
- (e) Monthly Fire Extinguisher Inspections dated 4/5/23, 4/15/23, 5/16/23, and 6/15/23.

The Expert was informed the SBCJ is working on incorporating (f) monthly fire & life safety inspections, and (c) quarterly replacement of ventilation filters into the General Services Preventive Maintenance program.

The Expert noted regular maintenance of plumbing and quarterly cleaning of fans has been incorporated into the General Services Preventive Maintenance

program. Quarterly cleaning of ventilation grills (b) has also not been fully implemented.

NBJ – Through document production, NBJ provided a report of work orders processed from July 1, 2022, through December 31, 2022. The Expert reviewed the Work Order Report and noted the following. The report appears to document that some work orders were processed for what appears to be preventive maintenance work. The report identified the following items and dates when inspection, preventive maintenance, or repairs were conducted:

- Quarterly Eye Wash/Shower Stations, dated 8/2/22, 10/4/22, 11/2/22
- Quarterly Air Handler Unit, dated 8/12/22 & 9/15/22, 10/26/22, 11/14/22, 11/15/22, 12/7/22
- Quarterly Air Handler Unit Mini Split, dated 8/12/22, 8/23/22, 9/14/22, 10/24/22, 11/14/22, 11/17/22, 12/6/22
- Quarterly Exhaust Fans, dated 7/15/22, 8/10/22, 8/23/22, 9/13/22, 10/7/22, 11/3/22, 11/17/22, 12/6/22
- Quarterly HVAC Controls, dated 8/15/2022, 9/1/22, 9/16/22, 10/26/22, 11/14/22, 11/30/22
- Quarterly Water MNG Controls, dated 8/2/22, 8/26/22, 10/4/22, 10/31/22, 11/2/22, 11/16/22
- Quarterly Air Handler Unit Interior, dated 8/12/22, 8/23/22, 9/8/22, 10/6/22, 10/24/22, 11/15/22, 12/15/22
- Quarterly Mixing Valve and CIRC PUMP, 8/2/22, 10/3/22, 12/6/22
- Quarterly Valves, 8/2/22, 11/21/22
- Quarterly Wet Room Insp., dated 7/19/22, 11/2/22
- Quarterly Sump Pump, dated 7/19/22, 11/16/22

Post tour, the NBJ provided a report of work orders processed in May 2023. Based on this report, the following quarterly maintenance was completed:

- (a) Quarterly Eye Wash/Shower Stations, dated 5/5/23
- Quarterly Air Handler Unit, dated 5/1/23 & 5/17/23,
- Quarterly Air Handler Unit Mini Split, dated 5/1/23 & 5/19/23,
- Quarterly Exhaust Fans, dated 4/28/23 & 5/22/23
- Quarterly HVAC Controls, dated 4/21/23 & 5/26/23,
- (a) Quarterly Water Mng Controls, dated 5/15/23 & 5/30/23
- Quarterly, Air Handler Unit-Interior, dated 5/1/23 & 5/19/23

The Expert was unable to determine what preventive maintenance or repairs were performed as the NBJ report does not provide details.

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? Has not been implemented.

- b. *Quarterly cleaning of fans and ventilation grills? Partially implemented at the Main Jail, unknown for NBJ.*
- c. *Quarterly replacement of ventilation filters? Has not been implemented at the Main Jail, unknown for NBJ.*
- d. *Regular external contractor monitoring of negative pressure cells and gauges? Has not been implemented.*
- e. *Monthly fire extinguisher inspections? Has not been implemented.*
- f. *Monthly fire and life safety inspections? Has not been implemented.*

Main Jail and NBJ – Through document production, the Expert was informed that the work order reporting system for cleaning or maintenance requiring an established schedule has not been fully implemented.

The Expert recommends the Main Jail and NBJ implement the work order reporting system to provide for any cleaning or maintenance requiring an established schedule, at a minimum, for the items listed above.

- 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: Partial Compliance

Prior Compliance Rating: Non-Compliance

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?*

Main Jail and NBJ – Through document production, SBCJ provided a copy of the “Santa Barbara County Sheriff’s Office Custody Operations-Policy and Procedures Manual (PPM) Section 102, Inspection and Operations Review.” PPM Section 102 is still under development.

The Expert reviewed PPM 102 and identified various environmental health and safety requirements required by the *Murray v. Santa Barbara County Remedial Plan* is included. Specifically, PPM 102, Section IV., subsection Sanitation, Safety and Maintenance states, in part, *“Cleaning schedules have been set up as to not conflict with other jail activities or mass movements of inmates. Any unsafe condition or maintenance requirement will be reported to the Lead Supervisor, and a work order completed and submitted to General Services. An 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 Commanders. This ECM will be responsible for conducting inspections relative to cleanliness and sanitation and submit written reports with corrective action plans. The Environment of Care Monitor for the Northern Branch Jail is the Administrative Senior Custody Deputy. This position shall have the same job duties as the Main Jail ECM but is assigned at the NBJ."

The Expert recommends PPM 102, Inspection and Operations Review be completed and implemented.

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 Santa Barbara County Sheriff's Office Custody Operations-PPM 102., Inspection and Operations Review is still under development.

The Expert recommends PPM 102 contain procedures for every housing unit that includes an assessment of maintenance issues for;

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

6.F. Chemical Control and Biohazardous Materials

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: Partial Compliance

Prior Compliance Rating: Non-Compliance

Analysis/Observations:

Through document production, SBCJ provided a copy of the "Santa Barbara County Sheriff's Office Chemical Management Program." The Expert reviewed the document and identified it contains the process for safe storage, distribution of chemicals used at the jail, and various other procedures. The Expert was unable to locate dilution procedures at SBCJ. The Expert identified certain cleaning chemicals are diluted and subsequently provided to incarcerated persons for the purpose of conducting daily cleaning.

The Expert recommends the process for diluting any chemicals at SBCJ is also incorporated into the policy and procedures. Additionally, the Expert was unable to determine if the Santa Barbara County Sheriff's Office Chemical Management Program will be incorporated into the SBCJ policies.

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 County'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

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?

Main Jail and NBJ - Through document production, SBCJ provided a copy of the Santa Barbara County Sheriff's Office Chemical Safety Program training PowerPoint presentation and copies of training rosters. The ECM and Expert have been in contact with the Expert throughout the development of the Chemical Safety Program training PowerPoint presentation. The PowerPoint presentation outlines the basic chemical safety requirements under OSHA. SBCJ also implemented a chemical safety training for staff and incarcerated persons assigned to the responsibilities of cleaning.

6.F.2.a 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?

Main Jail - Through document production, the Main Jail provided copies of Chemical Safety PowerPoint training rosters for staff and incarcerated persons. Based on the training rosters provided, the Main Jail trained 123 staff members and thirty-four (34) incarcerated persons assigned to the kitchen, laundry, and cleaning crews. Some documents contained dates when the training was provided, but most did not contain the training dates.

During the on-site review, the Expert was informed staff received training by accessing the intranet, and incarcerated persons were provided training by the ECM.

The Expert interviewed two (2) incarcerated persons assigned to a cleaning crew, three (3) incarcerated persons assigned to the main kitchen, and two (2) incarcerated persons assigned to laundry. The Expert reviewed the training sheets provided by the Main Jail and noted five (5) of the seven (7) incarcerated persons had attended chemical safety training.

The Expert interviewed one (1) staff member assigned to the Main Kitchen, two (2) staff members assigned as utility workers, and two (2) staff members assigned to the laundry. Based on the training records provided by the Main Jail, three (3) of the five (5) staff members attended chemical safety training.

NBJ – Through document production, NBJ provided copies of Chemical Safety PowerPoint training rosters for staff and incarcerated persons. Based on the training rosters provided, NBJ trained 79 staff members and 40 incarcerated persons assigned to the kitchen, laundry, and cleaning crews. Most rosters indicated training was provided in February 2023 and March 2023; however, many rosters did not contain the dates when training was taken.

