



Agreement Between Orange County and Disability Rights California

Expert Monitor's Report (Sixth Round)

Rights of People With Disabilities

On-Site Review: Review: February 24 - 28, 2025

Produced by:

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I. Introduction

On March 22, 2018, Disability Rights California (DRC) notified the County of Orange of its intent to monitor Orange County Jail facilities, as consistent with its federal and state law authority to monitor facilities with respect to the rights and treatment of individuals in California who have disabilities.

DRC and its authorized agents conducted facility monitoring tours of the Jail on May 10-11, 2018, June 11, 2018, and January 30-31, 2019. DRC's monitoring included (1) interviews with leadership and staff from the Orange County Sheriff's Department (OCSD) and Correctional Health Services (CHS), (2) interviews and other communications with a substantial number of people in custody at the Jail during and outside of the above-mentioned monitoring tours, and (3) review and substantive analysis of relevant records, data, and policies.

On March 8, 2019, DRC issued findings from its monitoring investigation of Orange County Jail facilities, including issues related to the rights of incarcerated people with disabilities, the treatment of incarcerated people with mental health care needs, the use of restrictive housing, and the treatment of incarcerated people who identify as LGBTQ.

Following the issuance of DRC's findings, the Parties engaged in discussions regarding a process to address the findings without the need for adversarial litigation.

On November 21, 2019, the Parties executed a Negotiations Agreement, which provided a procedural framework for resolving the disputed claims.

Consistent with the Parties' Negotiations Agreement, the Parties mutually agreed for Sabot Consulting to serve as a neutral expert (1) to conduct a comprehensive, independent review of policies, procedures, and practices related to the topics set forth in the Settlement Agreement, and (2) to complete a report with findings and recommendations to address any identified deficiencies. The County retained Sabot Consulting to serve as the neutral expert pursuant to an agreement executed on January 25, 2020 (amended on February 22, 2020, and August 1, 2022).

Sabot Consulting's team of experts conducted site visits at the Jail during the months of March, May, and June 2020. The assessment included interviews with 37 incarcerated persons, sworn staff, and non-sworn staff working at the Jail, as well as an extensive policy and data review.

On March 19, 2021, Sabot Consulting submitted to the Parties its Final Report, Orange County Sheriff's Department Custody Operations: Americans with Disabilities Act, Restrictive Housing, LGBTQI, and Healthcare Program Assessment.

Consistent with the Parties' Negotiations Agreement, the Parties then engaged in careful negotiations of a Remedial Plan (RP) to address the findings of Sabot Consulting's Assessment Report and to implement its recommendations, as appropriate. Negotiations were substantially informed by DRC's ongoing review of relevant records, data, and other materials, information-sharing with the County, and communication with people incarcerated at the Jail.

While Sabot Consulting's assessment and the Parties' negotiations were necessarily slowed by the circumstances of the COVID pandemic, the Parties' negotiations have proceeded as expeditiously as possible towards a resolution and formal agreement. In consultation with DRC

and its authorized agents, the County has already begun to implement several of Sabot Consulting's recommendations and related remedial actions during the period of negotiations.

The County agreed to implement the provisions of the RP, subject to monitoring by Sabot Consulting and by DRC with its authorized agents and further discussions between the Parties.

The County agreed to develop and implement appropriate and adequate plans, policies, and practices to ensure implementation of and compliance with the RP. During the period of monitoring pursuant to the Parties' Agreement, the County is required to submit plans or policies to DRC for review and comment.

DRC's March 2019 findings letter and Sabot Consulting's Assessment Report each identified concerns regarding the treatment of incarcerated people with mental health disabilities at the Jail.

- Subsequent to those findings, the County has taken and continues to take steps to enhance Jail mental health care programming.
- Certain mental health-related issues are addressed in the RP, including as related to disability-related accommodations and program access, reforms to restrictive housing/isolation practices, and reforms to disciplinary practices as they apply to people with mental health or other disabilities.
- The Parties agree that the Jail's mental health treatment programming requires further development to meet the needs of the population. The Parties further acknowledge that DRC and its authorized agents will continue to monitor the treatment of people with mental health disabilities at the Jail, including through monitoring processes.
- If DRC identifies concerns with respect to the care and treatment of people with mental health disabilities, it will raise those concerns with the County and confer in good faith as to necessary remedial action to address any such problems. If DRC finds that such concerns are not adequately addressed, it will so inform the County and may take any necessary action, including by any legal means, to protect the rights of people with mental health disabilities.

II. The Expert's Monitoring Role and Monitoring Activities

The Parties previously agreed to a process and framework for monitoring the implementation of the Remedial Plan (RP). The Parties also agreed in the Negotiations Agreement and continue to agree that Sabot Consulting will serve as the neutral Expert for purposes of monitoring the RP implementation.

The Expert is required to complete a comprehensive review (Compliance Review) of the County's implementation of the components of the RP within 180 days of the execution of the Agreement and conduct a Compliance Review every 180 days thereafter during the term of the Agreement. The Expert is required to review whether the County has adequately implemented each component of the RP and is required to identify which components, if any, are not yet adequately implemented.

As part of the Compliance Review, the Expert is required to issue a draft report (Compliance Report) that states their opinion as to whether the County has adequately implemented the components of the RP and which components, if any, are not yet adequately implemented. Within fifteen (15) days following the issuance of a draft Compliance Report, the Parties may provide written responses to the draft Compliance Report. If either Party submits a written response to the draft Compliance Report, the Expert will consider the response(s) and issue a final report within fifteen (15) days. The final report will address any written responses submitted by the Parties. If neither Party submits a written response to the draft report, the Expert's draft report will become the final report.

Within 15 days of the issuance of the Expert's final Compliance Report, the Parties will meet and confer to discuss the Expert's findings and recommendations. Within 30 days of the issuance of the final Compliance Report that includes a finding that the County has not adequately implemented one or more components of the RP, the County shall develop a proposed plan that identifies the actions it will take to address the Expert's findings (Action Plan). The Parties will then have 30 days to agree upon the County's proposed Action Plan or negotiate a revised Action Plan.

If the Expert issues two successive Compliance Reports finding that the County has adequately implemented the same component of the RP, such a finding will result in a suspension of monitoring by the Expert of the corresponding component. The Expert may, however, continue to review whether the County has adequately implemented a component for which monitoring has been suspended pursuant to this provision if such review is necessary for determining whether the County has adequately implemented other components of the RP for which monitoring has not been suspended pursuant to this provision. If, during the term of the Agreement, DRC forms the good faith belief that the County is no longer adequately implementing a component of the RP for which the Expert had suspended monitoring pursuant to this provision, DRC shall promptly notify the County in writing and present a summary of the evidence upon which such a belief is based. Within 30 days thereafter, the County shall serve a written response stating whether it agrees or disagrees with DRC's position. In the event that the County agrees, monitoring by the Expert and DRC pursuant to this Agreement shall resume with respect to the RP component(s) at issue. In the event the County disagrees, the Parties shall present to the Expert in writing their positions. The Expert will, within 30 days, issue a written decision regarding whether to resume monitoring of the RP component(s) at issue.

B. Monitoring Process

In each Compliance Report, the Expert is required to identify whether the County has adequately implemented each RP provision. The Expert is required to make the findings utilizing the following definitions:

Adequately Implemented (AI): Implementation of all or most components of the relevant RP provision, and no significant work remains to accomplish the goal of that provision.

Partially Implemented (PI): Implementation of some components of the relevant RP provision and significant work remains to reach adequate implementation.

Not Implemented (NI): No implementation of most or all the components of the relevant RP provision, and significant work remains to reach partial implementation.

Un-ratable (UR): Used where the Expert has not been provided data or other relevant material necessary to assess implementation or factual circumstances during the monitoring period, making it impossible for a meaningful review to occur at the present time.

Not Assessed (NA): Used where the Expert has not assessed implementation with a particular provision during a monitoring period. This designation should be used only where circumstances make it infeasible for the Expert to complete the assessment during the monitoring period.

Monitoring Suspended Based on Previous Findings of Compliance (MS): Used where two previous successive Compliance Reports have found that the provision has been adequately implemented.

III. Executive Summary

This is the fifth Expert Monitor Review to measure Orange County's (OC) compliance with the Settlement Agreement and the RP, which address related mandates, including:

- I. Policies and Procedures
- II. ADA Tracking Procedures
- III. Identifying People With Disabilities
- IV. Orientation
- V. Effective Communication
- VI. Intellectual and Developmental Disabilities
- VII. Healthcare Appliances, Assistive Devices, Durable Medical Equipment
- VIII. Housing Placements
- IX. Access to Programs, Services, and Activities
- X. Access to Worker Opportunities
- XI. Access to Community Work Programs
- XII. Disability-Related Grievance Process
- XIII. Alarms/Emergencies/Announcements
- XIV. Searches, Restraints, and Counts
- XV. Transportation
- XVI. ADA Training, Accountability, and Quality Assurance

The sixth round of monitoring focused on the Theo Lacy Facility (TLF), Central Men's Jail (CMJ), Central Women's Jail (CWJ), and the Intake Release Center & Transportation (IRC). The on-site Monitoring Review was conducted from February 24 – 28, 2025. The Monitoring Review included a review of pre-monitoring documents produced by the County of Orange (OC); on-site observations; interviews of sworn and non-sworn personnel (e.g., housing deputies, HCA CHS healthcare staff (medical and mental health) classification staff); and interviews of incarcerated persons housed in the OC Jails.

A meeting was conducted with representatives from the County of Orange (Orange County Jail Administration and staff from the County Counsel's Office). DRC Representatives were also present during the meeting and during portions of the monitoring tour. An exit meeting was conducted via Zoom on March 12, 2024, with representatives from the County of Orange (Jail Administration, Custody, HCA CHS, and staff from the County Counsel's Office) and DRC Representatives.

The Expert would like to thank all OC Jail staff for their assistance in facilitating access to the Jails, coordinating the staff and incarcerated person interviews, and the production of the pre-monitoring documents. The Expert found that the staff was open and transparent in their responses during the staff interviews.

The Expert finds that since the previous monitoring tour, additional provisions set forth in the Settlement Agreement and RP (and local policies/procedures) have been implemented, and previous provisions continue to be found as "Adequately Implemented." In addition, some areas found as "Partially Implemented" during the previous tour have been found as "Adequately Implemented" during the sixth monitoring tour. However, the Expert finds that in some cases, more information and evidence are needed to make a determination of compliance with the required provisions/elements.

For areas that were found not "Adequately Implemented," a more thorough assessment will continue to be made in future monitoring tours, including the review of proof of practice documentation. With the implementation of related policies, procedures, and training, staff continue to be informed in an understanding of the Settlement Agreement and RP requirements and how that correlates to their respective job duties.

As this was the sixth monitoring tour, elements of the Settlement Agreement and RP that were found "Adequately Implemented" in the previous five rounds of monitoring have been moved to "Monitoring Suspended Based on Previous Findings of Compliance." However, the Expert will continue to review whether the County has adequately implemented a component for which monitoring has been suspended if such review is necessary for determining whether the County has adequately implemented other components of the RP for which monitoring has not been suspended. Additionally, the Expert will follow the RP requirements if areas that have been found as "Adequately Implemented" are identified by DRC as no longer adequately implemented and the County agrees with DRC's position. In the event the County disagrees, the Expert will review the parties' position and provide a written decision regarding whether to resume monitoring of the RP component(s) at issue.

The County continues to put processes and practices in place to move provisions from partially implemented and not implemented to adequately implemented and suspension of monitoring.

Since the last monitoring tour, the County has:

- Revised the CCOM 8000 - Inmates with Disabilities sections 8000.13 and 8000.14 to include the provision of adaptive supports (basic life skills and tasks reminders, prompts for clinical appointments, and assessments for victimization) and the completion of the Adaptive Support Log.
- Implemented the requirement for staff involved in the disciplinary process to provide and document effective communication.
- Query all disabled incarcerated persons during the ADA Initial and Monthly Interviews regarding their ability to access the Tablet.
- Created a Tablet User Guide and placed it in each Guard Station for staff to provide assistance to disabled incarcerated persons in accessing the Tablet.
- Did not house any incarcerated persons in the Sheltered Living (SL) cells during the rating period.
- Activated the James A. Musick Facility.

Additionally, the County has an effective process in place for the disability-related designations as well as accommodation information to be shared with custody (Classification and ADA Compliance Unit) staff when the disabilities and associated accommodations are identified. The County has an effective process in place where medical Case Management (ADA) and the custody ADA Compliance Unit work collaboratively to interview and assess incarcerated persons with disabilities, provide accommodations, and inform incarcerated persons about the ADA program and how to request accommodations. The County has a Mental Health staff member at each facility designated to coordinate ADA-related issues as part of the ADA team. The County also has processes in place to ensure incarcerated persons are provided their Health Care Appliance/Assistive Devices and Durable Medical Equipment and that the devices are maintained in good working order. The County provides incarcerated persons with ADA-related information

during the orientation process. The County provides incarcerated persons with access to worker opportunities and the Community Work Program. The ADA Compliance Unit staff are engaged with staff and the disabled incarcerated persons in ensuring that the requirements of the RP and the ADA are provided to the incarcerated persons. All incarcerated persons with identified disabilities who were interviewed during the tour were aware of the ADA staff and stated they would resolve issues brought to their attention. Both the Custody/CHS Administration and staff continue to be committed to ensuring the RP requirements are implemented as well as ensuring the disabled incarcerated persons are provided with their accommodations and are provided equal access to the OC Jails programs, services, and activities. The process for custody staff to document Effective Communication continues to improve, and all staff interviewed were aware of the RP requirements. However, as in the previous report, CHS staff are not consistently providing Effective Communication using the incarcerated person's preferred method of communication (ASL/VRI), as is required by the Remedial Plan.

The Expert's report identifies areas deemed as Adequately Implemented, Partially Implemented, Not Implemented, Unratable, Not Assessed, and Monitoring Suspended Based on Previous Findings of Compliance. The areas deemed as Unratable are generally due to a lack of implementation and/or a lack of policy/procedures and/or other supporting documentation.

The following reflects the overall ratings given for the 115 areas rated:

- Adequately Implemented – 6
- Partially Implemented – 35
- Not Implemented – 2
- Un-ratable – 0
- Not Assessed – 0
- Monitoring Suspended Based on Previous Findings of Compliance - 72

It is the Expert's belief that as the County continues to implement vital components of the Settlement Agreement and RP, including those outlined in this report, the areas that have not been found to be Adequately Implemented will progress to an Adequately Implemented rating.

This report details the pre-monitoring tour document review, on-site monitoring, and staff and incarcerated person interviews and also includes findings and recommendations/actions the County must make to move towards meeting the mandates of the Settlement Agreement and RP.

Based on the document review and on-site monitoring tour, the summary of ratings and recommendations are listed below:

PROVISION	REQUIREMENT	CURRENT RATING	PRIOR RATING
I.	POLICIES AND PROCEDURES		
I.A.	Reasonable Accommodation Policy	MS	MS
I.B.	Finalize policies, practices, and procedures within six (6) months. Recommendation: The Expert recommends that the County finalize the revisions to the policies, procedures, and practices to ensure compliance with the ADA, its implementing regulations, and related federal and state disability laws and to ensure compliance with the remedial plan provisions.	PI	PI
II.	ADA TRACKING PROCEDURES		
II.A.	Implementation of a centralized, real-time networked electronic system Recommendation: Continue the process of implementing a centralized, real-time networked electronic system (SOMA) to identify and track all incarcerated people with disabilities and their specific accommodations	PI	PI
II.B.	Requirements of ADA tracking system Recommendation: See recommendation II.A above	PI	PI
II.C.	Tracking System readily available and used by all custody, medical, mental health, program, and other staff Recommendation: See recommendation II.A above	PI	PI
II.D.	ADA tracking not called “special needs list”	MS	MS
III.	IDENTIFYING PEOPLE WITH DISABILITIES		
III.A.	Identification of a person’s disability and disability needs throughout custody	MS	AI
III.B.	During medical intake screening, Identification of a person's disability based on self-identification, health record, staff observation, and request of third party	MS	AI
III.C.	During medical screening, determine effective communication and document effective communication provision	MS	MS
III.D.	Conduct medical screening in a confidential setting	MS	MS
III.E.	Use of evidence-based and Trauma Informed practices during medical screening	MS	MS
III.F.	Provision of accommodations (housing, HCS/AD/DME) promptly, communicated to relevant staff, and documented in the ADA Tracking System	MS	MS
III.G.	Notification of custody staff and ADA Compliance Unit of a person's disability and disability-related needs	MS	MS

III.H.	Tracking of all disabilities and disability-related needs in the ADA Tracking System Recommendation: See recommendation II.A above	PI	PI
III.I.	Development of a process for conducting disability-related evaluations after medical intake screening	MS	MS
IV.	ORIENTATION		
IV.A.	Adequately inform persons with disabilities of ADA rights	MS	MS
IV.B.	Provision of orientation video in accessible format, including Spanish	AI	AI
IV.C.	Information from the orientation process communicated effectively	AI	AI
IV.D.	Posting of ADA Rights Notice	MS	MS
IV.E.	Unit orientation and individualized support for individuals who are blind, low vision, deaf, hard of hearing, or who have Developmental or Intellectual disabilities	MS	MS
V.	EFFECTIVE COMMUNICATION		
V.A.	Assessment of Effective Communication and provision of Effective Communication Recommendation: Ensure that clinical and custody provide the preferred method of communication (SLI) for clinical and due process encounters.	PI	PI
V.B.	Assessment of Effective Communication needs	MS	MS
V.C.	Primary consideration of Effective Communication preference Recommendation: Ensure that clinical and custody staff gives primary consideration to the incarcerated persons' preferred method of communication (SLI).	PI	PI
V.D.	Provision of auxiliary aids and services when simple written or oral communication is not effective. Recommendation: Ensure that clinical and custody staff provide sign language interpretation services when oral communication is not effective.	PI	PI
V.E.	Provision of Effective Communication for programs, services, and activities Recommendation: See recommendation V.A. above. Provide the Expert the proof of practice for Effective Communication documentation for program staff.	PI	PI
V.F.	Requirements of Effective Communication for Due Process Events and Clinical Encounters Recommendation: See recommendation V.A. above.	PI	PI
V.G.	Checking ADA Tracking System to identify Effective Communication needs, provision of Effective Communication, and documentation of Effective Communication Recommendation: See recommendation V.A. above.	PI	PI
V.H.	Lip reading generally not used as a means of Effective Communication. If the preferred method is lip reading, staff must speak slowly and loudly	MS	MS

V.I.	Logging use of SLI Recommendation: See recommendation V.A. above.	PI	PI
VI.	INTELLECTUAL AND DEVELOPMENTAL DISABILITIES		
VI.A.	Development of OCSD and CHS policies and procedures for Intellectual/Developmental Disabilities	MS	AI
VI.B.	Development of OCSD and CHS policies and procedures for Intellectual/Developmental Disabilities, including cognitive deficits, adaptive supports Recommendation: Ensure the secondary screening is conducted within the required time. Provide the Expert the contacts/communications with the Regional Center so the Expert can measure the County's compliance with the RP requirements.	PI	PI
VI.C.	Monitoring individualized plan for individuals with Intellectual/Developmental Disabilities	MS	MS
VI.D.	Training of relevant staff on individualized plans, accommodations, and adaptive supports for Intellectual/Developmental Disabilities individuals	MS	MS
VI.E.	Provision of accommodations and adaptive supports tailored to intellectual/developmentally disabled persons' needs. Recommendation: Ensure staff provide and document the adaptive supports, prompts, assistance, and reminders on the Housing Unit Adaptative Support Log.	PI	PI
VI.F.	Access to easy reading books for Intellectual/Developmental and learning-disabled individuals	MS	AI
VI.G.	Provision of discharge planning Recommendation: Ensure staff provides discharge planning tailored to the needs of people with Intellectual/Developmental Disabilities, including appropriate and effective linkages to housing assistance and community-based service providers.	PI	PI
VII.	HEALTHCARE APPLIANCES, ASSISTIVE DEVICES, DURABLE MEDICAL EQUIPMENT		
VII.A.	Provision of HCA/AD/DME and individualized assessment	MS	MS
VII.B.	Tracking and documenting inspection and maintenance of HCA/AD/DME	MS	MS
VII.C.	County-provided wheelchairs	MS	MS
VII.D.	Charges for provision, repair, or replacement of HCA/AD/DME	MS	MS
VII.E.	Retention of personal HCA/AD/DME	MS	MS
VII.E.1.	Provision of equivalent alternative jail-issued device when HCA/AD/DME is removed Recommendation: Ensure staff document on the Safety and Security Assessment form in cases where Jail staff determined it was necessary to remove an individual's personal HCA/AD/DME for safety and security reasons, whether an alternative device was provided or that no alternative was possible.	PI	PI

VII.E.2.	Consultation with medical staff and documentation when determination of alternative device and/or accommodation Recommendations: See the recommendation in section VII.E.1 above.	PI	PI
VII.E.3.	Repair and/or replacement of personal HCA/AD/DME	MS	AI
VII.E.4.	Replacement HCA/AD/DME provided by the County is sufficient to provide access to the Jail's programs, services, and activities	MS	MS
VII.E.5.	Provision of equivalent alternative jail-issued device when HCA/AD/DME is removed	MS	MS
VII.F.	Permit of a prosthetic limb or similar device absent specific security concerns	MS	MS
VII.F.1.	Examination of the person when a prosthetic limb or device is removed	MS	MS
VII.F.2.	Repair of a prosthetic limb or similar device promptly	MS	MS
VII.F.3.	Prompt steps to provide assessment and provision of the alternative assistive device if the person requires a prosthetic limb or similar device and does not have one	MS	MS
VII.G.	Removal of HCA/AD/DME when placed in a temporary holding cell, sobering cells, or observation cells	MS	MS
VII.H.	Provision of HCA/AD/DME upon release	MS	MS
VII.H.1.	Return of personally owned HCA/AD/DME prior to release	MS	MS
VII.H.2.	Provision of HCA/AD/DME upon release if a person does not have a personal device	MS	MS
VII.H.3	Documentation of provision of HCA/AD/DME upon release	MS	MS
VIII.	HOUSING PLACEMENTS		
VIII.A.	Housing of disabled persons in the most integrated setting Recommendation: Continue physical plant modifications to bring accessible housing online, including full activation of the Musick facility, which will allow the County to house disabled incarcerated persons in the most integrated setting, consistent with their individual security classification, in facilities that accommodate their disabilities and in which they have equivalent access to programs, services, and activities. Ensure disabled incarcerated persons are provided accommodations for shower and in-cell accommodations (when needed).	PI	PI
VIII.B.	Equivalent access to out-of-cell time, programs, services, and activities Recommendation: Ensure that all persons with disabilities, including those in ADA-accessible or other specialized housing, have equal access to programs, services, and activities available to similarly situated persons without disabilities, consistent with their health and security needs. These programs include: <ul style="list-style-type: none"> ○ Dayroom and out-of-cell time 	PI	PI

	<ul style="list-style-type: none"> Access to in-person educational, vocational, reentry, and substance abuse programs 		
VIII.C.	Housing assignment system utilizing information in ADA Tracking System	MS	MS
VIII.D.	Placement of disabled persons by Classification Recommendation: See the recommendation in section VIII.A. above.	PI	PI
VIII.E.1.	Deactivation of Sheltered Living cells	AI	PI
VIII.E.2.	Housing of persons in Sheltered Living cells only if there is no other placement consistent with classification/housing needs	MS	MS
VIII.F.	Assistance of persons with disabilities (including wheelchairs) to access Central Men's Jail yard	MS	MS
VIII.G.	Quality Assurance Audits to ensure housing accommodations	MS	AI
VIII.H.	Development of process to expeditiously move people to accessible housing	MS	AI
IX.	ACCESS TO PROGRAMS, SERVICES, AND ACTIVITIES		
IX.A.	Provision of information and provision of equal access to programs, services, and activities Recommendations: Ensure the disabled incarcerated persons are provided the required out-of-cell time. Ensure the disabled incarcerated persons are provided accommodations during dayroom and recreational yard (chairs). Ensure the disabled incarcerated persons are provided access to religious and educational program opportunities. Ensure the disabled incarcerated persons are provided accommodations to access visiting.	PI	PI
IX.B.	Provision of assistance to persons with disabilities so that they can meaningfully participate in the Jails programs, services, and activities	MS	MS
IX.C.	Provision of reading and scribing documents (legal, medical, request forms, grievances, due process, etc.)	MS	MS
IX.D.	Equal access to library, recreational, and educational reading material. Recommendations: Although the Expert found the County adequately implemented this provision, the Expert is requesting that the County produce the Tablet User Guide and the online videos for staff.	AI	PI
IX.E.1.	Logging and tracking of out-of-cell time, program participation, including acceptance, refusals, and amount Recommendation: Ensure the out-of-cell (dayroom and outdoor) tracking includes whether the incarcerated person with a disability accepts or refuses the out-of-cell opportunity, and if an incarcerated person accepts the out-of-cell opportunity, the amount of time spent out-of-cell.	NI	NI
IX.E.2.	ADA Unit interviews of disabled persons on a monthly basis	MS	MS
IX.E.3.	Annual review of structured programs Recommendation: Ensure that the annual review of structured programs includes an assessment of access to religious and reentry programs.	PI	PI

