



Agreement Between Orange County and Disability Rights California

Expert Monitor's Report (Seventh Round)

Rights of People With Disabilities

On-Site Review: Review: August 25 - 29, 2025

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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 successive Compliance Reports have found that the provision has been adequately implemented.

III. Executive Summary

This is the seventh 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 seventh round of monitoring focused on the Theo Lacy Facility (TLF), Central Men's Jail (CMJ), Central Women's Jail (CWJ), the Intake Release Center & Transportation (IRC), and the James A. Musick Facility (JAMF). The on-site Monitoring Review was conducted from August 25 – 29, 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.

An entrance meeting was conducted with representatives from the County of Orange (Orange County Jail Administration and staff from the County Counsel's Office). A meeting was also conducted with representatives from HCA CHS. In addition, DRC Representatives were also present during the meeting and during portions of the monitoring tour. An exit meeting was conducted via Zoom on September 11, 2025, 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 were 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 previously implemented 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 seventh 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 correlate to their respective job duties.

As this was the seventh monitoring tour, elements of the Settlement Agreement and RP that were found “Adequately Implemented” in the previous six 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 1200 – (Classification), CCOM 1602.5 (Discipline), and CCOM 8000.13, requiring sergeants to review and sign all Adaptive Support Needs Logs for their area of supervision on a weekly basis and address any incomplete or deficient logs immediately.
- The Jail Compliance and Training Team (JCATT) developed a knowledge base training for the Adaptive Support Needs Log.
- Revised the Response To Inmate/Detainee Grievance response template to include the language “If you do not agree with the response to your grievance, you can appeal the grievance. To file an appeal, you must follow the same rules for filing an initial grievance. Any appeal must be submitted within 14 days of receiving the grievance response you are appealing. You must include the original jail incident number from the top right corner of the initial grievance. You must mark the form “APPEAL.” You will have exhausted your appeal after the division commander has reviewed your appeal. If you do not speak English or have a learning or other disability, jail staff will, upon request, help you with any appeal.”
- Made some efforts to implement group programming in the Mental Health Chronic Sectors.
- Fully implemented the Guardian RFID for staff safety checks and incarcerated person movement.
- Did not house any incarcerated persons in the Sheltered Living (SL) cells during the rating period.
- Continued the process of program facilitators providing and documenting accommodations during programming.

- Continued conducting program recruitment of disabled incarcerated persons housed on the Mod O (CMJ/TLF).

Additionally, the County continues to have 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 also continues to have 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 also has a Mental Health staff member at each facility designated to coordinate ADA-related issues as part of the ADA team. The County 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 continue to be engaged with staff and the disabled incarcerated persons in implementing the requirements of the RP. 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, 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 provisions of the ADA Remedial Plan:

- Adequately Implemented – 7
- Partially Implemented – 34
- Not Implemented – 0
- Un-ratable – 0
- Not Assessed – 0
- Monitoring Suspended Based on Previous Findings of Compliance - 74

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 is 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. Recommendations: The Expert recommends that the County finalize the revisions to 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 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	PI	PI
II.B.	Requirements of the ADA tracking system Recommendation: See recommendation II.A above	PI	PI
II.C.	Tracking System is 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 is 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	MS
III.B.	During medical intake screening, Identification of a person’s disability is based on self-identification, health record, staff observation, and request of a third party	MS	MS
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 the 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 an orientation video in an accessible format, including Spanish	MS	AI
IV.C.	Information from the orientation process was communicated effectively	MS	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 Recommendations: The Expert recommends that the County ensure that clinical and custody staff provide the preferred method of communication for clinical and due process encounters, with a particular focused effort on cases where the incarcerated person's preferred method of communication is through a Sign Language Interpreter (SLI). The Expert also recommends that the County continue to conduct audits and, when cases are identified where an SLI was not utilized when required, take corrective action to ensure an SLI is being appropriately provided	PI	PI
V.B.	Assessment of Effective Communication needs	MS	MS
V.C.	Primary consideration of the Effective Communication preference Recommendations: The Expert recommends that the County ensure that clinical and custody staff give primary consideration to the incarcerated persons' preferred method of communication, with a particular focused effort on cases where the incarcerated person's preferred method of communication is through a Sign Language Interpreter (SLI). The County should continue with further training and the use of existing quality assurance procedures (audits) to ensure that staff appropriately and consistently utilize an SLI when indicated.'	PI	PI

V.D.	<p>Provision of auxiliary aids and services when simple written or oral communication is not effective.</p> <p>Recommendations: The Expert recommends that the County ensure that clinical and custody staff provide 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 an SLI was not utilized when required, take corrective action to ensure an SLI is being appropriately provided</p>	PI	PI
V.E.	<p>Provision of Effective Communication for programs, services, and activities</p> <p>Recommendations: The Expert recommends that the County ensure that clinical and custody staff provide the preferred method of communication for clinical and due process encounters, with a particular focused effort on cases where the incarcerated person's preferred method of communication is through a Sign Language Interpreter (SLI). Provide the Expert with the proof of practice for Effective Communication documentation by program staff, again with a focus on SLI provision. 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</p>	PI	PI
V.F.	<p>Requirements of Effective Communication for Due Process Events and Clinical Encounters</p> <p>Recommendation: See recommendation V.A. above</p>	PI	PI
V.G.	<p>Checking the ADA Tracking System to identify Effective Communication needs, provision of Effective Communication, and documentation of Effective Communication</p> <p>Recommendation: See recommendation V.A. above</p>	PI	PI
V.H.	<p>Lip reading is generally not used as a means of Effective Communication. If the preferred method is lip reading, staff must speak slowly and loudly</p>	MS	MS
V.I.	<p>Logging use of SLI</p> <p>Recommendation: See recommendation V.A. above</p>	PI	PI
VI.	INTELLECTUAL AND DEVELOPMENTAL DISABILITIES		
VI.A.	Development of OCSD and CHS policies and procedures for Intellectual/Developmental Disabilities	MS	MS
VI.B.	<p>Development of OCSD and CHS policies and procedures for screening for Intellectual/Developmental Disabilities, including cognitive deficits, adaptive supports.</p> <p>Recommendations: The Expert recommends that the County ensure the secondary screening is conducted consistent with the required timeline. Additionally, provide the Expert with the documentation/information as to communications with the Regional Center so the Expert can measure the County's compliance with the RP requirements. The clinician conducting the</p>	PI	PI

	Intellectual/Developmental disability assessment should document how the case was referred for the evaluation (during the intake screening, staff referral post-intake or annual reevaluation), the date the case was referred, and the date the incarcerated person arrived in custody. Contacts with the Regional Center should be done in a timely manner in each case, and not periodically in batches. The recent communications with RCOC suggest that the County is in a position to demonstrate meaningful progress in this area in the next round. Dates and content of those communications for each case should be documented for this expert and for internal quality assurance purposes.		
VI.C.	Monitoring individualized plans 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. Recommendations: The Expert recommends that the County ensure staff (CJX and TLF) provide and document the adaptive supports, prompts, assistance, and reminders on the Housing Unit Adaptive Support Log	PI	PI
VI.F.	Access to easy reading books for Intellectual/Developmental and learning-disabled individuals	MS	MS
VI.G.	Provision of discharge planning Recommendation: Although the County has adequately implemented this provision, the Expert recommends that the TLF Behavioral Counselor I provide a resource package to the incarcerated persons as part of the discharge planning	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 the 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 an equivalent alternative jail-issued device when HCA/AD/DME is removed 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	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	MS
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 an 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 the provision of HCA/AD/DME upon release	MS	MS
VIII.	HOUSING PLACEMENTS		
VIII.A.	Housing of disabled persons in the most integrated setting 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 that the ADA Tracking List clearly notes in the accommodation section of the list that the incarcerated person's accommodations are "no stairs in the path of travel"	PI	PI
VIII.B.	Equivalent access to out-of-cell time, programs, services, and activities 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: <ul style="list-style-type: none"> Dayroom and out-of-cell time 	PI	PI

	If used as recreation space, the County must ensure disabled incarcerated persons who are prescribed wheelchairs have equal access to the recreation space adjacent to Barracks G and H		
VIII.C.	Housing assignment system utilizing information in the ADA Tracking System	MS	MS
VIII.D.	Placement of disabled persons by Classification 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: <ul style="list-style-type: none">• Dayroom and out-of-cell time Install the grab bars in the TLF showers.	PI	PI
VIII.E.1.	Deactivation of Sheltered Living cells	AI	AI
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 the Central Men's Jail yard	MS	MS
VIII.G.	Quality Assurance Audits to ensure housing accommodations	MS	MS
VIII.H.	Development of a process to expeditiously move people to accessible housing	MS	MS
IX.	ACCESS TO PROGRAMS, SERVICES, AND ACTIVITIES		
IX.A.	Provision of information and provision of equal access to programs, services, and activities Recommendations: The Expert recommends that the County ensure the disabled incarcerated persons are provided the required out-of-cell time. Ensure that the disabled incarcerated persons are provided access to religious and educational program opportunities. Ensure that the disabled incarcerated persons are provided with accommodations to access visiting. The County explore expanding program opportunities in Mods that currently are only provided MAT and religious programs	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	AI	AI
IX.E.1.	Logging and tracking of out-of-cell time, program participation, including acceptance, refusals, and the amount 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	PI	NI

	out-of-cell opportunity, the amount of time spent out-of-cell or at outdoor recreation		
IX.E.2.	ADA Unit interviews of disabled persons on a monthly basis	MS	MS
IX.E.3.	Annual review of structured programs	AI	PI
X.	ACCESS TO WORKER OPPORTUNITIES		
X.A.	Equitable work opportunities for disabled incarcerated persons	MS	MS
X.A.1.	Job descriptions and hiring criteria	MS	MS
X.A.2.	Individualized assessment by medical staff to identify work/duty restrictions Recommendations: The Expert recommends that for the next monitoring round, the County produce the medical progress notes for the cases the Expert selects from the cases referred by the Work Deputies and ADA staff	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 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.)	PI	PI
XI.	ACCESS TO COMMUNITY WORK PROGRAM		
XI.A.	Equitable Community Work Program opportunities for disabled incarcerated persons	MS	MS
XI.A.1.	Job descriptions and hiring criteria	MS	MS
XI.A.2.	Individualized assessment by medical staff to identify work/duty restrictions Recommendations: The Expert recommends that, for the next monitoring round, the County produce the medical progress notes for the cases the Expert selects from the CWP Disqualification Log. The County must also 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	PI	PI
XI.A.3.	Consideration of reasonable accommodations by work supervisors with input from incarcerated persons	MS	MS
XI.A.4.	Provision of equitable work opportunities for incarcerated persons with intellectual disabilities with appropriate accommodations	MS	MS
XI.B.	Ending the practice of medical staff not approving people with disabilities' participation in CWP without consideration of essential functions and accommodations	PI	PI