Based on the documentation provided, SBCJ maintains documentation that demonstrates evidence of training for staff and incarcerated person workers involved in the cleanup. However, based on the dates training was provided and numerous documents that did not contain the date of training, the Expert recommends SBCJ provide chemical safety training to staff and incarcerated person workers about the hazardous chemicals to which they may be exposed at the time of their initial assignment, and whenever a new hazard is introduced in their work area. The documentation of the training should include, at a minimum, the date each staff member or incarcerated person worker completed the training, and the date of initial assignment/start date.

The Expert interviewed two (2) incarcerated persons assigned to a cleaning crew, two (2) incarcerated persons assigned to the main kitchen, and one (1) incarcerated person assigned to laundry. The Expert reviewed the training sheets provided by the NBJ and noted one (1) of the five (5) incarcerated persons had attended chemical safety training.

The Expert interviewed one (1) staff member assigned as a utility worker, one (1) staff member assigned to the kitchen, and one (1) staff member assigned to laundry. Based on the training records provided by the NBJ, two (2) of the three (3) staff members attended chemical safety training.

The Expert recommends the SBCJ maintain documentation that demonstrates evidence of chemical safety training for all staff and incarcerated person workers involved in the cleanup.

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: Partial Compliance

Prior Compliance Rating: Partial Compliance

Analysis/Observations:

Through document production, SBCJ provided a copy of the Santa Barbara County Sheriff's Office Custody Operations – PPM 244, titled "Communicable Diseases." PPM 244 has a February 2019 revision date and January 2020 review date.

During the on-site review, the Expert was informed the Communicable Disease policy is in the process of being revised. Additionally, the Expert was informed the procedures for pyrethrum storage locations and staff authorized to utilize pyrethrum spray were being reviewed, and the final procedures would be subsequently incorporated into policy.

The Expert recommends the SBCJ Communicable Disease policy be revised and clarified if pyrethrum spray is used. If SBCJ continues the use of pyrethrum spray, the policy must include the appropriate use and concentration of pyrethrum spray that is used, and staff assigned to utilize pyrethrum spray to clean mattresses or cells/living areas for incarcerated persons who have ectoparasitic infestations, such as scabies, fleas, or lice are fully aware and trained in the Communicable Disease policy.

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: Non-Compliance

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?*

Main Jail and NBJ - The Expert requested copies of policies and procedures for cleaning, handling, storage, and disposal of biohazardous materials, including waste; however, the County reported the policies and procedures were in the process of being revised.

The Expert recommends that SBCJ complete the revisions to the policies and procedures for cleaning, handling, storage, and disposing of biohazardous materials, including waste, for implementation at SBCJ.

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

Main Jail - Through document production and the Chemical Safety PowerPoint presentation, the Main Jail provided the locations where MSDS binders were located. The locations include the Property Room, Northwest Treatment Room, Central Treatment, Nurses Office, Northwest Dock, Northwest Dock Storeroom, Laundry, Lobby Crew cleaning closet, IRC Cleaning Closet, Kitchen Office, and MSF Office. In addition, the Main Jail posted 24" x 36" OSHA posters titled "How To Read A Safety Data Sheet," which are located in the Laundry Department, Nurse's Office, Property Room, Northwest Dock, Lobby Crew Cleaning Closet, MSF Office, and Kitchen Office. The Main Jail also included pictures of where the binders are located.

While at the Main Jail, the Expert was able to visually verify MSDS binders in some locations, which include the main Kitchen, Laundry, and Northwest Dock.

NBJ - Through document production and the Chemical Safety Training PowerPoint presentation, NBJ provided the locations where MSDS binders are located. The locations include F Unit, F Unit #2, G Unit, G-Unit #2, H Unit, 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 Closet next to M-11, and Maintenance. The Expert was able to visually verify an MSDS binder was located in the Laundry Room, A Unit, E Unit, and D Unit.

Due to time constraints, the Expert was unable to verify all locations where MSDS binders are located. However, based on the pictures provided, the Expert accepted verification binders are in locations where chemicals are stored, mixed, or diluted. The Expert would need additional time to complete a review and identify if all locations that store mix or dilute chemicals have MSDS binders available. The Expert will attempt to complete visual verification of all binder locations during future monitoring reviews.

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: Partial Compliance

Prior Compliance Rating: Partial Compliance

Analysis/Observations:

Main Jail - The Expert requested copies of documentation providing verification that staff and incarcerated workers responsible for cleaning biohazardous materials or areas suspected of being contaminated by pests were outfitted with protective equipment and receive appropriate supervision. Through document production, the Main Jail provided two (2) documents titled "Property Office Recap," dated August 18, 2022, and December 31, 2022. The Property Office Recap documents contain a section titled "Biohazardous Waste Cleanup-blood, vomit, urine, and or feces or areas suspected of being contaminated by pests (e.g., lice or scabies)."

The Expert reviewed the Property Office Recap reports and noted the following: The Property Office Recap report dated August 18, 2022, contains two (2) documented locations where a biohazardous waste cleanup was completed. Both provide the name of the incarcerated person-worker who was utilized, the location where the cleanup was completed, the time, the PPE equipment used, and the cleaning solution(s) used. The Property Office Recap report dated December 31, 2022, contains one (1) documented location where a biohazardous waste cleanup was completed. Based on the documentation, no incarcerated person worker was utilized. The location, PPE equipment used, and cleaning solutions used were noted. The time was not noted.

The Expert interviewed two (2) incarcerated persons assigned as Northwest Dock Workers and Lobby Crew. Both incarcerated persons were asked if they are provided with PPE when cleaning biohazardous materials or areas contaminated with pests. One (1) incarcerated person stated he has had to clean blood twice and has always been provided full PPE, which included a gown, gloves, and face/mask. One (1) incarcerated person stated he is also provided PPE when cleaning biohazard materials. Both incarcerated persons stated they are always supervised when conducting biohazardous material cleanup by a Deputy or Property Officer.

The Expert noted the Property Office Recap report dated August 18, 2022, does not indicate if the incarcerated person was supervised by staff during the biohazardous material cleanup. Although the Expert believes the incarcerated person was supervised during the biohazardous cleanup, the Expert recommends the Property Office Recap report includes a location to document the name of a staff member who provides supervision when an incarcerated person conducts biohazardous materials cleanup. The Expert also recommends the Property Office Recap report includes a location to include a staff member(s) name/identification when a staff member conducts biohazardous materials cleanup.

NBJ – The Expert requested copies of documentation providing verification that staff and incarcerated workers responsible for cleaning biohazardous materials or areas suspected of being contaminated by pests were outfitted with protective equipment and receive appropriate supervision. NBJ did not provide documentation to verify if staff or incarcerated workers responsible for cleaning biohazardous materials or areas suspected of being contaminated by pests were outfitted with protective equipment or if incarcerated workers were appropriately supervised during biohazardous materials cleanup.

The Expert interviewed one (1) staff member assigned as an NBJ Utility Worker. The staff member supervises incarcerated workers assigned to clean biohazardous materials and can also be assigned to clean or supervise incarcerated persons who clean biohazardous materials or contaminated areas. The staff member stated that when cleaning biohazardous materials, they wear or provide PPE, which consists of gloves, a suit/gown, goggles, and a mask.

The Expert interviewed two (2) incarcerated persons assigned to a cleaning crew at NBJ. One (1) incarcerated person stated it was his first day assigned to the cleaning crew and has not been assigned to clean biohazardous materials. One (1) incarcerated person stated he has been assigned to the cleaning crew for about two (2) months and, when cleaning biohazardous materials, has been provided PPE, which includes gloves, face mask/shield, and suit.

The Expert recommends NBJ develop a method to document when staff or incarcerated persons are utilized to clean biohazardous incidents. The documentation must include the location, date, PPE utilized, cleaning solution(s) applied, and the staff member providing supervision. The documentation will provide verification that NBJ staff and incarcerated 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 as required and provide verification of compliance. All documentation should be forwarded to the ECM.

6.G. Negative Pressure Monitoring and Recording

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

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 Expert requested documentation of magnehelic gauge checks for all housing units that contain negative airflow cells and every shift during the rating period.

Main Jail – Based on PPM 244, titled “Communicable Diseases,” and the documentation provided, the Main Jail maintains one (1) location (housing unit) where negative airflow cells were maintained during the rating period. Fourteen (14) negative airflow cells are located in East Module/New East cells 25-38.

