



Agreement Between County of Orange and Disability Rights California

Expert Monitor's Report (Eighth Round)

Elimination of Harmful Restrictive Housing and Disciplinary Practices

On-Site Review: February 23-27, 2026

Produced by:

Sabot Consulting

Daniel Carvo, Consultant
Julian Martinez, Director

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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 (SA), 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 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 RP. The Parties also agreed in the Negotiations Agreement and continue to agree that Sabot Consulting will serve as the neutral Expert for purposes of monitoring the RP implementation.

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

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

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

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

B. Monitoring Process

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

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

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

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

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

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

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

III. Executive Summary

This is the first monitoring report by this Expert. Although the Expert has reviewed previous monitoring reports, Policies and Procedures, etc., there was (and will be) a learning curve for some of the more subtle intricacies of OCSD's facilities and organizational structure, the Settlement Agreement (SA) and Remedial Plan (RP) interpretation/agreement with Plaintiffs, and OCSD's compliance efforts. The Expert understands there may be clarifications needed regarding some of the analysis and conclusions in this report. The Expert is open to any discussions that will assist with accurately reporting compliance as OCSD moves forward.

This is the eighth Expert Monitor Review to measure OCSD's compliance with the SA, which addresses related mandates, including:

- I. Systemwide Increase of Minimum Out-of-Cell Time.
- II. Closure of Disciplinary Isolation (DI) Cells and Central Men's Living Cells to End Housing of People in Areas of Extreme Sensory Deprivation and Lack of Program Space.
- III. Creation of Special Management Unit (SMU) Status.
- IV. Prohibition on Discipline for Behaviors That Are Related to Mental Health or Disability, Prohibition on Sanctions That Pose Risk of Serious Harm.

The eighth round of monitoring focused on the Theo Lacy Facility (TLF), Central Men's Jail (CMJ), Intake Release Center & Transportation (IRC), and James A. Musick Facility (JMF). The on-site Monitoring Review was conducted from February 23rd through February 27th, 2026. It should be noted Central Women's Jail (CWJ) is no longer housing IPs and will not be included in this report. The Monitoring Review included a review of pre-monitoring documents produced by OCSD; 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 IPs housed at OCSD jails.

A meeting was conducted with representatives from OCSD (Orange County Jail Administration and Staff from OCSD Counsel's Office). DRC Representatives were also present during the meeting and during portions of the monitoring tour. An exit meeting was conducted via Microsoft Teams on March 9th, 2026, with representatives from OCSD (Jail Administration and Staff from OCSD Counsel's Office) and DRC Representatives.

The OCSD's professionalism, facilitation, and coordination ensured the Expert had access to all facilities, staff, and IPs for interviewing purposes and is greatly appreciated. The Expert found the staff were open and transparent in their responses during the staff interviews.

The Expert finds some of the provisions as set forth in the SA and RP (and local policies/procedures) have been implemented and continue to be found as "Adequately Implemented." However, the Expert finds in some cases related to the disciplinary process, the previous finding of "Adequately Implemented" has been downgraded to "Partially Implemented." Based on the evidence provided to the Expert, more information and evidence are needed before a determination of "Adequately Implemented" can be found.

For areas found not "Adequately Implemented," a thorough assessment will continue during future monitoring tours, including a review of proof-of-practice documentation. The Expert notes with the implementation of related policies, procedures, and training, staff are now better informed and have an understanding of the SA and RP requirements and how the SA correlates to their respective job duties.

As this was the eighth monitoring tour, all elements of the SA, except for the SMU processes, were evaluated for compliance. The parties previously agreed the SMU portion of the RP should not be monitored provision-by-provision, because OCSD has chosen not to maintain an SMU housing designation in its system.

For the eighth round of monitoring, OCSD has activated Guardian RFID in all facilities. Although data reporting for out of cell time has been implemented, it still remains to be seen if the system is reporting accurate data. The Expert will focus on this during the next monitoring tour.

The Expert conducted a comprehensive review of Guardian RFID data, which includes: All Module Report, Dayroom Report, Recreation Report, and Compliance Summary Reports for the weeks of: July 13-19, 2026, September 21-27, 2026, and November 2-8, 2026.

The Expert has the following recommendations The County has to adopt if it wants to achieve substantial compliance with the implementation of the out-of-cell time requirements, including Guardian RFID tracking of out-of-cell time.