	Recommendation: See the recommendation in section X.A.2 above.		
XI.C.	Provision of reasonable accommodations	MS	MS
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.	AI	PI
XII.D.2.	Grievance responses within fourteen days Recommendations: The Expert recommends that the County document the date when the written response to the grievances is <u>provided</u> to the incarcerated person and ensure this occurs within 14 days of the receipt of the grievances. The County should also continue to work toward a solution, including through use of Axon Standards for grievances, regarding the ADA unit's notification, tracking, and management of ADA grievances that are "handled as inmate request."	PI	PI
XII.D.3	When the County is unable to resolve a grievance within fourteen days. Recommendations: The Expert recommends that the County, 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: The Expert recommends that the County ensure the grievance responses include: <ul style="list-style-type: none"> • Whether the grievance is granted, in whole or in part, 	PI	PI

	<ul style="list-style-type: none"> 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) 		
XII.D.5.	Input from OCSD and CHS when responding to grievances	AI	AI
XII.D.6.	Interview by the ADA Unit regarding requests for accommodation	AI	AI
XII.D.7.	<p>Inclusion of the process for appealing the grievance response</p> <p>Recommendation: Ensure all grievance responses include an explanation of the process for appealing the grievance response.</p>	AI	NI
XII.D.8.	<p>Effective communication of grievance or appeal responses</p> <p>Recommendations: The Expert recommends that the County ensure staff effectively communicate all grievance and appeal responses to the grievant/appellant and document the communication method(s) used and their effectiveness</p>	PI	PI
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 are 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 a list of persons with disabilities who 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.	<p>Effective communication of announcements</p> <p>Recommendation: The Expert recommends that the County provide proof of practice that staff effectively communicate verbal announcements to persons with disabilities that affect communication</p>	PI	PI
XIII.G.	<p>Effective communication of all written notices</p> <p>Recommendations: The Expert recommends that the County provide proof of practice that staff effectively communicate written notices to persons with disabilities that affect communication</p>	PI	PI
XIV.	SEARCHES, RESTRAINTS, AND COUNT		
XIV.B.	<p>Provision of accommodations during searches, application of restraints, and count</p> <p>Recommendations: Although monitoring is suspended for this provision, the Expert recommends that the County establish a uniform procedure for staff to accommodate disabled incarcerated</p>	MS	MS

	persons when restraints are applied so they can use their assistive device and ambulate safely		
XV.	TRANSPORTATION		
XV.A.	Provision of accommodations when in transit	MS	MS
XV.B.	Availability of prescribed ACA/AD/DME during the 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.	Policies and procedures for monitoring, investigating, and tracking staff violations (or allegations of violations) of ADA requirements and Jail ADA policies 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 once the Axon Standards software is rolled out	PI	PI
XVI.D.	Development of an ADA accountability plan Recommendations: The Expert recommends that the County implement the ADA accountability plan to timely log and investigate allegations from any source that staff have violated the ADA or Jail ADA-related policies and procedures once the Axon Standards software is rolled out. Ensure violations of the ADA or Jail ADA-related policies and procedures are logged and tracked, and follow the CHS/OCSD progressive discipline policy	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. CCOM 1200 (Classification) and 1602.5 (Discipline) are being finalized after review by DRC and Sabot. 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 CCOM 1200 (Classification) and 1602.5 (Discipline). In addition, CCOM 8000 - Inmates with Disabilities was revised to include the requirement for sergeants to review and sign all Adaptive Support Need Logs for their areas of supervision on a weekly basis and to address any incomplete or deficient logs immediately. The County also reported that policy revisions are ongoing, and that the

Grievance policy will be revised in the near future. The Expert notes that there are a few policies that still require revision to meet the RP requirements. However, policies that have already been revised policies (CCOM 8000) get periodic/as-needed revisions. This shows that the County has a well-functioning policy review/update process in place.

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 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 persons’ disabilities and their specific accommodation needs (“Existing ADA Tracking System”).*

The County reports that ServiceNow and Guardian RFID (collectively “Jail Management System” or “JMS”) has many modules that will contribute to ADA tracking. Guardian RFID was previously rolled out for tracking safety and security checks, outdoor rec, and dayroom, and has expanded to include out-of-cell time, to include individual tracking. This standardization will assist OCSD with compliance with the Remedial Plan. OCSD will also continue to conduct audits and address deficiencies with training.”

During the previous on-site monitoring tour, the County reported that the SOMA application is being transitioned to ServiceNow and will be managed and supported by the OCSD IT Services. During the monitoring tour, the County reported that ServiceNow includes over 20 modules that will interface with 30 other databases.

The County also reported that Guardian RFID has been rolled out for tracking safety and security checks, outdoor rec, and dayroom, and has expanded to include out-of-cell time, to include individual tracking. 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 persons’ 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.

The County reported, “JMS has many modules that will contribute to ADA tracking. Guardian RFID was previously rolled out for tracking safety and security checks, outdoor rec, and dayroom, and has expanded to include out-of-cell time, to include individual tracking. This standardization will assist OCSD with compliance with the Remedial Plan. OCSD will also continue to conduct audits and address deficiencies with training.”

Pending the full implementation of ServiceNow, the County continues to use the existing system to track incarcerated persons' 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.

The County reported, "JMS has many modules that will contribute to ADA tracking. Guardian RFID was previously rolled out for tracking safety and security checks, outdoor rec, and dayroom, and has expanded to include out-of-cell time, to include individual tracking. This standardization will assist OCSD with compliance with the Remedial Plan. OCSD will continue to conduct audits and address deficiencies with training."

Pending the full implementation of ServiceNow, the County continues to use the existing system to track incarcerated persons' 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.*

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. *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.*

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. *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.

The County reported, “JMS has many modules that will contribute to ADA tracking. Guardian RFID was previously rolled out for tracking safety and security checks, outdoor rec, and dayroom, and has expanded to include out-of-cell time, to include individual tracking. This standardization will assist OCSD with compliance with the Remedial Plan. OCSD will continue to conduct audits and address deficiencies with training. The new forms will be implemented after OCSD and CHS update all policies to reflect the change in forms.”

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 is continuing work on revising 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. To date, the County has not implemented the revised forms.

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.

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. The County should also ensure appropriate training of relevant staff 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.*

As noted in the sixth 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. *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.*

As noted in the sixth 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)

- 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 health care 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 a 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 encounters. The CHS policy also requires medical staff to access the ADA Tracking System or the 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).

During the previous tour, the CHS leadership reported 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 was not reviewed by the Expert during this on-site review and 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 32 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:

- In 25 cases, the incarcerated persons had the following disabilities, and their preferred method of communication was as follows:
 - Twenty cases with a hearing disability and their preferred method of communication was one of the following: PocketTalker, speak loudly, speak slowly, speak loud and clear, hearing aids, and speak loud and slowly. In all medical encounters (medical, dental mental health) for this group, Effective Communication was provided and documented by medical staff.
 - Five (5) cases with an intellectual/developmental disability, and their preferred method of communication is speak slow or speak clearly. In all medical encounters (medical, dental mental health) for this group, Effective Communication was provided and documented by medical staff.
- An incarcerated person with a hearing disability (preferred method of communication ASL) – Of the six (6) medical encounters, an SLI/VRI was provided in three (3) encounters, written communication was provided in one (1), verbal communication was provided in one (1), and an Effective Communication form was not completed in one (1).
- An incarcerated person with a hearing disability (preferred method of communication ASL) – Of the 29 medical encounters, an SLI/VRI was provided in 17 encounters, written communication was provided in 11, and verbal communication was provided in one (1).
- An incarcerated person with a hearing disability (preferred method of communication ASL) – Of the four (4) medical encounters, an SLI/VRI was provided in two (2) encounters, lip reading was provided in one (1), and speech reading was provided in one (1).
- An incarcerated person with a hearing disability (preferred method of communication Certified Deaf Interpreter [CDI]) A Certified Deaf Interpreter is needed when a deaf person's communication needs are not adequately met by a hearing interpreter alone, such as in complex situations like due process or medical encounters, or when the deaf person uses a non-standard sign language. CDIs are crucial for bridging cultural and linguistic gaps, especially for deaf individuals with limited language skills, visual impairments, or who use a different signed language, ensuring accurate and effective communication. – Of the 31 medical encounters, a CDI/VRI was provided in eight (8) encounters (two in-person CDI), VRI was provided in seven (7), five (5) used hand gestures, five (5) had the VRI/interpreter not available, three (3) not indicated, one (1) refused VRI, and two (2) provided a Vietnamese interpreter.
- An incarcerated person with a hearing disability (preferred method of communication ASL) – Of the 12 medical encounters, an SLI/VRI was provided in eight (8) encounters, written communication was provided in two (2), and Deputy assistance was provided in two (2).
 - 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 nine (9) medical encounters, an SLI/VRI was

provided in five (5) encounters, written communication was provided in one (1), speaking clearly and slow was provided in two (2), and Cellie helped with sign in one (1) case.

- There are significant HIPAA and adequacy-of-care concerns when using incarcerated persons as interpreters in a medical encounter.

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 continues to recommend that additional training of staff on the policy be provided, including the requirements to check and utilize the Effective Communication alert (SLI/ASL/VRI) for patients' Effective Communication needs in the EHR, and provision of the patient's primary/preferred method of communication.

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 1,688 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 (343)
- ADA Interview (609)
- Classification (236)
- Grievance (5)
- Intake ID/New charges (264)
- Release (220)
- Rules Violation (8)
- Other
 - Use-of-force (1)
 - Work Orientation (1)
 - Message Slip response (1)

A review of the Effective Communication forms for the incarcerated persons whose preferred method of communication is ASL/VRI revealed the following:

- Two (2) cases where classification staff used written communication.
- Three (3) cases where the Effective Communication form was not provided for the release process.
- One (1) case where the Effective Communication form was not provided for the classification process.

- One (1) case where the Effective Communication form was not provided for the housing unit orientation process.
- One (1) case where lip reading was used during the intake process (was on hold for VRI for 20 minutes)
- One (1) case where lip reading was used during the housing unit orientation.
- One (1) case where the use of hand gestures was used during the intake process.

There were four (4) encounters for Classification, three (3) encounters for release, five (5) encounters for housing unit orientation, and five (5) encounters for the ADA Interviews.

The ADA Compliance Unit staff consistently provides and documents Effective Communication for all communication disabilities. However, staff who conduct the housing unit orientation, Classification staff, Intake/ID staff, and release staff do not consistently provide the preferred method of communication (ASL/VRI) as required by the RP.

The County reported that OCSD is continuing to train staff to ensure compliance with effective communication requirements for due process encounters. OCSD is performing audits to ensure effective communication is being provided during due process events and is taking corrective action when necessary (e.g., following up with staff and providing reminders). The County also reported that CHS is continuing to train staff to ensure compliance with effective communication requirements for clinical encounters. CHS is performing audits to ensure effective communication is being provided during clinical encounters and is taking corrective action when necessary.

An issue that arose during the monitoring tour was at times staff face wait times when using the VRI service. During the on-site review, although custody staff started the VRI program so the Expert and DRC could communicate with the incarcerated person, there was a delay before an interpreter became available, and the Expert and DRC had to postpone the interview. In addition, an incarcerated person required CDI but one was not available. County staff confirmed that at times there are delays waiting for VRI interpreters. During the exit interview the County reported it is aware of this issue and considering options.