Per PPM 244 titled “Communicable Diseases,” staff are required to check the magnehelic gauges once each shift and document checks and discrepancies in the housing unit “Module Recap.” Based on PPM 244, when readings are outside the prescribed ranges, staff are required to immediately report it to Maintenance and submit a work order. However, the Expert was informed by the ECM that if discrepancies are identified, a Deputy is required to follow a two-step process to secure doors and/or check vents for blockage. If the two-step process does not rectify the gauge readings, the Deputy is required to submit a work order documenting the gauge range discrepancies and not utilize the cell for any incarcerated persons necessitating negative airflow precautions. The ECM informed the Expert the policy and procedures are currently under review and being updated.

Based on PPM 244, gauge ranges should read between 0.05 and 0.35. However, through document production, the Main Jail also provided an inspection report which was completed by PALT and Associates Inc. on September 26, 2022. Based on this inspection report, pressure gauges for New East cells 25-38 (C25 to C38) were replaced with new pressure gauges which contained a larger pressure differential range. All replaced gauges scale ranges are 0.0 WC to 1.0 WC, which can more accurately display the current exhaust duct pressure for each cell. Based on a separate document provided, properly working negative airflow cell gauges should read between .25psi and .70psi. If the gauge reads above .70psi, the intake and exhaust ducts within the cell need to be checked for blockage. If the ducts are found to be blocked, clear the blockage and recheck the gauge in ten (10) minutes. If the gauge still reads above .70psi, a work order should be submitted to General Services. If the gauge reads below .25psi, a work order should be submitted to General Services.

Through document production, the Main Jail provided 24-hour Post Recap reports for East Module from July 1, 2022, through December 31, 2022.

According to all 24-hour Post Recap reports, the gauge checks are completed at 0600 hours and 1800 hours. A box is checked to indicate the gauge checks were completed, and the condition is noted. At the bottom of each 24-hour Post Recap

report, a cell number is listed for each negative airflow cell so that staff can record the gauge reading results for each cell.

The Expert reviewed copies of the 24-hour Post Recap reports for the 1st, 12th, and 24th of each month during the rating period for a sample size of eighteen (18) total separate dates. From July 1, 2022, through September 25, 2022, the gauge ranges should have read between 0.05 and 0.35. Based on the new gauges that were installed from September 26, 2022, through December 31, 2022, gauge ranges should read between .25 and .70. The Expert identified the following discrepancies.

- July – 1st, 12th, and 24th, all gauges on each date and shift were above the mandated magnehelic gauge range. All 24-hour Post Recap reports do not indicate if staff attempted to clear ventilation screens or if work orders were submitted to restore negative airflow in cells.
- August – 1st, no gauge readings were recorded from the 0600 shift.
- The 1800 shift recorded all gauges above the mandated magnehelic gauge range. On the 12th, all gauges on each shift were above the mandated magnehelic gauge range. On the 24th, all gauges on each date and shift were above the mandated magnehelic gauge range.
- 24-hour Post Recap reports do not indicate if staff attempted to clear ventilation screens or if work orders were submitted to restore negative airflow in cells.
- September – 1st, no gauge readings were recorded from the 0600 shift. The 1800 shift recorded all gauges above the mandated magnehelic gauge range. On the 12th, all gauges on each shift were above the mandated magnehelic gauge range. On the 24th (new gauges installed), no gauge readings were recorded from the 0600 shift. On the 1800 shift, all gauges were within the mandated magnehelic gauge range. 24-hour Post Recap reports do not indicate if staff attempted to clear ventilation screens or if work orders were submitted to restore negative airflow in cells.
- October – 1st, no gauge readings were recorded from the 0600 shift. The 1800 shift recorded all gauges within the mandated magnehelic gauge range. On the 12th, all gauges from the 0600 and 1800 shifts were within the mandated magnehelic gauge range. On the 24th, all gauges from the 0600 and 1800 shifts were within the mandated magnehelic gauge range.
- November – 1st, no gauge readings were recorded from the 0600 shift. The 1800 shift recorded all gauges within the mandated magnehelic gauge range. On the 12th, no gauge readings were recorded from the 0600 or 1800 shifts. On the 24th, no gauge readings were recorded from the 0600 or 1800 shifts.
- December – 1st, during the 0600 shift, seven (7) gauge readings were recorded above the mandated magnehelic gauge range. During the 1800 shift, seven (7) gauge readings were recorded above the mandated magnehelic gauge range. On the 12th, no gauge readings

- were recorded from the 0600 shift. The 1800 shift recorded thirteen (13) gauge readings above the mandated magnehelic gauge range. On
- the 24th, during the 0600 shift, one (1) gauge reading was below the mandated magnehelic gauge range. During the 1800 shift, twelve (12) gauge readings were above the mandated magnehelic gauge range. 24-hour Post Recap reports do not indicate if staff attempted to clear ventilation screens or if work orders were submitted to restore negative airflow in cells.

NBJ - The NBJ negative airflow cells located in the Medical Clinic, cells M-01 through M-05, were activated on or about June 2, 2022. Based on PPM 244, the Clinic's negative airflow gauges should display a green light when cells are in a negative airflow state and will display a red light when cells are not in a negative airflow state. Based on a PowerPoint training presentation titled "Custody Operations Negative Airflow Cells," the NBJ Clinic gauges should read between 0.050 and 0.001, and any other readings will require staff to take action. Each cell has a digital display screen that provides a color code and a numerical range reading. Staff are instructed to look for the screen to read "NORMAL" in a green box and identify the numerical readings in a black box. If the cell negative airflow is not working properly, the light will be red and will not indicate "NORMAL." Staff from each shift (0600 and 1800) are required to review the light, ensure the screen is green and reads "NORMAL," and notate 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 the ducts are found to be blocked, clear the blockage and recheck the gauge in ten (10) minutes. If the screen is still red or reads above the mandated gauge range, a work order should be submitted to General Services. If the gauge reads below -0.05, a work order should be submitted to General Services.

Through document production, the NBJ provided 24-hour Post Recap reports for the Medical Clinic from July 1, 2022, through December 31, 2022.

The Expert reviewed copies of the 24-hour Post Recap reports for the 1st, 12th, and 24th from July 2022 through December 2022. The Expert reviewed a sample size of eighteen (18) total separate dates. The Expert identified the following discrepancies:

Based on the documentation provided, negative airflow reading result documentation commenced in November 2022.

- July – Recap reports did not contain negative airflow reading results.
- August - Recap reports did not contain negative airflow reading results.
- September - Recap reports did not contain negative airflow reading results.
- October - Recap reports did not contain negative airflow reading results.
- November – November 1st did not contain negative airflow reading results. November 12th and 24th cell conditions indicate "Good," and

digital readings are within the mandated range for both 0600 and 1800 shifts and dates.

- December - All cell conditions indicate "Good," and digital readings are within the mandated range for both 0600 and 1800 shifts and dates.

The Expert recommends the Main Jail provide training to all staff assigned to monitor negative air pressure cells and develop an on-site post-assignment reference handbook. The handbook should contain instructions on the proper checks and documentation of magnehelic gauges. The handbook should also include specific instructions on what actions staff shall take when gauges are outside the prescribed ranges or non-conformities are identified. The handbook should also include a method for staff to sign an acknowledgment of reading and understanding the magnehelic gauge check process. The Expert further recommends supervisors monitor building staff to ensure all magnehelic gauge checks are completed and properly documented on Post Recap reports and that all actions taken to correct discrepancies are documented. The Expert noted the NBJ Medical Clinic, cells M-01 through M-05 negative airflow check logs commenced in November, and reading results were not provided for most of the rating period.

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

Main Jail – The Expert was unable to evaluate if staff performed the mandated steps to clear abnormal gauge readings as Post Recap reports did not contain information or documentation on what actions were taken when non-conformities were noted.

The Expert recommends that Post Recap reports, or other forms of documentation, are used to document when non-conformities are identified, and cells are not used for people requiring negative airflow cells.