- Sworn supervisory-level staff must review and track the Guardian RFID reporting processes to ensure the RP requirements are being met in their respective areas of supervision. If necessary, conduct follow-up training and as required by the RP, hold staff accountable for cases of non-compliance.
- Regularly review the classification designation of IPs in the classification groups to which it is most difficult to provide out-of-cell time, with the goal of reclassifying individuals into less restrictive classifications as soon as doing so, and consistent with the system's security needs.
- Consider revamping the classification system to reduce the number of classification levels or otherwise streamline the system. The number of classification levels in the current system makes it extremely difficult to comply with the RP's out-of-cell requirements; this is especially true in mental health units, where OCSD is typically far out of compliance.

As previously reported, the Expert notes the classification system does not appear to allow OCSD to lower a classification level based on a classification review by OCSD Classification staff. Factors to consider include whether the incarcerated person (IP) received a serious disciplinary action or has remained discipline-free in the past 12 months. Clear guidelines built with input from Classification, PMU, and Mental Health staff would provide consistency and allow for fair consideration for lowering classification levels.

Although there will always be some higher placements required for legitimate custodial reasons, there could be potential multi-use locations that could be retrofitted to provide additional out-of-cell opportunities for Mods housing more than four release groups. Especially for smaller or "Walk Alone" groups.

The Expert notes OCSD has implemented a policy (with parallel CHS policy update) for staff to make a meaningful consideration of the relationship of a disability (i.e., mental health, intellectual/developmental disability) and behaviors that may violate jail rules. This includes consideration of the efficacy/appropriateness of the disciplinary measures versus alternative interventions and the impact of the disciplinary measures on the health and well-being of the IPs with mental health and intellectual/developmental disabilities.

Although there is evidence of some implementation of this policy, other evidence suggests there are some gaps and inconsistencies in the process. The Expert recommends OCSD ensure the provision of effective communication and necessary assistance to people with disabilities at all stages of the disciplinary process. This includes a requirement for the Disciplinary Hearing Officer (and all staff interacting with the IP) to check the ADA Tracking System/Mental Health Tracking System, ensure the provision of reasonable accommodations and effective communication during all stages of the disciplinary process, and document these steps as a means to show proof-of-practice.

The Expert notes OCSD has adequately implemented the following practices that reflect or are necessary components of specific RP requirements:

- Providing IP access to toilet facilities during their dayroom time.
- Rotating the dayroom opportunity daily.
- Documenting circumstances when an IP is at court or an off-site medical appointment during their scheduled dayroom/recreation yard time.
- Consistent with safety and security needs, maximizing opportunities for IPs in celled housing to interact with others during the out-of-cell time.
- Ensuring IPs are offered some opportunities for out-of-cell time during normal daylight hours each week.
- Providing additional programming, including the use of electronic tablets.
- Closure of the DI cells in the CMJ, IRC, TLF, and CWJ.
- Designation of a supervisory-level Disciplinary Hearing Officer for each OC jail facility.
- Designation of a supervisory-level clinician

The following reflects the overall ratings given for the 24 RP provisions subject to assessment by the Expert:

- Adequately Implemented – Zero (0)
- Partially Implemented – Thirteen (13)
- Not Implemented – Zero (0)
- Un-ratable - Zero (0)
- Not Assessed - Three (3)
- Monitoring Suspended Based on Consecutive Findings of Adequate Implementation - Eight (8)

It is the Expert's belief as OCSD continues to implement vital components of the SA, including those outlined in this report, the areas found other than Adequately Implemented will progress to an Adequately Implemented rating.

This report details the pre-monitoring tour document review, on-site monitoring, and interviews of staff and IPs. It also includes findings and recommendations/actions OCSD should consider in order to move towards meeting the mandates of the SA and RP.