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 staff provide the preferred method of communication for clinical and due process encounters, with a particular focused effort on cases where the incarcerated person's preferred method of communication is through a Sign Language Interpreter (SLI). The Expert also recommends that the County continue to conduct audits and, when cases are identified where an SLI was not utilized when required, take corrective action to ensure an 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 OCSD is continuing to train staff to ensure compliance with effective communication requirements for due process events. OCSD is performing audits to ensure effective communication is being provided during due process events and is taking corrective action when necessary (e.g., following up with staff and providing reminders). The County also reported that CHS is continuing to train staff to ensure compliance with effective communication requirements for clinical encounters. CHS is performing audits to ensure effective communication is being provided during clinical encounters and is taking corrective action when necessary.

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

EC FORM COMPLIANCE (CHS)					
Month	Population With EC Flag	Encounters	EC form	EC Form Missing	Compliance (%)
January	45	812	684	128	84%
February	45	787	755	32	96%
March	60	788	752	36	95%
April	62	914	834	80	91%
May	65	906	851	55	94%
June	59	699	664	43	95%



Progress of the Settlement Agreement Between County of Orange and Disability Rights California – Rights of People With Disabilities August 25 - 29, 2025

EC ASL/SLI Primary Method Compliance						
Timeframe	Patient	Encounters	EC Form		EC Form Compliance	Primary Method Compliance
Jan-Jun	XXXX	26	25		96%	73%
			Primary (Y)	Primary (N)		
			19	6		
	XXXX	10	10		100%	30%
			Primary (Y)	Primary (N)		
			3	7		
	XXXX	2	2		100%	100%
			Primary (Y)	Primary (N)		
			2	1		
	XXXX	10	5		50%	40%
			Primary (Y)	Primary (N)		
			4	0		
	XXXX	18	15		83%	72%
			Primary (Y)	Primary (N)		
			13	5		
	XXXX	3	3		100%	67%
			Primary (Y)	Primary (N)		
			2	1		
	XXXX	4	4		100%	50%
			Primary (Y)	Primary (N)		
			2	2		
	XXXX	27	27		100%	56%
			Primary (Y)	Primary (N)		
			15	12		
	XXXX	3	3		100%	33%
			Primary (Y)	Primary (N)		
			1	2		
	XXXX	16	16		100%	56%
			Primary (Y)	Primary (N)		
			9	7		

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), further monitoring of implementation, including whether staff consistently give primary consideration to the preference of the incarcerated person with Effective Communication needs (ASL/VRI), 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 give primary consideration to the incarcerated persons' preferred method of communication, with a particular focused effort on cases where the incarcerated person's preferred method of communication is through a Sign Language Interpreter (SLI). The County should continue with further training and the use of existing quality assurance procedures (audits) to ensure that staff appropriately and consistently utilize an SLI when indicated. Post tour, the County reported that CHS is conducting education and currently has another contract with an SLI vendor as a backup. In addition, audits are being conducted.

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 that the VRI was provided for communication during the rating period (Medical):

- January 2025 – 30 occasions – 252 minutes
- February 2025 – 10 occasions – 104 minutes
- March 2025 – No usage
- April 2025 – Eight (8) occasions – 114 minutes
- May 2025 – 17 occasions – 161 minutes
- June 2025 – 14 occasions – 170 minutes

The Expert notes that there were two (2) occasions where an in-person interpreter was provided, and this is not reflected in the VRI/SLI usage log.

The VRI invoices reflect the following (Custody):

- January 2025 – No Usage
- February 2025 – 10 occasions – 73 minutes
- March 2025 – Four (4) occasions – 8 minutes
- April 2025 – One (1) occasion – 21 minutes
- May 2025 – One (1) occasion – 21 minutes
- June 2025 – 4 occasions – 26 minutes

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/documentated for all cases identified as requiring an SLI:

- Classification interview – Of four (4) encounters, one (1) case where VRI was provided. In two (2) cases, staff used written communication, and in one (1) case, the Effective Communication form was not produced.
- Housing Unit Orientation – Of four (4) encounters, two (2) cases where VRI was provided. In one (1) case, the Effective Communication form was not produced, and in one (1) case, lip reading was used.
- ADA Initial/Monthly Interview – Of (3) encounters, in all cases, a VRI was provided.
- Release – Of four (4) encounters, one (1) case where VRI was provided. In three (3) cases, no EC Form was produced.
- Intake – Of four (4) encounters, two (2) cases where VRI was provided. In one (1) case, lip reading was used (was on hold for VRI for 20 minutes), and in one (1) case, hand gestures were used.

To measure the County's compliance with the requirement to provide Effective Communication, the Expert randomly selected 32 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 1,688 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 1,152 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 County reported that OCSD is continuing to train staff to ensure compliance with effective communication requirements for due process events. OCSD is performing audits to ensure effective communication is being provided during due process events and is taking corrective action when necessary (e.g., following up with staff and providing reminders). The County also reported that CHS is continuing to train staff to ensure compliance with effective communication requirements for clinical encounters. CHS is performing audits to ensure effective communication is being provided during clinical encounters and is taking corrective action when necessary.

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 provide sign language interpretation services when oral communication is not effective and SLI is the incarcerated person's preferred method of communication. The Expert also recommends that the County continue to conduct audits and, when cases are identified where an SLI was not utilized when required, take corrective action to ensure an 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 that with this list, they can 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:

- Four (4) 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 other incarcerated persons.

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

The ADA Interview/Activity Logs reflect 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 OCSD is continuing to train staff to ensure compliance with effective communication requirements for due process events. OCSD is performing audits to ensure effective communication is being provided during due process events and is taking corrective action when necessary (e.g., following up with staff and providing reminders). ADA Deputies will continue to notify incarcerated persons with communication disabilities of their availability to assist, as well as how to obtain assistance from housing unit deputies and other staff. OCSD will provide housing unit deputies and staff with a reminder to provide or obtain assistance for incarcerated persons with communication disabilities. The County also reported that CHS is continuing to train staff to ensure compliance with effective communication requirements for clinical encounters. CHS is performing audits to ensure effective communication is being provided during clinical encounters and is taking corrective action when necessary.

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 (ASL/VRI) was not used.

The County provided attendance sheets for the following classes provided by Rancho Santiago Community College ("Rancho"):

- Food Services (Rancho Staff) – ADA Accommodation form for an incarcerated person who is hard of hearing. The ADA Accommodation form reflects "I have ensured that this inmate's accommodations listed on the Class Attendance Roster have been provided."
- Money Matters (Rancho Staff) - ADA Accommodation form for an incarcerated person with a vision impairment. The ADA Accommodation form reflects "I have ensured that this inmate's accommodations listed on the Class Attendance Roster have been provided."
- Workforce Readiness (Rancho Staff) – ADA Accommodation form for an incarcerated person who is hard of hearing. The ADA Accommodation form reflects "I have ensured that this inmate's accommodations listed on the Class Attendance Roster have been provided."
- Accounting (Rancho Staff) – ADA Accommodation form for an incarcerated person who is hard of hearing. The ADA Accommodation form reflects "I have ensured that this inmate's accommodations listed on the Class Attendance Roster have been provided."

The Expert will continue to monitor this provision and requests that the County produce ADA Accommodation forms for staff facilitated by OCSD Programs staff and other programs, such as religious services.

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 staff provide the preferred method of communication for clinical and due process encounters, with a particular focused effort on cases where the incarcerated person's preferred method of communication is through a Sign Language Interpreter (SLI). Provide the Expert with the proof of practice for Effective Communication documentation by program staff, again with a focus on SLI provision. 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 OCSD is continuing to train staff to ensure compliance with effective communication requirements for due process events. OCSD is performing audits to ensure effective communication is being provided during due process events and is taking corrective action when necessary (e.g., following up with staff and providing reminders). The County also reported that CHS is continuing to train staff to ensure compliance with effective communication requirements for clinical encounters. CHS is performing audits to ensure effective communication is being provided during clinical encounters and is taking corrective action when necessary.

To measure the County's compliance with the requirement to provide Effective Communication, the Expert randomly selected 32 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 1,688 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 (in particular, 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 for clinical and due process encounters, with a particular focused effort on cases where the incarcerated person's preferred method of communication is through a Sign Language Interpreter (SLI).

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 32 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 OCSD is continuing to train staff to ensure compliance with effective communication requirements for due process events. OCSD is performing to ensure effective communication is being provided during due process events and is taking corrective action when necessary (e.g., following up with staff and providing reminders). The County also reported that CHS is continuing to train staff to ensure compliance with effective communication requirements for clinical encounters. CHS is performing audits to ensure effective communication is being provided during clinical encounters and is taking corrective action when necessary.

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 (for clinical and due process

encounters, with a particular focused effort on cases where the incarcerated person's preferred method of communication is through a Sign Language Interpreter (SLI).

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 OCSD is continuing to train staff to ensure compliance with effective communication requirements for due process events. OCSD is performing audits to ensure effective communication is being provided during due process events and is taking corrective action when necessary (e.g., following up with staff and providing reminders). The County also reported that CHS is continuing to train staff to ensure compliance with effective communication requirements for clinical encounters. CHS is performing audits to ensure effective communication is being provided during clinical encounters and is taking corrective action when necessary.

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 32 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, there were cases where staff did not document the instances where an interpreter was needed but 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 staff provide the preferred method of communication for clinical and due process encounters, with a particular focused effort on cases where the incarcerated person's preferred method of communication is through a Sign Language Interpreter (SLI).

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.*

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. *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 the OCSD Classification and ADA Compliance Unit staff for appropriate consideration as to housing, work assignments, disciplinary measures, and other relevant matters.*

The County reported that CHS has developed a process to contact and collaborate with the Regional Center and document the referral. This was implemented 4/22/25. A clinician is dedicated to overseeing the process. A log was created to track this process.

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 Behavioral Health Counselor I's interviewed stated that they review all cases identified as having a potential intellectual/developmental disability, *Armstrong* notices for incarcerated persons identified as DD1, DD2, and DD3. Upon notification, they contact the Regional Center, contact the family, and obtain a release of information. The cases are then referred to the psychologist who conducts the evaluations. They also stated that any case where such an evaluation was conducted over one (1) year ago is reevaluated, and all cases in custody are reevaluated annually. After the psychologist completes the evaluation, they update the J105 and J112 and prepare the Adaptive Support Log for custody staff.

The CJX, TLF, and JAMF ADA Tracking Lists produced during the on-site monitoring tour include 30 incarcerated persons identified as Developmentally Disabled and ten (10) pending Intellectual/Developmental disability assessments. The County also produced 88 OCSD CHS J-112s that designated incarcerated persons as "Cognitive Disabled." The County produced a "Regional Center" spreadsheet that reflects 78 Regional Center Contacts. The Regional Center spreadsheet includes the dates the County contacted the Regional Center; however, the Expert notes the County contacted the Regional Center for 24 cases on 5/1/25, 15 cases on 4/22/25, and 18 cases on 5/19/25. It does not appear that the County is contacting the Regional Center timely (i.e., when cases are identified as potentially involving an intellectual/developmental disability).

The Regional Center spreadsheet reflects five (5) cases where it was confirmed that the incarcerated person was a Regional Center client. However, it is not reflected that the County requested the current Individualized Program Plan (IPP).