NBJ – No discrepancies were noted in the Post Recap reports that were provided. Additionally, no documentation was provided to demonstrate what actions the NBJ completed when non-conformities were identified.

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

Main Jail - The Expert requested copies of work orders for repairs completed to negative airflow cells during the rating period. However, the Expert did not receive any work orders.

The Expert recommends that Main Jail staff promptly submit work orders when non-conformities are identified. Copies of such work orders should be routed to the ECM for tracking and providing evidence of compliance.

NBJ – The NBJ provided a notification indicating no work orders were written during the rating period. Additionally, no discrepancies were noted in the Post Recap reports that were reviewed for the rating period.

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: Partial Compliance

Prior Compliance Rating: Partial Compliance

Analysis/Observations:

The Expert requested copies of the staff training curriculum for negative airflow cell gauge readings and copies of training records for staff assigned to housing areas with negative airflow cells.

SBCJ provided an eight (8) slide PowerPoint presentation titled “Custody Operations Negative Airflow Cells Review and Discussion.” The PowerPoint presentation is used to provide training at the Main Jail and NBJ.

The Expert reviewed the PowerPoint presentation and identified the following discrepancies:

The presentation reviews sections of PPM 244, Communicable Diseases; however, portions of the PowerPoint conflict with PPM 244. Per PPM 244, the staff is required to immediately report to maintenance and submit a work order when cells are outside the mandated ranges. However, the PowerPoint presentation instructs staff to inspect the intake and exhaust ducts for blockage. If vents are blocked, staff are instructed to clear and recheck the gauge in ten (10) minutes. If the gauges continue to read above the limits, a work order needs to be submitted to General Services. The Expert was informed PPM 244 is being revised/updated, and the discrepancies will be corrected.

The Expert was informed, and PPM 244 indicates the SBCJ maintains two (2) locations with negative airflow cells; New East Restrictive Housing cells 25 through 38 at the Main Jail and Medical Clinic Cells 1 through 5 at NBJ. The PowerPoint presentation identifies three (3) locations, which includes "South SRH -21."

The PowerPoint presentation states, “Main Jail gauges should read between 0.05 and 0.35 PSI.” However, as previously noted in section 6.G.1., on September 26, 2022, new pressure gauges were installed for the New East Restrictive Housing cells C25 through C38, which contain a different pressure differential range. All replaced gauges have an acceptable range of .25 PSI and .70 PSI. The PowerPoint presentation needs to be updated to reflect the

new acceptable gauge range, which includes replacing pictures of the old magnehelic gauges with pictures of the replaced gauges.

NBJ – Through document production, NBJ provided copies of training rosters for twenty-two (22) staff members that received training in March 2023.

Based on the Expert's review, the PowerPoint training presentation does not provide accurate information and is inconsistent with PPM 244. The Expert recommends PPM 244 be updated and the lesson plan/PowerPoint training presentation also be updated to reflect accurate, acceptable gauge ranges. The Expert further recommends that all SBCJ staff assigned to monitor negative air pressure cells receive the updated training.

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: Substantial Compliance

Prior Compliance Rating: Partial Compliance

Analysis/Observations:

The Expert requested documentation for negative pressure cell and gauge testing by external contractors and a schedule for the contractor's testing of negative pressure cells and gauges during the rating period.

Main Jail - Through document production, the Main Jail provided a notice indicating the SBCJ inspections of negative isolation cell gauges are conducted every six (6) months. Based on this document, testing dates were March 29, 2022, and September 26, 2022. The Main Jail provided one (1) copy of the "SBCJ Inspection Report Negative Isolation Cells" report dated September 26, 2022. The report was provided to SBCJ by PALT and Associates, a California State Licensed air and water balance contractor (CA.C.L. C61/D62 #976983).

The Expert reviewed the report and noted the following. PALT and Associates replaced pressure gauges in New East Restrictive Housing cells C25 through C38, inspected and tested the negative airflow system as to their optimum performance and capabilities, and completed necessary calibration if needed. PALT and Associates recommended the pressure gauges be calibrated every six (6) months, change out all pre-filters in the exhaust system every three (3) months, and monitor room pressure gauges closely. -, as changes in pressure differential will indicate if the registers/grills inside the cells become dirty/clogged and need to be cleaned and or pressure washed.

NBJ – Through document production, NBJ provided two (2) copies of the “Santa Barbara North County Jail Inspection Report Negative Isolation Cells” dated July 20, 2022, and December 13, 2022. The reports were provided to NBJ from PALT

and Associates, a California State Licensed air and water balance contractor (CA.C.L. C61/D62 #976983).

The Expert reviewed the July 20, 2022, report and noted the following. Based on pressure differential testing, all isolation cells were under a negative pressure toward the corridor except for cell M-05. Cell M-05 was neutral towards the corridor but under a negative pressure towards the outside Nurse Station. PALT and Associates recommend door sweeps get installed on all cell doors to increase negative room pressure and not use cell M-05 for contagious incarcerated persons in its current state. Additionally, PALT and Associates recommended the pressure gauges be calibrated every six (6) months, change out all pre-filters in the exhaust system every three (3) months, and monitor room pressure gauges closely. , as changes in pressure differential will indicate if the registers/grills inside the cells become dirty/clogged and need to be cleaned and or pressure washed.

The Expert reviewed the December 13, 2022, report and noted the following. Based on pressure differential testing, all isolation cells were under a negative pressure toward the corridor except for cell M-02, as the safety glass in the door was missing. Cell M-05 was positive towards the corridor but under a negative pressure towards the outside Nurse Station. The Corridor was also under a negative pressure towards the Nurse's Station. PALT and Associates concluded overall negative pressure for all five (5) cells should be increased to maintain a negative pressure of a minimum of -0.01" WC at all times and provided information on how to accomplish this task. PALT and Associates further recommended cells M-02 and M-05 should not be used for contagious incarcerated persons at that time. PALT and Associates further recommended pressure gauges be calibrated every six (6) months, change out all pre-filters in the exhaust system every three (3) months, and monitor room pressure gauges closely. PALT and Associates further recommended the pressure gauges be calibrated every six (6) months, change out all pre-filters in the exhaust system every three (3) months, and monitor room pressure gauges closely, as changes in pressure differential will indicate if the registers/grills inside the cells become dirty/clogged and need to be cleaned and or pressure washed.

The Expert was unable to evaluate if both M-02 and M-05 were not used for contagious inmates during the rating period, as recommended by PALT and Associates, as no information was noted on the daily Recap reports.

The Expert recommends that the Main Jail and NBJ maintain a regular schedule to test gauges by an external contractor as part of the jail's preventive maintenance. The Expert further recommends that the Main Jail and NBJ follow the external contractor's recommendations and calibrate pressure gauges every six (6) months, change out all pre-filters in the exhaust system every three (3) months, and monitor room pressure gauges closely. The external contractor's testing schedule should be incorporated in the Main Jail Work Order Preventive Maintenance and Repairs schedule system, as required by the *Murray v. Santa*

Barbara County Remedial Plan under section E.2.d., and all information pertaining to vents/exhaust grills should be incorporated into the Sanitation Plan under section B.1.g.

Based on documentation provided, negative pressure cells and gauges are tested by an external contractor on a regular schedule, as part of the jail's preventive maintenance schedule.

6.H. Emergency Response and Fire/Life Safety

6.H.1. The County shall inspect fire extinguishers monthly and hold drills to ensure all jail staff are trained consistent with NCCCHC (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: Partial Compliance

Prior Compliance Rating: Partial Compliance

Analysis/Observations:

6.H.1.a Does the SBCJ inspect fire extinguishers monthly?

The Expert requested documentation of monthly fire extinguisher inspections.

Main Jail – The Main Jail provided a Microsoft Word document titled “SBCJ Monthly Fire Extinguisher Check.” The document identifies fire extinguisher locations, type of fire extinguisher, size, “Date of Inspection,” and a location to notate who completed the inspection. The list contains eighty-seven (87) extinguishers within the Main Jail. 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-pin 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 are acceptable.

The Expert reviewed the documents and noted the Main Jail conducted fire extinguishers inspections during each month of the rating period from July 2022 through December 2022.