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

PROVISION	REQUIREMENT	CURRENT RATING	PRIOR RATING
I.	SYSTEMWIDE INCREASE OF MINIMUM OUT-OF-CELL TIME		
I.B.1.	Out of cell time (21 hours of dayroom per week) Recommendations: Ensure consistent provision of the required three (3) hours per day in the dayroom or other common area for a total of at least twenty-one (21) hours per week. Ensure supervisors audit the Guardian RFID Dayroom Logs. Continue decreasing the number of groups and increasing the sizes of the groups for all Mods if classification factors allow. Ensure the Dayrooms are consistently operating during the hours of 0600 through 2300.	PI	PI
I.B.1.a	Additional dayroom beyond three (3) hours per day Recommendations: Ensure additional dayroom time beyond the three (3) hours per day is offered when the dayrooms are available in all Mods. Ensure supervisors audit the Guardian RFID Dayroom Logs for RP Compliance through staff compliance.	PI	PI
I.B.1.b.	Access to toilet facilities during dayroom	MS	MS
I.B.1.c.	Documentation of exigent circumstances precluding minimum dayroom time	MS	MS
I.B.1.d.	Scheduled programming in the dayroom included in the three hours per day of dayroom time.	NA	NA
I.B.2.	Three (3) hours per week of outdoors for exercise. Recommendations: Ensure staff consistently provide the required three (3) hours minimum per week of outdoor exercise and/or recreation. Ensure supervisors audit the Guardian RFID Recreation Logs for staff compliance. Continue decreasing the number of groups and increasing the sizes of the groups for all Mods if classification factors allow. Ensure the recreation yards are consistently operating during the hours of 0600 through 2300.	PI	PI

I.B.2.a.	Additional Opportunities for Recreation or Outdoor Exercise Recommendations: Ensure that additional outdoor exercise and/or recreation time beyond the three (3) hours per week are offered and provided as scheduling and classification needs allow. Ensure supervisors audit the Guardian RFID Recreation Logs for staff compliance.	PI	PI
I.B.2.b.	Documentation of exigent circumstances precluding minimum outdoor recreation time Recommendations: With the implementation of Guardian RFID, ensure documentation of the reasons that precluded the provision of the minimum outdoor time in the given week.	PI	PI
I.B.3.	Additional programming, including the use of electronic tablets. Recommendations: Ensure tablets are not used as a behavior management tool unless it is part of the disciplinary process. Provide tablets on a 1 to 1 ratio or, at the very least, ensure every incarcerated person has the opportunity to utilize the tablet daily.	PI	PI
I.C.	Steps to maximize opportunities for interaction with others during dayroom.	MS	MS
I.D.	Accommodations for individual needs regarding time of day for out-of-cell time	MS	AI
I.E.	Out of cell time during normal daylight hours	MS	MS
I.F.	Utilization of an effective electronic system for documenting and tracking the amount of out-of-cell time Recommendations: Ensure the Guardian RFID documents and tracks the amount of out-of-cell time that each person in custody is offered and receives. The tracking system must have the capability/functionality to track the following: • Dayroom offered for every incarcerated person (date and time including weekly totals). • Dayroom provided for every incarcerated person (date and time, including weekly totals). Dayroom refusals for every incarcerated person (date and time, including weekly totals). • Cases of emergency or security-related events (count, searches, and lockdowns) where the Dayrooms were not open. • Cases where the incarcerated person is at court or an off-site medical appointment. • Scheduled program participation in the dayroom. • Recreation yard offered for every incarcerated person (date and time, including weekly totals). • Recreation yard provided for every incarcerated person (date and time, including weekly totals).	PI	PI

	- Recreation yard refusals for every incarcerated person (date and time, including weekly totals). - Cases related to exigent circumstances or inclement weather that preclude the provision of the minimum outdoor time in a given week. - Restriction of dayroom and recreation yard access related to infectious disease control.		
I.G.	Electronic audits to ensure that OCSD is offering the required out-of-cell time Recommendations: Ensure supervisory staff conduct and document electronic audits of the Guardian RFID logs at least weekly to ensure that OCSD is offering the required out-of-cell time consistent with the RP provisions.	PI	NI
I.H.	Temporary restriction of dayroom and Outdoor Recreation	NA	NA
I.J.	Referral to CHS when a person refuses out-of-cell time repeatedly (e.g., more than 3 times in one week), and the reason for refusals may be related to mental health, medical, or disability status. Recommendations: Ensure staff make a referral to CHS (urgent or higher) for assessment and appropriate clinical follow-up for cases where an incarcerated person refuses out-of-cell time repeatedly (e.g., more than three times in one week) and the reason for such refusals may be related to their mental health, medical, or disability status.	PI	PI
II.	CLOSURE OF DISCIPLINARY ISOLATION (DI) CELLS AND CENTRAL MEN'S SHELTERED LIVING CELLS TO END HOUSING OF PEOPLE IN AREAS OF EXTREME SENSORY DEPRIVATION AND LACK OF PROGRAM SPACE		
II.A-D	Closure of Disciplinary Isolation Cells	MS	MS
III.	CREATION OF SPECIAL MANAGEMENT UNIT (SMU) STATUS		
III.A-O	Special Management Unit and Status	NA	NA
IV.	PROHIBITION ON DISCIPLINE FOR BEHAVIORS THAT ARE RELATED TO MENTAL HEALTH OR DISABILITY, PROHIBITION ON SANCTIONS THAT POSE RISK OF SERIOUS HAR		
IV.A.	Policies and procedures requiring meaningful consideration of disability in the disciplinary process	AI	AI
IV.B.	Mental Health Review for Rules Violations Recommendations: Continue to monitor and ensure the revisions to OCSD policies and procedures are finalized to include the requirement for staff	PI	AI