There have been historical challenges for the County connecting with the Regional Center to obtain information about incarcerated persons with a history of Intellectual/Developmental disability warranting Regional Center Services. During the previous on-site review, the County's Mental Health staff reported that, at times, it was difficult to make contact with the Regional Center staff. In an email dated 8/4/25, the DRC team stated that "The DRC team has been in touch with staff at the Regional Center of Orange County (RCOC), and they are interested in participating in a meeting with DRC, RCOC, and Orange County Jail leadership to discuss how to enhance coordination efforts."

The parties report that on October 21, 2025, CHS and RCOC leadership and DRC together had a productive meeting regarding how to streamline communications and enhance interagency coordination efforts. During this meeting, CHS and RCOC discussed a process to help with identification of potential RCOC clients who are incarcerated and to share IPPs and related information, as available. This is a positive development and the Expert anticipates further progress in this area moving forward. The County reported that CHS has a protocol in place with multiple Regional Center Contacts to ensure timely communication.

During the monitoring round, 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.

There are now three (3) clinicians who conduct the IDD assessments at the Jail. CHS produced 78 completed Intellectual/Developmental disability assessments. However, the Expert notes that only 29 are within the rating period. In a review of the 29 assessments, the Expert found that in one (1) case, the secondary screening was performed within the seven (7) business day requirement. In four (4) cases, there was not sufficient information (date of arrest/referral) for the Expert to determine the County's compliance with the RP's timeliness requirements. The Expert recommends that the clinician clearly document 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 OCSD 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 consistent with the required timeline. Additionally, provide the Expert with the documentation/information as to communications with the Regional Center

so the Expert can measure the County's compliance with the RP requirements. The clinician conducting the Intellectual/Developmental disability assessment should document how the case was referred for the evaluation (during the intake screening, staff referral post-intake or annual reevaluation), the date the case was referred, and the date the incarcerated person arrived in custody. Contacts with the Regional Center should be done in a timely manner in each case, and not periodically in batches. The recent communications with RCOC suggest that the County is in a position to demonstrate meaningful progress in this area in the next round. Dates and content of those communications for each case should be documented for this Expert and for internal quality assurance purposes.

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 will continue to reinforce training and provide reminders regarding the documentation and reviews required of the Adaptive Support Needs Log.

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 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 person's 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 104 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 292 ID/DD Housing Unit Adaptive Support Needs Logs for the months of January 2025 to June 2025. Although there has been improvement in staff logging the required adaptive supports and the supervisor's weekly review, there were still numerous instances where staff did not provide and document the required adaptive supports, and supervisors did not review the logs weekly as required at CJX and TLF.

The Adaptive Support Logs for the JAMF reflect that staff provided and documented the required adaptive supports, and supervisors reviewed the logs weekly as required.

During the on-site review, the Expert found that staff at CJX and TLF are more consistently providing and logging the required adaptive supports, and the supervisors are conducting the required weekly reviews. The Expert expects to see further progress in the next round.

Additionally, there are concerns about the lack of process to provide interim adaptive supports pending an ID/DD evaluation. If certain adaptive support needs are apparent, based on a record review, previous detentions, or other factors, there should be a process to provide those adaptive supports on an interim basis pending completion of the full ID/DD evaluation and adaptive support plan. There is also a concern regarding ID/DD individuals getting and participating in timely clothing exchange outside of the regular clothing exchange process. The IDD Adaptive Supports log includes an item, "Clothing exchange participation (1x/wk)." However, there may be, cases, where more assistance may be needed, including if someone needs to exchange clothing/linens sooner if their clothing/linen get soiled. The Expert will work with the County on establishing a process to ensure these accommodations are provided, when needed.

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 (CJX and TLF) provide and document the adaptive supports, prompts, assistance, and reminders on the Housing Unit Adaptive Support Log.

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.*

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. *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 County reported that "Discharge planning is done for incarcerated persons with Intellectual/Developmental Disabilities by CHS JCRP, although 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 has developed a process to contact and collaborate with the Regional Center and document the referral. This process was implemented 4/22/25. A clinician is dedicated to overseeing the process. A log was created to track this process. Discharge plans and linkage to services are part of the individualized treatment plan.

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 reported that discharge planning for DD/ID is handled by CHS, and OCSD only does discharge planning upon request or by referral.

The CJX Behavioral Health Counselor I's interviewed stated that they conduct discharge planning 30 days before the incarcerated person's release. The Behavioral Counselors provided the Expert with a packet of resource materials that they provide to the incarcerated person. The resource packet includes:

- Department of Rehabilitation - Learn How DOR Can Help You Get A Job Or Grow In Your Career.
- Regional Center of Orange County - Service for Adults
- Regional Center of Orange County – Generic and Community Resources

CHS produced 49 JCRP Discharge Plans for incarcerated persons as “Cognitive Disabled.” The JCRP Discharge Plan referrals to AMAS Older Adult Services, Project Kinship, living arrangements at discharge, food EBT, medications, medical services, and provision of a Resource packet. However, the current discharge planning does not include linkages to housing assistance and community-based service providers. The County must include this resource.

The TLF Behavioral Health Counselor I reported that she conducts discharge planning; however, she does not provide the incarcerated persons with resource material. Additionally, she also reported that discharge planning for the ID/DD population “has been a challenge,” including as to CHS and JCRP coordination. Post tour, the County reported that CHS is reviewing TLF discharge process and resource packets, and the process will align with the process at CMJ/IRC/CWJ.

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

Partially Implemented (Previous Rating Partially Implemented)

Recommendation:

The Expert recommends that the TLF Behavioral Counselor I provide a resource package to the incarcerated persons as part of the discharge planning. The Expert also recommends that CHS coordinate with RCOC to link ID/DD incarcerated persons who have been/can be served by the regional center (e.g., schedule appointment, coordinate community-based services, etc.).

A. 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 OCSD will continue to reinforce training and provide reminders regarding the documentation required on the Safety and Security Assessment form.

The County reports there were 13 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 the review found that in two (2) cases, although CHS staff stated that the removal negatively impacts the health and safety of the inmate and possession of the assistive device is medically necessary, staff did not document that an alternative device was provided.

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 two (2) cases, 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 that the incarcerated person must be provided with.

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 and provide reminders regarding the documentation required on the Safety and Security Assessment form.

The County reports there were 13 cases where Jail staff determined it was necessary to remove an individual's personal HCA/AD/DME for safety and security reasons.

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 two (2) 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.*

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. *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.*

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. Housing Placements (Section VIII)

- C. *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 County reported that the Musick Facility has opened, and incarcerated persons with disabilities are included among those housed at Musick. OCSD is in the process of installing grab bars in non-ADA showers in the Theo Lacy Facility.

OCSD will continue to provide reminders regarding shower chairs and chairs in recreation yards. During the on-site review, there were two Modules activated at the JAMF. Additionally, the County reported that the female population from the CWJ will be relocated to the JAMF.

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 the additional 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
- JAMF Mod A – Sectors 1 and 2 – 16 bunks

- JAMF 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 JAMF brings online additional accessible beds. However, JAMF will house lower-security level incarcerated persons and will not be able to house all incarcerated persons (specifically, higher-security level incarcerated persons) who 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.

During the rating period, no incarcerated persons were housed in Central Men’s Sheltered Living (SL) cells. The last date an SL cell was occupied was 6/9/2024. This continues to be a significant accomplishment.

During the previous 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). To address these issues, the County issued a memo reminding staff to provide chairs in recreation areas. In addition, the County has committed to install grab bars for showers at TLF. The County reports that the Theo Lacy Shower Grab Bar renovations started on December 9, 2025, and are scheduled to go through the end of January. Shower bars are being installed in lower tier showers in all housing areas, with the exception of Module O, which will have bars installed in both upper and lower tier showers. (Although the bars will be installed at an ADA height, they will not

make the showers ADA compliant.) This effort, once implemented, will result in a significant improvement in accessibility and safety for individuals with mobility disabilities who require such accessible features,

In review of the ADA grievances, the Expert found two cases where incarcerated persons filed a grievance related to the need for in-cell accommodations (grab bars) and the showers in IRC Module J, Sector 6, not being ADA compliant.

An issue that arose during the on-site monitoring tour is access to visiting and programming at TLF for disabled incarcerated persons with low-tier housing orders. In the TLF Mods, except for Mod O, incarcerated persons must navigate a flight of stairs to access the visiting and upper tier program areas (classroom). Five (5) mobility disabled incarcerated persons with a low-tier housing order reported that they would not be able to navigate the stairs to access the visiting and program areas on the second tier of the Mods. An incarcerated person reported that while navigating the stairs using his assistive device, he almost fell down the stairs. Another incarcerated person reported that staff informed him of his visit, which was in the upper tier visiting area, and staff instructed him to navigate the stairs. He informed staff that he could not navigate the stairs, and staff then proceeded to use the elevator to provide him access to the visiting area.

Although the ADA Tracking List denotes the housing type (Low Tier) and the incarcerated persons are appropriately housed, the Expert recommends that the ADA Tracking List clearly note in the accommodation section of the list that the incarcerated person's accommodations are "no stairs in the path of travel."

An additional issue was identified at TLF (Barracks H) while interviewing incarcerated persons. A mobility disabled person arrived at the entrance to H Barracks as the Expert was interviewing another incarcerated person. The mobility disabled incarcerated person, who was in a wheelchair, was wheeled towards the Expert. He then used a cane to ambulate out of the wheelchair and walked towards the Expert and had a difficult time walking. At the end of the interview the incarcerated person ambulated into H Barracks with a PMU Deputy (the Expert escort) behind him. The mobility disabled incarcerated person was observed slowly ambulating up the staircase. The PMU staff and the Expert noted he had an active order for a low bunk, it was further discovered he is assigned to Dorm A Bunk #3 but is being forced to the upper tier to sleep by the "house mouse." PMU staff rectified the situation immediately.

Additionally, in review of the 1,152 ADA Interview/Activity Logs the County produced, the following cases were identified:

- Incarcerate person was housed on upper tier in Mod O despite the requirement for low bunk/low tier. Classification and PMU were contacted to make the appropriate housing change. PMU notified ADA Compliance that there is no available housing for him on a lower tier consistent with his needs. They are actively looking for appropriate housing. In the meantime, Mod O staff has been notified that when it is this individual's dayroom time, they will need to escort him down the elevator and back into his dayroom through his sector door.

- Incarcerate person requires ADA housing. Is currently living in regular LB LT housing due to there being no available ADA-accessible housing that is consistent with his classification designation.

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 (JAMF) 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 accommodations they require as applied to all security levels.

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 that the ADA Tracking List clearly notes in the accommodation section of the list that the incarcerated person's accommodations are "no stairs in the path of travel. Complete the shower/lavatory physical plant accommodations at TLF, as planned, to improve accessibility and safety for incarcerated persons with mobility disabilities not requiring full ADA/wheelchair-accessible facilities. Post tour, the County reported that this is already being done, i.e., low bunk/low tier ("LB LT") designation included on ADA Tracking List as an accommodation.

D. 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 OCSD will continue to explore ways to ensure incarcerated persons with disabilities in accessible housing are provided equivalent access to out-of-cell time, programs, services, and activities. The Musick (JAMF) Facility has opened, and incarcerated persons with disabilities are included among those housed at Musick. OCSD will continue to offer programs and escort disabled incarcerated persons to the Theo Lacy Facility programs building for in-person programs and the Green Sector for recreational opportunities. The Sheltered Living dayroom is now being used for religious programming at CMJ. Additionally, it is expected that implementation of the updated Jail Management System JMS will help ensure out-of-cell time.