X.	ACCESS TO PROGRAM OPPORTUNITIES		
X.A.	Equitable work opportunities for disabled incarcerated persons	MS	AI
X.A.1.	Job descriptions and hiring criteria	MS	MS
X.A.2.	Individualized assessment by medical staff to identify work/duty restrictions Recommendation: Ensure that for the next monitoring round, the County produces medical progress notes for all cases (medical and mental health progress notes including dates of the review) for completed work assignment medical evaluations that were denied by CHS staff and not just the MMS.	PI	PI
X.A.3.	Consideration of reasonable accommodations by work supervisors with input from incarcerated persons	MS	MS
X.A.4.	Provision of equitable work opportunities for incarcerated persons with intellectual disabilities with appropriate accommodations Recommendation: Ensure that for the next monitoring round, the County produces documentation that incarcerated workers with intellectual disabilities are being provided with appropriate accommodations and supports (e.g., additional supervision and training, modified production expectations, expanded timeframes for completion of projects, etc.	PI	PI
XI.	ACCESS TO COMMUNITY WORK PROGRAM		
XI.A.	Equitable Community Work Program opportunities for disabled incarcerated persons	MS	AI
XI.A.1.	Job descriptions and hiring criteria	MS	MS
XI.A.2.	Individualized assessment by medical staff to identify work/duty restrictions Recommendation: See the recommendation in section X.A.2 above.	PI	PI
XI.A.3.	Consideration of reasonable accommodations by work supervisors with input from incarcerated persons	MS	AI
XI.A.4.	Provision of equitable work opportunities for incarcerated persons with intellectual disabilities with appropriate accommodations	MS	AI
XI.B.	Ending the practice of medical staff not approving people with disabilities participation in CWP without consideration of essential functions and accommodations Recommendation: See the recommendation in section X.A.2 above.	PI	PI
XI.C.	Provision of reasonable accommodations	MS	AI
XII.	DISABILITY-RELATED GRIEVANCE PROCESS		
XII.A.1.	Informing incarcerated persons of disability grievance procedures	MS	MS

XII.A.2.	Effectively communicate grievance procedures	MS	MS
XII.B.	Tracking of grievances that request disability accommodations	MS	MS
XII.C.1.	Availability of grievance forms	MS	MS
XII.C.2.	Addressing grievances forms internally and not refusing, destroying a grievance form, or obstructing and interfering	MS	MS
XII.C.3.	Assisting Intellectual/Developmentally disabled persons to submit grievances and appeal of grievances	MS	MS
XII.D.1.	Screening of ADA-related grievances by Housing Sergeant Recommendation: Ensure ADA-related grievances and appeals that present an urgent issue immediately provide an interim accommodation that addresses the urgent issue pending a final response to the grievance or resolve the grievance promptly with the participation of health care staff.	PI	PI
XII.D.2.	Grievance responses within fourteen days Recommendations: Ensure the Facility Administrative Sergeant, in consultation with the ADA Compliance Unit, investigates all non-urgent ADA-related grievances and appeals and provides a written response within fourteen days of receipt. Ensure that each grievance response includes the date the response was provided to the incarcerated person to allow the Expert to monitor (and the County to track internally).	PI	PI
XII.D.3	When the County is unable to resolve a grievance within fourteen days. Recommendation: In cases where the County is unable to resolve ADA-related grievances within fourteen days (e.g., the incarcerated person must be referred to a specialist and the appointment will not occur within fourteen days or the grievance involves a personnel complaint), ensure the County provides a response within fourteen days communicating why the County cannot resolve the grievance within the fourteen-day deadline and, if relevant, provide information regarding any subsequent events scheduled to resolve the grievance (e.g., a specialist appointment) and address, as appropriate, the provision of interim accommodations pending resolution.	PI	PI
XII.D.4.	Grievance response requirements Recommendation: Ensure grievance responses include: <ul style="list-style-type: none"> ○ Whether the grievance is granted, in whole or part, ○ The date of the grievance response and the date the issue was resolved (if applicable), ○ Clear language as to what the resolution is (e.g., "the device was delivered on [DATE]") rather than "your concern was addressed"). ○ The results of the medical evaluation (if applicable). 	PI	PI
XII.D.5.	Input from OCSD and CHS when responding to grievances	AI	PI
XII.D.6.	Interview by ADA Unit regarding requests for accommodation	AI	PI
XII.D.7.	Inclusion of the process for appealing the grievance response Recommendation: Ensure all grievance responses include an explanation of the process for appealing the grievance response.	NI	NI

XII.D.8.	Effective communication of grievance or appeal responses Recommendation: Ensure staff effectively communicates all grievance and appeal responses to the grievant/appellant and documents the communication method(s) used and their effectiveness.	PI	NI
XII.D.9.	Provision of grievance or appeal response	MS	MS
XII.E.	Retaliation for requesting accommodations or submitting grievances	MS	MS
XIII.	ALARMS/EMERGENCIES/ANNOUNCEMENTS		
XIII.A.	Accommodations for alarms and emergencies	MS	MS
XIII.B.	Policies for alarms and emergencies communicated to persons with disabilities using Effective Communication	MS	MS
XIII.C.	Communicating effectively during emergencies and alarms	MS	MS
XIII.D.	Offering of vests and maintenance and posting of list of persons with disabilities that require accommodations during emergencies and alarms	MS	MS
XIII.E.	Prioritizing of deaf or hard of hearing during alarms, emergency announcements, and evacuations	MS	MS
XIII.F.	Effective communication of announcements Recommendation: Provide proof of practice that staff effectively communicates verbal announcements to persons with disabilities that affect communication.	PI	PI
XIII.G.	Effective communication of all written notices Recommendation: Provide proof of practice that staff effectively communicate written notices to persons with disabilities that affect communication.	PI	PI
XIV.	SEARCHES, RESTRAINTS, AND COUNT		
XIV.B.	Provision of accommodations during searches, application of restraints, and count Recommendation: Establish a uniform procedure for staff to accommodate disabled incarcerated person when restraints are applied so they can use their assistive device and ambulate safely.	MS	MS
XV.	TRANSPORTATION		
XV.A.	Provision of accommodations when in transit	MS	MS
XV.B.	Availability of prescribed ACA/AD/DME during transport process	MS	MS
XV.C.	Use of accessible vehicles	MS	MS
XV.D.	Provision of staff assistance for mobility impairments during transport	MS	MS
XVI.	ADA TRAINING, ACCOUNTABILITY, AND QUALITY ASSURANCE		
XVI.A.	Annual staff ADA training	MS	MS
XVI.B.	Appropriate ADA training for ADA instructors	MS	MS

XVI.C.	<p>Policies and procedures for monitoring, investigating, and tracking staff violations (or allegations of violations) of ADA requirements and Jail ADA policies</p> <p>Recommendation: Ensure the County finalizes and implements the OCSD written policies and procedures for monitoring, investigating, and tracking staff violations (or allegations of violations) of ADA requirements and Jail ADA policies.</p>	PI	PI
XVI.D.	<p>Development of an ADA accountability plan</p> <p>Recommendation: Ensure the County finalizes and implements the ADA accountability plan to timely log and investigate allegations from any source that staff has violated the ADA or Jail ADA-related policies and procedures. Ensure violations of the ADA or Jail ADA-related policies and procedures are logged and tracked and follow the CHS/OCSD progressive discipline policy</p>	PI	PI

IV. Findings

A. Policies and Procedures (Section I)

- A. *It shall be the policy of the County to provide equal access to the Jail's services, programs, and activities to incarcerated people with disabilities. No person with a disability, as defined in 42 U.S.C. § 12102 and under California law, shall, because of that disability, be excluded from participation in or denied the benefits of services, programs, or activities or be subjected to discrimination. It shall be the policy of the County to provide reasonable accommodations or modifications where necessary to provide equal access to services, programs, or activities, consistent with the Americans with Disabilities Act ("ADA"), 28 C.F.R. § 35.130, and other applicable federal and state disability laws.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- B. *The County shall, within six (6) months of finalizing this RP and in consultation with Counsel and the joint Expert, complete revision of its policies, procedures, and practices to ensure compliance with the ADA, its implementing regulations, related federal and state disability laws, and to ensure compliance with the remedial provisions outlined herein. Implementation of revised policies, procedures, and practices will proceed expeditiously and consistently with the parties' agreement. The six-month implementation deadline will not apply to the County's development of a disability tracking system, addressed in Paragraph II.A.*

The County reported that OCSD policy revisions are ongoing. The County has revised and implemented revisions to the following policies:

- Custody & Court Operations Manual (CCOM) 8000 - Inmates with Disabilities and the related forms.
- Health Care Agency Correctional Health Services Policy and Procedure 6602 Health Evaluations for OCSD Inmates who Violate Jail Rules (Effective date 4-24-24).
- Health Care Agency Correctional Health Services Policy and Procedure 1022 Inmate Workers (In-Jail and Community Work Program) (Effective 2-09-24, Revised 1-11-24)
- Health Care Agency Correctional Health Services Policy and Procedure 6002 ADA Effective Communication (Effective 6-28-24, Revised 1-23-24)

During this monitoring period, the County revised the CCOM 8000 - Inmates with Disabilities sections 8000.13 and 8000.14 to include the provision of adaptive supports (basic life skills and tasks reminders, prompts for clinical appointments, and assessments for victimization) and the completion of the Adaptive Support Log.

Based on this, the Expert finds that the County has partially implemented the RP requirements. The Expert recommends that the County revise and implement all applicable policies required by the SA.

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: The Expert recommends that the County finalize the revisions to the policies, procedures, and practices to ensure compliance with the ADA, its implementing regulations, and related federal and state disability laws and to ensure compliance with the remedial plan provisions.

B. ADA Tracking Procedures (Section II)

- A. *The County shall implement a centralized, real-time networked electronic system to identify and track all incarcerated people with disabilities and their specific accommodation needs (the "ADA Tracking System"). The County will make its best effort to implement the ADA Tracking System by January 1, 2023, and will provide notice of any delay to this timeline to allow the parties to confer and address the matter. Until the new ADA Tracking System is in place, the County shall continue to use its existing system for tracking incarcerated person's disabilities and their specific accommodation needs ("Existing ADA Tracking System").*

The County reports that "OCSD IT advises that modules are continuing to be built in SOMA and the core modules are planned to be completed by the end of June 2025. Many of the modules will contribute to ADA tracking. Because Guardian RFID will also integrate with SOMA, OCSD cannot give an exact date as to when all modules will be completed in SOMA."

During a previous on-site monitoring tour, the County provided a demonstration of the SOMA Jail Management System (JMS). The demonstration revealed that SOMA appears to include the functionality for the County to effectively manage the disability tracking requirements of the incarcerated persons with disabilities, their accommodation, and the provision of the accommodations. During the on-site review, the County reported that based on external issues with the vendor, the SOMA application is being transitioned to ServiceNow and will be managed and supported by the OCSD IT Services.

The County also reported that the first phase of Guardian RFID is "up and running" (safety and security checks). Following this rollout, out-of-cell time will be the next phase. The date is yet to be determined." The County plans to integrate Guardian RFID with ServiceNow.

Pending the full implementation of ServiceNow, the County continues to use the existing system to track incarcerated person's disabilities and their specific accommodation needs with the OCSD's "Existing ADA Tracking System" as required by the RP.

The Expert will continue to monitor the functionality of ServiceNow and Guardian RFID once fully implemented to ensure the tracking requirements of the RP are functioning as required.

Based on this, the Expert finds that the County has partially implemented the RP requirements.

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: The Expert recommends that the County continue the process of implementing a centralized, real-time networked electronic system (ServiceNow) to identify and track all incarcerated people with disabilities and their specific accommodations.

B. The ADA Tracking System shall identify:

- 1. All types of disabilities, including but not limited to mental health, Intellectual/Developmental Disability, learning, speech, hearing, vision, mobility, dexterity, upper extremity, or other physical or sensory disabilities;*
- 2. Disability-related health care needs;*
- 3. Barriers to communication, including but not limited to Intellectual/Developmental Disability, learning, and hearing, speech, or vision disabilities;*
- 4. Accommodation needs, including but are not limited to accommodations related to housing, programming, classification, Effective Communication, adaptive supports, health care appliances, assistive devices, and/or durable medical equipment ("HCA/AD/DME");*

Please refer to Section B. A above for the Expert's analysis and observations.

Pending the full implementation of ServiceNow, the County continues to use the existing system to track incarcerated person's disabilities and their specific accommodation needs with the OCSD's "Existing ADA Tracking System" as required by the RP.

The Expert will continue to monitor the functionality of ServiceNow and Guardian RFID once implemented to ensure the tracking requirements of the RP are functioning as required.

Based on this, the Expert finds that the County has partially implemented the RP requirements. ServiceNow

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: The Expert recommends that the County continue the process of implementing a centralized, real-time networked electronic system (ServiceNow) to identify and track all incarcerated people with disabilities and their specific accommodations

- C. The ADA Tracking System's information shall be readily accessible to and used by all custody, medical, mental health, program, and other staff who need such information to ensure appropriate accommodations, adaptive supports, and meaningful access for persons with disabilities.*

Please refer to Section B. A above for the Expert's analysis and observations.

Pending the full implementation of ServiceNow, the County continues to use the existing system to track incarcerated person's disabilities and their specific accommodation needs with the OCSD's "Existing ADA Tracking System" as required by the RP.

The Existing ADA Tracking System information continues to be available to custody and medical/dental and mental health staff, program staff, and work supervisors.

The Expert will continue to monitor the functionality of ServiceNow and Guardian RFID once implemented to ensure the tracking requirements of the RP are functioning as required.

Based on this, the Expert finds that the County has partially implemented the RP requirements. ServiceNow

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: The Expert recommends that the County continue the process of implementing a centralized, real-time networked electronic system (ServiceNow) to identify and track all incarcerated people with disabilities and their specific accommodations.

D. The ADA Tracking System shall not be called the "Special Needs List."

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

C. Identifying People With Disabilities (Section III)

A. The County shall, throughout a person's time in custody, take steps to identify and verify each person's disability and disability-related needs.

As noted in the fifth report, two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Adequately Implemented)

B. During the medical intake screening conducted for every person booked into the Jail, CHS staff shall take steps to identify and verify each person's disability and disability-related needs, including based on:

- 1. The individual's self-identification or claim to have a disability;*
- 2. Documentation of a disability in the individual's Jail health record and/or County (OCHCA) records;*
- 3. Staff observation/referral to ADA Unit regarding a person who may have a disability; or*

4. *The request of a third party (such as a family member) for an evaluation of the individual for an alleged disability.*

As noted in the fifth report, two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Adequately Implemented)

- C. *When conducting the medical intake screening, staff shall determine if the individual has a disability affecting communication and, if yes, provide and document the provision of Effective Communication during the medical intake screening.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- D. *CHS staff shall conduct medical intake screenings, including for disabilities, in settings that allow for reasonable privacy and confidentiality.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Monitoring Suspended Based on Previous Findings of Compliance)

- E. *When conducting screening and intake, CHS shall utilize evidence-based and Trauma-Informed practices that take into account that many incarcerated people have experienced trauma.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- F. *If the medical intake screening identifies that the person in custody requires any accommodations (e.g., housing, HCA/AD/DME), such accommodations shall be provided promptly to the incarcerated person. The need for such accommodations shall also be communicated to all relevant staff and documented in the ADA Tracking System/Existing ADA Tracking System.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- G. The medical staff shall immediately notify custody staff and the ADA Compliance Unit regarding a person's disabilities and disability-related needs.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- H. All disabilities and disability-related accommodation needs identified during the intake process shall be tracked in the ADA Tracking System/Existing ADA Tracking System.*

Disability accommodation information continues to be provided to the ADA Compliance Unit staff. When received, the ADA Compliance Unit staff enter the information into the "Existing ADA Tracking System" for tracking purposes.

The County has been working to revise the J-112 and J-105A forms that are used for identifying disability accommodation needs at and after intake. The County intends to phase out the J-105A form, to modify the J-112 form, and to implement a new J-113 form. In January 2025, this Expert and DRC representatives separately provided feedback on the revised J-112 form and the new J-113 form, which the County is reviewing.

Once the J-112 and J-113 forms are completed, there will need to be appropriate training of relevant staff on their use. This Expert will assess implementation on these forms and related procedures, likely starting in the next round.

The County also reports that ServiceNow will have at least the same functionality as ServiceNow.

Based on this, the Expert finds that the County has partially implemented the RP requirements.

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: The Expert recommends that the County continue the process of implementing a centralized, real-time networked electronic system (ServiceNow) to identify and track all incarcerated people with disabilities and their specific accommodations. The County should finalize the revisions to the J-112 form and implement the new J-113 form, in consultation with this Expert and DRC as warranted. The County should also ensure appropriate training of relevant on the rollout of these forms, to ensure the procedure is consistent and effective with respect to identifying, tracking, and implementing disability-related accommodations.

- I. CHS shall develop a process for conducting disability-related evaluations for persons in custody after the medical intake screening. Such evaluations can occur at the request of the person in custody, staff who observe a potential need for accommodation, or third*

parties. Like the medical intake screening, such evaluation shall be conducted by a qualified health care professional to determine whether a person has a disability and, if yes, any reasonable accommodations necessary for the person to have equal access to programs, services, and activities offered at the Jail.

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

D. Orientation (Section IV)

A. *The County shall ensure that persons with disabilities are adequately informed of their rights under the ADA, including but not limited to:*

- 1. The right to reasonable accommodations;*
- 2. The process for requesting a reasonable accommodation;*
- 3. The grievance process, location of the forms, and process for getting assistance in completing the grievance process;*
- 4. The role of the OCSD and CHS ADA Coordinators and methods to contact them;*
- 5. Instructions on how persons with disabilities can access health care services, including the provision of Effective Communication and other accommodations available in accessing those services; and*
- 6. The availability of and process for requesting access to auxiliary aids, including sign language interpreters and other accommodations for people with disabilities affecting communication.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

B. *Upon booking, persons with disabilities shall receive, in an accessible format (including in the Spanish language), an orientation video regarding rules or expectations. Once they are housed, persons with disabilities shall receive, in an accessible format (including in the Spanish language), the Jail rules, the ADA information brochure, and the ADA inmate qualifications/acknowledgment of rights/programs form as part of the initial ADA interview process conducted by the ADA Compliance deputies.*

The County produced the Orange County Sheriff's Department Custody Orientation Video. The video is in English and Spanish and includes subtitle text. The County reported, "The tablets have been rolled out system-wide, and the jail orientation video and three PREA videos have been added to the tablets. The videos are in English and Spanish and have closed captioning in English and Spanish. The ADA Compliance team has included in the initial interview questions for persons with disabilities whether they have viewed, listened to, and understood the videos or whether they need assistance. If the person needs assistance, the ADA Compliance team provides assistance. If the person has a disability

affecting communication, the ADA Compliance team will ensure that effective communication is used to convey the contents of the videos."

The County previously reported the status of the television in the Booking Loop as follows:

- Female: PF 4, PF 5 ADA, PF 6, PF 7 (all are working)
- Male: PM 5, PM 6 ADA, PM 9, PM 10 ADA, PM 16, PM 18, PM 19, PM 20, PM 21, PM 24, PM 25 (all are working)
- The Dock Area (where arrestees wait to be seen by Medical prior to entering the booking loop): three (3) televisions, one (1) is dedicated to the orientation video; all are working.

The County also reported that since the last site visit, no new televisions have been added.

The ADA information brochure and the ADA inmate qualifications/acknowledgment of rights/programs form, which is part of the initial ADA interview process, are consistently completed by the ADA Compliance Unit staff. The Orientation and Jail Rules, New Inmate Orientation, is available in large print. The televisions in the Booking Loop are operational and were displaying the orientation and PREA videos. The Expert also confirmed the tablets include the jail orientation video, and PREA videos have been added to the tablets. The videos are in English and Spanish and have closed captioning in English and Spanish. The ADA Compliance team asks persons with disabilities whether they have viewed, listened to, and understood the videos or whether they need assistance. If the person needs assistance, the ADA Compliance team provides assistance. If the person has a disability affecting communication, the ADA Compliance team ensures that effective communication is used when conveying the contents of the videos. All incarcerated persons interviewed reported they viewed the orientation video in the dock area, booking loop, Tablet, or jail housing unit televisions.

Based on this, the Expert finds that the County has Adequately implemented the RP requirements.

Adequately Implemented (Previous Rating Adequately Implemented)

- C. *The County shall ensure that all information from the orientation process is communicated effectively to people with communication-related disabilities. The County shall ensure that any orientation videos are available with closed captioning and in the Spanish language.*

The County produced the Orange County Sheriff's Department Custody Orientation Video. The video is in English and Spanish and includes subtitle text. Although the video does not include ASL format, the County reports accommodations for incarcerated persons whose preferred method of communication is ASL and the incarcerated person cannot read; they would be provided an ASL interpreter via VRI during the viewing of the orientation video. The Expert notes there were no cases to rate during the current rating period. Additionally, in the review of the completed ADA Inmate Qualifications Acknowledgement of Rights/Programs, the Orange County Sheriff's Department Custody Operations ADA Information Brochures, and the ADA Interview/Activity Logs, Effective Communication accommodations are being provided to the incarcerated persons during

the interviews by the ADA Compliance Unit staff as reflected in the ADA Interview/Activity Logs.

The Custody & Court Operations Manual (CCOM) 8000 - Inmates with Disabilities states, "Inmates identified by CHS staff will be interviewed by the facility ADA Deputy. Each inmate will be notified in writing regarding what level of programs and services they are eligible to receive based on classification level and medical needs. In addition, each inmate will receive a copy of the jail rules and correctional programs brochure. If an inmate requires assistance reading the orientation brochure, the ADA Deputy will take steps to ensure Effective Communication for the inmate." The policy also states, "Each inmate will receive a written copy of the Orange County Jail Rules and Orientation brochure as well as the ADA information brochure. Each inmate will sign acknowledging receipt of those documents. If an inmate is unable to read or understand the written material, due to various types of disabilities, ADA Compliance staff will make the appropriate accommodations to ensure Effective Communication." The policy further states, "ADA Compliance Unit shall document an inmate's disability as well as reasonable accommodations, including any Effective Communication needs, in the JMS and on the ADA Tracking List."

The County produced 140 OCSD Effective Communication Forms that were completed for the Initial ADA Interview. The Effective Communications Forms reflect that Effective Communication was provided during the interview, which includes information on the following:

- Recreation
- Education classes
- Religious services
- Visiting
- Grievance process
- Emergency/alarms
- Jail Rules
- Programs

The ADA Inmate Interview Worksheets reviewed reflect that the ADA Deputies ask and document whether the person saw or listened to the orientation and PREA videos and understood the videos. Listed below is an example of the language used by the ADA Deputies to log the responses:

- Stated he saw or heard the orientation video and PREA videos on the loop or Tablet.
- Stated he understood the orientation video and PREA videos.
- Did not see the Orientation Video and PREA Videos on the loop or Tablet. He did not see the Orientation and PREA videos. ADA Deputy asked him if he wanted him to explain the video. He declined and stated that he would watch the video the next time it played.

Based on this, the Expert finds that the County has adequately implemented the RP requirements.

Adequately Implemented (Previous Rating Adequately Implemented)

- D. *The County shall post an ADA Rights Notice that provides information about incarcerated persons' rights under the ADA, reasonable accommodations, and contact information for the ADA Coordinator. The Notice shall be prominently posted in all housing units, in the booking/intake areas, in medical/mental health/dental treatment areas, and at the public entrances of all Jail facilities.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- E. *The County shall ensure that staff orient and provide individualized support for persons who are blind, low vision, deaf, hard of hearing, or who have Developmental or Intellectual disabilities when the County initially places such people in housing or transfers such people to a new housing unit. The orientation must be effectively communicated to ensure that the person with a disability can safely navigate the housing unit and understands how to request assistance, including from staff working in the housing unit. The nature and extent of the orientation will depend on individual need.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

E. Effective Communication (Section V)

- A. *For people with disabilities affecting communication, the County shall assess each person's Effective Communication need and shall provide Effective Communication based on individual need.*

The Health Care Agency Correctional Health Services Policy and Procedure 6002 ADA Effective Communication includes a process for the CHS staff to assess an incarcerated person's Effective Communication needs during the medical intake screening process. Once identified, the CHS staff document the Effective Communication accommodations on the CHS Functional Performance Worksheet and the CHS Inmate Health and Mobility Notification Form J-105A. The J-105A is provided to classification staff and the ADA Compliance Unit and entered into the Existing ADA Tracking System. With the planned rollout of a revised J-112 form and new J-113 form that replaces the J-105A form, the County will be substantively continuing this process. The Expert will confirm implementation and consistency in future monitoring rounds.

The CHS has a process in place for the medical providers to identify the Effective Communication needs and provide and document the Effective Communication accommodations provided during the clinical encounter. The CHS policy also requires

medical staff to access the ADA Tracking System or patient's EHR, as applicable, to identify whether the patient requires reasonable accommodations for Effective Communication prior to routine health encounters. CHS staff are also required to document the provision of Effective Communication in the patient's health record using an ADA Effective Communication form or directly enter the Effective Communication provided in the electronic medical record (electronic Effective Communication Form).

The CHS leadership reported during the on-site review that in April 2025, an "Alert" was being implemented in the health record to prompt the user/clinical staff to document the Effective Communication before closing out the progress note/file. This new Alert will be reviewed in the next monitoring round.