	to conduct a meaningful consideration of the relationship of each person's behavior to any mental health disability or Intellectual/Developmental Disability, the efficacy of disciplinary measures versus alternative interventions, and the impact of disciplinary measures on the health and well-being of incarcerated people with disabilities. The Expert notes that the Correctional Health Services (CHS) Policy 6602 Health Evaluations for OCSD IPs who violate Jail Rules has been implemented.		
IV.C.	Consideration of mental health input in the disciplinary process.	PI	AI
IV.D.	Disability accommodations during the disciplinary process Recommendations: Ensure the Disciplinary Hearing Officer checks the ADA Tracking System and ensures the provision of reasonable accommodations and effective communication during the disciplinary process.	PI	PI
IV.E.1.	Designation of Disciplinary Hearing Officer	MS	MS
IV. E. 2.	Designation of supervisory-level clinician	MS	AI

IV. Findings

A. Systemwide Increase Of Minimum Out-Of-Cell Time

- A. *It is the intent of OCSD and CHS to provide as much out-of-cell time and programming to the incarcerated population as possible, consistent with security, classification, and operational needs.*
- B. *Absent exigent circumstances or exigent security concerns that are documented, the County shall offer each person in custody who is not housed in the Special Management Unit a minimum of twenty-four (24) hours out of their cell each week, as follows:*
 - 1. *At least (3) hours per day in a dayroom or other common area, for a total of at least twenty-one (21) hours per week.*

The County reported, “More consistent use of Guardian RFID (along with ServiceNow, collectively ‘Jail Management System’ or ‘JMS’) and improvement in the system’s reporting capabilities will assist OCSD with compliance with the Remedial Plan. OCSD will continue to conduct audits and address deficiencies with training or corrective action as needed. OCSD has established a pilot Chronic Mental Health Treatment Unit (CMHTU) at IRC, in which IPs who are approved to program with others will be cohorted into programming groups, which will consist of either a ‘PC’ or ‘GP’ cohort. This will allow for potentially larger group size, increased out-of-cell time (e.g., dayroom, outdoor recreation, programming), and increased IP participation in activities. The PC/GP cohorting will be assessed as the pilot progresses.”

As of August 2025, OCSD has implemented Guardian RFID, inclusive of tracking reports to accurately track out-of-cell time. The Expert will continue to carefully monitor the implementation and use of Guardian RFID as OCSD moves towards compliance. The standardization of documenting out-of-cell time and the development of summary compliance reports is essential for OCSD to show compliance with the Remedial Plan.

Although Guardian RFID was implemented shortly before the document production period for this report, there have been modifications to the reports and changes to data fields collected. Some of the reports reviewed for this report contain discrepancies and anomalies, making the reported information unreliable for this reporting period. The Expert is hopeful the data and summary reports will be more reliable during the next round of monitoring.

Regardless, the Expert performed a limited review of OCSD's compliance with these provisions, including through on-site observation, staff and IP interviews, and a truncated review of the Guardian RFID, all Module Reports, Time Type Tracking Reports, and Summary Compliance Reports for Dayroom and Recreation access.