NBJ – Through document production, NBJ provided a document titled “Santa Barbara Sheriff’s Office NBJ Monthly Fire Prevention Inspection Log.” The document states, “The designated employee shall conduct a monthly fire prevention inspection of the facility as stated in title 15 Minimum Standards for Local Detentions Facilities 1032, Fire Suppression Preplanning. This shall include (when applicable) an examination of the fire extinguisher locations/service tag, a visual inspection of the fire alarm pull stations, smoke detectors, emergency fire response equipment, exterior fire hydrants, facility exit routes/doors and check for any other fire hazards. Any deficiencies shall be noted in the Remarks column and written report. If none, write “N/A” in the “Notes” column. The employee will additionally note the date the inspection was completed and write their initials and badge number.”

The document contains a column for each month in 2022, the date of inspection, initials of who inspected, and a note column that contains notes.

The Expert reviewed the Monthly Fire Prevention Inspection Log, specific to the requirements in 6.H.1.(1), and noted the following. Based on the inspection log instructions, the staff is only required to examine fire extinguisher locations and service tags. The Expert recommends NBJ complete fire extinguisher inspections. Per OSHA (1910.157 [e][2]), employers must perform a visual inspection on portable fire extinguishers at least once per month.

The monthly inspection should consist of the following:

- Verify locking pin is intact.
- The tamper seal is unbroken.
- Inspect for physical damage, corrosion, leakage, or clogged nozzle.
- Confirm pressure gauge or indicator is in operational mode/range.
- Make sure the operating instructions on the nameplate are legible and facing outward, and check the last professional service date on the tag (A licensed fire extinguisher maintenance contractor must have inspected the extinguisher within 12 months).
- Initial and date the back of the tag.
- Documentation of action taken to correct deficiencies.

The Expert noted the Monthly Fire Prevention Inspection Log provided by NBJ does not indicate which fire extinguisher(s) or location(s) were checked or if the inspection meets the OSHA visual inspection requirements.

The Expert further recommends NBJ identify all fire extinguisher locations and the items which are visually inspected, which should be consistent with OSHA recommendations.

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

The Expert requested documentation for fire/life safety drills conducted during the rating period.

Main Jail – Through document production, the Main Jail provided a document titled “Santa Barbara County Jail Emergency Response Drill Evaluation Form.” The document is dated February 2, 2023, and indicates an emergency response drill was completed outside the rating period. The Expert reviewed the document and noted a fire drill was conducted on February 2, 2023, by the "D" squad in the MSF Laundry.

NBJ – Post tour, the NBJ provided documents titled Santa Barbara County Jail Emergency Response Drill Evaluation Forms for drills conducted on November 2, 2022, March 20, 2023, and June 26, 2023. The Expert noted one drill was completed during the rating period, and two were completed outside the rating period. All three drills were completed by Squad “A”.

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

Main Jail - The Expert reviewed the Main Jail Emergency Response Drill Evaluation Form dated February 2, 2023, and noted the form contains a drill start time and end time.

NBJ – The Expert reviewed the documentation for drills conducted on November 2, 2022, March 20, 2023, and June 26, 2023, and noted all forms/drills contain a start and end time.

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

Main Jail - The Expert requested documentation of fire/life safety drills conducted during the rating period; however, the documentation provided by the Main Jail indicated a fire drill was completed in February 2023, which is outside of the rating period. The Expert reviewed the Main Jail Emergency Response Drill Evaluation Form dated February 2023 to identify if documentation includes the number and location of any incarcerated persons that were moved as part of the drill. The Expert noted the form does contain a location for staff to note the number of incarcerated moved and location as part of the drill, the drill location was at the MSF Laundry, and no inmates were moved as a result of the drill.

NBJ – The Expert noted the November 2, 2022, March 20, 2023, and June 26, 2023, drill documentation properly documented the locations where the drills occurred, and the number of incarcerated persons that were moved as a result of the fire/life safety drills.

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

Main Jail - The Expert requested documentation of fire/life safety drills conducted during the rating period; however, the documentation provided by the Main Jail indicated a fire drill was completed in February 2023, which is outside of the rating period. The Expert reviewed the Main Jail Emergency Response Drill Evaluation Form dated February 2023 to identify if documentation includes any noted deficiencies. The Expert noted a section for staff to document/note deficiencies which stated, *"Some of the responding staff did not respond with gear required for this type of incident."*

NBJ - The Expert reviewed the NBJ Emergency Response Drill Evaluation Forms dated November 2, 2022, March 20, 2023, and June 26, 2023, to identify if the drill evaluation form documentation included any noted deficiencies. The November 2, 2022, and March 20, 2023, drill evaluation form indicated no deficiencies were noted. The June 26, 2023, drill evaluation form noted the following deficiency: *"Fire suppression supplies and equipment brought to the incident location was lacking. Out of all responders; (1) fire extinguisher, (2) IEVAC and (1) "man down" bag was brought to the scene. Familiarity with evacuation plan and shutoff areas is recommended.*

Based on the drill evaluation forms provided by the SBCJ, two drill evaluation forms contain noted deficiencies, and two drill evaluation forms indicate no noted deficiencies.

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

Main Jail - The Expert requested documentation of fire/life safety drills conducted during the rating period; however, the documentation provided by the Main Jail indicated a fire drill was completed in February 2023, which is outside of the rating period. The Expert reviewed the Main Jail Emergency Response Drill Evaluation Form dated February 2023 to identify if the drill documentation includes corrective actions taken. The Expert noted a section in the form that includes "Recommendations to alterations in policy, training and/or equipment," which can be used to document corrective actions that may be taken. Based on the drill conducted, a recommendation was noted on the drill evaluation form which stated, *"As part of the response to fire incident (smoke), Il Cardenas recommended having MCR announce to the responding deputies to bring fire related equipment as part of the response. Admin to consider adding this into policy if appropriate.*

NBJ - The Expert reviewed the NBJ Emergency Response Drill Evaluation Forms dated November 2, 2022, March 20, 2023, and June 26, 2023, to identify if the drill evaluation form documentation includes corrective actions taken. The Expert noted a section in the form includes "Recommendations to alterations in policy, training and/or equipment," which can be used to document corrective actions that may be taken. The Expert identified one (1) drill form included corrective actions taken/recommendations actions taken and noted the following:

Drill evaluation form dated November 2, 2022, stated; “None, event occurred on 11/2/2022 but form has been updated since and transcribed to form on 6/22/23.”

Drill evaluation form dated March 20, 2023, stated; “None, event occurred on 3/20/2023, but form has been updated since and transcribed to form on 6/22/2023.”

Drill evaluation form dated June 26, 2023, stated; “Custody Division: Brief Custody Squads on freezing all movement and initiating locking down housing units (on their own) to become available for response. Provide “alternative route” walking for non SBSO responders (Wellpath). Update staff on fire extinguisher locations and provide iEVAC skills demonstration at upcoming training. FIRE AND AMR RECOMMENDATION: SBSO to initiate an incident commander who is outside in triage area assisting with the coordinating and communication for all parties. Coordinate FIRE and AMR to be in (1) location to provide patient care in one triage area.”

The Expert noted drills at the Main Jail dated February 2, 2023, and NBJ dated June 26, 2023, contain corrective actions and/or recommendations to policy, training and or equipment.

The Expert recommends SBCJ conducts drills to ensure all jail staff/squads are trained consistent with NCCHC standards on emergency response. It is further recommended that SBCJ create manuals and/or lesson plans with detailed instructions on how to conduct drills, directions to staff on how the drills will be accomplished, and the documentation of any corrective actions taken for verification of compliance.

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

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

Analysis/Observations:

6.1.1.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 Expert requested copies of bimonthly Environmental Health and Safety inspection reports and corrective action plans completed for the rating period.

Main Jail - The Main Jail provided three (3) copies of the Environmental of Care Inspection reports dated July-August 2022, September-October 2022, and November-December 2022. The Expert reviewed the reports and noted the following. Per the reports, the Main Jail ECM completed environment of care inspections in August 2022. The second inspection was completed throughout various dates in September and October 2022, and the third inspection was completed throughout various dates in November, December 2022, and January 2023. Based on the cover page notes, the inspections encompassed all locations inmates may reside, work, and/or have access to during their incarceration at the Main Jail.