To measure the County's compliance with the requirement to provide Effective Communication, the Expert randomly selected 12 cases where the incarcerated person was identified as having a disability that affects communication. The Expert reviewed the medical progress notes in the EHR to determine if the medical staff provided and documented Effective Communication during the encounters. Listed below is a summary of the review:

- An incarcerated person with an intellectual disability (preferred method of communication: speak slowly and clearly) – Of 26 medical encounters, the provision of Effective Communication was not documented in two (2) encounters.
- An incarcerated person with an intellectual disability (simple 1-2 instructions) – Of four (4) medical encounters, the provision of Effective Communication was not documented in one (1) encounter.
- An incarcerated person with an intellectual disability (simple 1-2 instructions) – Of two 29 medical encounters, the provision of Effective Communication was documented in all 29 encounters.
- An incarcerated person with a hearing disability (preferred method of communication ASL) – Of the 10 medical encounters, an SLI/VRI was provided in all 10 encounters. However, in three (3) encounters, a custody Deputy, a Registered Nurse, and the incarcerated person's mother were used as an interpreter.
 - There are significant HIPAA and adequacy-of-care concerns when using custody staff as an interpreter in a medical encounter.
 - There are concerns as well if the staff used to interpret are not qualified ASL interpreters.
- An incarcerated person with a hearing disability (preferred method of communication ASL) – Of the three (3) medical encounters, an SLI/VRI was not provided in one (1) encounter.
- An incarcerated person with a hearing disability (preferred method of communication ASL) – Of the 32 medical encounters, an SLI/VRI was not provided in seven (7) encounters, and an SLI was refused in five (5).
- An incarcerated person with a hearing disability (preferred method of communication ASL) – Of the 15 medical encounters, an SLI/VRI was provided in all eight (8) encounters, the SLI was refused in one (1) and in one (1) encounter a Correctional Deputy who knows sign language was used as an interpreter.

- There are significant HIPAA concerns when using custody staff as an interpreter in a medical encounter.
- An incarcerated person with a hearing disability (preferred method of communication ASL) – Of the 33 medical encounters, an SLI/VRI was not provided in 13 encounters.
- An incarcerated person with a hearing disability (preferred method of communication PocketTalker) – Of the 17 medical encounters, Effective Communication was not documented in all 17 encounters.
- An incarcerated person with a hearing disability (preferred method of communication speak loudly and clear) – Of the four (4) medical encounters, Effective Communication was documented in all four (4) encounters.
- An incarcerated person with a hearing disability (preferred method of communication is Pocket Talker speak loudly) – Of the 16 medical encounters, the provision of Effective Communication was documented in all 16 encounters.
- An incarcerated person with a hearing disability (preferred method of communication: Speak Loud and Clear) – Of four (4) medical encounters, the provision of Effective Communication was documented in three (3) encounters.

The County has implemented revisions to the Custody & Court Operations Manual (CCOM) 8000 - Inmates with Disabilities, which includes an Effective Communication section that requires custody staff to identify incarcerated persons with Effective Communication needs and provide and document the Effective Communication as required by the RP. The form for staff to document Effective Communication has also been revised and implemented.

CHS has also implemented Policy 6002 – ADA Effective Communication. Based on the Expert's findings, the Expert recommends that further training of staff on the policy be provided, including the requirements to check and utilize the Effective Communication alert for each patient's Effective Communication needs in the EHR, provision of the patient's primary/preferred method of communication, and documentation on the EC form.

The Expert determined from interviews with classification staff, staff involved in the disciplinary process (issuance and hearings), and staff involved in the service of notices to appear and service of new charges that they are aware of the requirement to identify the Effective Communication needs and document the Effective Communication accommodations provided during due process events. The County produced 1,456 completed Orange County Sheriff's Department Effective Communication forms. The completed forms include documentation of Effective Communication for the following types of encounters:

- Housing Unit Orientation (309)
- ADA Interview (498)
- Classification (212)
- Grievance (6)
- Intake ID/New charges (255)
- Release (174)
- Rules Violation (1)
- Other

- Medical Treatment (1)

The ADA Compliance Unit staff, staff that conduct the housing unit orientation, Classification staff, Intake/ID staff, and release staff consistently provide and document Effective Communication. However, the production of documents included only one (1) completed Effective Communication Form for disciplinary encounters. During the next rating period, the Expert will review these types of encounters to determine if OCSD is providing and documenting Effective Communication as required by the RP.

The County reported that OCSD has modified the Sergeant's Disciplinary Hearing Report form to include a check box for EC:

13. ☐ (EC) Form Required. Refer to the daily ADA Tracking List.

OCSD's Correctional Programs is working on procedures for instructors to document if accommodations have been provided, including effective communication, for persons with disabilities.

CHS reported they are continuing to train staff and audit encounters to ensure compliance with effective communication requirements. Audits and proof of training can be produced upon request and can be demonstrated during future visits.

Based on this, the Expert finds the County has partially implemented the RP requirements. The Expert recommends that staff provide the preferred method of communication for clinical encounters.

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: The Expert recommends that the County ensure that clinical and custody provide the preferred method of communication (SLI) for clinical and due process encounters. The Expert also recommends that the County continue to conduct audits and when cases are identified where a SLI was not utilized when required, take corrective action to ensure a SLI is being appropriately provided.

- B. The County shall assess all people detained at the Jail for any period of time to determine if they have a disability that affects communication. A disability affects communication if it affects hearing, seeing, speaking, reading, writing, or understanding. Persons who have disabilities affecting communication include but are not limited to, people who are blind or have low vision, who are deaf or hard of hearing, who have a speech, learning, Intellectual/Developmental Disability, who have a traumatic brain injury, or who have a mental illness.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- C. *In determining what accommodations are necessary to achieve Effective Communication, including what auxiliary aids and services may be necessary, the County shall give primary consideration to the preference of the person with Effective Communication needs.*

The revised and implemented Health Care Agency Correctional Health Services Policy and Procedure 6002 ADA Effective Communication states, “In determining what accommodations are necessary to achieve Effective Communication, including what auxiliary aids and services may be necessary, CHS staff shall give primary consideration to the preference of the patient.” The revised and implemented Custody & Court Operations Manual (CCOM) 8000 - Inmates with Disabilities also requires the identification of the incarcerated person's primary method of communication.

The County reported that CHS is continuing to train staff and audit encounters to ensure compliance with effective communication requirements. Audits and proof of training can be produced upon request and can be demonstrated during future visits. In addition, please refer to section E. A above for the County's action plan.

CHS provided the results of the Effective Communication Electronic Health Record audits. The results are listed below.

EC FLAG COMPLIANCE					
Month	Population with EC flag	Encounters	EC form	EC form Missing	Compliance (%)
July	39	472	417	55	88%
August	37	483	450	33	93%
September	41	523	486	37	93%
October	45	756	670	86	89%
November	41	610	512	98	84%
December	46	637	508	129	80%

Primary Method Compliance						
Timeframe	Population (ASL)	Encounters	EC Form (Required)		EC Form (Not Required)	Compliance (%)
Jul	0	0	0	0	0	NA
Aug						
Sep-Dec	4	73	EC Form (Required)		0	53%
			73			
			Primary (Y)	Primary (N)		
			39	34		

The County has a process in place to identify the incarcerated person's Effective Communication accommodations, including the implementation of policy revisions and forms to ensure compliance with the RP.

However, based on the findings in Section V (E. Effective Communication A), further monitoring of implementation, including whether staff consistently give primary consideration to the preference of the incarcerated person with Effective Communication needs, will be necessary. Proof of practice through the review of completed Effective Communication forms and the implementation and utilization of ServiceNow's ADA tracking system will continue to be reviewed.

Based on this, the Expert finds that the County has partially implemented the RP requirements. The Expert recommends that staff provide the preferred method of communication for clinical encounters.

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: The Expert recommends that the County ensure that clinical and custody staff gives primary consideration to the incarcerated persons' preferred method of communication (SLI), with further training and the use of existing quality assurance procedures (audits) to ensure that staff appropriate and consistently utilize an SLI when indicated.

- D. Effective auxiliary aids and services shall be provided when simple written or oral communication is not effective. Such aids may include, but are not limited to, bilingual aides, qualified sign language interpreters, certified deaf interpreters, oral interpreters, readers, sound amplification devices, captioned television/video text displays, speech-to-text, and real-time captioning, videophones, and other telecommunication devices for deaf persons (TDDs), video relay services, video remote interpreting services, audiotaped texts, Braille materials, large print materials, screen readers, writing materials, written notes, and signage.*

The revised and implemented Health Care Agency Correctional Health Services Policy and Procedure 6002 ADA Effective Communication lists the following Assistive Devices and Methods of Technology that are Provided for Patients Needing ADA Effective Communication:

- Contracted qualified and certified translators and interpreters
- Qualified Sign Language interpreters, including American Sign Language (ASL) and Certified deaf interpreters
- Readers, speech-to-text, and real-time captioning
- Sound amplification devices
- Video Remote Interpreting (VRI)
- Video Relay Service (VRS)
- Closed captioning videos
- Speaking at an increased volume
- Speaking at a slower rate
- Providing replacement hearing aid batteries
- Large print educational handouts
- Issuing pocket talkers
- Repeating, rephrasing statements, and/or using basic language
- Allowing additional time for the patient to respond

- Vests to alert staff if the patient is hard of hearing or visually impaired
- Audiotaped texts, Braille materials, and screen readers
- Writing materials, written notes, and signage
- Providing a mental health clinical staff member to assist, when warranted, for patients with a cognitive or Developmental disability (refer to Health Care Agency Correctional Health Services Policy and Procedure Cognitive and Developmentally Disabled Patients)

The revised and implemented Custody & Court Operations Manual (CCOM) 8000 - Inmates with Disabilities lists the following assistance or accommodations that may be provided to incarcerated persons with Effective Communication accommodation needs:

- Use of a qualified sign language interpreter
- Use of Simple English
- Use of a bilingual aide
- Repeated statements
- Speaking slowly
- Rephrasing statements
- Using written communication
- Using lip reading (only if the inmate's preferred/primary method of communication is lip reading)
- Use of sound amplification device
- Captioned television/video text displays
- Speech-to-text and real-time captioning
- Videophones and other telecommunication devices for deaf inmates
- Braille materials
- Screen readers
- Reading documents to the inmate
- Providing magnifier
- Using large print
- Using scribe
- Any other tool that was used to facilitate Effective Communication

The County produced the following documents which reflect the VRI was provided for communication during the rating period (Medical):

- July 2024 – No Usage
- August 2024 – 13 occasions – 137 minutes
- September 2024 – Two (2) occasions – 43 minutes
- October 2024 – 6 occasions – 64 minutes
- November 2024 – 13 occasions – 135 minutes
- December 2024 – Seven (7) occasions – 120 minutes

The VRI invoices reflect the following (Custody):

- July 2024 – No usage
- August 2024 – Seven (7) occasions – 55 minutes

- September 2024 – No usage
- October 2024 – Three (3) occasions – 12 minutes
- November 2024 – 15 occasions – 192 minutes
- December 2024 – No usage

The County also produced OCSD Effective Communication Forms where an SLI/VRI was required. Additionally, the Expert reviewed the Effective Communication Forms to determine if EC was provided/documented for all cases identified as requiring an SLI:

- Classification interview – Of eight (8) encounters, only two (2) cases where VRI was provided. In two (2) cases, no EC Form was produced.
- Housing Unit Orientation – Of eight (8) encounters, only four (4) cases where VRI was provided. In one (1) case, no EC Form was produced.
- ADA Initial/Monthly Interview – Of eight (8) encounters, in all cases, a VRI was provided.
- Release – Of six (6) encounters, only two (2) cases where VRI was provided. In three (3) cases, no EC Form was produced.
- Intake – Of seven (7) encounters, only four (4) cases where VRI was provided.

To measure the County's compliance with the requirement to provide Effective Communication, the Expert randomly selected 12 cases where the incarcerated person was identified as having a disability that affects communication. The Expert reviewed the medical progress notes in the Electronic Health Record to determine if the medical staff provided and documented Effective Communication during the encounters. For the summary of the review, see Section V (E. Effective Communication A). Further training and quality assurance are necessary to ensure consistent implementation of this provision by CHS staff.

The County produced 1,456 completed Orange County Sheriff's Department Effective Communication forms. For the summary of the review and the Expert's analysis, see Section V (E. Effective Communication A).

The Expert also reviewed 1,002 ADA Interview/Activity Logs the County produced and noted that the Activity Logs reflect that disabled incarcerated persons are provided with auxiliary aids and services (qualified sign language interpreters, readers, sound amplification devices, captioned television/video text displays, speech-to-text, and real-time captioning, videophones, and other telecommunication devices for deaf persons (TDDs), video relay services, video remote interpreting services, audiotaped texts, large print materials, writing materials, written notes, etc.) as required by the RP.

The ADA Interview/Activity Log reflects the following:

- Was given +2 reading glasses
- Requested and was given 2.0 reading glasses by ADA CSA
- ADA Deputy swapped the audiobook
- Was given a large print book
- Provided +3 reading glasses
- Requested to be evaluated for a bottom bunk. ADA nurse notified.

- On 08-09-24, ADA Deputy and ADA CSA delivered 1.0 reading glasses to him.
- Requested a Magnifying sheet, an Audio Tape Player (#9) and Tape via inmate message slip. Both were provided on 8-13-24.
- Requested and swapped his audio tape
- Easy reading book exchanged for new easy reading book
- Was given +1 glasses
- Was given audio player #6 and an audiobook
- Swapped out audio tape.
- 3 reading glasses, audio player, and tapes issued by ADA Deputy. No magnifier sheets in stock. Will order replacements and issue them upon receiving
- VRS access was explained. Tablet #2. He stated she did not know any phone numbers and did not want to use the VRS ViaPath tablet.
- ADA Deputy spoke with him and verified he was able to access the VRS Tablet. He stated he had no issues and is being issued both the ADA VRS tablet and a regular ViaPath tablet daily. He also said he is able to make phone calls.

The County reported that CHS is continuing to train staff and audit encounters to ensure compliance with effective communication requirements. Audits and proof of training can be produced upon request and can be demonstrated during future visits. In addition, please refer to section E. A above for the County's action plan.

Based on this, the Expert finds that the County has partially implemented the RP requirements. The Expert will continue to monitor this provision closely with the rollout of the ServiceNow ADA Tracking System.

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: The Expert recommends that the County ensure that clinical and custody staff provides sign language interpretation services when oral communication is not effective. The Expert also recommends that the County continue to conduct audits and when cases are identified where a SLI was not utilized when required, take corrective action to ensure a SLI is being appropriately provided.

- E. The County shall ensure that staff provide Effective Communication such that persons with communication-related disabilities can participate as equally as possible in Jail programs, services, and activities for which they are qualified.*

During the on-site monitoring tour program, staff interviewed stated they are provided the ADA Inmate Tracking List, and with this list, they are able to identify the Effective Communication accommodation needs of the incarcerated persons who are participating in the jail programs. The specific Effective Communication accommodation needs are listed in the Current ADA Tracking List.

During the incarcerated person interviews, the incarcerated persons reported the following:

- Six (6) incarcerated persons stated that although the ADA Deputies provide reading and writing assistance, housing unit staff do not assist them and refer them to the ADA Deputies or incarcerated persons.

The Expert was not able to confirm or refute these claims.

The ADA Interview/Activity Log listed in Section E. D. above reflects entries where ADA staff provided effective communication accommodations so the incarcerated person can participate in the Jail programs, services, and activities.

The County reported that CHS is continuing to train staff and audit encounters to ensure compliance with effective communication requirements. Audits and proof of training can be produced upon request and can be demonstrated during future visits. In addition, please refer to section E. A above for the County's action plan.

There continues to be progress on this RP provision. However, as in the previous reports, there also continue to be several sub-components to this provision that are discussed in this section that have been rated as Partially Implemented. There are still some concerns with the provision of Effective Communications by CHS and OCSD staff. Although custody staff interviewed reported they are aware of the Effective Communication form and check for Effective Communication needs and are also knowledgeable of the Effective Communication requirements, there were cases where the incarcerated person's preferred method of communication was not used. During the on-site review, the County reported that as of January 2025, the County had implemented a process to show proof-of-practice that the County is providing accommodations during programming, including during county-facilitated programs and programs provided by outside facilitators. During the next monitoring tour, the Expert will review the documents to measure the County's compliance with the RP requirements. This includes documents that reflect the provision of Effective Communication during the incarcerated persons' participation in Jail programs, services, and activities such as education, religion, and work assignments.

Based on this, the Expert finds that the County has partially implemented the RP requirements.

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: The Expert recommends that the County ensure that clinical and custody provide the preferred method of communication (SLI) for clinical and due process encounters. Provide the Expert the proof of practice for Effective Communication documentation by program staff. The Expert also recommends that ADA Deputies affirmatively notify incarcerated persons with communication (reading or writing-related disabilities) of their availability to assist, and the methods to request/secure such assistance from housing unit deputies and other staff.

F. The requirements in subsection (G) shall apply for Effective Communication in the following situations:

1. Due Process Events

- a. Classification processes;*
- b. Jail disciplinary hearing and related processes;*
- c. Service of notice (to appear and/or for new charges);*
- d. Release processes;*

2. Clinical Encounters

- a. Obtaining medical history or description of ailment or injury;*
- b. Communicating diagnosis or prognosis;*
- c. Providing medical care (note: medical care does not include medication distribution);*
- d. Performing medical evaluations;*
- e. Providing mental health care;*
- f. Performing mental health evaluation;*
- g. Providing group and individual therapy, counseling, and other therapeutic activities;*
- h. Providing patient's rights advocacy/assistance;*
- i. Obtaining informed consent or refusal for provision of treatment;*
- j. Explaining information about medications, medical or mental health procedures, treatment, or treatment options;*
- k. Explaining discharge instructions;*
- l. Providing clinical assistance during a medical/mental health round (note: this requirement does not apply to performing routine medical/mental health safety checks).*

The revised and implemented Health Care Agency Correctional Health Services Policy and Procedure 6002 ADA Effective Communication lists the following clinical encounters that require the provision of Effective Communication accommodations and completion of an ADA Effective Communication:

- Health history, current ailments, and/or injuries
- Diagnosis, treatment options, and prognosis
- Health evaluations
- Individual and group therapy/counseling and evaluation sessions
- Assistance with patient's rights advocacy
- Informed consent or refusal of health care
- Explaining medications, medical or mental health procedures, and discharge instructions
- Providing clinical assistance during a medical/mental health round

The revised and implemented Custody & Court Operations Manual (CCOM) 8000 - Inmates with Disabilities lists the following events and other processes that rise to the level of the higher standard for ensuring Effective Communication by OCSD staff:

- Classification interviews and processes
- Sergeant's Disciplinary Hearings
- Major Jail Rule Violation Interviews (e.g., serving initial copies of documents, etc.)
- Special Management Unit placement and related processes

- Service of notice (to appear and/or for new charges)

The County reported that CHS is continuing to train staff and audit encounters to ensure compliance with effective communication requirements. Audits and proof of training can be produced upon request and can be demonstrated during future visits. In addition, please refer to section E. A above for the County's action plan.

To measure the County's compliance with the requirement to provide Effective Communication, the Expert randomly selected 12 cases where the incarcerated person was identified as having a disability that affects communication. The Expert reviewed the medical progress notes in the Electronic Health Record to determine if the medical staff provided and documented Effective Communication during the encounters. For the summary of the review, see Section V (E. Effective Communication A). Further training and quality assurance are necessary to ensure consistent implementation of this provision by CHS staff.

The County produced 1,456 completed Orange County Sheriff's Department Effective Communication forms. For the summary of the review and the Expert's analysis, see Section V (E. Effective Communication A).

The staff that conducts the housing unit orientation, Classification staff, Intake/ID staff, and release staff do not consistently provide the incarcerated persons' preferred method of communication (VRI/SLI) for deaf incarcerated persons.

Based on this, the Expert finds that the County has partially implemented the RP requirements.

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: The Expert recommends that the County ensure that clinical and custody provide the preferred method of communication (SLI) for clinical and due process encounters.

G. In the situations described in subsection (F) above, Jail staff shall:

- 1. Prior to the encounter, access the ADA Tracking System or Electronic Health Record system (as applicable) and identify if the person requires reasonable accommodation(s) for Effective Communication;*
- 2. Provide reasonable accommodation(s) to achieve Effective Communication and*
- 3. Document the method used to achieve Effective Communication and how the staff person determined that the person understood the encounter, process, and/or proceeding.*

The revised and implemented Health Care Agency Correctional Health Services Policy and Procedure 6002 ADA Effective Communication and the revised and implemented Custody & Court Operations Manual (CCOM) 8000 - Inmates with Disabilities include the RP requirements for the identification, provision, and documentation of the Effective Communication accommodations.

To measure the County's compliance with the requirement to provide Effective Communication, the Expert randomly selected 12 cases where the incarcerated person was identified as having a disability that affects communication. The Expert reviewed the medical progress notes in the Electronic Health Record to determine if the medical staff provided and documented Effective Communication during the encounters. For the summary of the review, see Section V (E. Effective Communication A). Further training and quality assurance are necessary to ensure consistent implementation of this provision by CHS staff.

The County also produced OCSD Effective Communication Forms where an SLI/VRI was required. For the summary of the review, see Section V (E. Effective Communication D).

A review of EHRs and Effective Communication Forms reveals that some medical providers and OCSD staff do not follow requirements for Effective Communication, including the use of the incarcerated person's preferred method of communication and accessing VRI/SLI when warranted. The County must ensure staff identify, provide, and document the incarcerated person's preferred method of communication.

The County has revised and implemented the Custody & Court Operations Manual (CCOM) 8000 - Inmates with Disabilities and the associated Effective Communication Form and process for custody and classification staff to identify, provide, and document the Effective Communication accommodations.

The County reported that CHS is continuing to train staff and audit encounters to ensure compliance with effective communication requirements. Audits and proof of training can be produced upon request and can be demonstrated during future visits. In addition, please refer to section E. A above for the County's action plan.

Based on this, the Expert finds that the County has partially implemented the RP requirements.

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: The Expert recommends that the County ensure that clinical and custody provide the preferred method of communication (SLI) for clinical and due process encounters.

- H. Lip reading generally should not be used by staff as a means of Effective Communication. If an incarcerated person's preferred/primary method of communication is lip reading, then staff shall accommodate by speaking slowly and loudly.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- I. *The County shall establish a process for logging all instances where sign language interpreters are provided to persons in custody. The County shall also log all instances where a sign language interpreter was needed but was not provided.*

The County reported that CHS is continuing to train staff and audit encounters to ensure compliance with effective communication requirements. Audits and proof of training can be produced upon request and can be demonstrated during future visits. In addition, please refer to section E. A above for the County's action plan.

The revised and implemented Health Care Agency Correctional Health Services Policy and Procedure 6002 ADA Effective Communication states, "In the event a SLI is not available, is waived, or refused by the patient, CHS clinical staff shall employ the most effective form of communication available (i.e., VRI) when communicating with a patient with a hearing disability. For patients refusing SLI assistance, A Refusal to Accept Treatment and Release of Liability Form is completed with the reason."

The revised and implemented Custody & Court Operations Manual (CCOM) 8000 - Inmates with Disabilities policy states, "Staff shall complete the Effective Communication (EC) form and notify (email) the ADA Compliance Unit and record when, for whom, and for what purpose a sign language interpreter was used. If there is a safety or security risk presented that does not permit the use of a Sign Language interpreter or VRI device, staff must document the justification for proceeding without those services on the Effective Communication (EC) form."

To measure the County's compliance with the requirement to provide Effective Communication, the Expert randomly selected 12 cases where the incarcerated person was identified as having a disability that affects communication. The Expert reviewed the medical progress notes in the Electronic Health Record to determine if the medical staff provided and documented Effective Communication during the encounters. For the summary of the review, see Section V (E. Effective Communication A). Further training and quality assurance are necessary to ensure consistent implementation of this provision by CHS staff.

The County also produced OCSD Effective Communication Forms where an SLI/VRI was required. For the summary of the review, see Section V (E. Effective Communication D).

The staff that conducts the housing unit orientation, Classification staff, Intake/ID staff, and release staff do not consistently provide the incarcerated persons' preferred method of communication (VRI/SLI) for deaf incarcerated persons.

Although the County has policies, procedures, and processes, including the associated forms for staff to document the provision of sign language interpreters, in the cases where staff did not document the instances where an interpreter was needed but was not provided, the Expert finds that the County has partially implemented the RP requirements. The Expert will monitor these processes in the context of the rollout of the ServiceNow ADA tracking system.

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: The Expert recommends that the County ensure that clinical and custody provide the preferred method of communication (SLI) for clinical and due process encounters.

F. Intellectual and Developmental Disabilities (Section VI)

- A. *OCSD and CHS shall develop and implement comprehensive and coordinated written policies and procedures for serving incarcerated people with Intellectual/Developmental Disabilities.*

As noted in the fifth report, two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Adequately Implemented)

- B. *CHS will develop and adopt a comprehensive screening process for trained clinical staff to identify Intellectual/Developmental Disabilities, including cognitive deficits, adaptive functioning deficits, and adaptive support needs.*
- 1. If a person is known to have or suspected of having an Intellectual/Developmental Disability, the County shall provide a secondary screening performed by a licensed clinical psychologist within seven (7) business days.*
 - 2. CHS will timely contact the appropriate Regional Center and request the person's current Individualized Program Plan (IPP) with the person's authorization. Once received, health care and custody staff will review the IPP to ensure that appropriate supports and services are provided.*
 - 3. Whenever possible, Jail staff will work with the Regional Center and any relevant County agencies to move a person with an identified Intellectual or Developmental Disability out of custody and into a setting with appropriate supports to meet the person's individual needs.*
 - 4. CHS and OCSD will timely provide relevant information and input about a person's Intellectual/Developmental Disabilities and related needs to OCSD Classification and ADA Compliance Unit staff for appropriate consideration as to housing, work assignments, disciplinary measures, and other relevant matters.*

The County has implemented a screening process for trained clinical staff to identify Intellectual/Developmental Disabilities, including cognitive deficits, adaptive functioning deficits, and adaptive support needs. The screening process includes the RP requirements.