As previously reported, the revised OCSD Court & Custody Operations Manual (CCOM) 2006 – Recreation states, “Under normal circumstances, inmates will be afforded the opportunity to use the dayroom for a minimum of three hours per day, unless specific and articulable reasons exist for a shorter time period (i.e., court, off-compound medical appointment, unforeseen security events, facility maintenance, medical emergency). In such cases, the reasons will be thoroughly documented in the Guard Station Daily log by the respective Deputy or Correctional Services Assistant. It is expected dayrooms will generally be available for use by

inmates from 0600 through 2300 hours daily, for a total of at least twenty-one (21) hours per week.”

The policy also states, “Documented security concerns may necessitate the reduction or cancellation of scheduled dayroom time. A Sergeant or the Watch Commander must approve any changes prior to implementation. If an exigency prevents prior approval, staff will notify a supervisor as soon as practical for approval. The reduction or cancellation will be documented in the Guard Station Daily Log along with the name of the approving supervisor. If an inmate has an Individual Inmate Activity Log, the cancellation or reduction will also be documented there.”

Conceptually, the policy complies with RP Requirements, though, as the parties have stipulated, the practice has not been fully implemented with Guardian RFID. It should be noted there are now “Early Return (ER)” comment boxes in Guardian RFID for when an IP is returned prior to minimum allotted amount of time out of cell. However, documentation of Supervisor approval is currently absent in Guardian RFID.

The OCSD has taken steps to increase the provision of out-of-cell time. This includes the successful process of clustering and increasing group sizes for more effective and additional programming of incarcerated people with similar classification levels and factors.

Additional classification reviews should also be considered to facilitate additional out-of-cell time opportunities. OCSD has improved out of cell opportunities to meet RP Requirements.

The Expert concurs with the previous Expert’s finding that enhancing semi-annual classification reviews could provide OCSD the ability to increase group sizes and to gain additional out of cell programming opportunities. This more robust classification process would provide an avenue for IPs to work themselves to lower classification levels, and if their classification level is lowered, this may allow for the IP to be assigned to a larger group and may provide increased program opportunities, including self-help, education, and access to dayroom/recreation.

When interviewed, staff provided correct responses regarding the RP requirement for daily dayroom access. The Expert reviewed newly implemented Guardian RFID data and conducted a limited number of non-dorm housed IP interviews. Although it appears improvement has been made, the Expert is not able to say with confidence that OCSD is consistently providing the required three (3) hours of dayroom daily until a review of post January 1 Guardian RFID improvements can be assessed.

The Expert interviewed a total of fifty-three (53) IPs housed in both dorm and celled living.

- Forty-eight (48) or 90% indicated they receive the minimum of three hours of dayroom daily.
 - CMJ: Twenty-five (25) out of twenty-seven (27) or 92%.
 - IRC: Six (6) out of eight (8) or 75%.
 - TLF: Seventeen (17) out of eighteen (18) or 95%.

All fifty-three (53) IPs reported they have access to the dayrooms at different times of the day throughout the week. It should be noted these anecdotal compliance ratings are based on a limited number of interviews for both dorm and celled IPs and conducted during a period of time several months outside of the document production period for this round of monitoring. As a result, there will naturally be some inconsistencies between interview compliance ratings and document production compliance ratings as OCSD moves towards a more consistent compliance level.

The Expert plans to concentrate on non-dorm housed IPs during future interviews in order to provide a more useful comparison between interview results and data review results.

The OCSD produced the following OCSD Guardian RFID Reports, All Module Report, and Time Type Tracking Report (Dayroom), Time Tracking Report (Recreation), and Summary Compliance Reports for the week of July 13-19, 2025, September 21-27, 2025, and November 2-8, 2025.

A cursory review of one of the reports (CMJ-July 13, 2025, to July 19, 2025) revealed the following data inconsistencies:

- Forty-one (41) identical entries showing out of cell duration of eighty-nine (89) hours for the seven-day period all logged by the same individual.
- Eight hundred sixty (860) entries logging out of cell duration of between 4299 and 4419 hours for a seven-day period.
- Forty-one (41) identical “Early Return-Voluntary” comments with identical end times.

It should be noted OCSD implemented Guardian RFID shortly before this reporting period. As with any new IT tracking system, anomalies and bugs can be expected. The Expert has extensive experience in developing, implementing, and modifying department-wide tracking and process systems. Rarely do systems immediately report accurate data or report it in the way that is needed. There is always a learning phase, both from an IT programming standpoint and a user familiarization standpoint.