During the monitoring tour, there was no incarcerated person housed in the CMJ Mod O Sheltered Living (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 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 position 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 program opportunities, which is highlighted in Section IX of this report.

During the previous monitoring tour, issues regarding the lack of programming opportunities (in-person education and religious) for incarcerated persons with disabilities housed in the CMJ Mod O Ward C were identified. 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 at CMJ are classified as protective custody, and classification rules require that the populations cannot mix, leaving the Mod O Ward C population with limited programming opportunities. To address this concern, the County began utilizing the SL dayroom for in-person religious programming for the Mod O Ward C population. This is a positive development.

The County reported that the TLF Barracks' outdoor field recreation area (Green Sector) will not be available for use due to construction, and as an alternative, the County will use the grass area adjacent to Barracks G and H for outdoor recreation. The Expert toured the area, and if this area were to be used as a recreation space, the Expert identified some path of travel concerns, as the walkway is made of decomposed granite and not concrete.

In the rainy season, this would be difficult for an incarcerated person in a wheelchair to navigate the perimeter of the recreation yard (and thus may not be able to access the area at all). If used as recreation space, the County must ensure disabled incarcerated persons who use wheelchairs have equal access to the recreation space.

The County continues to provide lower security classification level disabled incarcerated persons who reside in TLF Mod O access to the outdoor field recreation area (Green Sector) instead of the much smaller and concrete-filled interior recreation space 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. The availability of staff allows more access to the TLF Green Sector Recreation yard. The Expert also found that TLF Green Sector provides the RP Requirement of access to three (3) hours of recreation to 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

If used as recreation space, the County must ensure disabled incarcerated persons who are prescribed wheelchairs have equal access to the recreation space adjacent to Barracks G and H.

E. *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)

F. 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 County reported that OCSD will continue to explore ways to ensure incarcerated persons with disabilities in accessible housing are provided equivalent access to out-of-cell time, programs, services, and activities. The Musick (JAMF) Facility has opened, and incarcerated persons with disabilities are included among those housed at Musick. OCSD will continue to offer programs and escort disabled incarcerated persons to the Theo Lacy Facility programs building for in-person programs and the Green Sector for recreational opportunities. Sheltered Living space is now being used for religious programming at CMJ, which is a positive development. OCSD will continue to provide reminders regarding chairs in recreation yards. Additionally, it is expected that implementation of the updated JMS will help ensure out-of-cell time.

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 position to ensure incarcerated persons with disabilities who require accessible housing are provided equivalent access to out-of-cell time, programs, services, and activities as compared to persons without disabilities with comparable security and classification profiles, and as compared to incarcerated persons who do not require accessible housing.

During the previous 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) the lack of grab bars in showers, (b) the lack of level terrain in/out of shower areas, (c) insufficient shower space to use a shower chair and access to a shower chair, and (d) the lack of grab bars next to one's bed or toilet. There were also inconsistencies 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 (and should not be made to sit on the floor). To address these issues, the County issued a memo reminding staff to provide chairs in recreation areas. In addition, as noted above, the County has committed to install grab bars in lower tier showers at TLF.

The County must ensure sufficient "esig'ated ADA compliant housing and shower accommodations are available for the mobility disabled population. The Expert will monitor the installation and placement of the grab bars at TLF.

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 and installation of grab bars in the TLF showers.

G. 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 an SL cell was occupied was 6/9/2024. Any use of an 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. This is a notable achievement.

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

Adequately Implemented (Previous Rating Adequately 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)

H. *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)

I. *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.*

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)

J. *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.*

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)**K. 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 County reported that OCSD will continue to explore ways to ensure incarcerated persons with disabilities in accessible housing are provided equivalent access to out-of-cell time, programs, services, and activities. The Musick Facility has opened, and incarcerated persons with disabilities are included among those housed at Musick. OCSD will continue to offer programs and escort disabled incarcerated persons to the Theo Lacy Facility programs building for in-person programs and the Green Sector for recreational opportunities. Sheltered Living is now being used for religious programming at CMJ. OCSD will continue to provide reminders regarding chairs in recreation yards. Additionally, it is expected that the implementation of JMS will help ensure out-of-cell time.

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 RN 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 Programs staff reported that staff continue to meet with every disabled incarcerated person to inform them of program opportunities. This is in addition to the ADA surveys conducted by the Programs staff.

The Expert has reviewed out-of-cell tracking logs (recreation) during the previous six 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 seventh 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. The County reported they have fully implemented the Guardian RFID to track recreation opportunities, and the tracking of the provision of out-of-cell time continues to improve as staff become aware of the system and tracking requirements. With the tracking information produced by the County in future document production, 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 1,152 ADA Interview/Activity Logs the County produced, there were no cases where a disabled incarcerated person claimed they were not being provided the required out-of-cell time:

During the previous monitoring tour, there were three (3) cases where the disabled incarcerated persons claimed they required but were not provided 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.”

During the monitoring tour, there was only one (1) complaint regarding staff not providing a chair during yard and dayroom.

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 with a 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 1,152 ADA Interview/Activity Logs, there were cases where incarcerated persons were offered/provided access to the VRS.

As reported in section 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 1,152 ADA Interview/Activity Logs reviewed by the Expert, there were numerous cases where incarcerated persons were provided access to the easy reading books, large print reading material, magnifying sheet, audiobook, and audio player.

As reported in sections J and K, the County provides incarcerated persons with disabilities access to Work Assignments, including the Community Work Program. The ADA Deputy asks the disabled incarcerated persons if they are interested in participating in the work and CWP program. If the incarcerated person is interested, the ADA Deputy advises the work deputies of their interest.

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. During the previous 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) the lack of grab bars in showers, (b) the lack of level terrain in/out of shower areas, (c) insufficient shower space to use a shower chair and access to a shower chair, and (d) the lack of grab bars next to one's bed or toilet. There were also inconsistencies 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). To address these issues, the County issued a memo reminding staff to provide chairs in recreation areas. In addition, the County has committed to install grab bars for showers at TLF.

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 generally have equal access to the visiting programs. However, an issue that arose during the on-site monitoring tour is access to visiting and programming at TLF for disabled incarcerated persons with low-tier housing orders. In the TLF Mods, except for Mod O, incarcerated persons must navigate a flight of stairs to access the visiting and upper tier program areas (classroom). Five (5) mobility disabled incarcerated persons with a low-tier housing order reported that they would not be able to navigate the stairs to access the visiting and program areas on the second tier of the Mods. An incarcerated person reported that while navigating the stairs using his assistive device, he almost fell down the stairs. Another incarcerated person reported that staff informed him of his visit, which was in upper tier visiting area, and staff instructed him to navigate the stairs. He informed staff that he could not navigate the stairs, and staff then proceeded to use the elevator to provide him access to the visiting area.

Although the ADA Tracking List denotes the housing type (Low Tier) and the incarcerated persons are appropriately housed, the Expert recommends that the ADA Tracking List

clearly note in the accommodation section of the list that the incarcerated person's accommodations are "no stairs in the path of travel."

Amplification devices are provided to hard-of-hearing incarcerated persons to use during their 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, four (4) of the 15 incarcerated persons interviewed who are identified as having needs in this area stated that 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 1,152 ADA Interview/Activity Logs reviewed by the Expert, there were cases identified where incarcerated persons needed assistance with reading or writing. In these cases, the incarcerated persons were either advised that staff would assist upon request or the ADA Deputy offered to assist or actually provided assistance. The Expert also notes that the Adaptive Support Logs reflect that the housing unit staff offer assistance in reading and writing. However, the staff do not consistently document that assistance in reading and writing was offered and/or provided.

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 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 that at the TLF Mods, 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 for purposes of complying with the Restrictive Housing portion of the RP. The County reported that the TLF Mods now run three (3) instead of four (4) groups of up to 12 incarcerated persons per group.

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

- Women's Central Jail
 - Substance Abuse (MAT, Substance Abuse, Narcotics Anonymous, and Alcoholics Anonymous)
 - Self-Help (Fir4e, SUD Group, Olive Crest, VR, Parenting, Back On Track, Money Matters, All In Workshops, All In Case Management, Work Readiness, Great Escape)
 - Religious Services (Protestant, Christian Science, Catholic, 7th Day Adventist, Malachi Women, and Women of Purpose)
 - Education/Skills (Creative Writing, A Skills GED, GED Math, ESL, Accounting, Business, Computers, Food Services)
- Men's Central Jail
 - Religious Services (Protestant, Christian Science, Catholic, Protestant Bible Study, Malachi Men)
 - Self-Help (Anger Management, Great Escape, Money Matters, Mental Health, Work Readiness, Parenting)
 - Education/Skills (Accounting, Computers, Business, Food Service, A Skills GED, GED Math, ESL, HiSet Testing)
 - Substance Abuse (Narcotics Anonymous, Alcoholics Anonymous, MAT)
- Intake Release Center
 - Religious Services (Protestant Service, Bible Discipleship, Catholic Bible Study, and Catholic Service)
 - Self-Help (Processing Group, Mental Health, Anger Management, Yoga, Great Escape, Case Management, Back on Track, Work Readiness, Parenting, and Malachi Women)
 - Substance Abuse (AA Panel, AA, Substance Abuse, and MAT)
- Theo Lacy Facility
 - Religious Services (Protestant, Catholic, Catholic Bible Study, Christian Science, Bible Discipleship, Muslim Service, Protestant Bible Study, Malachi Men, Men of Purpose)

- Self-Help (Great Escape, PIVOT, All In Program, Effective Parenting, Money Matters, T4C, Back on Track, Men of Purpose, Diabetic Education, Group Therapy, Workforce Readiness, Shanti)
- Substance Abuse (Substance Abuse, AA Panel, NA Panel, MAT Group)
- Education/Skills (GED, ESL, Food Service, HiSet, HiSet Testing, 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)
 - Education/Skills (Food Service, HiSet, HiSet Math, ESL, Intro to Computers, Accounting)
 - Self-Help (SUD Group, PIVOT, Back on Track, Coping Skills Group, Great Escape, Parenting, Money Matters, Home-Based Business, Workforce Readiness)

Programs are delivered in the following locations:

- Central Men's Jail
 - 2nd Floor Classroom #1 – Max 24 (Protestant Service, Money Matters, HiSet Testing, ESL, Mental Health, 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, Protestant Bible Study, Great Escape, Anger Management, AA, and MAT Program)
 - 2nd Floor Computer Lab (GED Math, Business, Computers, and Substance Abuse)
 - Mod O Dayroom (Catholic Service, and Protestant Service)
- 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 (Mental Health Processing Group)
 - 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, Phoenix House Case Management, Anger Management, Mental Health, Back on Track, and AA)
 - Mod M Room B (No Programs)*
 - Mod M Outdoor Rec (Yoga)

- Mod M Sector 24 Dayroom (AA Panel, NA Panel)
- Mod N Room A (Under Construction)
- Mod N Room B (Under Construction)