The CJX and TLF ADA Tracking Lists produced during the on-site monitoring tour include 38 incarcerated persons identified as Developmentally Disabled and two (2) pending Intellectual/Developmental disability assessments. The County also produced 115 OCSD CHS J-112s that designated incarcerated persons as "Cognitive Disabled." The County produced a "Regional Center" spreadsheet that reflects 47 Regional Center Contacts. However, the Expert notes that the Regional Center spreadsheet does not include dates the County contacted the Regional Center. During the on-site review, the County Mental

Health staff reported that, at times, it was difficult to make contact with the Regional Center staff.

The Regional Center spreadsheet reflects one (1) case where it was confirmed that the incarcerated person has an open case with the Regional Center. However, it is not reflected that the County requested the current Individualized Program Plan.

The County did not provide information on any cases showing that, whenever possible, the County worked with the Regional Center and any relevant County agencies to move the person with an identified Intellectual or Developmental Disability out of custody and into a setting with appropriate supports to meet the person's individual needs.

One (1) of the clinicians who conducts Intellectual/Developmental disability assessments stated that there are now three (3) clinicians who conduct the assessments and that this has improved the timeliness of the assessments.

CHS produced 55 completed Intellectual/Developmental disability assessments. However, the Expert notes that only 32 are within the rating period. In a review of the 32 assessments, the Expert found that in only four (4) cases, the secondary screening was performed within the seven (7) business day requirement. In seven (7) cases, there was not sufficient information (date of evaluation and date of arrest/referral) for the Expert to determine the County's compliance. The Expert recommends that the clinician documents in the Intellectual/Developmental disability assessment how the case was referred for the evaluation (during the intake screening or staff referral post-intake), the date the case was referred, and the date the incarcerated person arrived in custody.

CHS completes and provides a Functional Performance Worksheet to OCSO Classification and ADA Compliance Unit staff, advising them of information for consideration for housing, work assignments, disciplinary measures, and other relevant matters. Additionally, as part of the Intellectual/Developmental disability assessment, the clinician makes recommendations related to the incarcerated person's adaptive support needs, such as reminders for dayroom, outdoor recreation, showers, brushing teeth, clinical appointments, clothing exchange participation, assistance with reading and writing, and assessment for victimization concerns. This information is conveyed to the ADA staff, who prepare an individualized ID/DD Housing Unit Adaptive Support Needs Log for the housing unit staff where the incarcerated person is housed.

For future monitoring, the Expert will need the information listed above to measure the County's compliance with the RP requirements.

Based on this, the Expert finds that the County has partially implemented the RP requirements. Post-tour, CHS reported that screening results for future monitoring will be produced.

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: The Expert recommends that the County ensure the secondary screening is conducted on the required timeline. Provide the Expert the contacts/communications with the Regional Center so the Expert can measure the

County's compliance with the RP requirements. Additionally, the clinician conducting the Intellectual/Developmental disability assessment should document how the case was referred for the evaluation (during the intake screening or staff referral post-intake), the date the case was referred, and the date the incarcerated person arrived in custody.

- C. A multidisciplinary team that includes appropriate healthcare staff shall monitor and ensure appropriate care and support for people with an Intellectual/Developmental Disability. For each patient, the multidisciplinary team will develop an individualized plan that addresses: (1) safety, vulnerability, and victimization concerns, (2) adaptive support needs, and (3) programming, housing, and accommodation needs. The multidisciplinary team's plan will be reviewed quarterly. If a member of the team becomes aware that a person with an Intellectual/Developmental Disability has a change in (1), (2), or (3) above, the team will promptly review and, if necessary, update the person's plan.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- D. Relevant staff, including housing deputies, the ADA Compliance Unit, and work supervisors/teachers, shall be trained and informed, as appropriate, as to (a) incarcerated people with Intellectual/Developmental Disabilities, their individualized plan, and related accommodation and adaptive support needs; and (b) staff responsibilities to provide for such needs as well as to monitor for and address any safety, vulnerability, or victimization concerns.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- E. People identified as having an Intellectual/Developmental Disability shall be provided with accommodations and adaptive supports tailored to their needs, including (but not limited to) communications at the appropriate comprehension level, more time to complete directions, and specific behavioral and activities of daily living (ADL) supports.*
- 1. Jail staff will be assigned, as appropriate, to assist with health appointments, classification or disciplinary proceedings, housing/facility transfers, and other events involving potentially complex communications.*
 - 2. The ADA Compliance Unit shall track provision of supports for people with Intellectual/Developmental Disabilities on the ADA Inmate Activity Log.*

The County reported that OCSD and CHS implemented an Adaptive Support Needs Log, which is individualized for the needs of the incarcerated person. The County has revised and implemented the Custody & Court Operations Manual (CCOM) 8000 - Inmates with Disabilities to include the following:

“8000.13 – Inmates with Intellectual and Developmental Disabilities

e) Adaptive Support Needs Logs

1. For any inmate identified as intellectually or developmentally disabled, CHS staff shall initiate and send an Adaptive Support Needs Log to the ADA Compliance Unit via email at ADACompliance@ocsheriff.gov.
2. The ADA Compliance Unit will forward the Adaptive Support Needs Log to the appropriate housing location/guard station which houses the inmate.
3. The ADA Compliance Unit will collect all completed Adaptive Support needs Logs at the end of each calendar month, or upon the inmate's release. For those inmates still in custody, a new Adaptive Support Needs Log will be provided to the inmate's housing location for the next month.

8000.14 – Housing Inmates with Intellectual/Developmental Disabilities

f) Staff assigned to the inmate's housing location shall use the Adaptive Support Needs Log to aid them in areas where ID/DD inmates may need reminding to complete basic life skills and tasks. Minimum standards to aid these inmates with Intellectual/Developmental Disabilities in the housing units may include but are not limited to:

1. Showers: prompt as deemed necessary by medical/mental health staff.
 2. Brushing Teeth: prompt as deemed necessary by medical/mental health staff.
 3. Laundry Exchange: prompt during routine laundry exchange if indicated.
 4. Cell Cleaning: prompt when a cell or bed area needs cleaning. Prompt the inmate to clean their cell/bed area. If the inmate is unable to complete the task(s), please advise both shift Sergeant and CHS mental health staff to assist with this item. Advise Classification unit, if necessary, for possible housing change.
 5. Outdoor Recreation/Dayroom: prompt when offered. Prompt the inmate to use recreational/leisure time.
 6. Clinical Appointments: prompt as deemed necessary by medical/mental health staff.
 7. Assessment for Victimization: If this box is checked, a Deputy will have a weekly one-on-one private discussion with the inmate to ensure the inmate is safe from abuse and exploitation. Intellectually or developmentally disabled inmates may be vulnerable to verbal, physical, and sexual abuse, as well as property loss through theft, coercion and manipulation. If the inmate relays victimization concerns, staff will comply with all applicable OCSD policies and procedures to ensure the inmate's safety and/or prevent the inmate from being the victim of property loss. Staff will document their reminders and any assessments for victimization on the Adaptive Support Needs Log For additional information refer to CCOM Section 8000.13(e) - Adaptive Support Needs Log.
- g) Pressuring/Victimization: At least once per month, or within one (1) week of arrival on a new unit, BHB/ADA Deputy will conduct a private one-on-one interview to ensure the inmate is safe from abuse and exploitation
1. The BHB/ADA Deputy will document the confidential one-on-one interviews. If the inmate relays victimization concerns, staff will comply with all applicable OCSD policies and procedures to ensure the inmate's safety and/or prevent the inmate from being the victim of property loss.”

The revised and implemented Custody & Court Operations Manual (CCOM) 8000 - Inmates with Disabilities includes the RP requirement for staff to provide incarcerated persons with Intellectual/Developmental disabilities with accommodations and adaptive supports tailored to their needs, including (but not limited to) communications at the appropriate comprehension level, more time to complete directions and specific behavioral and activities of daily living (ADL) supports. The Custody & Court Operations Manual (CCOM) 1602.5 Discipline Policy states, "The inmate shall have access to staff or inmate assistance when the inmate is illiterate, or the issues are complex." The Custody & Court Operations Manual (CCOM) 1200 Classification Policy does not address the RP requirements for Jail staff to be assigned as an assistant, as appropriate, to assist with the classification proceedings/hearings, housing/facility transfers, and other events involving potential complex communications. The County reports that the effective communication forms are the proof of practice that the incarcerated persons are being assisted by staff with events involving potential complex communication. Specifically, classification policy 1204.9 refers to receipt of the J-112/J-105a form from CHS and the completion of the J-119 detailing the incarcerated persons special protocols, which are sent to the ADA Unit and are tracked. The Health Care Agency Correctional Health Services Policy and Procedure 8651 Cognitive or Developmentally Disabled Patients states, "ADA Nurse Coordinator Responsibilities may include assisting the patient with comprehension with non-emergent health interviews/appointments."

The Revised Health Care Agency Correctional Health Services Policy and Procedure 6407 Reasonable Health Accommodations for Patients with Disabilities states, "When clinically indicated, CHS mental health clinical staff serve as assistants for patients diagnosed with a cognitive or Developmental disability to assist with non-emergent health interviews/appointments, custody disciplinary hearings, and inter and intra-facility transfers (refer to CHS P&P 8651 Cognitive and Developmentally Disabled Patients)."

The County produced 119 ADA Interview/Activity Logs for incarcerated persons identified as having an Intellectual/Developmental disability. The logs reflect ADA Compliance Unit staff meeting monthly with the incarcerated person to address verbal and written communication, visits, commissary, and self-care. The County also produced 41 ID/DD Housing Unit Adaptive Support Needs Logs for the month of December 2024. A review of the logs found that in 34 of the logs, the required adaptive supports were not consistently logged, and the supervisor's weekly review was not conducted. During the on-site review, the Expert found that staff assigned to the CJX and JMF were providing and logging the required adaptive supports, and the supervisors were conducting the required weekly reviews. However, the staff assigned to the TLF were not consistently providing and logging the required adaptive supports, and supervisory staff were not consistently reviewing the logs weekly.

Based on this, the Expert finds the County has partially implemented the RP requirements.

Partially Implemented (Previous Partially Implemented)

Recommendations: The Expert recommends that the County ensure staff provide and document the adaptive supports, prompts, assistance, and reminders on the Housing Unit

Adaptative Support Log. Corrective action efforts should focus on TLF staff's logging of adaptive supports and supervisory staff reviews.

- F. Incarcerated people with Intellectual/Developmental Disabilities, as well as learning disabilities, will have access to easy reading books, magazines, and electronic tablet programs consistent with their reading and cognitive abilities, such that they have equal access to such materials as compared with other incarcerated people at the Jail.*

As noted in the fifth report, two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Adequately Implemented)

- G. CHS and OCSD staff will provide discharge planning tailored to the needs of people with Intellectual/Developmental Disabilities, including appropriate and effective linkages to housing assistance and community-based service providers.*

The revised and implemented Health Care Agency Correctional Health Services Policy and Procedure 8651 Cognitive or Developmentally Disabled Patients states, "Discharge Planning - CHS JCRP Clinicians are responsible for coordinating discharge planning for patients with cognitive and or Developmental disabilities, making referrals, and linking them to appropriate community providers."

OCSD produced an Excel spreadsheet "DD_ID list for DP." The spreadsheet has a column "Discharge Plan Completed by OCSD/Inmate Services?" Of the 86 entries, the spreadsheet reflects one discharge plan was completed by OCSD.

OCSD reported that Inmate Services will provide the discharge plans that they have, but the numbers are few since discharge planning is done for these incarcerated persons by CHS JCRP. OCSD Inmate Services may provide discharge plans to anyone requesting the assistance through one of the following means: Inmate message slip request, referral from CHS, ADA surveys, and/or those enrolled in any programs/classes OCSD offers. The County also reported that CHS will produce all requested documents during document production and during future visits.

CHS produced three (3) JCRP Discharge Plans. However, the Expert notes that the County produced 115 OCSD CHS J-112s that designated incarcerated persons as "Cognitive Disabled." Discharge plans were not produced for all cases that were released from custody as, at the time of the on-site monitoring review, there were only 38 identified intellectually disabled incarcerated persons in custody.

Additionally, in a review of the 1,002 ADA Interview/Activity Logs the County produced, the following entry was noted, "12-27-24 CHS email: I am not sure who to contact for assistance. Our ADA deputies have reached out to me requesting assistance with patient XXXXX. Pt is flagged for ADA MH for cognitive/Autism and requesting assistance with discharge planning upon release. Pt currently has 3 pending JCRP sick calls for discharge planning and 1 ADA MH sick call. Can this be forwarded to the appropriate personnel who

can follow up with patient." This discharge plan was not produced for this case. It is unknown if it was completed.

For future monitoring, the County will need to provide the discharge plans for all incarcerated persons with Intellectual/Developmental Disabilities released during the rating period for the Expert to measure the County's compliance with the RP requirements.

Based on this, the Expert has determined that the County has partially implemented the RP requirements.

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: The Expert recommends that the County ensure staff provides discharge planning tailored to the needs of people with Intellectual/Developmental Disabilities, including appropriate and effective linkages to housing assistance and community-based service providers. The County should develop an action plan to develop, clarify, and train relevant staff on procedures for the provision of appropriate, individually tailored discharge plans for people with Intellectual/Developmental Disabilities.

G. Health Care Appliances, Assistive Devices, Durable Medical Equipment (Section VII)

- A. *The County shall immediately provide HCA/AD/DME to persons for whom HCA/AD/DME are a reasonable accommodation. The County shall ensure an individualized assessment by qualified health care staff to determine whether HCA/AD/DME is warranted and to ensure equal and meaningful access to programs, services, and activities in the Jail.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- B. *The County shall track and document the inspection and maintenance of HCA/AD/DME. Such documentation shall include the following information for each device: whether the person has all assigned HCA/AD/DME; whether the person believes the assigned HCA/AD/DME is appropriate; whether the HCA/AD/DME is in good working order; and, if the HCA/AD/DME requires repair or replacement or is inappropriate for the person, a description of the actions taken (e.g., to repair/replace HCA/AD/DME, evaluation for different HCA/AD/DME, etc.).*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- C. *The County shall ensure that all County-provided wheelchairs are in working order and have features consistent with individual needs.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- D. The County shall not charge people in custody for the provision, repair, or replacement of HCA/AD/DME.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- E. Personal HCA/AD/DME. The County shall allow people to retain personal HCA/AD/DME (including reading glasses, as allowed by current policy) unless there is an individualized determination that doing so would create an articulated safety or security risk.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- 1. Where Jail staff determine it is necessary to remove an individual's personal HCA/AD/DME for safety and security reasons, the County shall immediately provide an equivalent alternative Jail-issued device unless custody staff, with supervisory review, determine and document, based on an individualized assessment, that the device constitutes a risk of bodily harm or threatens the security of the facility.*

The revised and implemented Custody & Court Operations Manual (CCOM) 8000 - Inmates with Disabilities includes a formalized process for custody staff to conduct and document the individualized assessment when personal HCA/AD/DME is removed from an incarcerated person.

The Safety and Security Assessment Form to guide the implementation of this provision has been implemented. The form provides an effective procedure for this RP requirement. It will also be important to ensure that this form and process are considered within the ServiceNow ADA Tracking System rollout.

The County reported that OCSA will continue to reinforce training regarding the documentation required on the Safety and Security Assessment form. The County also reported that CHS will ensure that devices – such as diabetes management devices – are reviewed on a case-by-case basis so that individuals receive appropriate care and accommodations based on their individual needs. CHS will continue to follow policies/procedures related to the Safety and Security Assessment form. CHS will produce all requested documents during document production and during future visits.

The County reports there were 11 cases where Jail staff determined it was necessary to remove an individual's personal HCA/AD/DME for safety and security reasons. In the review of the completed Safety and Security Assessment forms. Listed below is a summary of the cases:

Case #1

- On 7/18/24, I/M used the assistive device (cane) to break the glass in cell PM17.
- A temporary wheelchair was provided as an alternative device. Safety and Security and Assessment Form reflects the ADA Compliance Team was notified on 7/18/24.
- The CHS section of the Safety and Security Assessment Form reflects removal negatively impacts the health and safety of the inmate and possession of the assistive device is medically necessary.

Case #2

- On 7/9/24, I/M used the assistive device (wrist splint) to assault staff or inmates. Placed in evidence.
- An ace wrap bandage was provided as an alternative device. Safety and Security and Assessment Form reflects the ADA Compliance Team was notified on 7/10/24.
- The CHS section of the Safety and Security Assessment Form reflects removal negatively impacts the health and safety of the inmate and possession of the assistive device is medically necessary.

Case #3

- On 10/1/24, cane has a heavy metal handle that unscrews and a pointed end.
- I/M provided with HCA walking cane. Safety and Security and Assessment Form reflects the ADA Compliance Team was notified on 10/1/24.
- The CHS section of the Safety and Security Assessment Form reflects removal does not negatively impact the health and safety of the inmate and possession of the assistive device is medically necessary.

Case #4

- On 9/28/24, I/M threatened to use the device (cane) to assault staff or inmates.
- Will be reassessed for a wheelchair once housing is assigned. Safety and Security and Assessment Form reflects the ADA Compliance Team was notified on 9/28/24.
 - The Safety and Security Assessment Form does not indicate if the alternative device was approved or issued.
 - Post tour the County reported that In situations where the Safety and Security Assessment Form says that the individual will be reassessed once assigned to housing, the Form isn't subsequently changed to reflect the outcome of that later assessment; rather, any alternative devices approved or issued are documented in the Activity Log. The County produced the Activity Log which reflects that follow-up was done and documented. The Expert notes that the documents reflect the incarcerated person was placed in a wheelchair for processing. However, there is no documentation that an assessment was

conducted upon housing. The documents do reflect that on 10/9/24 he was provided a cane and an AFO.

- The CHS section of the Safety and Security Assessment Form reflects removal does not negatively impact the health and safety of the inmate and possession of the assistive device is medically necessary.

Case #5

- On 9/30/24, I/M spliced wires from C-PAP to start a fire.
- The Safety and Security Assessment form reflects N/A for alternative devices. I/M transferred to IRC. The Safety and Security Assessment Form reflects the ADA Compliance Team was notified on 9/29/24 (this could be a typo).
 - The Safety and Security Assessment Form does not indicate if the alternative device was approved or issued.
 - Post tour, the County reported that the Safety and Security Assessment Form does not indicate if an alternative device was approved or issued because there is no alternative device to a CPAP (i.e., the form “reflects N/A for alternative devices”).
- The CHS section of the Safety and Security Assessment Form reflects removal negatively impacts the health and safety of the inmate and possession of the assistive device is medically necessary.

Case #6

- On 10/18/24, cane is metal and can easily be used as a weapon.
- I/M received a replacement cane from CHS. Safety and Security and Assessment Form reflects the ADA Compliance Team was notified on 10/18/24.
- The CHS section of the Safety and Security Assessment Form reflects removal negatively impacts the health and safety of the inmate, and possession of the assistive device is medically necessary.

Case #7

- On 12/2/24, I/M broke cane, revealing sharp metal screw in handle.
- I/M was given alternative CHS device (cane). Safety and Security and Assessment Form reflects the ADA Compliance Team was notified on 12/3/24.
- The CHS section of the Safety and Security Assessment Form reflects removal negatively impacts the health and safety of the inmate and possession of the assistive device is medically necessary.

Case #8

- On 10/1/24, cane was missing rubber end cap with a metal tip. Inmate was uncooperative when he arrived at the IRC.
- I/M provided with HCA walking cane. Safety and Security and Assessment Form reflects the ADA Compliance Team was notified on 10/1/24.
- The CHS section of the Safety and Security Assessment Form reflects removal does not negatively impact the health and safety of the inmate and possession of the assistive device is medically necessary.

Case #9

- On 12/5/24, I/M broke an approximately 4 ½ inch piece of metal from the wrist brace splint.

- Safety and Security and Assessment Form reflects the ADA Compliance Team was notified on 12/5/24.
- The Watch Commander Approval/Denial section was not completed.
- The CHS section of the Safety and Security Assessment Form reflects removal does not negatively impact the health and safety of the inmate and possession of the assistive device is not medically necessary.

Case #10

- On 8/27/24, Cane was bent during an altercation with another inmate.
- Cane removed – was used to violently hit another inmate. I/M also broke cell glass prior to 7/18/24 I/M in ADA Housing. Safety and Security and Assessment Form reflects the ADA Compliance Team was notified on 8/27/24.
- The CHS section of the Safety and Security Assessment Form reflects removal does not negatively impact the health and safety of the inmate and possession of the assistive device is not medically necessary.

Case #11

- On 10/31/24, I/M has used the device to assault staff or inmates (DR 24-036955). Will remove the cane due to safety concern. Will provide walker. Safety and Security and Assessment Form reflects the ADA Compliance Team was notified on 11/8/24. Watch Commander signed on 11/8/24.
- The Watch Commander Approval/Denial section reflects denial; however, no alternative device was noted.
- The CHS section of the Safety and Security Assessment Form reflects removal does negatively impacts the health and safety of the inmate and possession of the assistive device is not medically necessary.

In a review of the 1,002 ADA Interview/Activity Logs the County produced, there was only one (1) case where a disabled incarcerated person's assistive device was removed by staff and the Safety and Security Assessment form was not produced by the County.

- On 10-19-24, XXXX assaulted another inmate and used his cane as a weapon. As a result, his cane was removed by housing deputies, who then submitted a safety and security assessment form (SS form). The SS form was accidentally submitted to the wrong party by housing staff. This resulted in the SS form not being properly handled until 10/24/24, when ADA compliance staff became aware of the situation.

Based on the County not documenting on the Safety and Security Assessment form whether an alternative device was provided or that no alternative was possible in three (3) cases (Case #4, 9, and 11), the Expert has determined the County has partially implemented the RP requirement. The Expert also notes that in cases where CHS staff notes that removal negatively impacts the health and safety of the inmate and possession of the assistive device is medically necessary, custody staff provides an alternate device. The Expert recommends that CHS staff identify the device the incarcerated person must be provided.

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: The Expert recommends that the County ensure staff document on the Safety and Security Assessment form in cases where Jail staff determined it was necessary to remove an individual's personal HCA/AD/DME for safety and security reasons, whether an alternative device was provided or that no alternative was possible.

2. *If such a determination is made, an ADA Coordinator or supervisory level designee shall document the decision and reasons for it and shall consult with medical staff within 48 hours to determine an appropriate alternative device and/or accommodation.*

The revised and implemented Custody & Court Operations Manual (CCOM) 8000 - Inmates with Disabilities includes a formalized process for custody staff to conduct and document the individualized assessment in cases where Jail staff determine it is necessary to remove an individual's personal HCA/AD/DME for safety and security reasons.

The County reported that OCSD will continue to reinforce training regarding the documentation required on the Safety and Security Assessment form. The County also reported that CHS will continue to follow policies/procedures related to the Safety and Security form and ensure alternative device options are addressed. CHS will produce all requested documents during document production and during future visits.

The County reports there were 11 cases where Jail staff determined it was necessary to remove an individual's personal HCA/AD/DME for safety and security reasons. For the summary of the review, see Section VII (G. Health Care Appliances, Assistive Devices, Durable Medical Equipment G. E.1.).

Based on the County not documenting on the Safety and Security Assessment form whether an alternative device was provided or that no alternative was possible in four (4) cases, the Expert has determined the County has partially implemented the RP requirement.

Partially Implemented (Previous Rating Partially Implemented)

Recommendation: The Expert recommends that the County ensure staff document on the Safety and Security Assessment form in cases where Jail staff determined it was necessary to remove an individual's personal HCA/AD/DME for safety and security reasons, whether an alternative device was provided or that no alternative was possible.