Based on the documents submitted, the ECM commenced or completed bimonthly Environment Health and Safety inspections of the Main Jail.

NBJ – The NBJ provided two (2) documents titled "Environment of Care Inspection," dated September-October 2022 and November-December 2022. Based on the documentation provided, an Environment of Care Inspection was not completed in July and August 2022. The Expert reviewed the Environment of Care Inspection reports and noted the following. The September-October 2022 Environment of Care Inspection was completed throughout October 2022. The November-December Environment of Care Inspections were completed throughout December 2022 and January 2023.

The Expert noted that bi-monthly inspections were partially completed at NBJ during the rating period. The Expert recommends the Main Jail and NBJ complete bi-monthly Environment of Care Inspections bimonthly.

6.1.1.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?*

Per the *Murray v. Santa Barbara County Remedial Plan*, SBCJ is required to submit a Corrective Action Plan (CAP), as needed, to correct problematic concerns identified during the bi-monthly inspections. A CAP is a step-by-step plan of action that is developed to achieve the resolution of identified concerns. Although an identified area of concern may take time to resolve, the CAP can maintain ongoing tracking, recognizing what steps have been completed and the steps still needed to achieve a full resolution.

Main Jail – The Expert reviewed the bi-monthly Environmental Health and Safety inspection reports provided by the Main Jail. The Expert noted the inspection report lists a housing unit, date of inspection, and various locations within the housing unit, such as showers, dayroom, or living quarters, and reviews cleanliness, plumbing, lighting, paint, and plumbing if applicable. Each section reviewed indicates if the location was clean, good, with no issues, dirty, identified problems, not functional, and needs repairs and if a work order was submitted. In some notations, the ECM indicates he was unable to conduct an inspection due to uncooperative incarcerated persons. This is insufficient documentation. Under such circumstances, the ECM must return to the area and complete the inspection consistent with the Remedial Plan timelines. Based on this inspection report, the Expert is unable to determine if furnishings, shower chairs, plastic chairs, wheelchairs, stretchers, or personal property containers, as required by the *Murray v. Santa Barbara County Remedial Plan*, are included in the bi-monthly inspection.

The Main Jail also provided a copy of the July-August 2022 Bimonthly Inspection CAP. The Expert reviewed the CAP and noted the following. The CAP is the method needed to track and correct problematic concerns identified during bi-monthly inspections. The Expert noted the CAP provides bulleted written discrepancies identified during the bi-monthly inspection but does not indicate what action was taken to correct the discrepancy or problem. The CAP also provides a list of ongoing discrepancies that were identified during the bi-monthly inspection or a previous inspection, the date the issue was identified, the location, the work order number submitted, the status, and the date the issue was resolved. The Expert noted that some issues or problematic areas of concern were identified during previous bi-monthly inspections, but are still not resolved and are not listed on the CAP. The Expert recommends the CAP be used to maintain an ongoing tracking of identified issues, recognizing what steps have been completed and the steps still needed to achieve resolution. That is, there must be documentation that corrective action was in fact taken (and when) for each identified discrepancy or problem.

NBJ - The Expert reviewed the bi-monthly Environmental Health and Safety inspection reports provided by NBJ. The Expert noted the inspection report lists a housing unit, date of inspection, and various locations within the housing unit, such

as showers, dayroom, living quarters, storage and video rooms, medical treatment rooms, and yards. The inspection report reviews cleanliness, plumbing, lighting, paint, ventilation, and plumbing, if applicable. Each section that was reviewed indicates good, needs to be fixed, or work order submitted. Based on this inspection report, the Expert is unable to determine if furnishings, shower chairs, plastic chairs, wheelchairs, stretchers, or personal property containers, as required by the *Murray v. Santa Barbara County Remedial Plan*, are included in the bi-monthly inspection. The Expert noted problematic concerns identified during the bi-monthly inspections, but a CAP was not included to explain what actions were taken or the steps needed to be taken to resolve each area of concern.

Fixing the CAP process is foundational to establishing Substantial Compliance demonstrating a system that does not require external oversight by independent monitors on these matters.

6.1.2. 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

Analysis/Observations:

6.1.2.a Does SBCJ provide a system through which class members are able to raise sanitation matters of concern?

Incarcerated persons at the Main Jail and NBJ utilize form SH-585a titled "Santa Barbara County Sheriff's Office Custody Operations–Inmate Grievance Form" to file grievances and/or raise sanitation matters of concern.

Main Jail - The Expert reviewed the electronic documents shared in a folder titled "2022 SBJ Grievances" and identified sixteen (16) grievance forms related to sanitation matters of concern submitted by incarcerated persons during the rating period. Five (5) grievances were related to kitchen issues, four (4) grievances were related to plumbing/water temperature issues, four (4) grievances were related to AC/HVAC issues, one (1) grievance was related to a clothing/laundry issue, and one (1) issue was related to cleaning products/supplies.

The Main Jail also provided six (6) work orders. Four (4) work orders were related to one (1) grievance, and one (1) work order was related to one (1) grievance provided.

The Expert was able to interview five (5) of the fifteen (15) incarcerated persons who submitted grievances during the rating period. Ten (10) incarcerated persons were no longer in custody.

The Expert reviewed the sixteen (16) grievances and noted the following:

1. On July 1, 2022, one (1) incarcerated person housed in "E-24" submitted a grievance stating, in part, a lack of staff professionalism with cleaning, how to clean areas incarcerated persons use and touch daily, and when an incarcerated person tests positive for COVID-19 they are removed from the area and are not allowed cleaning products or anything. On July 1, 2022, staff received the grievance. On July 2, 2022, the reviewing supervisor replied, "Your concerns are valid and thank you for bringing them to our attention. To ensure sanitary conditions are always maintained throughout the facility, cleaning supplies are made available to you in the morning as well as throughout the day, all you need to do is ask. If you are asking and not getting a response, please ask for a supervisor and we will address the situation. Unfortunately, due to the physical plant of the facility and the number of inmates we have it(s) been difficult to create more space than what is already being provided, but I assure you classification/medical is constantly working on creating space. When it comes to receiving a new mask all you need to do is ask and one will be provided to you. Again, thank you for bringing these concerns to our attention." On July 15, 2022, the administrative review was completed. No other action was noted.
2. On July 24, 2022, one (1) incarcerated person housed in "C-17" submitted a grievance stating, in part, that his cell heat was not working. The incarcerated person stated a grievance was previously submitted, but it didn't get fixed, and asked to be moved. On July 24, 2022, the grievance was received. On August 1, 2022, the reviewing supervisor replied, "Per your conversation with (staff), your issues have been addressed, and you have been appropriately rehoused. I consider this grievance to be resolved." The administrative review was not completed. No work order or action was noted.
3. On August 9, 2022, one (1) incarcerated person housed in "NW 18" submitted a grievance stating there were dead bugs in the food. The incarcerated person stated the officer was informed, and he was told to submit a grievance. The incarcerated person stated this was not the first time this has happened. On August 9, 2022, staff received the grievance. On August 18, 2022, the reviewing supervisor replied, "The kitchen receives regular pest control services. The kitchen will send up replacement meal if notified." No work order or other action was noted.
4. On September 18, 2022, one (1) incarcerated person housed in "W-4" submitted a grievance stating that due to COVID precautions for health and safety, there needs to be proper air circulation, and they don't have adequate ventilation/air circulation as their last "air purifier" caught on fire when a Deputy moved it. The grievance was received by staff on

September 18, 2022. On an unknown date, an unknown supervisor replied, "We are not required to supply air purifiers. We had air scrubbers placed in the facility during our severe COVID outbreak. We no longer have major outbreaks. We kept the air scrubbers running during the extreme heat wave. We are looking into possibly placing another fan in the area. We will follow up with a location to possibly create circulation with general services." On September 30, 2022, the administrative review was completed. No work order or other issues were noted.