*Rooms utilized as Health Office, Property Overflow, and BHB Office

- Central Women's Jail
 - Classroom A (Malachi Women, ESL, Computers, All In, Olive Crest, All In Case Management, Business, Back on Track, A Skills GED, Money Matters, Food Service, Accounting, Olive Crest, Protestant Service, Christian Science Service, and Women of Purpose)
 - Classroom B (GED Math, MAT, Substance Abuse, Protestant Service, Catholic Service, 7th Day Adventist Service, Great Escape, Parenting, Creative Writing, VR, Work Release, AA, All In Fir4E, and SUD Group)
- Theo Lacy Facility
 - Classroom #2 (HiSet Science, Protestant Service, Great Escape, Malachi Men, Custodial, Catholic Service, Accounting, Food Service, MAT Group, Home-Based Business, and AA Panel)
 - Classroom #3 (PIVOT, Money Matters, Men of Purpose, and Computers)
 - Classroom #4 (GED, ESL, HiSet Math, Effective Parenting, AA Panel, NA Panel, Diabetic Ed, Substance Abuse, Catholic Service, Catholic Bible Study, Back on Track, and Workforce Readiness)
 - Classroom #5 (All in Program, HiSet Testing, All in Program, AA Panel, Bible Discipleship, Protestant Bible Study, and Protestant Service)
 - Mod I Multi-Purpose Room Up (Protestant Service, Group Therapy, APAIT, MAT, HiSet, Workforce Readiness, Shanti, AA Panel, Protestant Bible Study, and Catholic Service)
 - Mod I Multi-Purpose Room Down (Catholic Service, Catholic Bible Study, and MAT)
 - Mod J Multi-Purpose Room (Catholic Service, Catholic Bible Study, Protestant Bible Study, Shanti, and AA Panel)
 - Mod K Multi-Purpose Room (Catholic Service, Protestant Bible Study, AA Panel, Great Escape, Catholic Bible Study, and Muslim Service)
 - Mod L Multi-Purpose Room (No Programs)
 - Mod M Multi-Purpose Room (Catholic Service, Catholic Bible Study, Protestant Bible Study, Great Escape, MAT, and AA Panel)
 - Mod N Multi-Purpose Room (Catholic Service, Catholic Bible Study, Muslim Service, and Protestant Bible Study)
 - Mod O Multi-Purpose Room (Catholic Service, and Protestant Bible Study)
 - Mod P Multi-Purpose Room (Catholic Service, Catholic Bible Study, Protestant Service, Protestant Bible Study, Great Escape, and MAT)
 - Mod Q Multi-Purpose Room (Catholic Service, Catholic Bible Study, Protestant Bible Study, T4C, and MAT)
 - Mod R Multi-Purpose Room (Catholic Service, Catholic Bible Study, Protestant Bible Study, and MAT)
- James A. Musick Facility
 - Mod F (11) Room A (HiSet, HiSet Math, Back on Track, Workforce Readiness, ESL, PIVOT, Parenting, Great Escape, Accounting, Home-

- Based Business, AA, Coping Skills Group, Protestant Service, and Catholic Service)
- Mod F (12) Room A (SUD Group, Food Services, Protestant Service, Catholic Service, Intro to Computer Software, Catholic Bible Study, Coping Skills Group, Great Escape, Back on Track, AA, Money Matters, and Substance Abuse)

The County is providing in-person programs, which are facilitated by OCSD Inmate Services facilitators, volunteers (religious), and Rancho Santiago Community College Educators. The Programs staff continues to conduct 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.

The County produced information on disabled incarcerated persons enrolled in the in-person programs:

- Educational Classes – 208
- Behavior Modification Programs – 23
- Re-Entry Programs/Classes – 84
- Vocational Classes – 153
- Substance Abuse Classes/Programs – 229
- Life Skills Classes – 161
- Religious Services – 675

The County also produced the Program's Annual Progress Review. The review reflects the following:

The "ADA Recruitment Log 7.1.24_6.30.25" contains a list of ADA individuals housed at Theo Lacy - Mod O, Men's Central Jail - Mod O, and James A. Musick Facility who have been met with throughout the reporting period during recruitment efforts by Correctional Programs staff. Please note that those listed at Theo Lacy Mod O only include inmates with GP6 or GP7 classification levels. The list reflects the following:

- TLF
 - Total number of individuals recruited: 44
 - Number requesting enrollment into classes: 12
 - Number enrolled and attended: 9 (3 released before they could attend class)
 - Number completed program: 4 (others were released or dropped before program completion)
- CJX
 - Total number of individuals recruited: 42
 - Number requesting enrollment into classes: 16
 - Number enrolled and attended: 14 (1 was released and one dropped before attending classes)

- Number completed program: 8 (6 were released or dropped before completion)
- JAMF (opened in 12/2024)
 - Total number of individuals recruited: 22
 - Number requesting enrollment into classes: 16
 - Number enrolled and attended: 16
 - Number completed program: 6 (10 were released or dropped before completion)

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

In a review of the 1,152 ADA Interview/Activity Logs the County produced, there were two (2) cases where disabled incarcerated persons requested enrollment in programs:

- One incarcerated person stated that she has taken programs in the past and would like to reach out to programs via a message slip to enroll. A blank Inmate message slip was provided to her.
- One incarcerated person stated that he was taking multiple in-person classes at TLF. Due to his new housing location (Central Men's Jail, Ward C), these classes are not available in person. The ADA Deputy reached out to programs via email, asking what the best course of action is to receive classroom materials and to keep this individual enrolled in the classes. Responding to the education class issue from interview date 3-25-25, Programs staff stated, "Unfortunately, because all face-to-face classes at the Men's Jail are for the PC population, the GP inmates in Ward C are only offered enrollment in classes through correspondence packets. I will have our Education Coordinator meet with him to determine which correspondence classes he would like to continue with and go from there. Because the classes are correspondence-based, he is provided pre-paid stamped envelopes where he can mail questions to his instructors, if needed. If he needs to speak to an instructor directly, that may be a little more difficult, but we can talk to the college and see if they could provide face-to-face meetings with him, if needed."

The incarcerated persons with disabilities in the TLF Mod O are informed of the opportunities through direct engagement with Programs staff and the ADA Compliance Unit (e.g., during the 7-day and 30-day ADA Compliance Unit check-ins).

With the opening of the lower security JAMF (there are no disability or mental health-related exclusions other than for those individuals needing a higher level of mental health care) and the disabled incarcerated person housed at JAMF 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 JAMF, the Expert notes that there are limited programs (only religious and MAT) available in several TLF units (Mods L, N, O, and R). The Expert notes that the County has expanded programs (Great Escape) in some of the TLF Mods. The County should explore expanding program availability in all the mods (especially TLF Mod O, where incarcerated persons with disabilities are concentrated) by:

- Increasing the number of individuals allowed to program in groups (taking into consideration classification and security concerns).
- Increasing the modalities of program delivery (virtual/video)
- Evaluate the location where programs can be provided (IRC Mod M provides AA/NA Panel in Sector 24)

The Expert notes that previously, the Programs leadership had indicated that if the programming group size limit was increased, the County and outside program providers would be able to increase in-person program offerings. During the previous monitoring tour, there were concerns reported by incarcerated persons housed in the CMJ Mod O Ward C regarding the lack of programming opportunities (in-person education and religious). Because CMJ 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 CMJ 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 notes that in-person religious programs are now being provided to the CMJ Mod O Ward C population.

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

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 disabled incarcerated persons are provided the required out-of-cell time. Ensure that the disabled incarcerated persons are provided access to religious and educational program opportunities. Ensure that the disabled incarcerated persons are provided with accommodations to access visiting. The County should explore expanding program opportunities in Mods that currently are only offered MAT and religious programs.

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, four (4) 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 other 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.*

Adequately Implemented (Previous Rating Adequately Implemented)

During the previous monitoring tour, the Expert requested that the County produce the Tablet User Guide and the online videos for staff. The County produced the following documents:

- Contacts and Making Outgoing Video Calls (Inmate)
- Video Visit Adding Contacts (Inmate)
- Visit Now for Friends and Family (Inmate)
- Visit Now Outgoing Only for Friends and Family (Inmate)
- Bulk Approve Photos (Staff)
- Cleaning Devices (Staff)
- How to Approve a Photo (Staff)
- How to Reset a Staff User's Password (Staff)
- Locking Down Tablets (Staff)
- Checking Inmate Contacts (Staff)
- Creating a Notice and/or Creating a Facility Message (Staff)
- How to Access ViaPath Command Center Website (Staff)
- How to Add New Users in Command Center (Staff)
- Suspending a Visitors Tablet Usage (Staff)
- Suspending an Inmates Tablet User Privileges
- Tablets Issues and Resolutions (Staff)
- Video Visit Downloads (Staff)
- Video Visits Statuses (Staff)
- Video Visits (Staff)
- Setting Up an Account for Video Calling (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 implementation of JMS will help OCSD comply with this requirement of the Remedial Plan.”

For the seventh round of monitoring, the Expert notes that the parties again stipulated that the County has not yet adequately implemented this provision. The parties entered into this stipulation, at least in part, because the County has agreed that its current system for tracking out-of-cell time is not capable of capturing the data necessary to establish compliance.

Notwithstanding the stipulation, the Expert performed a limited review of the County’s compliance with these provisions, including through onsite observation, staff and incarcerated person interviews, and a truncated review of out-of-cell logs.

The County produced the following OCSD Guardian RFID Reports, All Module Report, and Time Type Tracking Report (Dayroom) and Time Tracking Report (Recreation) for the week of June 22-28, 2025.

The Time Type Tracking Report (Dayroom) includes the following columns:

- Inmate
- Current Housing
- Time Type
- Min. Time
- Credit Time
- Time Left
- Time Status
- Total Duration
- Credit Days
- Custody Days

The All Module Report includes the following columns:

- Module Name
- Date & Time
- Scan Loc.
- Scan Type
- Inmate
- Current Loc.
- Officer
- Details

In the Details column, the All Module Report identifies all movement within the Module for a seven (7) day period, and captures the types of movement, such as Dayroom, Recreation, Medical, Court, etc.

The Expert utilized the reports to review out-of-cell access. The Expert conducted an analysis of the data from the All Module Report and the Time Type Tracking Report from each Module to determine if incarcerated persons were being provided and/or

offered at least three (3) hours per day in a dayroom or other common area, for a total of at least twenty-one (21) hours per week and three (3) hours of recreation.

- CMJ Mod O Ward D – reflects all incarcerated persons were provided with three 3 hours to 4 hours and 52 minutes of recreation. The Expert notes that the reports do not reflect whether or when incarcerated persons refused outdoor recreation.
- IRC Mod L – Reflects that no incarcerated person was provided 21 hours of dayroom, and only 16 of the 49 incarcerated persons were provided three (3) hours of outdoor recreation.
- TLF Mod O – Reflects only 12 of the 57 were provided three (3) hours of dayroom every day (26 were provided at least 21 hours of dayroom for the week), and 28 of the 49 incarcerated persons were provided at a minimum of three hours of outdoor recreation during the week.

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

Partially 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 or at outdoor recreation.