3. *If an individual's personal HCA/AD/DME is in need of repair, the County shall either repair the HCA/AD/DME at the County's expense or provide the person with a replacement HCA/AD/DME at the County's expense while the person is incarcerated.*

As noted in the fifth report, two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Adequately Implemented)

4. *Any HCA/AD/DME provided by the County to replace an individual's personal HCA/AD/DME shall be sufficient to provide the person with safe access to the Jail's programs, services, and activities.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

5. *If the County repairs a personal HCA/AD/DME, the County shall provide the person with an interim HCA/AD/DME while the personal HCA/AD/DME is being repaired.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- F. *Prosthetics. The County shall permit any person who has a prosthetic limb or similar device and needs such prosthesis full use of such prosthesis while in custody absent specifically identified security concerns.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

1. *If a prosthetic limb or device is removed, a health care provider will examine the person as soon as possible, and not later than the next sick call after the removal, in order to address any negative impact on the health or safety of the person and to provide an alternative device and/or accommodation.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

2. *If a person requires repair or maintenance of a prosthetic limb or similar device, the County shall take prompt steps to resolve the issue, including providing interim accommodations as indicated.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

3. *If CHS determines a person requires a prosthetic limb or similar device but does not have one, the County will take prompt steps to provide appropriate assessment and timely provision of prostheses or similar device. The County will provide an alternative assistive device, based on clinical assessment and meaningful consideration of the individual's stated preference, as an interim accommodation to facilitate equal access to services.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- G. *The County shall not automatically remove HCA/AD/DME when incarcerated people are placed in temporary holding, sobering, or observation cells and shall remove HCA/AD/DME only based on individualized security factors and only for the minimum time necessary.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- H. *HCA/AD/DME Upon Release. The County shall take steps necessary to address a person's disability needs upon release. In no event will a person in need of HCA/AD/DME be released without access to HCA/AD/DME that is in good working order and appropriate for the person's needs.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

1. *The County will ensure that any personally owned HCA/AD/DME that has been removed is returned to the incarcerated person prior to release from custody.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

2. *Upon release, if an incarcerated person does not have personal HCA/AD/DME or came to the Jail with HCA/AD/DME that is not adequate for the person's needs, the County will permit the person to retain any HCA/AD/DME that the County provided to the person while in custody, or the County will provide a comparable device. Jail staff may alternatively coordinate with the incarcerated person, the person's family or friends, and/or other County agencies to secure HCA/AD/DME for the person prior to release.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

3. *The County shall document this process in a manner that (a) can be reviewed for quality assurance and (b) ensures individual tracking and an adequate inventory of HCA/AD/DME.*

As noted in the third report, two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

H. Housing Placements (Section VIII)

- A. *The County shall house persons with disabilities in the most integrated setting appropriate, consistent with their individual security classification, in facilities that accommodate their disabilities and in which they have equivalent access to programs, services, and activities.*

The Musick Jail opened in December 2024 and provides additional ADA-accessible beds. Additionally, construction and modifications are ongoing in the other facilities. The County continues to make physical plant modifications, adding accessible housing, accessible features, and accessible paths of travel for incarcerated persons to have equivalent access to the Jail's programs, services, and activities. Pending these modifications, the County's current accessible housing for incarcerated persons who require accessible housing and features includes:

- TLF Mod O – Sector 37 and Sector 42 (28 beds)
- TLF A/E Barracks (40 beds)
- IRC Mod K – Sectors 9-14 (one cell in each Sector, six (6) cells)
- IRC Mod L – Sectors 15-20 (one cell in each Sector, six (6) cells)
- IRC Mod M – Sectors 21-26 (one cell in each Sector, six (6) cells)
- CMJ Mod O – Ward C (all 18 bunks), Ward D (18 lower bunks), and Sheltered Living (SL) 24 beds. The housing of incarcerated persons in SL requires the Assistant Sheriff's approval.

- CWJ Mod P-13 – Eight (8) bunks
- JMF Mod A – Sectors 1 and 2 – 16 bunks
- JMF Mod B – Sectors 3 and 4 – 16 bunks

The Custody & Court Operations Manual (CCOM) 1200 – Inmate Classification Procedure states, “Classification and Population Management Unit (PMU) staff will take into consideration the inmate’s abilities and movement needs when assigning housing locations. Being disabled in any way is not justification for a higher security classification. Every effort will be made to accommodate inmates with mobility disabilities in their housing assignments. In the event an inmate with a mobility disability is assigned to non-ADA housing or a specific accommodation cannot be met, Classification and PMU staff will ensure that an inmate deemed to require accessible accommodations is provided with such accessible accommodations as soon as possible.”

The Custody & Court Operations Manual (CCOM) 8000 - Inmates with Disabilities states, “Inmates with a disability shall be housed in the most integrated setting appropriate, consistent with their individual security classification, in facilities that accommodate their disabilities and in which they have equivalent access to programs, services, and activities. Qualified inmates with a disability will have access to the same services, programs, and activities offered to other inmates of the same classification level. Inmates with disabilities will be provided accessible showers, toilets, sinks, equipment, etc., consistent with their disability and accommodation needs.”

Due to the limited number of accessible housing locations coupled with classification case factors, the County must house incarcerated persons with higher classification case factors who require accessible housing in the TLF Mod O, and due to the limited number of accessible cells in the CMJ (Mod O). The opening of the JMF brings online additional accessible beds. However, they will house lower-level incarcerated persons and will not be able to house all incarcerated persons that require a higher level of mental health and medical needs. Thus, there must continue to be attention on ensuring adequate accessible housing options across all facilities to meet the population’s needs.

The County reported that any use of a Sheltered Living (SL) cell for an incarcerated person requires the Assistant Sheriff’s approval. If exigent circumstances require immediate housing into these cells, the Assistant Sheriff will be notified as soon as possible. During the rating period, no incarcerated persons were housed in SL cells. The last date a SL cell was occupied was 6/9/2024. This is a significant accomplishment.

During the on-site review, there were cases where incarcerated persons with mobility disabilities who do not require fully ADA-compliant housing reported concerns about accessibility issues in their housing units, primarily regarding (a) grab bars in showers, (b) level terrain in/out of shower areas, (c) shower space to use a shower chair and access to a shower chair, and (d) grab bars next to one’s bed or toilet. There was also inconsistency in the TLF recreation yards and in other areas as to the provision of chairs, which are generally useful but are essential for people with mobility disabilities who cannot stand for extended periods (or sit on the floor). Some examples include:

- Incarcerated person housed in IRC J-6 – He has a mobility disability and was unable to navigate the large step in and out of the shower. He also needs access

to a grab bar for stability. During the on-site review, the ADA team was working to move him to another housing location that meets his accessibility need.

- OCSD reported that he was moved to housing with an ADA shower.
- Incarcerated person housed in TLF Mod O-41. He reported that he does not get regular access to the ADA shower in Mod O-37. He must instead use the lower-tier shower in O-41, which lacks a grab bar that he needs for stability.
 - OCSD reported it is looking into the feasibility of installing grab bars in non-ADA showers.
- Incarcerated person housed in TLF Mod J-08 - He uses a wheelchair for long distances. He reported that it is difficult to get a wheelchair when returning from court and requested access to a chair in the recreation area since he cannot sit down easily.
 - OCSD reported that they have followed-up to ensure he has been getting a wheelchair. Additionally, OCSD issued a memo reminding staff to provide chairs in recreation areas.
- Incarcerated person housed in TLF Mod J-07 - He requested access to a chair in the recreation area. He shared that he's unable to sit on the ground and can't remain standing for the 1.5 hours of recreation.
 - OCSD reported it issued a memo reminding staff to provide chairs in recreation areas.
- Incarcerated person housed in TLF Mod M-30 - He has a mobility disability related to a severe hip injury. He uses a cane and requires a lower bunk/lower tier placement. His housing unit shower has a step and no grab bars. He indicates that having access to a grab bar in the shower would be particularly helpful in ensuring stability and safety for him.
 - OCSD reported that he was referred to CHS for evaluation of the need for a shower chair. OCSD reported it was looking into the feasibility of installing grab bars in non-ADA showers.
- Incarcerated person housed in TLF Mod M-30 - He has a mobility disability for which he uses a cane and requires a lower bunk/lower tier placement. He also has severe asthma. He reports that having access to a grab bar in the shower is important to ensure stability and safety for him. He often must lean against the shower wall to avoid falling. He also would like access to a shower chair.
- Incarcerated person housed in TLF Mod L-22 - Has a mobility disability and uses orthotic shoes and a knee brace. He reports that he does not have access to the shower chair on a consistent basis. In his unit, the shower chair is kept outside the unit and staff do not consistently respond to requests to use it.
 - OCSD reported staff spoke with him and he confirmed that he has access to the shower chair upon request from housing staff but that he is embarrassed to ask for it in front of other incarcerated persons.
- Incarcerated person housed in TLF Mod O-40 – He needs access to the ADA shower. OCSD reported that he was provided with access to an ADA shower.
- Incarcerated person housed in TLF Mod Q-54 - He uses a cane and requested access to a chair in the recreation area and in the waiting area in Mod Q, outside the medical office.
 - OCSD reported that there are chairs in the waiting area for the medical office. Additionally, OCSD reported it issued a memo reminding staff to provide chairs in recreation areas.

When presented with these complaints, OCSD addressed the individuals' specific situations regarding the need for ADA showers or shower chairs, issued a memo reminding staff to provide chairs in recreation areas, and is reportedly looking into the feasibility of installing grab bars in non-ADA showers.

The Musick Facility has opened, and incarcerated persons with disabilities are included among those housed in the Musick notes that are now populated.

The County is making its best efforts to house persons with disabilities in the most integrated setting, consistent with their individual security classification case factors, in facilities that accommodate their disabilities and in which they have equivalent access to programs, services, and activities. As accessible housing is brought online, including the activating of all units at the Musick facility, the County will be in a better position to ensure that all disabled incarcerated persons are housed in the most integrated setting, consistent with their individual security classification, in facilities that accommodate their disabilities and in which they have equivalent access to programs, services, and activities. However, the County must evaluate the housing placements for individuals with similar accessible concerns listed above and ensure they are housed in areas where they can access the jail programs, services, and activities (shower/recreation) and provide the in-cell accommodation they require.

Based on this, the Expert finds that the County has partially implemented the RP requirements.

Partially Implemented (Previous Rating Partially Implemented)

Recommendation: The Expert recommends that the County continue physical plant modifications to bring accessible housing online, including full activation of the Musick facility, which will allow the County to house disabled incarcerated persons in the most integrated setting, consistent with their individual security classification, in facilities that accommodate their disabilities and in which they have equivalent access to programs, services, and activities. Ensure disabled incarcerated persons are provided accommodations for shower and in-cell accommodations as needed, with a focus on ensuring that people with disabilities have access to (as indicated) (a) grab bars in showers, (b) level terrain in/out of shower areas, (c) shower space to use a shower chair and access to a shower chair, and (d) grab bars next to one's bed or toilet. Ensure that disabled incarcerated persons with mobility disabilities who cannot stand for extended periods (or sit on the floor) have access to chairs, with focus on addressing this issue on the TLF recreation yards.

As part of ongoing efforts, the ADA unit's periodic interviews with incarcerated persons with disabilities should include specific inquiry as to whether each person has any concerns or unmet needs with respect to shower, bed, or other housing-related accessibility issues, and whether any accommodations on the recreation yard are needed.

- B. The County shall provide persons with disabilities at all classification levels with access to out-of-cell time, programs, services, and activities that are equivalent to the access provided to persons without disabilities with comparable security and classification profiles.*

The County reported that The Musick Facility has opened, and incarcerated persons with disabilities are included among those housed at Musick. OCSD continues to offer programs and escort disabled incarcerated persons to the TLF Programs building for in-person programs and Green Sector for recreational opportunities.

During the monitoring tour there was no incarcerated person housed in the CMJ Mod O SL cells.

Although the revised and implemented Custody & Court Operations Manual (CCOM) 8000 - Inmates with Disabilities states, "Qualified inmates with a disability will have access to the same services, programs, and activities offered to other inmates of the same classification level," due to the limited number of accessible cells/beds, the County must place incarcerated persons with higher classification case factors who require accessible housing in the TLF Mod O and due to the limited number of accessible cells in the CMJ Mod O. Based on this, and the classification case factors which prohibit the mixture of the incarcerated population, the disabled incarcerated persons who require accessible housing are not being provided with access to out-of-cell time, programs, services, and activities equivalent to non-disabled incarcerated persons, including in-person programs (educational, self-help and computer programs) and work assignments. The County is making its best efforts to provide equivalent programming to the disabled incarcerated persons with lower classification, such as escorting them to the TLF Programs building for in-person programs and the Green Sector for recreational opportunities.

The Expert wants to highlight that during the rating period, no incarcerated persons were housed in SL cells. The last date a Sheltered Living (SL) cell was occupied was 6/9/2024. Any use of a SL cell for an incarcerated person requires the Assistant Sheriff's approval. If exigent circumstances require immediate housing into these cells, the Assistant Sheriff will be notified as soon as possible.

Once more accessible housing is brought online at CJX and TLF, the County will be in a better place to ensure incarcerated persons with disabilities who require accessible housing are provided equivalent access to out-of-cell time, programs, services, and activities as persons without disabilities with comparable security and classification profiles and incarcerated persons who do not require accessible housing. There continues to be significant progress in the area of program opportunities which is highlighted in Section IX of this report.

However, concerns were reported by incarcerated persons housed in the CMJ Mod O Ward C regarding the lack of programming opportunities (in-person education and religious). Because Mod O Ward C houses incarcerated persons with medical issues/concerns, there is a high concentration of disabled incarcerated persons housed in Mod O Ward C. The Mod O Ward C population is the only general population classification housed at the CMJ. All other incarcerated persons are classified as protective custody, and based on this, the populations cannot mix, leaving the Mod O Ward C population with limited programming opportunities. The Expert and DRC discussed this issue with programs and custody leadership during the February site visit, and hope to see progress on this issue before the next monitoring visit.

The County continues to make progress in providing access to the Barracks' outdoor field recreation area (Green Sector) instead of being limited to the much smaller and concrete-filled interior recreation space for disabled incarcerated persons housed in TLF Mod O, Sector 37 (disability cluster unit). During the monitoring tour, incarcerated persons interviewed stated that they are being provided access to the Green Sector yard; however, as reported in the Restrictive Housing Report, the Expert noted that at TLF, the redirection of sworn staff assigned to Green Sector recreation has been reduced and that access to the TLF Green Sector Recreation yard has improved. The Expert also found that TLF Green Sector provides the RP Requirement of access to three (3) hours of recreation to all incarcerated persons housed at TLF and, in some cases, on a rotational basis, provides the RP requirement of additional recreation opportunities. The Expert found that TLF currently does comply with the RP requirements of the recreation hours beginning at daylight.

Based on this, the Expert finds that the County has partially implemented the RP requirements.

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: Ensure that all persons with disabilities, including those in ADA-accessible or other specialized housing, have equal access to programs, services, and activities available to similarly situated persons without disabilities, consistent with their health and security needs. These programs include:

- Dayroom and out-of-cell time
- Access to in-person educational, vocational, reentry, and substance abuse programs

Ensure meaningful access to in-person programming for incarcerated persons housed in CMJ Mod O Ward C. Consider utilizing the Sheltered Living dayroom for this purpose. Programs and custody staff should work collaboratively to address this challenge.

C. *The County shall maintain a housing assignment system that utilizes information in the ADA Tracking System/Existing ADA Tracking System for each person's disability needs, including, but not limited to:*

1. *The need for ground floor housing;*
2. *The need for a lower bunk;*
3. *The need for grab bars in the cell;*
4. *The need for a cell with sufficient clearance for a wheelchair;*
5. *The need for accessible toilets;*
6. *The need for accessible showers;*
7. *The need for no stairs or other obstructions in the path of travel;*
8. *The need for level terrain; and*
9. *The need for mental-health-related accommodations.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

D. Classification staff shall not place persons with disabilities in:

- 1. Inappropriate security classifications simply because no ADA-accessible cells or beds are available;*
- 2. Designated medical areas unless the person is currently receiving medical care or treatment that necessitates placement in a medical setting; or*
- 3. Any location that does not offer the same or equivalent programs, services, or activities as the facilities where they would be housed absent a disability.*

The Musick Facility has opened, and incarcerated persons with disabilities are included among those housed at Musick. The County also reported that CHS will continue to collaborate with OCSD on the process (as well as the forms) for J-105/J-112 forms (currently pending revision).

The Custody & Court Operations Manual (CCOM) 1200 – Inmate Classification Procedure states, “Classification and Population Management Unit (PMU) staff will take into consideration the inmate’s abilities and movement needs when assigning housing locations. Being disabled in any way is not justification for a higher security classification. Every effort will be made to accommodate inmates with mobility disabilities in their housing assignments. In the event an inmate with a mobility disability is assigned to non-ADA housing or a specific accommodation cannot be met, Classification and PMU staff will ensure that an inmate deemed to require accessible accommodations is provided with such accessible accommodations as soon as possible.”

The Custody & Court Operations Manual (CCOM) 8000 - Inmates with Disabilities states, “Inmates with a disability shall be placed in housing that is consistent with their security classification and their accessibility needs. Qualified inmates with a disability will have access to the same services, programs, and activities offered to other inmates of the same classification level. Inmates with disabilities will be provided accessible showers, toilets, sinks, equipment, etc. consistent with their disability and accommodation needs.”

The Custody & Court Operations Manual (CCOM) 8000 - Inmates with Disabilities also states, “An inmate’s need for a mobility device or tapping cane in a housing unit shall not be a basis for assigning the inmate to the infirmary, a medical unit, or a mental housing unit, or for excluding the inmate from placement in those settings should they otherwise be warranted. The fact that an inmate has a disability and/or requires a reasonable accommodation shall not be a factor in determining an inmate’s security classification. Not all inmates with a mobility disability or tapping cane require an ADA accessible cell or unit. However, the inmate may still require reasonable accommodations related to their housing such as a cell with certain ADA features (grab bars), lower bunk/lower tier, or access to an ADA accessible shower facility. Where CHS staff or ADA Compliance unit staff advise the Classification Unit that an inmate requires a housing accommodation (e.g., ADA Cell, ADA Housing, lower bunk/lower tier), the Classification Unit/PMU Unit shall determine the appropriate housing location consistent with the inmate’s classification and disability-related needs.”

As in the previous monitoring tour, Classification and PMU staff stated that incarcerated persons with a disability are not placed in inappropriate security classifications simply because no ADA-accessible cells or beds are available or designated medical areas unless the person is currently receiving medical care or treatment that necessitates placement in a medical setting; or any location that does not offer the same or equivalent programs, services, or activities as the facilities where they would be housed absent a disability. However, as noted in H.B above, due to the limited number of accessible cells/beds available, the County must place incarcerated persons with higher classification case factors who require accessible housing in the TLF Mod O due to the limited number of accessible cells in the CMJ Mod O. Based on classification case factors and limited accessible housing options due to physical plant issues, many disabled incarcerated persons who require accessible housing are not being provided with access to out-of-cell time, programs, services, and activities equivalent to non-disabled incarcerated persons with like classifications. Once more accessible housing is brought online, the County will be in a better place to ensure incarcerated persons with disabilities who require accessible housing are provided equivalent access to out-of-cell time, programs, services, and activities as persons without disabilities with comparable security and classification profiles and incarcerated persons who do not require accessible housing.

Additionally, as reported in H. A above, during the on-site review, there were cases where incarcerated persons with mobility disabilities who do not require fully ADA-compliant housing reported concerns about accessibility issues in their housing units, primarily regarding (a) grab bars in showers, (b) level terrain in/out of shower areas, (c) shower space to use a shower chair and access to a shower chair, and (d) grab bars next to one's bed or toilet. There was also inconsistency in the TLF recreation yards and in other areas as to the provision of chairs, which are generally useful but are essential for people with mobility disabilities who cannot stand for extended periods (or sit on the floor). It is the County's position that, "Per the Remedial Plan, grab bars are only required in ADA housing, although OCSD is looking into the feasibility of installing grab bars in non-ADA showers. If an inmate cannot successfully access non-ADA housing, then CHS can assess them to determine whether they qualify for ADA housing." It is the Expert's position that the required accommodations must be provided in designated ADA compliant cells and showers and the County must ensure sufficient designated ADA compliant housing and shower accommodations are available for the mobility disabled population.

During the previous monitoring tour, Classification/PMU staff reported that although the J-105/J-112 hard copy was given to the Intake Deputy, at times, the Classification Deputy did not have the J-105/J-112 prior to the classification interview as they were provided the J-105/J-112 via email. As a result, classification staff at times did not have the J-105/J-112 ADA information available to them when they are conducting the classification for a new intake. The Expert confirmed that a process was put in place to provide a hard copy of the J-105/J-112 to the classification staff. Such a process should continue and be further refined as the new J-112/J-113 forms are rolled out.

Based on this, the Expert finds that the County has partially implemented the RP requirements.

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: The Expert recommends that the County ensure that all persons with disabilities, including those in ADA-accessible or other specialized housing, have equal access to programs, services, and activities available to similarly situated persons without disabilities, consistent with their health and security needs. These programs include:

- Dayroom and out-of-cell time
- Access to in-person educational, vocational, reentry, and substance abuse programs

Ensure meaningful access to in-person programming for incarcerated persons housed in CMJ Mod O Ward C. Consider utilizing the Sheltered Living dayroom for this purpose. Programs and custody staff should work collaboratively to address this challenge.

E. Sheltered Living cells

1. *The County agrees that the Sheltered Living (SL) cells behind the O Module at Central Men's Jail create operational difficulties, including with respect to the provision of adequate out-of-cell time, program access, and socialization for incarcerated persons with disabilities. OCSD will deactivate and no longer use these SL cells for incarcerated persons with disabilities at the earliest date feasible, given COVID-related housing demands (e.g., quarantine housing) and alternative accessible housing. OCSD will begin to re-house individuals with disabilities from SL as soon as other accessible housing units are available.*

The County reports that the Musick Facility has opened, and incarcerated persons with disabilities are included among those housed at Musick. Sheltered Living cells remain closed and will not be used without the Assistant Sheriff's approval.

The Expert wants to highlight that during the rating period, no incarcerated persons were housed in SL cells. The last date a SL cell was occupied was 6/9/2024. Any use of a SL cell for an incarcerated person requires the Assistant Sheriff's approval. If exigent circumstances require immediate housing into these cells, the Assistant Sheriff will be notified as soon as possible.

Based on this, the Expert has determined that this RP requirement is adequately implemented.

Adequately Implemented (Previous Rating Partially Implemented)

2. *Until the Central Men's Jail SL cells are deactivated, the County shall house a person with a disability in the SL cells only if there is no other placement that is consistent with the person's classification/housing needs and meets the person's accessibility needs.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- F. *The County shall assist incarcerated persons with disabilities (including in wheelchairs) to access the Central Men's Jail yard from the elevators and to navigate the ramp leading to the yard. Staff shall ensure incarcerated persons with mobility disabilities are provided access to an accessible restroom when in the Central Men's Jail yard.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- G. *The County shall conduct periodic quality assurance audits to ensure that all people in custody who require accommodations in housing are placed in housing consistent with their needs.*

As noted in the fifth report, two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Adequately Implemented)

- H. *The County shall develop a process to expeditiously move people in custody with disability-related needs who are inappropriately housed in an inaccessible placement to an accessible placement.*

As noted in the fifth report, two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Adequately Implemented)

I. Access to Programs, Services, and Activities (Section IX)

- A. *The County shall ensure that all persons with disabilities, including those in ADA-accessible or other specialized housing, are informed of and have equal access to programs, services, and activities available to similarly situated persons without disabilities, consistent with their health and security needs. Such programs, services, and activities include, but are not limited to:*

1. *Dayroom and out-of-cell time;*
2. *Outdoor recreation and exercise equipment;*
3. *Showers;*
4. *Telephones;*
5. *Reading materials;*

6. *Reading and scribing documents;*
7. *Religious services;*
8. *Educational, vocational, reentry, and substance abuse programs;*
9. *Work Assignments, including the Community Work Program;*
10. *Medical, mental health, and dental services and treatment;*
11. *Public visiting; and*
12. *Attorney visiting.*

The Musick Facility has opened, and incarcerated persons with disabilities are included among those housed at Musick. OCSD continues to offer programs and escort disabled incarcerated persons to the TLF Programs building for in-person programs and Green Sector for recreational opportunities. The County also reported that CHS will produce any documents as requested to show proof of practice regarding disability/mental health exclusions for James Musick.

The revised and implemented Custody & Court Operations Manual (CCOM) 8000 - Inmates with Disabilities states, "Qualified inmates with a disability will have access to the same services, programs, and activities offered to other inmates of the same classification level. Inmates with disabilities will be provided the opportunity to work, both in the Jail and through the Community Work Program. Those who accept the opportunity will meet with the CHS ADA Compliance R.N. and ADA Compliance Unit. An individualized interactive process will take place to determine the type of assignment and provision of reasonable accommodations as needed to allow the inmate to participate. Staff supervising inmates must consider, with input from the inmate, reasonable accommodations that would make it possible for the inmate to perform the essential job functions and/or consider whether the inmate could, with or without reasonable accommodations, perform the essential job functions of another position. Staff shall notify the ADA Compliance Unit if they notice that an inmate with a disability is having trouble participating in programs and services, to discuss provision of reasonable accommodations as necessary to address the issue."

The ADA information brochure and the ADA inmate qualifications/acknowledgment of rights/programs form, which is part of the initial ADA interview process, are consistently conducted by the ADA Compliance Unit staff. During the ADA interview, disabled incarcerated persons are informed of the programs, services, and activities available to disabled incarcerated persons. Additionally, the Program's staff reported that staff meet with every disabled incarcerated person to inform them of program opportunities. This is in addition to the ADA surveys conducted by the Program's staff. Programs staff also reported that a new program, "Thinking for Change," was started at TLF Mod Q.

The Expert has reviewed out-of-cell tracking logs (recreation) during the previous five rounds of monitoring. The results of the review have consistently found that the documentation of certain facilities or certain Mods does not reflect that the County is consistently providing the required three (3) hours of weekly recreation required by the RP. Additionally, the data within the recreation logs does not provide the Expert the detailed information necessary to rate the County's compliance as some of the logs do not contain incarcerated person identifiers and simply report on the number of incarcerated persons provided access to the recreation yards. Based on this, for the sixth round of monitoring, the parties agreed to stipulate that the County will need to implement Guardian RFID inclusive of tracking reports to accurately track out-of-cell time. Once the County fully

implements the Guardian RFID to track recreation opportunities, the Expert will report on the County's compliance with the RP provision regarding the provision of recreation as required by the RP.

In a review of the 1,002 ADA Interview/Activity Logs the County produced, there was only one (1) case where a disabled incarcerated person claimed he was not being provided the required out-of-cell time:

- Stated he is not being offered outdoor recreation and dayrooms are not being rotated.

During the monitoring tour, there were three (3) cases where the disabled incarcerated persons claimed they required accommodations during yard and dayroom, i.e., access to a chair in the recreation areas of TLF Mod J-08, J-07, Q-54.

On March 12, 2025, the OCSD issued the following information in a Custody Briefing,

“Throughout Orange County Jail facilities, there are inmates across all housing locations who require various accommodations due to mobility disabilities. While many of these inmates may not require full ADA-compliant housing, it is important to ensure that their needs are met in other areas of the facility.