5. On September 22, 2022, one (1) incarcerated person housed in "BC-4" submitted a grievance stating disgusting things have been found in the meals; on 9/21/2022, a cooked spider was in the meal. The officer was able to provide another dinner. The incarcerated person stated it was not the first time something disgusting was found in the food, but it is the first time the issue has been addressed. On September 22, 2022, the grievance was received. On September 23, 2022, the reviewing supervisor replied, "All food preparation and serving is done under supervision. Additionally, pest control services are completed on a regular basis in the kitchen. You handled the situation correctly by asking for a new tray." On October 5, 2022, the administrative review was completed. No work order was submitted, or action taken was noted.
6. On October 15, 2022, one (1) incarcerated person housed in "NW 4" submitted a grievance stating in part the Northwest part of the jail is unusually and extremely hot, and people who take medication like himself can have adverse effects when exposed to extreme temperatures. Staff received the grievance on October 14, 2022. On October 14, 2022, the reviewing supervisor replied, "I spoke with (Lieutenant) and the current maintenance supervisor. They did an inspection of the air system two days ago and confirmed the system is operating as designed and blowing air at the set temp. We will have (ECM) lookout for clogged/blocked air vents on his next cleaning check. Blocked vents can prevent cold air circulation." On October 17, 2022, the administrative review was completed. No work order was submitted, or other action was taken was noted.
 - o During the on-site review, the Expert was able to interview the incarcerated person who submitted this grievance. The incarcerated person stated that a worker opened the vent to look at a thermometer, but nothing resulted in a change of temperature, and the problem was never resolved.
7. On October 15, 2022, one (1) incarcerated person housed in "S Dorm" submitted a grievance asking for extra linen and clothing for another incarcerated person. The incarcerated person stated they have to constantly clean after another incarcerated person due to defecating and urinating on himself and would need at least three (3) sets of linen and clothing daily. On October 15, 2022, staff received the grievance. On October 17, 2022, the reviewing supervisor replied, "Unable to respond HIPPA not signed." On October 17, 2022, the administrative review was completed. No other action was noted as a result of this grievance.

- During the on-site review, the Expert was able to interview the incarcerated person who submitted this grievance. The incarcerated person stated another incarcerated person was constantly soiling himself and his clothing and linen. Sometimes staff would exchange linen/clothing, but not always. The incarcerated person stated he would sometimes have to throw away the clothing, but nothing was done as a result of the grievance.
8. On October 17, 2022, one (1) incarcerated person housed in "W-4" submitted a grievance stating multiple work orders have been submitted for lack of hot water and water pressure. On October 17, 2022, staff received the grievance. On October 18, 2022, the reviewing supervisor replied, "A maintenance work order has been submitted to address this issue." On October 18, 2022, the administrative review was completed. The Main Jail provided work order number FAC-176915 dated October 16, 2022, that had already been submitted as a result of this issue. Based on work order 176915, repairs were conducted on 10/1/2022, 10/25/2022, and 11/28/2022.
 9. On October 30, 2022, one (1) incarcerated person housed in "BC-4" submitted a grievance stating the shower water is not hot, and they have been asking the module officer to have it fixed. On October 30, 2022, staff received the grievance. On October 30, 2022, the reviewing supervisor replied, "Maintenance has advised that this is a jail-wide issue, and they are working at resolving the issue. They have addressed your housing unit directly; thank you for your patience." On October 31, 2022, the administrative review was completed. No work order was submitted, or action taken was noted.
 10. On October 29, 2022, one (1) incarcerated person housed in "BC-1" submitted a grievance stating they have not had hot water for at least a month and are unable to conduct essential daily activities such as showering, cooking, and eating without hot water. The incarcerated person asked for a temporary interim solution for showers and cooking until repairs are done. On October 29, 2022, the grievance was received by staff. On October 29, 2022, the reviewing supervisor replied, "Jail maintenance has been working on this issue for a week now; the issue is jail wide. The water is hot, but not for long periods of time. They are contracting a company to come permanently fix the issue." On October 31, 2022, the administrative review was completed. No other action was noted.
 - During the on-site review, the Expert was able to interview the incarcerated person who submitted this grievance. The incarcerated person stated it took over a month to fix the problem. The incarcerated person further stated that on hot days they have ventilation problems, and ventilation does not work.
 11. On December 4, 2022, one (1) incarcerated person housed in "S Dorm" submitted a grievance claiming when he gets food trays, he sees "bits of black which appear to be black mold." Staff received the grievance on December 4, 2022. On December 15, 2022, the reviewing supervisor replied, "Our food trays are washed after each use with hot water. There is

- no reason to believe there is black mold in it." On December 19, 2022, the administrative review was completed. No work order or other action was noted on the grievance.
12. On December 4, 2022, one (1) incarcerated person housed in "S Dorm" submitted a grievance claiming a lack of safety due to water in front of the handicap toilet posing a slip hazard. Staff received the grievance on December 4, 2022. On an unknown date, the reviewing supervisor replied, "Maintenance has been notified of the leak and will correct the issue." On December 12, 2022, the administrative review was completed. The Expert was unable to locate a work order that was submitted as a result of this grievance.
 13. On December 16, 2022, one (1) incarcerated person housed in "S Dorm" submitted a grievance claiming the kitchen constantly delivers meals up to two hours before night crews are on duty. By the time they get the food, it is cold as the day crew refuses to feed them. On December 17, 2022, staff received the grievance. On December 17, 2022, the reviewing supervisor replied, "The deputies deliver the food based on when they conduct evening count. Evening count is processed at 6 p.m. Because of the limited number of inmates in S Dorm the food is not packed into the warm cart. I will speak with kitchen staff and try to have the warmer cart used more." On December 19, 2022, the administrative review was completed. No other action is noted on the grievance.
 14. On December 17, 2022, one (1) incarcerated person housed in "South Dorm" submitted a grievance that states, in part, the water is not hot enough to shower, wash hands, wash soiled clothing, or prepare food. On December 17, 2022, staff received the grievance. On December 17, 2022, the reviewing supervisor replied, "Solved on scene. Work order put into maintenance to see about raising the water temperature." On December 19, 2022, the administrative review was completed. The Main Jail provided four (4) work orders dated: October 28, 2022; November 3, 2022; December 1, 2022; and December 4, 2022. All four (4) work orders indicate the reason for the work order was no hot water in South Dorm. The Expert noted the work orders are dated more than two weeks prior to when this grievance was processed. No other work order was provided to demonstrate another work order was processed as a result of this grievance. The Expert noted the lack of hot water in South Dorm was an ongoing problem. No other action was noted on the grievance.
 15. On December 21, 2022, one (1) incarcerated person housed in "New East ISO 3" submitted a grievance stating in part his cell is very cold and asked for the heat to be turned up. Staff received the grievance on December 22, 2022. On December 22, 2022, the reviewing supervisor replied, "We do not have control of facility temperature; those are maintained by county public services employees. While you are in East restrictive housing, I have authorized you to have one (1) additional blanket; when you leave East RH at the completion of your medical protocol, you are expected to relinquish that additional blanket, and you

will revert to having two (2) per policy." On December 23, 2022, the administrative review was completed. No work order or other actions were taken as a result of this grievance.

- During the on-site review, the Expert was able to interview the incarcerated person who submitted this grievance. The incarcerated person stated the room was very cold but did feel the problem was resolved when he was provided an extra blanket.
16. On December 25, 2022, one (1) incarcerated person housed in "314" submitted a grievance claiming black mold was in his food. The grievance was received by staff on December 28, 2022. On January 3, 2023, the reviewing supervisor replied, "There is no black mold in the food served on our facilities. Food trays are washed with hot water and detergent after each use." On January 3, 2023, the administrative review was completed. No work order or other action was noted on the grievance.

NBJ - The Expert reviewed the electronic documents shared in a folder titled "2022 NBJ Grievances" and identified seven (7) grievance forms related to sanitation matters of concern submitted by incarcerated persons during the rating period. One (1) grievance was related to a food/kitchen issue, one (1) grievance was related to plumbing issues, one (1) was related to a clothing/laundry issue, and four (4) grievances were related to electrical/lighting issues.