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 produced the Orange County Sheriff's Department Annual Progress Review ADA – Rights of People with Disabilities 7/1/24 – 6/30/25. 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 7/1/24 through 6/30/25, 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 8.1.25)
- Enrollment and Participation Outcomes (ADA Recruitment Log 7.1.24_6.30.25)
- Assessment of ADA individuals who were housed in the OCSD jails during the rating period (ADA Inmates_Total_7.1.24_6.30.25)
- Expansion of Services (Bi-Weekly recruitments, ADA Surveys, TLF Mod O, Religious Services CJX Mod O Ward C, Programs data integration, and ADA Accommodations proof-of-practice.
- Gaps and Corrective Measures

The Annual Progress Review includes a review of the following programs 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.

- Educational Classes
- Behavior Modification Programs
- Re-Entry Programs/Classes
- Vocational Classes
- Substance Abuse Classes/Programs
- Life Skills Classes
- Religious Services

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

Adequately Implemented (Previous Rating Partially Implemented)

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).*

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)

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 the OCSD ADA Compliance Unit and enter Work Program Clearance Status in the patient's 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 Deputies 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 the Work Deputy and 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's reported that once a disabled incarcerated person is referred to her by the ADA Deputy, they conduct a work clearance evaluation/interview to determine the assignments the incarcerated person can be assigned to. In cases where they cannot make the determination for work clearance, they refer the case to a medical provider for review. Additionally, the case is referred to mental health staff for a mental health review/clearance.

Medical providers interviewed stated that all incarcerated persons are eligible to work and that, in conducting the review, the incarcerated person is not automatically excluded based on a disability or a chronic medical condition. They stated that the incarcerated persons are interviewed, and they identify the physical limitations and duty restrictions for the incarcerated person. They 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, in addition to documenting the case in the progress notes.

The Behavioral Health Clinicians stated they conduct the in-custody work and CWP mental health clearances. They 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 advise that custody staff resubmit the case 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.

During the Medical Intake Screening, the Expert notes 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.

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 “No Work List” (not cleared), listing 36 cases.
 - CHS Progress Notes for 33 cases
- Email from Work Deputy to Classification and email from ADA CSA to ADA RN requesting MH clearance for two (2) cases.
- ADA Interview/Activity Logs for 23 disabled incarcerated person workers

The “No Work List” includes comments for the MH/Medical decision regarding work approval/denial and includes:

- No work MH acute housing – 3
- No work x 1 month – 5
- No work until MDSC - 4
- No work – 4
- No work MH hold – 3
- No work until F/U – 1
- No work perm – 4
- No work x 1 week – 2
- No work x 2 weeks – 1
- No work unless conditional – 1
- No work ortho F/U – 2
- No work x 10 days – 1
- No work x 2 days – 2
- No work x 3 months – 1
- No work, no documentation – 1
- No work 2 months - 1

Progress notes were not produced for three (3) cases. In 20 cases, the progress note was for a medical sick call or other medical encounter. In 10 cases, the progress note reflected that the evaluation/review was for work clearance. The Expert recommends that the progress include language similar to the language found in one such note, provided below:

“ADA Chart Reviewed for work clearance, pt is pending ortho appointment and MDSC for follow up, TLSO brace lost and lumbar support brace given in the interim until follow up. Case consulted with Dr. XXXX hold for work clearance until ortho follow up evaluation.”

In a review of the documentation produced by the County, in some cases, there is insufficient information as to what guided the medical provider's or mental health clinician's decision.

The County reported that CHS will produce documentation for medical progress notes for cases for completed work assignment medical evaluations that were denied by healthcare staff during the next monitoring round. CHS also audits the assessment of work assignments. This was implemented in May 2025.

After the June 3, 2025, audit, CHS staff separated Medical and MH Work Hold Flags so each department could focus on only their own departments. In a joint effort, floor nurses, MH clinicians, seniors, and supervisors performed massive chart reviews to address work holds. Acute and Chronic MH patients had comments added to flags acknowledging their work status, and that they would be reviewed and followed up on, once cleared to RH.

CHS made flags that were >14 days old as the only parameter for review; all new booking patients that required a work hold were scheduled to be seen for medical and MH clearance 14 days from their time of arrival. This allowed patients to stabilize and adjust to their medications, such as MAT and psychiatrist treatment. Anyone who required more than a 14-day hold was scheduled for a follow-up to reassess work status, and a progress note was made supporting the reason for the continued hold.

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 Custody produce a list of all incarcerated persons who were referred by the Work Deputies and ADA staff and who were denied work clearance based on medical and mental health evaluation. From this list, the Expert will request that CHS produce the progress notes (medical and mental health progress notes, including dates of the review).

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 for the next monitoring round, the County produce the medical progress notes for the cases the Expert selects from the cases referred by the Work Deputies and ADA staff.

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 County reported that OCSD is working on a process for documentation of accommodations, including effective communication, for incarcerated persons with disabilities who are assigned to work in the jails (non-CWP).

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 a 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 has not been implemented. 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 a 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 that the Adaptive Support Log is for housing unit staff and has not been revised to include work supervisors.

Additionally, in review of the Adaptive Support Logs for the 15 incarcerated persons with a developmental/intellectual disability who had been assigned as workers during the document production period, the Expert found that in nine (9) cases the incarcerated person required prompts and reminders. The Adaptive Support Logs do not include entries from the work supervisors 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).*

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)

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 documentation for medical progress notes for cases for completed work assignment medical/mental health evaluations for CWP that were denied by healthcare staff during the next monitoring round. CHS also audits the assessment of work assignments. This was implemented in May 2025.

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 the County’s workflow process for this requirement in detail in Section J. A. above.

During the monitoring tour, the County provided the Expert with cases (CWP Disqualification Log) that had not been cleared for CWP by medical and mental health staff. The list includes 20 cases. The Expert requested that the County produce the medical/mental health progress notes for the 20 cases (19 mental health and one medical). The summary of the cases is as follows:

- Medical
 - One (1) case, the CWP Disqualification Log reflects “Reason For Disqualification” medical. However, the progress note (4/25/25) reflects that the case was medically cleared.
- Mental Health
 - In four (4) cases, Progress notes reflect the reason for denial.
 - In one (1) case, the progress note was not for the CWP clearance evaluation.
 - In nine (9) cases, the progress notes reflect that the entries were post monitoring tour.
 - In all nine (9) cases, the recent evaluation reflects that the incarcerated person was in acute/observation housing/status.
 - In three (3) cases, the progress note did not include a reason for the denial.
 - In one (1) case, the CWP Disqualification Log reflects “Reason For Disqualification” as mental health. However, the progress note (1/18/25) reflects that the case was medically cleared.

The County reported that CHS started doing thorough audits in May for the work denial and everyone has it well dialed in now in terms of nursing and MH teams making notes

regarding the need for holds, and removal/discontinuation of flags once cleared. The County reports that clinicians and nurses now understand that they must enter a quick note for work denials and reschedule them for follow-up if they are cleared for RH.

After audit #4 (June 3, 2025), the team separated Medical and MH Work Hold Flags so each department could focus on only their own departments. In a joint effort, floor nurses, MH clinicians, seniors, and supervisors performed massive chart reviews to address work holds. Acute and Chronic MH patients had comments added to flags acknowledging their work status, and that they would be reviewed and followed up on.

The County reported that it made flags that were >14 days old as the only parameter for review; all new booking individuals that required a work hold were scheduled to be seen for medical & MH clearance 14 days after their arrival. This allowed patients to stabilize and adjust to their medications, such as MAT and psychiatrist treatment. Anyone who required more than a 14-day hold were scheduled for a follow-up to reassess work status, and a progress note was made supporting the reason for the continued hold.

In the next monitoring round, the Expert will request that CHS produce the progress notes (medical and mental health progress notes, including dates of the review) for cases selected from the CWP Disqualification Log.

Partially Implemented (Previous Rating Partially Implemented)

Recommendations: The Expert recommends that, for the next monitoring round, the County produce the medical progress notes for the cases the Expert selects from the CWP Disqualification Log. The County must also 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.

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.*

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 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.).*

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 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.

In the next monitoring round, the Expert will request that CHS produce the progress notes (medical and mental health progress notes, including dates of the review) for cases selected from the CWP Disqualification Log. The County must also 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, for the next monitoring round, the County produce the medical progress notes for the cases the Expert selects from the CWP Disqualification Log. The County must also 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.

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

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)

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)

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)

Although the provision was rated as Monitoring Suspended Based on Previous Findings of Compliance, there are reports that grievances are not accessible in the TLF Barracks. Incarcerated persons reported that they are being told that grievances are available from the deputies; however, when incarcerated persons ask for a grievance form to submit a concern, they are told to get the grievance forms from the "house mouse" (and not deputies). The incarcerated persons interviewed stated:

- "They (house mouse) want to read it; I get the grievance from them."
- "I get it from them (house mouse), they want to read it."

- “I get them from the rep, I fill it out, give it back to the rep they want to read it before I drop in the box, lots of politics in these dorms.”
- “I get the message slips and grievances from the reps; I give them to the deputies.”
- “We get all grievances and message slips from the inmate (reps), they read, approve, and I turn them into the deputy.”

The Expert recommends that the County ensure that grievance forms are readily available by either placing grievance forms in the housing units in areas accessible to incarcerated persons or ensuring that staff provide grievance forms promptly upon request, irrespective of the type of grievance raised. This important issue will be assessed in the next monitoring round.

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 County reported that “OCSD has revised the grievance form and, 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). The ADA Team reviews all ADA-related grievances to determine who is best equipped to address the grievance and if the ADA Team can provide an accommodation pending review of the grievance by CHS. OCSD will also be revising the grievance policy and process. Training will be developed on how to provide grievance responses that meet the requirements of the Remedial Plan.”

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.

There were no grievances where the incarcerated person raised safety concerns related to their housing and disability access needs.

In review of the 35 grievances identified by the County as being ADA-related, the Expert notes that all but one (1) were reviewed by the ADA Unit, the ADA staff interviewed the incarcerated person, or were responded to by the ADA staff. The County has a mechanism in place for ADA grievances to be screened within one day of receipt and for the ADA staff to determine whether the grievance presents an urgent issue regarding the incarcerated person’s safety or well-being.

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

Adequately Implemented (Previous Rating Partially Implemented)

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 has revised the grievance form and, 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). The ADA Team reviews all ADA-related grievances to determine who is best equipped to address the grievance and if the ADA Team can provide an accommodation pending review of the grievance by CHS. OCSD will also be revising the grievance policy and process. Training will be developed on how to provide grievance responses that meet the requirements of the Remedial Plan.

Although the County documents the response date on the grievance, the administrative sergeants interviewed stated that this date is when they finalize the grievance response and not the date the incarcerated person is provided the completed response. The administrative sergeants reported that the completed response is provided to the housing sergeants, who then provide the completed response to the incarcerated person. There is no documentation recorded of when the housing sergeant provides the completed response to the incarcerated person. The RP requires that a written response to the grievance be provided within fourteen days of grievance receipt.