Effective immediately, please ensure that an appropriate number of chairs are placed in recreation areas to accommodate inmates with mobility disabilities. The chairs should remain in recreation areas at all times.

Thank you for your prompt attention to this matter. Please contact the ADA team if you have any questions or concerns.”

The County has alternate telecommunication technology (Video Phones, Video Relay Services, and TDD). The County implemented video phone access via tablets at both jail complexes. Access to videophone technology is equal as compared to non-disabled incarcerated persons, as the disabled incarcerated persons have direct access to the telecommunication devices in their housing units. The disabled incarcerated persons are provided the video phone tablet when they access the dayroom program. The County provides telephone amplification devices for incarcerated persons who are hard of hearing and who require this accommodation. In a review of the 1,002 ADA Interview/Activity Logs the County produced, there were (2) cases where incarcerated persons were offered/provided access to the VRS:

- VRS access was explained. Tablet #2. She stated she did not know any phone numbers and did not want to use the VRS ViaPath tablet.
- ADA Deputy spoke with him and verified he was able to access the VRS Tablet. He stated he had no issues and is being issued both the ADA VRS tablet and a regular ViaPath tablet daily. He also said he is able to make phone calls.

As reported in section F.F., easy-reading books are available for disabled incarcerated persons. Additionally, large print reading material is available for disabled incarcerated

persons. The County also provides "Books on Tape" for incarcerated persons with vision disabilities.

- Of the 1,002 ADA Interview/Activity Logs reviewed by the Expert, there were (2) cases where incarcerated persons were provided access to the easy reading books, large print reading material, magnifying sheet, audiobook, and audio player.

However, there was one case where the County reported that "All audio players are checked out; he will get one when one is returned." The County must ensure there is a sufficient supply of audiobooks available.

- As reported in sections J and K, the County provides incarcerated persons with disabilities access to Work Assignments, including the Community Work Program. However, of the 1,002 ADA Interview/Activity Logs reviewed by the Expert there was one (1) case where a disabled incarcerated person claimed he was not being offered work opportunity by mod staff and Module staff was notified.

The County reports that its intent is to provide incarcerated persons with disabilities access to accessible showers by housing the incarcerated persons in locations with accessible showers or providing incarcerated persons access to shower chairs. However, during the incarcerated person interviews, six (6) incarcerated persons reported issues related to accommodations (shower chair, grab bars, and physical barriers) when accessing the shower (see Section H.A.) This issue requires further attention and is relevant to this section on Access to Programs, Services, and Activities.

Of the 1,002 ADA Interview/Activity Logs reviewed by the Expert, in two (2) cases, the ADA RNs or Classification were notified because the shower step or lack of a downstairs shower restricted shower access.

The County provides group and one-on-one religious services. Group religious services are provided on a rotational basis to all incarcerated persons. In the event a disabled incarcerated person requires access to an SLI, the County has a mobile iPad that is used with a Video Remote Interpreter. The iPad is also available for one-on-one religious services. Documentation of this accommodation was not provided to the Expert.."

The public and attorney visiting services are accessible, and incarcerated persons with disabilities have equal access to the visiting programs. Amplification devices are also provided to hard-of-hearing incarcerated persons to use during their visits.

Of the 1,002 ADA Interview/Activity Logs reviewed by the Expert, one entry contained an allegation by an incarcerated person that staff does not take him to Mod O for weekly visits; staff was advised to take him to Mod O for visits.

The revised and implemented Custody & Court Operations Manual (CCOM) 8000 - Inmates with Disabilities states, "Disabled inmates who cannot read and/or write might have difficulty gaining access to disability-related services if needed. Staff will provide these inmates with assistance with reading and writing to access services and programs. Examples include, but are not limited to, filling out inmate message slips, grievances, and commissary forms. If an inmate cannot read or write and the inmate has a disability, that

information will be indicated on the inmate's J-105A form, ADA Tracking List or CHS Functional Needs List."

Staff interviewed stated they would provide assistance to disabled incarcerated persons who require assistance with reading and writing. During the incarcerated person interviews, six (6) of the 17 incarcerated persons interviewed who are identified as having needs in this area stated staff do not provide assistance and that they must rely on other incarcerated persons for reading and writing assistance. The Expert was not able to confirm these claims.

Of the 1,002 ADA Interview/Activity Logs reviewed by the Expert, in nine (9) cases of incarcerated persons who needed help with reading or writing, either they were advised that staff would assist upon request or the ADA Deputy offered to assist or actually provided assistance.

The Expert notes that all assistance provided was from ADA staff. The County must ensure that housing unit deputies offer, provide, and document assistance in reading and writing.

The revised and implemented Custody & Court Operations Manual (CCOM) 8000 - Inmates with Disabilities states, "Staff will provide reasonable modifications to jail rules, policies, and practices to enable inmates to participate in the services, programs, and activities offered to other inmates of the same classification level. Some examples of reasonable accommodations include Assistance in reading or scribing documents (legal, medical, request forms, grievances, due process etc.). Staff shall not provide assistance in reading legal mail, reference CCOM Policies 1900.3 and 1900.4."

All Incarcerated persons are informed of the process of how to request access to medical, mental health, and dental services and treatment. Additionally, during the ADA Compliance Unit interview, the disabled incarcerated persons are informed of the access to healthcare (pink slip) process. None of the disabled incarcerated persons reported they had difficulty accessing medical services.

The County produced ADA Interview/Activity Logs that reflect that disabled incarcerated persons are provided accommodations (i.e., reading glasses, magnifying sheets, pocket talkers) so they can access the programs, services, and activities.

In-person program opportunities are available at the OC jails. These programs are facilitated by OCSD program staff. There are additional in-person programs facilitated by Rancho Santiago Community College District Education facilitators. During a previous monitoring tour, programs staff reported the Rancho Santiago Community College District requires a minimum of 15 participants for the class/program, and due to the limit of incarcerated persons allowed out-of-cell, OCSD cannot meet this requirement, and classes are not able to be offered by Rancho Santiago Community College District educators. Previously, the County reported that OCSD conducted a pilot to increase the number of incarcerated persons allowed out of cell. Based on the results of the pilot, the County is exploring the feasibility based on safety and security to increase the number of incarcerated persons allowed to program out-of-cell together.

The Inmate Services Correctional Programs Facility Schedules for the IRC, CMJ, CWJ, TLF, and JMF program opportunities reflect the following in-person programs being offered:

- Women's Central Jail
 - Substance Abuse (MAT, Narcotics Anonymous and Alcoholics Anonymous)
 - Self-Help (Parenting, Workshops, Laura's House, All In , Back On Track, Money Matters, All In Case Management, Work Readiness, Great Escape)
 - Religious Services (Protestant, Christian Science, Catholic, 7th Day Adventist, Malachi Women and Women of Praise)
 - Education/Skills (Creative Writing, A Skills GED, GED Math, ESL, Accounting, Computers, Food Services)
- Men's Central Jail
 - Religious Services (Protestant, Christian Science, Catholic, Jewish Service, Protestant Bible Study, Malachi Men)
 - Self-Help (Back on Track, Great Escape, Money Matters, Work Readiness, Parenting)
 - Education/Skills (Accounting, Computers, Business. Food Service, A Skills GE, GED Math, ES, HiSet Testing)
 - Substance Abuse (Narcotics Anonymous, Alcoholics Anonymous, MAT)
- Intake Release Center
 - Religious Services (Protestant, Bible Discipleship, Catholic, Catholic Bible Study, Malachi Women)
 - Substance Abuse (MAT Progra, AA Panel, AA Spanish, NA Panel)
 - Self-Help (Back on Track, Great Escape, Parenting, Yoga, Mental Health (CHS), Work Readiness, Case Management (Phoenix House))
- Theo Lacy Facility
 - Religious Services (Protestant, Catholic Service, Christian Science, Bible Discipleship, Muslim Service, 7th Day Adventist, Protestant Bible Study, Catholic Bible Study, Malachi Men, Men of Purpose)
 - Self-Help (All In Program, Custodial, Effective Parenting, Money Matters, APAIT, Back on Track, Virtual Reality, Diabetic Education, Workforce Readiness, Shanti)
 - Substance Abuse AA Panel, MAT Group)
 - Education/Skills (GED, GED Math, ESL, Food Services, HiSet, Computers, Home Based Business, Accounting)
 - HUMV Program (Various)
 - PRIDE Program (Various)
 - TAY Program (Various)
 - Phoenix House (Various)
- James Musick Facility
 - Religious Services (Catholic, Catholic Bible Study, Protestant Service)
 - Substance Abuse (AA, NA)
 - Education/Skills (Food Service, HiSet, ESL, Accounting)

- Self-Help (SUD Group, Back on Track, Coping Skills Group, Great Escape, Parenting, Money Matters, Home Based Business)

Programs are delivered in the following locations:

- Central Men's Jail
 - 2nd Floor Classroom #1 – Max 24 (Protestant Service, Back on Track Money Matters, HiSet Testing, ESL, Parenting, Accounting, Work Readiness, A Skills GED, Malachi Men, MAT Program, Food Service, and NA)
 - 2nd Floor Classroom #2 – Max 14 (Protestant Service, Christian Science Service, Catholic Service, Jewish Service, Protestant Bible Study, Great Escape, Back on Track, AA, and MAT Program)
 - 2nd Floor Computer Lab (GED Math, Business, and Substance Abuse)
- Intake Release Center
 - 2nd Floor Multi-Purpose Room – Max 32 (Malachi Women, Parenting, Yoga, Mental Health, Substance Abuse, Great Escape, Work Readiness, AA, and AA Panel)
 - Mod J Room A (No Programs)*
 - Mod J Room B (Protestant Service, Catholic Service, and Catholic Bible Study)
 - Mod K Room A (No Programs)*
 - Mod K Room B (No Programs)*
 - Mod L Room A (No Programs)*
 - Mod L Room B (No Programs)*
 - Mod M Room A (Protestant Service, Catholic Service, Catholic Bible Study, Bible Discipleship, MAT Program, Case Management, Back on Track, and AA)
 - Mod M Room B (No Programs)*
 - Mod M Sector 24 (AA Panel, NA Panel)
 - Mod N Room A (Under Construction)
 - Mod N Room B (Under Construction)

*Rooms utilized as Heath Office, Property Overflow, and BHB Office
- Central Women's Jail
 - Classroom A (Malachi Women, All In, All In Olive Crest, All In Case Management, GED Math, Business, Back on Track, A Skills GED, Money Matters, Food Service, Accounting, Protestant Service, Christian Science Service, and Women of Purpose)
 - Classroom B (ESL, MAT, Substance Abuse, Protestant Service, Catholic Service, 7th Day Adventist Service, Workshops, Great Escape, Parenting, Creative Writing, Work Readiness, AA, NA, All In Fir4E, SUD Group, Laura's House, and Catholic Service)
- Theo Lacy Facility
 - Classroom #2 (Protestant Service, Great Escape, Malachi Men, Custodial, Catholic Service, Food Service, MAT Group, Money Matters, Home Based Business, and AA Panel)

- Classroom #3 (All in Program, Men of Purpose, and Computers)
- Classroom #4 (GED, Effective Parenting, AA Panel, Diabetic Ed, Substance Abuse, Catholic Service, Catholic Bible Study, Back on Track, Bible Discipleship, and Workforce Readiness)
- Classroom #5 (All in Program, HiSet Testing, Virtual Reality, AA Panel, Catholic Service, and Protestant Service)
- Chapel (PIVOT)
- Mod I Multi-Purpose Room Up (Protestant Service, APAIT, MAT, HiSet, Workforce Readiness, Shanti, AA Panel, Protestant Bible Study, and Catholic Service)
- Mod I Multi-Purpose Room Down (Catholic Service)
- Mod J Multi-Purpose Room (Catholic Service, Protestant Bible Study, Shanti, and AA Panel)
- Mod K Multi-Purpose Room (Catholic Service, Protestant Service, Protestant Bible Study, AA Panel, Catholic Bible Study, and Muslim Service)
- Mod L Multi-Purpose Room (No Programs)
- Mod M Multi-Purpose Room (Catholic Service, Protestant Service, Protestant Bible Study, Al Annon, MAT, and AA Panel)
- Mod N Multi-Purpose Room (Catholic Service and Protestant Bible Study)
- Mod O Multi-Purpose Room (Catholic Service, Protestant Bible Study, Protestant Service, and Muslim Service)
- Mod P Multi-Purpose Room (Catholic Service, Catholic Bible Study, Christian Science Service, Protestant Service, Protestant Bible Study and MAT)
- Mod Q Multi-Purpose Room (Catholic Service, Protestant Service, Catholic Bible Study, Protestant Bible Study, T4C, and MAT)
- Mod R Multi-Purpose Room (Catholic Service, Protestant Bible Study, and MAT)
- James A. Musick Facility
 - Mod A 1 Room A (SUD Group, Catholic Bible Study, Anger Management, NA, Coping Skills Group, Protestant Service, and Catholic Service)
 - Mod A 1 Room B (Protestant Service, Catholic Service, Intro to Computer Software, HiSet Math, HiSet, Catholic Bible Study, Anger Management, AA, Accounting, Substance Abuse, and Home-Based Business)
 - Mod A 2 Room A (SUDS Group, Catholic Bible Study, Protestant Service, and Coping Skills)
 - Mod A 2 Room B (Protestant Service, Catholic Service, Workforce Readiness, ESL, Anger Management, Parenting, HiSet, and AA)

The County is providing in-person programs, which are facilitated by OCSD Inmate Services facilitators, volunteers (religious), and Rancho Santiago Educators. The Program's staff conducts outreach and recruitment of all GP 6-7 disabled incarcerated persons housed in CMJ and TLF Mod O. Currently, at TLF, only incarcerated persons classified as GP 6-7 (the lowest custody classifications) are eligible to participate in the in-person programs provided in the TLF program classrooms and GP 1-5 are eligible only for correspondence programs. During the incarcerated person interviews, it was reported that, at times, the correspondence course facilitators do not provide any follow-up and do not

engage with the incarcerated persons when assignments are turned in. Programs staff reported the County was considering piloting in one (1) mod, having a Programs staff member assist with the correspondence packets. The Expert recommends that Programs evaluate the method of curriculum/assignment review by the instructors and provide the incarcerated persons feedback/grading of their course work.

During the last rating period, the County produced information on disabled incarcerated persons enrolled in in-person programs, correspondence/distance learning packets, and disabled incarcerated persons from TLF Mod O who participated in the in-person programs in the TLF Programs building. The information provided was information from the programs annual review. Since the review is conducted annually, there was no new information for this reporting period and as such, the County anticipates providing the information at every other site review.

Disabled incarcerated persons can also participate in educational opportunities via the tablets, and the County reported that the Program's staff facilitates the provision of a transcript of educational courses completed by the incarcerated persons.

In a review of the 1,002 ADA Interview/Activity Logs the County produced, there were four (4) cases where disabled incarcerated persons claimed they were not enrolled in or would like to enroll in programs. In all cases, program staff was notified, and in two cases, program staff indicated that they would enroll the individual in available courses. In at least one case, the requested program(s) were not yet available.

The County reported that in some cases cited above, the requested program was not available or was going to be available in the near future (for example, the third bullet point regarding Attitudes for Success and Rancho College). In all but the first two bullet points, the incarcerated person was going to be enrolled or provided program information.

Additionally, the County reports that these Log entries show that OCSD is facilitating communication/requests without requiring inmate message slips. When an inmate requests programming, these notations are made in the Activity Log and deputies contact Programs so that the requests can be accommodated. These Log entries demonstrate that staff were being responsive to requests, and not that there were equal access issues.

The incarcerated persons with disabilities in the TLF Mod O are informed of the opportunities through direct engagement with program staff and the ADA Compliance Unit (e.g., during the 30-day ADA Compliance Unit check-ins).

With the opening of the lower security JMF (there are no disability or mental health-related exclusions other than those needing a higher level of mental health care) and the disabled incarcerated person housed at JMF has access to a variety of in-person programs. However, in a review of the Inmate Services Correctional Programs Facility Schedules for the IRC, CMJ, CWJ, TLF, and JMF, the Expert notes that there are limited programs (only religious and MAT) available at the TLF (Mods L-R with the exception of Mod M). The County should explore expanding program availability in these mods by:

- Increasing the number of individuals allowed to program in groups (taking into consideration classification and security concerns).

- The modality of program delivery (virtual/video)
- The location of the programs (IRC Mod M provides AA/NA Panel in Sector 24)

The Expert notes that the Program's leadership has indicated that if the programming group size limit is increased, the County and outside program providers would be able to increase in-person program offerings. Additionally, concerns were reported by incarcerated persons housed in the CMJ Mod O Ward C regarding the lack of programming opportunities (in-person education and religious). Because Mod O Ward C houses incarcerated persons with medical issues/concerns, there is a high concentration of disabled incarcerated persons housed in Mod O Ward C. The Mod O Ward C population is the only general population classification housed at the CMJ. All other incarcerated persons are classified as protective custody, and based on this, the populations cannot mix, leaving the Mod O Ward C population with limited programming opportunities.

The Expert will continue to monitor this component with the full activation of the JMF.

Based on this, the Expert has determined that the County has partially implemented the RP requirement.

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: The Expert recommends that the County ensure the disabled incarcerated persons are provided the required out-of-cell time. Ensure the disabled incarcerated persons are provided accommodations during the dayroom and recreational yard (chairs). Ensure the disabled incarcerated persons are provided access to religious and educational program opportunities. Ensure the disabled incarcerated persons are provided accommodations to access visiting. That Programs evaluate the method of curriculum/assignment review by the instructors and provide the incarcerated persons feedback/grading of their correspondence course work.

- B. The County shall provide appropriate assistance to persons with disabilities so that they can meaningfully participate in Jail programs, services, and activities for which they are qualified and medically cleared.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- C. The County shall assist persons with disabilities in reading or scribing documents (legal, medical, request forms, grievances, due process, etc.).*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

Although monitoring has been suspended based on previous findings of compliance, six (6) incarcerated persons stated that although the ADA Deputies provide reading and writing assistance, housing unit staff do not assist them and refer them to the ADA Deputies or incarcerated persons. (see Section I.A. above).

- D. The County shall provide equal access to library, recreational, and educational reading materials for persons with disabilities, including providing easy reading, large-print, and Braille books; a Braille writer audiobooks; accessible electronic tablet programming; and assistive technology, as necessary.*

The County reported that for individuals who are blind or have low vision, or who have Intellectual/Developmental disabilities, OCSD's ADA Compliance team will respond to requests for tablet assistance, and housing deputies will provide assistance if requested. Housing deputies will provide assistance on a day-to-day basis to these individuals who request help accessing the tablets in coordination with the ADA Compliance team as needed.

In a previous report, the County reported that the tablets had been rolled out system-wide. The Expert previously reported that during a tablet demonstration, the Expert identified the following issue. There may be some difficulty for incarcerated persons who are blind or have low vision to access the tablets. The login process is convoluted requiring an individual to navigate this process every time they want to access the Tablet. The tablets also automatically log a person out after a short period of inactivity (approximately 30 seconds). When this occurs, the person must go through the multi-step login process again. Though the tablets have built-in accessibility features through the operating system, the tablets are very difficult to use through the login process. Because some incarcerated persons have money loaded onto the tablets, it would not be appropriate for incarcerated persons to rely on other incarcerated persons for assistance in logging into the tablets as this may compromise the login passwords and may lead to victimization concerns. To address this concern, the County reported that the ADA Compliance Team would assist persons with disabilities if they had issues accessing the Tablet. The ADA Compliance Team is trained on how to use the tablets and will readily provide this assistance. In a review of the ADA Activity logs, the Expert found the ADA Deputies queried all incarcerated persons on their ability to access the Tablet during the initial and monthly interviews. Additionally, the review of the 1,002 ADA Interview/Activity Logs related to incarcerated persons accessing the tablets revealed six entries in which the ADA deputies confirmed the incarcerated persons had access to and could access the tablet, offered to show the incarcerated person how to use the tablet, and/or notified staff to put in a request for a PIN resent in one case.

Additionally, during the monitoring tour, the County reported they created a Tablet User Guide and placed it in each Guard Station for staff to provide assistance to disabled incarcerated persons in accessing the Tablet and also created online videos for staff.

Although the vendor for the tablets advised OCSD that easy reading books are not available to be included on the tablets, OCSD continues to provide easy-reading books to persons with Intellectual/Development disabilities. As reported in section F.F., easy-reading books are available for disabled incarcerated persons. Additionally, large print

reading materials are also available for disabled incarcerated persons. The County provides "Books on Tape" for incarcerated persons with vision disabilities. The tablet screen can be enlarged for disabled individuals with vision disabilities and accommodation needs. The tablets have a talk-back function as an accommodation.

The review of the 1,002 ADA Interview/Activity Logs related to the provision of audiobooks, electronic tablets, and assistive technology is addressed in section E.D. above.

The County previously reported that OCSD currently has an account and receives materials from two different braille libraries, one in Los Angeles County and one in Orange County. The County also produced the mailing slips from these libraries. The County reports that OCSD is able to request specific books to be sent to OCSD and the only difference with the BARD services is that BARD allows for books and magazines to be downloaded to electronic devices. Due to cybersecurity issues, OCSD is unable to download BARD materials. In a review of the 1,002 ADA Interview/Activity Logs, the Expert notes one entry in which the Braille Institute of Technology conducted an intake interview of an incarcerated person via speaker phone to start weekly sessions, and another in which the ADA RN notified the ADA Compliance Team that she had reached out to the Braille Institute for a referral.

Based on this, the Expert has determined that the County has adequately implemented the RP requirement.

Adequately Implemented (Previous Rating Adequately Implemented)

Recommendations: Although the Expert found the County adequately implemented this provision, the Expert is requesting that the County produce the Tablet User Guide and the online videos for staff.

- E. The County shall log and track out-of-cell time and program participation to ensure that people with disabilities receive meaningful and equitable access to such programs and activities. At a minimum, the system shall collect information as to:*
- 1. When the County offers out-of-cell opportunities (dayroom and outdoor); whether the incarcerated person with a disability accepts or refuses the opportunity; and, if an incarcerated person accepts the opportunity, the amount of time spent out of cell;*

The County reported that it is expected that the implementation of Guardian RFID will help OCSD comply with this requirement of the Remedial Plan.

The County produced the following OCSD Daily Activity Logs, which include the dayroom/recreation opportunities offered and provided for the following weeks:

- August 1-30, 2024
- September 1-30, 2024
- October 1-31, 2024
- November 1-30, 2024
- December 1-31, 2024

The Daily Activity Logs included the following:

- CMJ (Mods A, B, C, D, E, F, O, and Roof Recreation),
- CWJ (Mod P and Second Floor)
- IRC (Mods J, K, M, and N)
- TLF (AE Barracks, F Barracks, G Barracks, Mods I, J, K, L, M, O, P, Q, and R, Green Sector)

The following logs were not provided as part of the document production.

- CWJ Mod I

The Expert has reviewed out-of-cell tracking logs (dayroom and recreation) during the previous five rounds of monitoring. The results of the review have consistently found that the documentation of certain facilities or certain Mods does not reflect the County is consistently providing or offering the required three (3) hours of dayroom daily and the required three (3) hours weekly required by the RP. Additionally, the data within the dayroom and recreation logs does not provide the Expert the detailed information necessary to rate the County's compliance as some of the logs do not contain incarcerated person identifiers and simply report on the number of incarcerated persons provided access to the dayroom and recreation. Based on this, for the sixth round of monitoring, the parties agreed to stipulate that the County will need to implement Guardian RFID inclusive of tracking reports to accurately track out-of-cell time.

Based on this, the Expert finds that the County has not implemented the RP requirements.

Not Implemented (Previous Rating Not Implemented)

Recommendations: The Expert recommends that the County ensure the out-of-cell (dayroom and outdoor) tracking includes whether the incarcerated person with a disability accepts or refuses the out-of-cell opportunity, and if an incarcerated person accepts the out-of-cell opportunity, the amount of time spent out-of-cell.

- 2. The ADA Compliance Unit shall interview incarcerated persons with disabilities on a monthly basis. If, during the interview, the ADA Compliance Unit discovers that a person with a disability has refused offers for outdoor recreation three times in a row or has refused offers for dayroom three times in a row, the ADA Compliance Unit shall inquire and document the reason(s) for the refusal. The ADA Compliance Unit shall inquire whether a disability accommodation, mental health referral, or other action is needed to afford meaningful access and shall document the action taken in the incarcerated person's ADA Inmate Activity Log. During the monthly meeting, the ADA Compliance Unit will also provide the incarcerated person with a message slip to contact the ADA Compliance Unit regarding any disability issues. If, at any time prior to the monthly interview, any member of the ADA Compliance Unit becomes aware that an incarcerated person with a disability may need a disability accommodation, mental health referral, or other action to afford meaningful access to out-of-cell opportunities, the ADA Compliance Unit will meet promptly with the incarcerated*

person and document the action taken in the incarcerated person's ADA Inmate Activity Log.

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

3. *The County shall conduct an annual review to determine whether the County offers structured programs and activities, including, but not limited to, religious, educational, vocational, reentry, and substance abuse programs, on an equal basis to people with disabilities and whether there are access/accommodation barriers to be addressed.*

The County reported that the Programs staff will work to implement this requirement.