No work orders related to grievances for the rating period were provided by NBJ. This is of significant concern.

Due to time constraints, the Expert was unable to interview incarcerated persons who submitted a grievance during the rating period.

The Expert reviewed the seven (7) grievances and noted the following:

1. On July 28, 2022, one (1) incarcerated person housed in "E" housing submitted a grievance stating the laundry is returned wet and brown in color. The grievance was received on July 28, 2022. On August 11, 2022, the reviewing supervisor replied, "The domestic water being used in the laundry meets and or exceeds state water quality. Regarding the wet clothing, it was an isolated accident." On August 11, 2022, the administrative review was completed. No work order or other action was noted.
2. On February 18, 2022 (outside of the rating period), one (1) incarcerated person housed in "G-3" submitted a grievance stating every hot meal is coming cold. The grievance was received by staff on February 28, 2022; however, the reviewing supervisor dated the response on September 13, 2022, and replied, "Grievance received late, inmate no longer in custody." On September 14, 2022, the administrative review was completed. No other action was noted.
3. On September 29, 2022, one (1) incarcerated person housed in "J-03" submitted a grievance stating, in part, his "cell sink gets stuck constantly,"

and the toilet gets clogged and will not flush even after maintenance has tried to fix it. On September 29, 2022, staff received the grievance. On October 18, 2022, the reviewing supervisor replied, "I have spoken with staff and confirmed they have submitted work orders regarding your complaints. They also have confirmed that the issues have (been) addressed by maintenance. The cell you are requesting to move to is currently occupied. You will remain in your current housing at this time." On November 13, 2022, the administrative review was completed. No other action was noted.

4. On November 29, 2022, one (1) incarcerated person housed in "C-05" submitted a grievance stating the cell lights do not work and have been off for three months. On November 30, 2022, staff received the grievance. On December 5, 2022, the reviewing supervisor replied, "We are aware of the issue and are working on remedying the situation as quickly as possible. This issue has not been intentional or as means of punishment. If the lights are causing any medical issue, please submit a medical kite so that medical can address these issues." On December 6, 2022, the administrative review was completed. No work order or other action was noted. During the on-site review, the Expert was informed various housing units/cells are experiencing lighting problems, and the jail contractors and manufacturers are attempting to resolve the problem.
5. On November 30, 2022, one (1) incarcerated person housed in "C-08" submitted a grievance stating the lights in his cell have been off since arriving over thirty days ago and are causing medical/mental health issues. On November 30, 2022, staff received the grievance. On December 2, 2022, the reviewing supervisor replied, "We understand that the lighting is an issue; it is not an action that is intentional against the inmate population. This is an area that is and has been actively pursued for repairs. If needed, the multipurpose room offers plenty of light and privacy to work on legal matters." On December 2, 2022, the administrative review was completed. No work order or other action was noted. As previously noted, during the on-site review, the Expert was informed various housing units/cells are experiencing lighting problems, and the jail contractors and manufacturers are attempting to resolve this problem.
6. On November 24, 2022, one (1) incarcerated person housed in "C-08" submitted a grievance stating the cell lights are not working and is unsafe. On November 26, 2022, staff received the grievance. On November 27, 2022, the reviewing supervisor replied, "We are aware of the lighting situation and are currently working on a solution. Please use your out-of-cell time from 0700 -2100 hours to read any material you like in the well-lit dayroom. Our deputies will continue to do hourly security checks, ensuring your safety." On November 29, 2022, the administrative review was completed. No work order or other action was noted. As previously noted, during the on-site review, the Expert was informed various housing units/cells are experiencing lighting problems, and the jail contractors and manufacturers are attempting to resolve this problem.

7. On November 27, 2022, one (1) incarcerated person housed in "C-14" submitted a grievance stating, in part, the lights in his cell have not worked for over three (3) months. The incarcerated person stated it is a safety issue and is cruel and unusual punishment. On November 28, 2022, staff received the grievance. On November 28, 2022, the reviewing supervisor replied, "The lighting control issue that multiple housing units have been experiencing is not an intentional punishment against you or any other inmate housed here in NBJ who are experiencing similar issues. We have been attempting to rectify this issue for some time and will continue to do so. In the meantime, please utilize the day room and multi-purpose room of your unit to write and conduct proper research." On December 9, 2022, the administrative review was completed. No work order or other action was noted. As previously noted, during the on-site review, the Expert was informed various housing units/cells are experiencing lighting problems, and the jail contractors and manufacturers are attempting to resolve this problem. Post tour, the Expert was informed the lighting problems were fixed on Friday April 14, 2023.

Main Jail and NBJ - During incarcerated person interviews, the Expert asked questions about filing grievances regarding sanitation matters of concern. Most incarcerated persons stated they are aware of using the grievance process to raise sanitation matters of concern; however, some issues are not completely resolved. Some incarcerated persons stated they submit a "kite" or tell staff about sanitation matters, and most times, the problem is resolved. However, sometimes Deputies will not accept grievances and tell incarcerated persons, "The issues are not grievable."

Other grievance topics incarcerated persons claimed or provided to the Expert consisted of the following:

- Cleaning supplies at Main Jail – Not providing cleaning supplies on weekends or holidays, sufficient cleaning materials/liquid, or cleaning equipment provided is inadequate to clean.
- Showers at Main Jail - Have mold/mildew, rust, and water is either scorching hot or too cold.
- Private visitation rooms at Main Jail - Dirty or not cleaned.
- Ventilation at Main Jail – Vents are not cleaned, bad ventilation on hot or humid days, and insufficient heat in winter or cool/cold air in summer.
- Laundry at Main Jail and NBJ – Not always clean; issued incorrect sizes, linen, or clothing have stains or tears.

Based on the grievances obtained and most incarcerated person interviews, the SBCJ provides a system through which incarcerated persons are able to raise sanitation matters of concern. However, the Expert recommends 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 grievances from the time of submission to resolution.

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

Main Jail - The Expert noted that not all grievances at the Main Jail are reviewed by the housing unit supervisors before each shift change. Of the sixteen (16) grievances and/or grievance responses that were obtained, nine (9) appeared to be reviewed by a supervisor before shift change. The grievance responses did not contain the time when the grievance was reviewed by a supervisor; therefore, the Expert was unable to determine if a grievance was completed before the end of the shift (1800 to 0600 hours). Two (2) grievances did not contain a date, and the Expert was unable to determine if the grievances were reviewed by a supervisor before shift change. Five (5) grievances appeared to have been reviewed by a supervisor from two (2) to nine (9) days after it was received.

NBJ - The Expert noted that not all grievances at NBJ are reviewed by the housing unit supervisors before each shift change. Of the seven (7) grievances and/or grievance responses that were obtained, one (1) grievance appeared to be reviewed by a supervisor before shift change. The grievance responses did not contain the time when the grievance was reviewed by a supervisor; therefore, the Expert was unable to determine if a grievance was completed before the end of the shift (1800 to 0600 hours). Six (6) grievances appeared to have been reviewed by a supervisor from two (2) to twenty-four (24) days after it was received.

The Expert recommends that grievances containing issues related to sanitation matters of concern be reviewed by the housing unit supervisors before each shift change. The Expert also recommends that SBCJ provide both a copy of the grievance submitted by the incarcerated person and a copy of the grievance response generated by the program/system. This would allow the Expert to review and evaluate the actual grievance, date and time submitted, response, and date and time of response.

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

Main Jail – From the sixteen (16) grievances submitted, nine (9) required a work order to be submitted; however, in various cases, a work order had already been submitted before the grievance was submitted. Of the six (6) grievances submitted that required a work order, a work order was not provided for review, or it was unknown if a work order was submitted.

NBJ – The Expert was unable to rate this question as NBJ did not provide copies of work orders related to sanitation matters of concern.

The Expert recommends that SBCJ provides copies of all work orders submitted when a grievance is received with a maintenance issue identified, with

documentation that includes whether and when the work order was completed, and the issue resolved. It is further recommended staff submit all work orders before the end of the following shift when a maintenance issue is identified.



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", written over a horizontal line.

Julian Martinez
Director
Sabot Consulting

November 4, 2023

Date