A review of the 35 disability-related grievances found that the County did not document the date the grievance response was provided to the incarcerated person. Additionally, during a previous tour, the County reported that OCSD has revised the grievance form and, 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). However, when interviewing an Administrative Sergeant and other staff, DRC and the Expert learned that if an ADA grievance is handled as an inmate request (as is checked at the bottom of the grievance form), it is not routed to or reviewed by ADA compliance staff. This creates an incidental but consequential gap in ADA accommodation processes. Specifically, ADA request forms get routed to and reviewed by the ADA team, ADA grievances get routed to and reviewed by the ADA team, but if an ADA grievance is “handled as inmate request,” it does not get routed to or reviewed by the ADA team. The County reported that OCSD is evaluating the use of Axon Standards for grievances and will be updating the grievance forms and policy, and in the interim, OCSD can send out a briefing item to remind staff not to handle ADA-related grievances as inmate message slips and to route them to the ADA team.

To address this gap, the County issued an internal memo to the Custody Operations Sergeants on September 9, 2025. The memo states, “During the recent DRC inspection, it was noted that not all ADA-related grievances are being reviewed by the ADA team of each facility. To address this issue, going forward, all ADA-related grievances, including ‘Handled as Inmate Request,’ will be entered in the CRM. For further clarification or guidance, contact your Administrative Sergeant.” The Expert will continue to monitor this during the next monitoring tour.

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 document the date when the written response to the grievances is provided to the incarcerated person and ensure this occurs within 14 days of the receipt of the grievances. The County should also continue to work toward a solution, including through use of Axon Standards for grievances, regarding the ADA unit's notification, tracking, and management of ADA grievances that are "handled as inmate request."

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 reported that the ADA Team reviews all ADA-related grievances to determine who is best equipped to address the grievance and if the ADA Team can provide an accommodation pending review of the grievance by CHS. OCSD will also be revising the grievance policy and process. Training will be developed on how to provide grievance responses that meet the requirements of the Remedial Plan.

There were seven (7) grievances where a response was not resolved within the general fourteen-day deadline. The responses stated:

- "You were seen by the ADA nurse on 5/12/25 regarding your concerns. You were referred to a medical provider and have a pending medical sick call scheduled."
- "You were referred to a specialist for this issue and we are waiting for your orthotics to be made and returned."
- "You are scheduled to follow up with a medical provider."
- "Patient will be placed on ADA sick call."
- "CDCR recommendations noted. You are currently scheduled to be evaluated by the medical provider regarding your request for eyeglasses, accommodations."

- “However, your request for a wheelchair for court has been referred to the Provider to make a determination on your request. You have a pending Medical sick call.”
- “You are scheduled to see a provider, please discuss your concerns with your provider. Generally, ADA patients are housed all over the jail, as we are not allowed to restrict their housing.”

The responses do not communicate why the County could not resolve the grievance within the fourteen-day deadline, nor did the responses provide relevant information regarding any subsequent events scheduled to resolve the grievance (e.g., when (generally, i.e., without specifying specific appointment date/time) the specialist appointment will occur) 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, 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. Post tour the County (CHS) reported that the grievance system is an OCSD platform and that CHS responses are limited to prevent HIPAA violation. CHS will review the process to ensure that appointments happen within 14 days and progress notes will be provided to show proof of practice.

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 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 County reported that OCSD has revised the grievance form and, 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). The ADA Team reviews all ADA-related grievances to determine who is best equipped to address the grievance and if the ADA Team can provide an accommodation pending review of the grievance by CHS. OCSD will also be revising the grievance policy and process. Training will be developed on how to provide grievance responses that meet the requirements of the Remedial Plan.

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 35 grievance responses reviewed, 24 were compliant with the RP requirements while 11 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 in 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.

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 in 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 34 of the 35 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 Adequately 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 35 grievances reflects that the ADA Compliance Unit interviewed disabled incarcerated persons in seven (7) of the cases.

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 as the grievance was resolved where no ADA interview was completed.

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 Adequately Implemented)

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

The County reported that OCSD has revised the grievance form to 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 35 grievance responses, the Expert found that all 35 included an explanation of the process for appealing the grievance response.

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

Adequately Implemented (Previous Rating Not Implemented)

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

The County reported that OCSD will continue to provide training and reminders to reinforce the use of the effective communication form in responding to grievances. Additionally, OCSD will be revising the grievance policy and process. Training will be developed on how to provide grievance responses that meet the requirements of the Remedial Plan.

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 five (5) completed EC forms for grievance encounters. However, a review of the ADA grievances found that there were four (4) grievances submitted by incarcerated persons with disabilities that affected communication where Effective Communication forms were not produced: one (1) vision, two (2) Hearing, and one (1) Developmentally Disabled. In these cases, there was no documentation that the grievance responses were effectively communicated.

Based on this, the Expert finds the County has partially implemented the RP requirement. With the rollout of ServiceNow, the County must ensure that 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 Partially Implemented)

Recommendations: The Expert recommends that the County ensure staff effectively communicate all grievance and appeal responses to the grievant/appellant and document 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, four (4) incarcerated persons with a disability that affects communication stated that staff do not consistently provide the accommodations necessary for them to understand the announcements being made. 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 are 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 reported that OCSD has eliminated the guard station log since it is expected that implementation of JMS will help document when staff effectively communicate announcements to incarcerated persons with disabilities.

The Expert asked 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 effective communication following announcements. Only one (1) of the four housing units where deaf incarcerated persons were housed did the housing unit's Guard Station Log reflect that staff had provided face-to-face notifications.

Additionally, in a review of the 1,152 ADA Interview/Activity Logs the County produced, there was one (1) case where a disabled incarcerated person stated he had trouble hearing announcements.

- Stated he has trouble hearing announcements. Advised housing staff to communicate with him better.

Based on this, the Expert finds the County has partially implemented the RP requirement. With the rollout of ServiceNow, the County must ensure that 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 communicate verbal announcements to persons with disabilities that affect communication. Additionally, in the case cited above, the Expert recommends that when such an issue is identified, the documentation should reflect that staff identified and had a plan to provide an effective method of communication (for example, staff will use whiteboard or face-to-face notifications to communicate announcements to the individual).

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, three (3) disabled incarcerated persons with disabilities that affect communication stated that staff do not consistently 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. Three (3) incarcerated persons stated that the ADA Deputy is the only staff that provides assistance. The Expert could not refute or 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 OCSD has eliminated the guard station log since it is expected that implementation of JMS will help OCSD document when staff effectively communicate announcements 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 that 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)

The County reported that “Whether restraints need to be applied will be left to deputies’ discretion on a case-by-case basis, but OCSD will provide a reminder that disabled incarcerated persons must be able to use their assistive devices and ambulate safely.”

Although monitoring is suspended for this provision, during the incarcerated person interviews, six (6) disabled incarcerated persons reported that staff do not provide accommodations when applying restraints. Some stated this occurs about fifty percent of the time. 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. The parties and the Expert should address the County’s plan to ensure compliance moving forward during the next monitoring round.

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)

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 do 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.*

- 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.*
- 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).*
- 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
- ADA Custody Orientation ADA Compliance Training (32 PowerPoint slides)
- ADA Compliance Training for Civilian Staff (37 PowerPoint slides)
- Americans With Disabilities Act (2-Hour Lesson Plan)
- Americans With Disabilities Act STC PowerPoint Presentation (79 slides) Revised 7/2/25

The OCSD 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. ADA training is provided as formal classroom training.

The County also produced an Excel spreadsheet "STC ADA Courses Taken 010125-063025", that reflects 520 staff (Deputy Sheriff I, Deputy Sheriff II, Deputy Sheriff Trainee, Sergeant, Lieutenant, Correctional Service Tech, Sheriff Correctional Service Assistant, and Sheriffs Special Officer II).

The County produced the following CHS/HCA training sign-in sheets that reflect a total of 338 CHS staff members have attended the ADA Annual Mandatory Overview and Training (5/27/25 to 6/24/25). During the previous monitoring tour, the County produced CHS/HCA training sign-in sheets that reflect a total of 472 CHS staff attended the ADA Annual Mandatory Overview and Training. This provision requires the County to provide annual ADA training, and training from January through December is included in the rating. The County reported that there are 448 CHS employees assigned to the jails.

The CHS/HCA training material 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 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.

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 OCSD has devised a staff accountability plan and tracking form that will be provided at the upcoming site visit.

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 reported that OCSD developed a staff accountability plan that would comply with POBR while allowing for investigation and tracking of allegations of ADA or LGBTQI-involved discrimination against incarcerated persons or noncompliance with policies and procedures. The plan called for the Administrative Sergeant at each jail facility to conduct a semiannual audit of allegations of discrimination or noncompliance, verifying progressive discipline was being issued, attempting to identify trends, making action item recommendations, and documenting the findings on a staff accountability form in

ServiceNow. The Behavioral Health Bureau Captain would then review and analyze the findings and recommendations to determine what actions, if any, should be taken for continuous quality improvement purposes (e.g., training, counseling, briefing, policy review, referral to Internal Affairs).

However, OCSD, in consultation with DRC and the Expert, made the decision during the site visit to put implementation of the staff accountability plan on hold until OCSD implements Axon Standards software. The Axon Standards platform will centralize and track all personnel-related information (e.g., commendations, citizen & internal complaints, SB2 complaints) in a single system of record. The Department is currently evaluating whether this platform will also serve as an adequate replacement for the current grievance system. Axon Standards can serve as an early intervention and performance management tool, allowing supervisors to monitor employee conduct, recognize positive performance, and identify patterns of behavior or performance concerns that may require timely supervisory action. By centralizing and automating these processes, Axon Standards will support more comprehensive and continuous quality improvement and significantly reduce the administrative burden associated with the manual, semiannual staff accountability audits originally planned by OCSD. Implementation of Axon Standards departmentwide is anticipated by the end of the year. Additionally, OCSD reported and has confirmed all grievances will live in ServiceNow but personnel-related grievances will be pushed into Axon Standards to be handled consistent with any other public complaint. While ServiceNow will reflect all grievances, Standards would need to be referenced for follow-up on personnel-related complaints. Implementation is anticipated at the beginning of the year.

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 once the Axon Standards software is rolled out.

D. *The County shall develop an ADA accountability plan intended to timely log and investigate allegations from any source that staff have 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.*

The County reported that OCSD has devised a staff accountability plan and tracking form that will be provided at the upcoming site visit. The County also reported that CHS continues to log, track, and work with Human Resources to address compliance.

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 245 entries for staff who did not use the Effective Communication form during the patient encounter.

The County reported that OCSD developed a staff accountability plan that would comply with POBR while allowing for investigation and tracking of allegations of ADA or LGBTQI-involved discrimination against incarcerated persons or noncompliance with policies and procedures. The plan called for the Administrative Sergeant at each jail facility to conduct a semiannual audit of allegations of discrimination or noncompliance, verifying progressive discipline was being issued, attempting to identify trends, making action item recommendations, and documenting the findings on a staff accountability form in ServiceNow. The Behavioral Health Bureau Captain would then review and analyze the findings and recommendations to determine what actions, if any, should be taken for continuous quality improvement purposes (e.g., training, counseling, briefing, policy review, referral to Internal Affairs).

As discussed in the previous section, OCSD, in consultation with DRC and the Expert, made the decision during the site visit to put implementation of the staff accountability plan on hold until OCSD implements Axon Standards software.

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 implement the ADA accountability plan to timely log and investigate allegations from any source that staff have violated the ADA or Jail ADA-related policies and procedures once the Axon Standards software is rolled out.



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".

Julian Martinez
Director
Sabot Consulting

December 29, 2025

Date