In the previous monitoring tour, the County produced the Orange County Sheriff's Department Annual Progress Review ADA – Rights of People with Disabilities. The Progress Review states, "The County has conducted an assessment to determine if structured programming including religious, educational, vocational, reentry, and substance abuse programs, is being offered on an equal basis to people with disabilities that are housed within the Orange County Jails. The following report will reflect a list of current programs that are offered to individuals within our jails regardless of ADA status, a snapshot of outcomes for ADA clients who enrolled and participated in programming throughout the review period 1/1/24 – 6/30/24, actions taken to expand services in Mod O housing units, and gaps that are needing to be addressed and corrective measures that will be taken." The Progress Review also included the following:

- Reference to the Programs List (Programs and Reentry Profile 6.30.24)
- Enrollment and Participation Outcomes
- Assessment of ADA individuals who were housed in the OCSD jails during the rating period (1.1.24 to 6.30.24)
- Expansion of Services in CMJ/TLF Mod O
- Gaps and Corrective Measures

The Progress Review did not include an assessment of access to religious and reentry programs.

The County did not produce the Orange County Sheriff's Department Annual Progress Review ADA – Rights of People with Disabilities for the sixth monitoring tour.

Based on this, the Expert has determined that the County has partially implemented the RP requirement.

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: The Expert recommends that the County ensure that the annual review of structured programs includes an assessment of access to religious and reentry programs.

J. Access to Worker Opportunities (Section X)

- A. *The County shall ensure equitable work opportunities for incarcerated persons with disabilities. Incarcerated people with disabilities who can perform the essential functions of a position, with or without accommodations, shall be considered for and placed into work opportunities in the same manner as incarcerated people who do not have disabilities and who are similarly situated with respect to other factors unrelated to disability (e.g., classification level, individualized security considerations).*

As noted in the fifth report, two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Adequately Implemented)

1. *To ensure equitable work opportunities for incarcerated people with disabilities, the County shall: Ensure clear job descriptions that include the essential functions and clear hiring criteria that do not inappropriately screen out people with disabilities;*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

2. *To ensure equitable work opportunities for incarcerated people with disabilities, the County shall: Ensure that medical staff conduct an individualized assessment to identify work duty restrictions and/or physical limitations in order to ensure appropriate work assignments and reasonable accommodations on the job;*

The revised and implemented Custody & Court Operations Manual (CCOM) 8000 - Inmates with Disabilities states, "Inmates with disabilities will be provided the opportunity to work, both in the Jail and through the Community Work Program Those who accept the opportunity will meet with the CHS ADA Compliance R.N. and ADA Compliance Unit An individualized interactive process will take place to determine the type of assignment and provision of reasonable accommodations as needed to allow the inmate to participate."

The County previously produced HCA CHS Policy and Procedure 1022 Inmate Workers. The policy includes the medical criteria and also includes specific health conditions that require a sick call appointment for clearance. The policy requires that medical staff confer with the ADA nurse coordinator, and after the evaluation is completed, for temporary or permanent disability related to mobility, dexterity, vision, hearing, or speech, an ADA Nurse Coordinator will communicate the necessary

reasonable health accommodations to OCSD ADA Compliance Unit and enter Work Program Clearance Status in the patients EHR. For cognitive, intellectual, and developmental disabilities, medical staff must confer with a CHS psychologist. For mental health diagnosis, medical staff must confer with a mental health clinician. For unstable medical conditions, medical staff must confer with a CHS medical provider.

The HCA CHS Policy and Procedure 1022 Inmate Workers states:

Senior Nurse/Supervising Nurses receive inmate (in-jail and CWP) worker eligibility screening lists from OCSD's Work Deputy for patients housed within Orange County Jail facilities prior to a patient receiving a work assignment.

- Senior/Supervising Nurse or assigned clinical staff designee will conduct a chart review to ensure the patient is:
 - Free from withdrawing from illicit drugs or alcohol.
 - Physically and mentally capable of working, including with the provision of health-related or disability-related accommodations and/or adaptive supports.
 - Assigned clinical staff reviewer will confer with appropriate CHS clinical staff or schedule appropriate follow-up sick call appointment(s) whenever health status is unclear upon reviewing patient's EHR (refer to table in Section B for scheduling appropriate appointments).
 - Not currently placed in medical isolation/quarantine

The ADA Deputy reported that they query all disabled incarcerated persons during the initial and monthly ADA Interviews, and in cases where a disabled incarcerated person informs the ADA Deputy that they are interested in a work assignment, they refer the case to Classification for a custody eligibility review. The ADA Deputies also reported that they refer the case to the CHS ADA RN for a medical review. The CHS ADA Nurse reported that once a disabled incarcerated person is referred to her by the ADA Deputy, she conducts a work clearance evaluation/interview to determine the assignments the incarcerated person can be assigned to. In cases where she cannot make the determination for work clearance, she refers the case to a medical provider for a provider review. Additionally, the case is referred to mental health staff for a mental health review/clearance.

A medical provider interviewed stated that all incarcerated persons are eligible to work and that in conducting the review, he does not automatically exclude disabled incarcerated persons with chronic medical conditions. He stated that he interviews the incarcerated person and identifies the physical limitations and duty restrictions. He also stated that the Work Status (Work With Restrictions/No Work) is documented on an HCA Medical Message Slip, which is provided to custody staff and is also provided to the incarcerated person and in the progress notes.

The Behavioral Health Clinician stated she conducts the in-custody work and CWP mental health clearances. She reported that they would conduct a chart review, and if the person is not in mental health acute or chronic housing, they would be eligible to work. For people who were housed in the chronic and acute mental health units, they

would be considered 30 days after release from the mental health units. Medical and mental health staff reported that a medical message slip would be provided to custody staff listing the physical limitations.

Medical and mental health staff reported that health care clearance assessments are logged in the health record as a progress note. As part of document production, the County produced the following documents:

- Excel Spreadsheet “List Inmate Work Program (not cleared)” listing four (4) cases
 - CHS Progress Notes for two (cases)
 - CHS Receiving Screening for two (2) cases
- Emails from Work Deputy and ADA RN for three (3) cases
- ADA Interview/Activity Logs for 23 disabled incarcerated person workers
- Excel Spreadsheet “All persons on No Work List.”
 - List 598 cases
 - The County did not produce progress notes for any of these cases.

During the Medical Intake Screening, the Expert noted that the following work-related information is documented by the RN:

- Work Status
 - Cleared for work
 - Cleared for work with accommodations(s) needed
 - Hold for medical follow-up
 - Hold for mental health follow-up
 - Mental health referral
 - Medical Case Management Sick call

The Medical Intake RN reported that the cases not cleared for work would be reviewed for work clearance by medical and mental health staff. However, review of the documents produced by the County (Case #1 and 2 below) reflects that these cases are not being reviewed by medical and mental health staff and CHS staff rely on the “Work Status” listed in the Receiving Screening.

The Excel Spreadsheet includes three (3) cases that were not cleared by medical and one (1) case not cleared by mental health. No provider or RN progress notes were provided in at least two (2) cases.

In a review of the documentation produced by the County, there is insufficient information as to what guided the medical provider's or mental health clinician's decision for most of the cases. There is further concern about the intake screening including a designation of “No work in custody.” At least seven female incarcerated persons had the “No work in custody” designation assigned to them, while provider notes indicated that each of them was “cleared for work.” The Expert has raised the concern that health care provider staff must conduct the review, not an intake staff member. It is unclear the purpose and effect of the “No work in custody” designation, and this needs to be addressed. The County is investigating the issue and will need to provide clarification and (if necessary) an action plan on this issue.

The County reported that CHS will produce all requested documents during document production and during future visits.

During the monitoring tour, the County provided the Expert with cases (CWJ Work Deputy) that had not been cleared for work by medical and mental health staff. The Expert reviewed 13 cases (12 medical and 1 mental health) in the EUHR to determine the reasons for the denial. Of these 14 cases, the Expert found that:

- Medical
 - One (1) - Released
 - Seven (7) – Cleared
 - Three (3) – Hold
 - Two (2) Nothing in comments
 - One (1) pending provider sick call. History of seizures and asthma on meds.
 - One (1) – No Progress note in medical file
- Mental Health
 - One (1) – No Progress note in medical file

The County must ensure that the work evaluations/reviews are documented in a way that the Expert can determine the clinical reasons for the determination of the denials. The County must also ensure that medical and mental health staff review the cases where the Medical Intake screening does not clear incarcerated persons for work while in custody.

In the next monitoring round, the Expert is requesting that the County produce medical progress notes for all cases (medical and mental health progress notes including dates of the review) for completed work assignment medical evaluations that were denied by CHS staff (medical and mental health) and not just the MMS.

Based on this, the Expert has determined that the County has partially implemented the RP requirement.

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: The Expert recommends that the County ensure that for the next monitoring round, the County produces medical progress notes for all cases (medical and mental health progress notes including dates of the review) for completed work assignment medical evaluations that were denied by CHS staff. The County must also resolve the issue regarding the intake screening designation of “No work in custody,” which is confusing and may also be serving to undermine disability access-to-work efforts.

3. *To ensure equitable work opportunities for incarcerated people with disabilities, the County shall: Ensure that staff supervising incarcerated workers consider, with input from the incarcerated person, reasonable accommodations that would make it possible for the incarcerated person to perform the essential job functions and/or*

consider whether the incarcerated person could, with or without reasonable accommodations, perform the essential job functions of another position.

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

4. *To ensure equitable work opportunities for incarcerated people with disabilities, the County shall: Ensure equitable work opportunities for incarcerated persons with Intellectual disabilities, with appropriate accommodations and supports (e.g., additional supervision and training, modified production expectations, expanded timeframes for completion of projects, etc.).*

The revised and implemented Custody & Court Operations Manual (CCOM) 8000 - Inmates with Disabilities states, "Relevant staff, including housing deputies, the ADA Compliance Unit, and work supervisors/teachers shall be informed, as appropriate, as to: inmates with Intellectual/Developmental Disabilities, their individualized plan, and related accommodations and adaptive support needs and staff responsibilities to provide for such needs as well as to monitor for and address any safety, vulnerability, or victimization concerns."

During the previous monitoring tour, the County reported that OCSD was working on a form for documenting that any necessary accommodations were provided for incarcerated workers (non-CWP). However, the form was not produced. The County also reported that CHS would continue to collaborate with OCSD to ensure logs meet requirements.

The Work Deputies interviewed stated that in the event the individual could not perform the essential functions of the work assignment, the supervisor would provide reasonable accommodations for the individual to perform the assignment, and in cases where they cannot perform the essential functions of a particular job even with an accommodation, the individual would be placed in another work assignment where they could be accommodated.

The revised and implemented Custody & Court Operations Manual (CCOM) 8000 - Inmates with Disabilities states that work supervisors/teachers shall be informed as appropriate as to the incarcerated persons with Intellectual/Developmental Disabilities, their individualized plan, related accommodations, adaptive support needs, and staff responsibilities to provide for such needs.

In the previous monitoring tour, the County reported it was considering requiring that staff provide and document all adaptive supports reflected on an Adaptive Support Log. The County implemented the Adaptive Support Log; however, the Expert notes the Adaptive Support Log is for housing unit staff and is not for work supervisors.

Additionally, individualized plans for the eight (8) assigned workers designated as developmentally disabled were not produced. In addition, the County did not produce

documentation showing that incarcerated workers with intellectual disabilities were provided with appropriate accommodations and supports (e.g., additional supervision and training, modified production expectations, expanded timeframes for completion of projects, etc.).

Based on this, the Expert has determined that the County has partially implemented the RP requirement.

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: The Expert recommends that the County ensure that for the next monitoring round, the County produces documentation that incarcerated workers with intellectual disabilities are being provided with appropriate accommodations and supports (e.g., additional supervision and training, modified production expectations, expanded timeframes for completion of projects, etc.).

K. Access to Community Work Program (Section XI)

- A. *The County shall ensure equal access to the Community Work Program (CWP) for people with disabilities. People with disabilities who can perform the essential functions of a CWP position, with or without accommodations, shall be considered for and placed into CWP opportunities in the same manner as people who do not have disabilities and who are similarly situated with respect to other factors unrelated to disability (e.g., classification level, individualized security considerations).*

As noted in the fifth report, two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Adequately Implemented)

1. *To ensure equitable CWP opportunities for people with disabilities, the County shall: Ensure clear job descriptions that include the essential functions and clear hiring criteria that do not inappropriately screen out people with disabilities;*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

2. *To ensure equitable CWP opportunities for people with disabilities, the County shall: Ensure that medical staff conduct an individualized assessment to identify work duty restrictions and/or physical limitations in order to ensure appropriate CWP assignments and reasonable accommodations on the job;*

The County reported that CHS will produce all requested documents during document production and during future visits.

The revised and implemented Custody & Court Operations Manual (CCOM) 8000 - Inmates with Disabilities states, "Inmates with disabilities will be provided the opportunity to work, including Community Work Program. Those who accept the opportunity will meet with the CHS ADA Compliance RN and ADA Compliance Unit. An individualized interactive process will take place to determine the type of assignment."

The Expert addresses this requirement in detail in Section J. A. above.

The County produced a CWP Disqualification Log. The log includes 15 cases. The Expert reviewed the EUHRs for the 15 cases and found the progress notes listed the following reasons for the disqualification:

- Medical Cases – Two (2) cases
 - No progress notes on either case
- Mental Health Cases (13 cases)
 - Psych observation
 - On CIWA day 3
 - H/O mental health on meds
 - No Progress notes on 10 cases

The County must ensure that the work evaluations/reviews are documented in a way that the Expert can determine the clinical reasons for the determination of the denials.

Based on this, the Expert has determined that the County has partially implemented the RP requirement.

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: The Expert recommends that the County ensure that for the next monitoring round, the County produces medical progress notes for all cases (medical and mental health progress notes including dates of the review) for completed work assignment medical/mental health evaluations that were denied by CHS staff.

3. *To ensure equitable CWP opportunities for people with disabilities, the County shall: Ensure that staff supervising CWP workers consider, with input from the incarcerated person, reasonable accommodations that would make it possible for the person to perform the essential job functions and/or consider whether the person could, with or without reasonable accommodations, perform the essential job functions of another CWP position.*

As noted in the fifth report, two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Adequately Implemented)

4. *To ensure equitable CWP opportunities for people with disabilities, the County shall: Ensure equitable CWP opportunities for incarcerated persons with Intellectual disabilities, with appropriate accommodations and supports (e.g., additional supervision and training, modified production expectations, expanded timeframes for completion of projects, etc.).*

As noted in the fifth report, two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Adequately Implemented)

- B. *The County shall end its practice of medical staff not approving people with disabilities for participation in the CWP based on a person's disabilities absent meaningful consideration of essential job functions and reasonable accommodations.*

The Expert addresses this provision in detail in Sections J. A. and J. A. 2. above.

The County reported that CHS will produce all requested documents during document production and during future visits.

The County produced a CWP Disqualification Log. The log includes 15 cases. The Expert reviewed the EUHRs for the 15 cases and found the progress notes listed the following reasons for the disqualification:

- Medical Cases – Two (2) cases
 - No progress notes on either case
- Mental Health Cases (13 cases)
 - Psych observation
 - On CIWA day 3
 - H/O mental health on meds
 - No Progress notes on 10 cases

The County must ensure that the work evaluations/reviews are documented in a way that the Expert can determine the clinical reasons for the determination of the denials.

Based on this, the Expert has determined that the County has partially implemented the RP requirement.

Partially Implemented (Previous Rating Partially Implemented)

Recommendation: The Expert recommends that the County ensure that for the next monitoring round, the County produces medical progress notes for all cases (medical and

mental health progress notes including dates of the review) for completed work assignment medical/mental health evaluations that were denied by CHS staff.

- C. *The County shall provide reasonable accommodations to enable incarcerated persons with disabilities to participate in work opportunities, including the CWP.*

As noted in the fifth report, two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Adequately Implemented)

L. Disability-Related Grievance Process (Section XII)

- A. *The County shall ensure that grievance policies and procedures are readily available and accessible to all persons.*

1. *The County shall inform people of the disability grievance procedures, including, but not limited to, by posting notices throughout the Jail, ensuring the grievance procedures are explained in the orientation packet, and discussing the procedures with people with disabilities during the meeting with staff from the ADA Compliance Unit that occurs within seven days of a person being identified as having a disability.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

Although the provision was rated as adequately implemented, there are reports that some staff members are still asking incarcerated persons what the grievance “is about” before providing a grievance form. It is fine for staff to attempt to address issues at the lowest level feasible; however, disclosing the nature of the grievance should not be a requirement to receive a grievance form.

Additionally, the Expert recommends that the grievance box currently in the hallway outside CMJ Mod O, Wards C and D be replaced or supplemented with a grievance box inside each ward. This will address concerns from the Incarcerated persons with disabilities about their ability to timely (and as necessary, confidentially) submit grievance forms.

2. *The County shall ensure that the disability grievance procedures are effectively communicated to persons with disabilities affecting communication.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- B. *The County shall track all grievances that request disability accommodations and/or raise any disability-based discrimination or violation of the ADA, this RP, or Jail ADA-related policy.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- C. *The County shall ensure that all persons, including people with disabilities, have meaningful access to the grievance process and to grievance forms.*

1. *The County shall ensure that grievance forms are readily available to people in custody, either by placing grievance forms in the housing units in areas accessible to people in custody or ensuring that staff provides grievance forms promptly upon request, irrespective of the type of grievance raised.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

2. *Jail staff can and should attempt to address grievances informally but may not, under any circumstances, refuse to provide a requested grievance form, destroy a grievance form, or otherwise obstruct or interfere with a person's ability to submit a grievance form.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

3. *Jail staff shall assist people in custody who require accommodations to submit a grievance or to appeal a grievance response (e.g., people who are blind, have an Intellectual/Development Disability, have a learning disability, or who have physical disabilities that make it difficult or impossible for them to write, or are illiterate).*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

D. Responses to Grievances

- 1. The Housing Sergeant who receives the grievance or appeal shall screen all ADA-related grievances and appeals within one day of receipt to determine whether the grievance presents an urgent issue regarding a person's safety or well-being. For grievances and appeals that present an urgent issue, the County shall either (a) immediately provide an interim accommodation that addresses the urgent issue pending a final response to the grievance or (b) resolve the grievance promptly with the participation of health care staff, as appropriate. For grievances that raise significant and imminent health or safety risks, the County shall address the grievance immediately.*

The revised and implemented Custody & Court Operations Manual (CCOM) 8000 Inmates with Disabilities policy states, "The Housing Sergeant who receives the grievance or appeal shall screen all ADA-related grievances and appeals within one day of receipt to determine whether the grievance presents an urgent issue regarding inmate's safety or well-being. For grievances and appeals that present an urgent issue, staff shall either (a) immediately provide an interim accommodation that addresses the urgent issue pending a final response to the grievance or (b) resolve the grievance promptly with participation of CHS staff, as appropriate. For grievances that raise significant and imminent health or safety risks, staff shall address the grievance immediately."

Staff reported that the Housing Sergeants screen all grievances within one (1) day of receipt, and in cases where the grievances are identified as ADA-related grievances and the issue being grieved presents an urgent issue (safety or well-being), staff provide an interim accommodation pending a response and/or resolve the issue as soon as possible. The staff also reported that in these cases, they inform the ADA Compliance Unit staff.

In the following grievance, the incarcerated person raised safety concerns related to their housing and disability access needs:

- 241203-0390 12/3/24 – States he was moved from TLF Mod O to TLF Mod J. States this housing is not accessible when he enters with his walker. He states that on 11/27/24, the walker got stuck when exiting his cell, and he pulled on the walker and fell, hitting his head. The response states, "The ADA nurse met with you on 12/6 to discuss your concerns. A request for housing change was submitted to OCSD at that time to address your concern." Reviewed by ADA Compliance on 12-1-24, who noted inmate was rehoused from a smaller cell in Mod J (near shower) to a larger cell in the same sector in Mod J. Response date 12/6/24.

Although the synopsis of the grievance by the ADA Unit notes, "Inmate rehoused from a smaller cell in Mod J (near shower) to a larger cell in the same sector in Mod J," the County did not provide an interim accommodation that addresses the urgent issue pending a final response to the grievance, did not resolve the grievance promptly with the participation of health care staff and did not address the grievance immediately.

The County reported that OCSD will be revising the Grievance Form.

Based on this, the Expert finds that the County has partially implemented the RP requirements.

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: The Expert recommends that the County ensure ADA-related grievances and appeals that present an urgent issue immediately provide an interim accommodation that addresses the urgent issue pending a final response to the grievance or resolve the grievance promptly with the participation of health care staff.

2. *The Facility Administrative Sergeant, in consultation with the ADA Compliance Unit, shall investigate all non-urgent ADA-related grievances and appeals and provide a written response within fourteen days of receipt.*

The revised and implemented Custody & Court Operations Manual (CCOM) 8000 Inmates with Disabilities policy states, "The Facility Administrative Sergeant, in consultation with the ADA Compliance Unit, shall investigate all non-urgent ADA-related grievances and appeals and provide a written response within fourteen days of receipt."

The County reported that OCSD will be revising the Grievance Form. For tracking purposes, all grievances submitted are given a jail incident (JI number), including those resolved as a request (such as for a haircut or library book).

A review of the 23 disability-related grievances produced found that the County did not document the date the grievance response was provided to the incarcerated person in 17 of the cases.

Based on this, the Expert finds that this County has partially implemented the RP requirement.

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: The Expert recommends that the County ensure the Facility Administrative Sergeant, in consultation with the ADA Compliance Unit, investigates all non-urgent ADA-related grievances and appeals and provides a written response within fourteen days of receipt. Ensure that each grievance response includes the date the response was provided to the incarcerated person to allow the Expert to monitor (and the County to track internally).

3. *In limited circumstances where the County is unable to resolve the grievance within fourteen days (e.g., the incarcerated person must be referred to a specialist and the appointment will not occur within fourteen days or the grievance involves a personnel complaint), the County should still provide a response within fourteen days. The response should communicate why the County cannot resolve the grievance within the fourteen-day deadline and, if relevant, provide information regarding any subsequent events scheduled to resolve the grievance (e.g., a specialist appointment)*

and address, as appropriate, the provision of interim accommodations pending resolution.

The revised and implemented Custody & Court Operations Manual (CCOM) 8000 Inmates with Disabilities policy states, "In limited circumstances where staff is unable to resolve the grievance within fourteen days (e.g., the inmate must be referred to a specialist and the appointment will not occur within fourteen days or the grievance involves a personnel complaint), staff should still provide a response within fourteen days. The response should communicate why the grievance cannot be resolved within the fourteen-day deadline and, if relevant, provide information regarding any subsequent events scheduled to resolve the grievance (e.g., a specialist appointment) and address, as appropriate, provision of interim accommodations pending resolution."

The County reports that training will be developed on how to provide grievance responses that meet the requirements of the Remedial Plan.

There were three (3) grievances where the responses state:

- "Your personnel complaint will be addressed per CHS protocol. You will be scheduled to be seen regarding your request to have your foot evaluated. Please submit a pink health message slip to return to care for any future health concerns."
- "You are currently scheduled to be seen by the optometrist regarding your treatment plan. A member of the health care staff will be reaching out to you to provide clarification regarding your concern and answer any questions you may have. Your request is pending further evaluation with the specialist."
- "You were seen by the health care personnel on 7/24. At that encounter, personnel confirmed that the back brace was ordered after your evaluation with the provider on 7/16 and would be delivered to you upon receipt."

The responses do not communicate why the County could not resolve the grievance within the fourteen-day deadline, nor did the responses provide relative information regarding any subsequent events scheduled to resolve the grievance (e.g., a specialist appointment) and address, as appropriate, the provision of interim accommodations pending resolution.

Based on this, the Expert finds the County has partially implemented the RP requirement.

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: The Expert recommends that the County that in cases where the County is unable to resolve ADA-related grievances within fourteen days (e.g., the incarcerated person must be referred to a specialist, and the appointment will not occur within fourteen days or the grievance involves a personnel complaint), ensure the County provides a response within fourteen days communicating why the County cannot resolve the grievance within the fourteen-day deadline and, if relevant, provide information regarding any subsequent events scheduled to resolve the grievance (e.g.,

a specialist appointment) and address, as appropriate, the provision of interim accommodations pending resolution.

4. *If the grievance is a request for an accommodation, the response must articulate whether the County is granting the requested accommodation, providing an alternative accommodation, or is declining to provide any accommodation. If the County is not providing the requested accommodation, the response must explain the reasoning for the decision. If the County is providing an accommodation (either the requested accommodation or an alternative), the County must document that it has provided the granted accommodation.*

The revised and implemented Custody & Court Operations Manual (CCOM) 8000 Inmates with Disabilities policy states, "If the grievance is a request for an accommodation, the response must articulate whether the inmate will be granted the requested accommodation, provided an alternative accommodation, or whether the requested accommodation is declined. If the requested accommodation is declined, the response must explain the reasoning for the decision. If an accommodation is provided (either the requested accommodation or an alternative), staff will document that the granted accommodation has been provided."

Of the 23 grievance responses reviewed, 18 were compliant with the RP requirements while five (5) were not.

Based on the Expert's review of the grievance responses, the Expert makes the following recommendations. The County grievance responses should:

- 1) Document whether the grievance is granted, in whole or part.
- 2) Include the date of the grievance response and the date the issue was resolved (if applicable).
- 3) Include a response to all issues.
- 4) Document whether the County is providing the requested accommodation, an alternate accommodation or declining to provide an accommodation.
- 5) If the County is not providing the requested accommodation, clearly document the reasoning for the decision.

The County reports training will be developed on how to provide grievance responses that meet the requirements of the Remedial Plan. For tracking purposes, all grievances submitted are given a jail incident (JI number), including those resolved as a request (such as for a haircut or library book).

Based on the review of the grievances and grievance responses, the Expert finds the County has partially implemented the RP requirement.

Partially Implemented (Previous Rating Partially Implemented)

Recommendation: The Expert recommends that the County ensure the grievance responses include:

- Whether the grievance is granted, in whole or part,

- The date of the grievance response and the date the issue was resolved (if applicable),
 - Clear language as to the resolution is (e.g., "the device was delivered on [DATE]") rather than "your concern was addressed", including a clear statement with the reasoning for the decision.
 - The results of the medical evaluation (if applicable).
5. *The County shall ensure that, in responding to an ADA-related grievance, the ADA Compliance Unit receives input from all sources, including OCSD and CHS staff, as necessary. Input from CHS staff may be required in circumstances where the grievance raises a question regarding whether the grievant has a disability or whether an accommodation requested by the grievant is reasonable. CHS staff may provide input based on a records review and/or in-person evaluation conducted for the purpose of responding to the grievance, as circumstances warrant.*

The revised and implemented Custody & Court Operations Manual (CCOM) 8000 Inmates with Disabilities policy states, "In responding to an ADA-related grievance, the ADA Compliance Unit will obtain input from all sources, including OCSD and CHS staff, as necessary to respond to the grievance. Input from CHS staff may be required in circumstances where the grievance raises a question regarding whether the grievant has a disability or whether an accommodation requested by the grievant is reasonable. CHS staff may provide input based on a records review and/or in-person evaluation conducted for purpose of responding to the grievance, as circumstances warrant."

A review of the grievances reflects that all of the 23 grievances produced were reviewed by the ADA Compliance Unit or assigned to the ADA Compliance Unit for response. Additionally, the grievance responses reflect that CHS staff when required (in circumstances where the grievance raised a question regarding whether the grievant has a disability or whether an accommodation requested is reasonable), provided input. This includes a records review and/or in-person evaluation conducted for the purpose of responding to the grievance. However, the Expert notes that at times the in-person evaluation did not occur prior to the response being finalized.

The County reports that OCSD's ADA Compliance Team will continue to document their input on the ADA-related grievances in the grievance system.

Based on the review of the grievances and grievance responses, the Expert finds the County has adequately implemented the RP requirement.

Adequately Implemented (Previous Rating Partially Implemented)

6. *When necessary, the ADA Compliance Unit shall interview people in custody regarding their requests for accommodations to gather information about or to clarify the nature of the request for accommodation.*

The revised and implemented Custody & Court Operations Manual (CCOM) 8000 Inmates with Disabilities policy states, "When necessary, the ADA Compliance Unit shall interview inmates regarding their requests for accommodations to gather information about or to clarify the nature of the request for accommodation."

A review of the 23 grievances reflects that the ADA Compliance Unit interviewed disabled incarcerated persons for the following grievances:

- 240826-0094
- 240702-0233
- 240811-0176
- 240530-0158
- 240905-0158
- 240815-0138
- 240807-0135

The County reports that this item requires the interview “when necessary.” OCSD’s ADA Compliance Team is documenting their input on the ADA-related grievances in the grievance system. The Expert notes that in the cases listed in D. 4 above where the ADA staff did not interview the incarcerated person, there was no need for the ADA staff to obtain clarification from the incarcerated person about the nature of the request for accommodation/ADA grievance.

Based on the review of the grievances and grievance responses, the Expert finds the County has adequately implemented the RP requirement.

Adequately Implemented (Previous Rating Partially Implemented)

7. *All grievance responses shall include an explanation of the process for appealing the grievance response.*

The revised and implemented Custody & Court Operations Manual (CCOM) 8000 Inmates with Disabilities policy states, “All grievance responses shall include an explanation of the process for appealing the grievance response.”

In a review of the 23 grievance responses, the Expert found that all 23 did not include an explanation of the process for appealing the grievance response.

The County reports that OCSD will be revising the grievance form.

Based on this, the Expert finds the County has not implemented the RP requirement.

Not Implemented (Previous Rating Not Implemented)

Recommendations: The Expert recommends that the County ensure that all grievance responses include an explanation of the process for appealing the grievance response.

8. *The County shall ensure that it effectively communicates all grievance and appeal responses to the grievant/appellant.*

The revised and implemented Custody & Court Operations Manual (CCOM) 8000 Inmates with Disabilities policy states, "Staff shall ensure that they effectively communicate all grievance and appeal responses to the inmate. For inmates with disabilities affecting communication, staff will also complete the Effective Communication form per Policy 8000.11 for responses to grievances and appeals."

The County produced six (6) completed EC forms for grievance encounters. However, a review of the ADA grievances found that there were three (3) grievances submitted by incarcerated persons with disabilities that affected communication: one (1) vision, one (1) Hearing, and one (1) Developmentally Disabled. In these cases, there was no documentation that the grievance responses were effectively communicated.

The County reports that OCSD will continue to reinforce training on the requirements of the Remedial Plan and the use of the Effective Communication form.

Based on this, the Expert finds the County has partially implemented the RP requirement. With the rollout of ServiceNow, the County must ensure the functionality for all staff to document the effective communication staff provided during the issuance of grievance and appeal responses to persons with disabilities that affect communication is included.

Partially Implemented (Previous Rating Not Implemented)

Recommendations: The Expert recommends that the County ensure staff effectively communicates all grievance and appeal responses to the grievant/appellant and documents the communication method(s) used and their effectiveness.

9. *When a person files a grievance or appeal of a grievance response, the County shall provide a copy of the grievance or appeal to the grievant.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- E. *The County shall ensure that incarcerated persons do not face any retaliation for requesting accommodations or submitting grievances.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

M. Alarms/Emergencies/Announcements (Section XIII)

- A. *The County shall accommodate people with disabilities with respect to alarms and emergencies.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- B. Relevant policies related to accommodations for alarms and emergencies shall be communicated to persons with disabilities using Effective Communication.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- C. The County shall communicate effectively and appropriately with persons who have disabilities that may present barriers to communication during emergencies or alarms.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- D. In order to facilitate appropriate accommodations during alarms or emergencies, the County shall offer, but shall not require, people who have disabilities to wear visible markers to identify their disability needs (e.g., identification vests). The County shall also maintain a list, posted in such a way to be readily available to Jail staff in each unit, of persons with disabilities that may require accommodations during an alarm or emergency.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- E. The County shall ensure that people who are deaf or hard of hearing receive Effective Communication during alarms and emergency announcements. Staff will prioritize these persons during alarms, emergency announcements, and any evacuation.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- F. Staff shall ensure that they effectively communicate all verbal announcements to persons with disabilities that affect communication. For example, staff may need to communicate*

verbal announcements in writing or electronic means (e.g., pager) to deaf incarcerated people.

The revised and implemented Custody & Court Operations Manual (CCOM) 8000 Inmates with Disabilities policy states, "Some inmates who are deaf and/or hard of hearing, blind or with low vision may not be able to hear announcements, alarms, or read written notices in the unit. These impairments will be listed on the Functional Needs List and the ADA Tracking List. Depending on the inmate's level of impairment, staff assigned to housing units with inmates who are deaf and/or hard of hearing, blind, or with low vision should use the following techniques for instructions, announcements, alarms, and written notices.

- Prioritize the inmate's evacuation.
- Whiteboard/written notes
- Speak one-on-one in an elevated, clear voice.
- Speak closely enough to allow the inmate to lip-read.
- Read the written notice.
- Provide the notice in large print."

Staff interviewed stated they would effectively communicate verbal announcements to disabled incarcerated persons with disabilities that affect communication by conducting face-to-face communication, writing notes, speaking louder, etc. The staff has "whiteboards" available in the housing units for staff to communicate announcements to the incarcerated persons. However, five (5) incarcerated persons with a disability that affects communication stated that staff does not always provide the accommodations necessary for them to hear the verbal announcements. The incarcerated persons stated that they must rely on other incarcerated persons and/or watch for the movement of others when announcements are made. The Expert was not able to confirm these claims. More attention and staff training is necessary to ensure the required accommodations are provided.

Proof-of-practice documentation was not provided.

The ADA STC PowerPoint includes information on the requirement for staff to accommodate people with disabilities with respect to alarms and emergencies.

The County reports staff have been reminded to document in the guard station log when they effectively communicate announcements to persons with disabilities that affect communication. However, the Expert asked the staff assigned to housing units where incarcerated persons with disabilities that affect communication are housed to show guard station log entries where they had provided and documented the effective communication provided following announcements. All staff replied they had not documented this in the guard station log.

Based on this, the Expert finds the County has partially implemented the RP requirement. With the rollout of ServiceNow, the County must ensure the functionality for all staff to document the effective communication staff provided for all verbal announcements to persons with disabilities that affect communication is included.

Partially Implemented (Previous Rating Partially Implemented)

Recommendation: The Expert recommends that the County provide proof of practice that staff effectively communicates verbal announcements to persons with disabilities that affect communication.

- G. *Staff shall ensure that they effectively communicate all written notices to persons with disabilities that affect communication. For example, staff may need to read a written notice to blind or low-vision incarcerated people or provide such notices in large print.*

The revised and implemented Custody & Court Operations Manual (CCOM) 8000 Inmates with Disabilities policy states, "Some inmates who are deaf and/or hard of hearing, blind or with low vision may not be able to hear announcements, alarms, or read written notices in the unit. These impairments will be listed on the Functional Needs List and the ADA Tracking List. Depending on the inmate's level of impairment, staff assigned to housing units with inmates who are deaf and/or hard of hearing, blind, or with low vision should use the following techniques for instructions, announcements, alarms, and written notices.

- Prioritize the inmate's evacuation.
- Whiteboard/written notes
- Speak one-on-one in an elevated, clear voice.
- Speak closely enough to allow the inmate to lip-read.
- Read the written notice.
- Provide the notice in large print."

However, five (5) disabled incarcerated persons with disabilities that affect communication stated that staff does not always provide the accommodations of reading documents and providing large print notices/material. Some stated they must rely on other incarcerated persons to fill out pink slips and commissary forms. Two (2) incarcerated persons stated that the ADA Deputy is the only staff that provides assistance. The Expert could not confirm these claims.

The ADA STC PowerPoint includes the following language, "Accommodating Visual Impairments: Assist with filling out paperwork (message slips/commissary forms)." However, other than the ADA Unit staff effectively communicating with the incarcerated person during the ADA orientation process, the County did not produce proof of practice documentation where staff effectively communicated written notices to incarcerated persons with disabilities that affect communication. The Expert will monitor this during the next monitoring tour.

The County reports that staff have been reminded to document in the guard station log when they effectively communicate written notices to persons with disabilities that affect communication.

Based on this, the Expert finds the County has partially implemented the RP requirement. With the rollout of ServiceNow, the County must ensure the functionality for all staff to document the effective communication staff provided for all verbal announcements to persons with disabilities that affect communication is included.

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: The Expert recommends that the County provide proof of practice that staff effectively communicate written notices to persons with disabilities that affect communication.

N. Searches, Restraints, and Count (Section XIV)

- A. *The County shall ensure that incarcerated people with disabilities, including those with prosthetic limbs, receive reasonable accommodations with respect to the following:*
1. *All searches, including pat searches and searches without clothing;*
 2. *Application of restraint equipment; and*
 3. *During counts.*
- B. *Incarcerated persons with disabilities who cannot be restrained, searched, or counted using the standard methods/processes, including but not limited to persons with certain mobility or upper extremity disabilities, using HCA/AD/DME, using prosthetic limbs, and in need of Effective Communication accommodations, must be provided reasonable accommodations.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

Although monitoring is suspended for this provision, during the incarcerated person interviews, three (3) disabled incarcerated persons reported that staff do not provide accommodations when applying restraints. The Expert was not able to confirm these claims.

Recommendations:

Although monitoring is suspended for this provision, the Expert recommends that the County establish a uniform procedure for staff to accommodate disabled incarcerated persons when restraints are applied so they can use their assistive device and ambulate safely.

O. Transportation (Section XV)

- A. *The County shall provide reasonable accommodations for persons with disabilities when they are in transit, including during transport to court, between Jail facilities, or to outside health care services.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

Although monitoring is suspended for this provision, during the review of the ADA Interview/Activity Logs, the following entry was noted:

- Stated when going to court staff makes him use the bus instead of proper SUV transportation. ADA Deputy sent out staff email to make sure he is being transported properly in the future.

B. Prescribed HCA/AD/DME, including canes, for persons with disabilities shall be available to the person at all times during the transport process.

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

C. The County shall use accessible vehicles to transport persons whose disabilities necessitate special transportation, including by maintaining a sufficient number of accessible vehicles. For scheduled transportation (e.g., court appearances and non-emergency outside medical appointments), the County shall schedule the accessible transportation in advance. The County shall ensure that, to the greatest extent practicable, persons who require accessible transportation are not required to wait longer for transportation than people who do not require accessible transportation. The County shall ensure that transportation staff does not ask persons who require accessible transportation to accept inaccessible transportation.

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

D. Persons with mobility impairments shall, when necessary, be provided staff assistance getting on and off transport vehicles.

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

P. ADA Training, Accountability, and Quality Assurance (Section XVI)

A. The County shall ensure all custody, health care, and other Jail staff receive annual ADA training appropriate to their position.

1. The County shall provide to all staff appropriate training on disability awareness, including the use and purpose of accommodations and modifications in accordance with the ADA and other federal and state disability law.

2. *The County shall provide to all staff appropriate training on Trauma-Informed Care, which will be included in the ADA training and Crisis Intervention Training (CIT).*
3. *The ADA training shall include: formalized lesson plans and in-classroom or real-time virtual training for staff (including managers, supervisors, and rank-and-file staff) provided by certified or otherwise qualified ADA trainers. Self-directed study may be paired with real-time ADA training.*
4. *CHS and OCSD staff shall receive periodic training on the range of potential accommodation and adaptive support needs of people with Intellectual/Developmental Disabilities.*

The County produced the following OCSD training documents:

- 2 HR ADA STC Color Handouts
 - Attachment A for ADA Action Plan
 - ADA Tracking List
 - ADA Tracking List Log Instructions
 - ADA Effective Communication Form
 - Housing Unit Orientation
 - Safety and Security Assessment Form
- Americans With Disabilities Act (2-Hour Lesson Plan)
- Americans With Disabilities Act STC PowerPoint Presentation (80 slides) Revised 1/1/25

The training material includes training on disability awareness, including the use and purpose of accommodations and modifications in accordance with the ADA and other federal and state disability law. Trauma-informed care is also included in the ADA training curriculum. The Americans With Disabilities Act PowerPoint Presentation includes a segment on the adaptive support needs of incarcerated people with Intellectual/Developmental Disabilities. The Expert notes that the ADA training is provided as formal classroom training.

They produced an Excel spreadsheet "STS ADA 7/1/24 to 1/1/25, that reflects 607 staff (Deputy Sheriff I, Deputy Sheriff II, Deputy Sheriff Trainee, Sergeant, Sheriff Correctional Service Assistant, Sheriff Special Officer I, and Sheriffs Special Officer II). The County also produced the OCSD Transportation Bureau ADA Training Roster, which reflects 56 staff who attended the training, and the Introduction to Corrections rosters, which reflect 81 staff who attended the training.

The County produced the following CHS/HCA training sign-in sheets that reflect a total of 472 CHS staff have attended ADA Annual Mandatory Overview and Training.

The Expert had previously reviewed all training material and found that the training includes information on the following:

- Disability awareness, including the use and purpose of accommodations and modifications in accordance with the ADA and other federal and state disability law.
- Trauma-Informed Care.

The Expert previously noted that the training includes formalized lesson plans and in-classroom or real-time virtual training for staff. Staff who have attended the training include managers, supervisors, and rank-and-file staff. The Expert notes that the training is provided by certified ADA trainers. The Expert also notes that the training includes the information on accommodations and adaptive support needs of people with Intellectual/Developmental Disabilities.

The Expert notes that four (4) CHS staff have attended and completed the ADA Coordinator certification.

All staff interviewed reported they had attended the annual 2-Hour Americans With Disabilities Act training.

As noted in the fifth report, two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- B. *ADA instructors shall have appropriate ADA training and subject matter expertise necessary to effectively provide ADA training to staff.*

Two previous successive Compliance Reports have found that the provision has been adequately implemented. Therefore, monitoring of this provision is suspended.

Monitoring Suspended Based on Previous Findings of Compliance (Previous Rating Monitoring Suspended Based on Previous Findings of Compliance)

- C. *The County shall, in consultation with Counsel and the joint Expert, develop and implement written policies and procedures regarding monitoring, investigating, and tracking staff violations (or allegations of violations) of ADA requirements and Jail ADA policies.*

The County reported that County Counsel will prepare a summary of OCSD's current policies and procedures for staff accountability. The County believes the current policies and procedures satisfy the requirements of the Remedial Plan.

The County previously produced the following documents:

- Orange County Sheriff-Coroner Department, Orange County SD Policy Manual Policy 1001, Code of Professional Conduct and Responsibility for Peace Officers
- Orange County Sheriff-Coroner Department, Orange County SD Policy Manual Policy 1018 Rules of Conduct – General
- Orange County Sheriff-Coroner Department, Orange County SD Policy Manual Policy 347 Disciplinary Policy
- Custody & Court Operations Manual (CCOM) 1600.5 – Inmate Grievance Procedure

The Health Care Agency (HCA) Correctional Health Services (CHS) Policy and Procedure 6407 Reasonable Health Accommodations for Patients with Disabilities states, "CHS staff may be subject to HCA's disciplinary process if found in violation of ADA or Jail ADA-related policies and procedures." The Health Care Agency (HCA) Correctional Health Services (CHS) Policy and Procedure 1007 Staff Accountability (Effective Date 10-13-23) states, "Every staff member is responsible and held accountable for following Health Care Agency's (HCA) Code of Conduct, Correctional Health Services (CHS) policies and procedures, standardized protocols, and guidelines. In addition, they are responsible for adhering to the security/safety rules and procedures established by the Orange County Sheriff's Department (OCSD). Supervisory counseling, consultation, and/or progressive discipline, in coordination with HCA Human Resources (HR), may occur when CHS staff fail to comply with or fail to remain updated on current policies and procedures, standardized protocols, guidelines, or OCSD's security/safety rules and procedures." The policy also states, "CHS Administrative and Supervisory staff or assigned designee(s) conduct audits of and track occurrences of staff violations of policy.

- a) Examples of audits include but are not limited to policy and legal violations related to Americans with Disabilities Act (ADA) requirements, provision of disability accommodations and effective communication, and prevention of LGBTQI/transgender/intersex-based discrimination.
- b) Occurrences of staff violations include but are not limited to documentation of a performance management issue found within the staff member's individual drop file."

The CHS produced the ADA-CHS Accountability Log that includes 30 entries for staff who did not use the Effective Communication form during the patient encounter. OCSD produced a summary of complaints and investigations into five (5) incarcerated persons' grievances regarding allegations of discrimination based on disability. HCA concluded investigations into two of the cases; in two other cases, OCSD investigated and determined the allegations were either unfounded or unsubstantiated.

The OCSD document review revealed cases that were identified as not being in compliance with the Effective Communication Policy and Settlement Agreement. These cases should be identified, and the County must follow the Accountability Policy to correct the non-compliance issues.

The revised and implemented Custody & Court Operations Manual (CCOM) 8000 - Inmates with Disabilities states, "Allegations, from any source, that staff have violated the ADA or Jail ADA-related policies and procedures will be investigated. OCSD staff who OCSD finds have violated the ADA or Jail ADA-related policies and procedures shall be subject to OCSD's progressive discipline policy."

The revised and implemented Custody & Court Operations Manual (CCOM) 8000 - Inmates with Disabilities includes language that OCSD staff who OCSD finds have violated the ADA or Jail ADA-related policies and procedures shall be subject to OCSD's progressive discipline policy, the policies and procedures do not include a process for monitoring, investigating, and tracking staff violations (or allegations of violations) of ADA requirements and Jail ADA policies. The County must, in consultation with Counsel and the Expert, develop and implement written policies and procedures regarding monitoring,

investigating, and tracking staff violations (or allegations of violations) of ADA requirements and Jail ADA policies as required by the RP. During the onsite monitoring tour, the OCSD management team raised concerns based on the Public Safety Officers Procedural Bill of Rights Act (POBAR), with maintaining a log with certain information and specific custody staff identifiers for monitoring purposes of allegations and investigations of alleged violations of the RP. The Expert notes that OCSD is not using (or has not provided) a specific accountability log/tracking element pertaining to staff violations as required by the RP provision. However, the Expert understands the County's concerns with the POBAR. The comprehensive accountability plan should include a method to track violations of ADA and the Jails ADA policies, including historical data. This will assist the County in identifying trends, including staff repeat offenders. The parties must confer on a process that can be put in place to satisfy the RP requirements and not violate the POBR.

Based on this, the Expert finds the County has partially implemented the RP requirements.

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: The Expert recommends that the County ensure the County finalizes and implements the OCSD written policies and procedures for monitoring, investigating, and tracking staff violations (or allegations of violations) of ADA requirements and Jail ADA policies.

- D. The County shall develop an ADA accountability plan intended to timely log and investigate allegations from any source that staff has violated the ADA or Jail ADA-related policies and procedures. OCSD staff who OCSD finds have violated the ADA or Jail ADA-related policies and procedures shall be subject to OCSD's progressive discipline policy. CHS staff who the Health Care Agency finds to have violated the ADA or Jail ADA-related policies and procedures shall be subject to the Health Care Agency's discipline policy.*

County Counsel prepared a summary of OCSD's current policies and procedures for staff accountability. The County believes the current policies and procedures satisfy the requirements of the Remedial Plan.

The revised and implemented Custody & Court Operations Manual (CCOM) 8000 - Inmates with Disabilities states, "Allegations, from any source, that staff have violated the ADA or Jail ADA-related policies and procedures will be investigated. OCSD staff who OCSD finds have violated the ADA or Jail ADA-related policies and procedures shall be subject to OCSD's progressive discipline policy. CHS staff who the Health Care Agency finds to have violated the ADA or Jail ADA-related policies and procedures shall be subject to the Health Care Agency's discipline policy."

The Health Care Agency (HCA) Correctional Health Services (CHS) Policy and Procedure 6407 Reasonable Health Accommodations for Patients with Disabilities states, "CHS staff may be subject to HCA's disciplinary process if found in violation of ADA or Jail ADA-related policies and procedures." The Expert also notes that Health Care Agency (HCA) Correctional Health Services (CHS) Policy and Procedure 1007 Staff Accountability (Effective Date 10-13-23) states, "Every staff member is responsible and held accountable

for following Health Care Agency's (HCA) Code of Conduct, Correctional Health Services (CHS) policies and procedures, standardized protocols, and guidelines. In addition, they are responsible for adhering to the security/safety rules and procedures established by the Orange County Sheriff's Department (OCSD). Supervisory counseling, consultation, and/or progressive discipline, in coordination with HCA Human Resources (HR), may occur when CHS staff fail to comply with or fail to remain updated on current policies and procedures, standardized protocols, guidelines, or OCSD's security/safety rules and procedures." The policy also states, "CHS Administrative and Supervisory staff or assigned designee(s) conduct audits of and track occurrences of staff violations of policy.

- c) Examples of audits include but are not limited to policy and legal violations related to Americans with Disabilities Act (ADA) requirements, provision of disability accommodations and effective communication, and prevention of LGBTQI/transgender/intersex-based discrimination.
- d) Occurrences of staff violations include but are not limited to documentation of a performance management issue found within the staff member's individual drop file."

The CHS produced the ADA-CHS Accountability Log that includes 30 entries for staff who did not use the Effective Communication form during the patient encounter.

OCSD produced a summary of complaints and investigations into five (5) incarcerated persons' grievances regarding allegations of discrimination based on disability. HCA concluded investigations into two of the cases; in two other cases, OCSD investigated and determined the allegations were either unfounded and unsubstantiated.

The OCSD document review revealed cases that were identified as not being in compliance with the Effective Communication Policy and Settlement Agreement. These cases should be identified, and the County must follow the Accountability Policy to correct the non-compliance issues. Additionally, in a review of the 1,002 ADA Interview/Activity Logs the County produced, the following entry was noted, "made allegations that some housing staff are harassing him and trying to fight him. He started to get irritated and just complained about housing staff and refused to answer the rest of the interview questions. Sgt. XXXX was made aware of the situation." This case was not produced by the County.

The revised and implemented Custody & Court Operations Manual (CCOM) 8000 - Inmates with Disabilities includes language that OCSD staff who OCSD finds have violated the ADA or Jail ADA-related policies and procedures shall be subject to OCSD's progressive discipline policy and the Health Care Agency (HCA) Correctional Health Services (CHS) Policy and Procedure 6407 Reasonable Health Accommodations for Patients with Disabilities includes language that CHS staff may be subject to HCA's disciplinary process if found in violation of ADA or Jail ADA-related policies and procedures. However, OCSD has not formalized a process and has not created a mechanism to log allegations where it is alleged that staff violated the ADA or Jail ADA-related policies and procedures as required by the RP. The County reported that based on the Peace Officers Bill of Rights (POBR), the County cannot maintain a log related to custody staff disciplinary issues. The parties must confer on a process that can be put in place to satisfy the RP requirements and not violate the POBR.

Based on this, the Expert finds the County has partially implemented the RP requirements.

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: The Expert recommends that the County ensure the County finalizes and implements the ADA accountability plan to timely log and investigate allegations from any source that staff has violated the ADA or Jail ADA-related policies and procedures. Ensure violations of the ADA or Jail ADA-related policies and procedures are logged and tracked and follow the CHS/OCSD progressive discipline policy.



V. Signature

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

A handwritten signature in black ink, appearing to read "Julian Martinez", is written over a horizontal line.

Julian Martinez
Director
Sabot Consulting

August 4, 2025

Date