The OCSD IT subject matter expert (SME) indicates major system corrections were made to Guardian RFID effective January 1, 2026. The OCSD IT SME made himself readily available to the Expert whenever a question was raised or clarification was needed. He patiently attempted to explain how the Guardian RFID system works, how it reports, and how to maneuver through its complex data sets. His extensive operational and IT knowledge and patience with the Expert was greatly appreciated.

The Expert conducted an analysis of the data from the All Module Report, the Time Type Tracking Report (Dayroom), and the Summary Compliance Report from each Module to determine if IPs 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. The Expert performed this analysis for every Module at all OCSD Facilities for housing Mods (non-dorm).

- CMJ (Mods A, B, C, D, E, F, and O),
- IRC (Mods J, K, L, and M)

- TLF (Mods I, J, K, L, M, N, O, P, Q, and R)

The Expert noted differing numbers between facilities and mods and therefore the Expert will include the percentage of compliance per facility as well as system-wide summarization of compliance with the RP requirements. It is also noted the demographics of IP classifications, as well as medical and/or mental health factors in certain mods, have an impact on the ability of OCSD to meet RP dayroom requirements for certain populations (e.g., IRC-L, IRC-K, and TLF-P):

All Jails

This summary consolidates the assessment of compliance with the RP requirement of providing/offering 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 across CMJ, IRC, and TLF facilities (non-dorm housing) for the weeks of July 13-19, 2025, September 21-27, 2025, and November 2-8, 2025.

According to Guardian RFID data provided to the Expert, the overall compliance rating for non-dorm housing Mods for dayroom access is **66.95%** (A 1.15% decline from the 7th Round compliance rating of 68.1%). The Expert will need to see data after the January 1, 2026, Guardian RFID improvements before making any definitive assessment of compliance.

Compliance for the separate document production time periods reveals some inconsistencies over time:

- July 13-19, 2025, reported an overall dayroom access compliance of 73.06%
- September 21-27, 2025, reported an overall dayroom access compliance of 76.06%
- November 2-8, 2025, reported an overall dayroom access compliance of 71.43%

CMJ

According to Guardian RFID data provided to the Expert, the overall compliance rating for non-dorm housing Mods at CMJ is **57.84%** (A 5.06% decline from the 7th Round compliance rating of 62.90%).

IRC

According to Guardian RFID data provided to the Expert, the overall compliance rating for non-dorm housing Mods at IRC is **61.57%** (A 6.53% decline from the 7th Round compliance rating of 70.80%).

TLF

According to Guardian RFID data provided to the Expert, the overall compliance rating for non-dorm housing Mods at TLF is **81.46%** (A .86% improvement from the 7th Round compliance rating of 80.60%).

Based on a review of newly implemented Guardian RFID reports, interviews with staff, and the limited number of interviews with IPs housed in non-dorm Mods, the Expert finds OCSD has improved in the offering of at least three (3) hours of dayroom time daily. However, it does not appear OCSD will be able to show compliance until after the January 1 Guardian RFID improvements can be assessed.

Anecdotal on-site observations would lead a reasonable person to believe dayrooms and yards are not being utilized as much as they should be. There were many instances at different times during the tour where the Expert entered a Mod where dayrooms and recreation areas were closed. It appears the use of dayrooms and recreation varies greatly from facility to facility, Mod to Mod, Team to Team, and Shift to Shift:

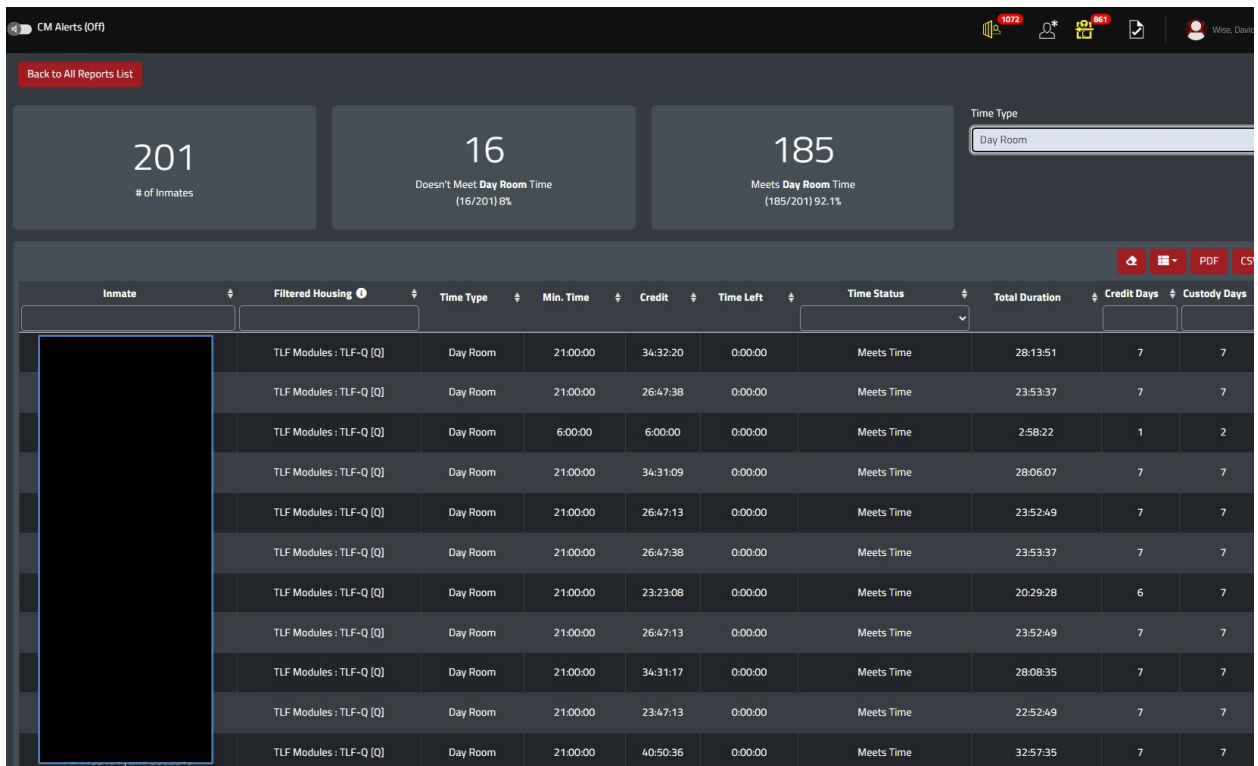
- Some staff indicated shift change and morning briefings prevent opening dayrooms and recreation until around 0700 hours. Parties have met and conferred on this subject and have agreed to a starting time of 0715 hours moving forward.
- Some Mods have the previous shift open dayrooms and recreation prior to the next shift coming on duty.
- Some Mods/shifts keep dayroom and recreation closed during count.
- Some Mods/shifts will release for dayroom and recreation once the Mod count is cleared.
- Some Mods/shifts wait for the Facility count to clear before opening dayroom and recreation.
- Some Mods/shifts appear to allow dayroom and recreation to run “during” count.

The OCSD allows discretion in how modules operate during daily operational activities {See CCOM Section 1719.2(a)(5)(i)}. However, without supervisory and managerial oversight to ensure consistent operations across modules, achieving compliance will be significantly delayed, if not entirely unattainable. The OCSD will need to be able to articulate safety and security concerns when programming is limited. The modifications to how Guardian RFID reports compliance should significantly improve OCSD’s ability to self-monitor and ensure compliance with RP out-of-cell requirements.

Guardian RFID Improvements

The document production period for this report was July 1, 2025, to December 31, 2025. Effective January 1, 2026, a new “real-time” interface dashboard for Guardian RFID was made available for Staff, Supervisors, and Jail Commanders. The Expert heard from Jail Commanders during the on-site tour of how they can now look at the dashboard and immediately identify Mods not meeting out-of-cell requirements and follow up with Supervisors and Staff of those Mods.

The OCSD IT SME provided the Expert with some sample screenshots of these new dashboard interfaces:



The screenshot shows a dashboard with three summary cards at the top: 201 # of Inmates, 16 Doesn't Meet Day Room Time (16/201) 8%, and 185 Meets Day Room Time (185/201) 92.1%. Below these is a table with columns: Inmate, Filtered Housing, Time Type, Min. Time, Credit, Time Left, Time Status, Total Duration, Credit Days, and Custody Days. The table contains 11 rows of data for 'TLF Modules : TLF-Q [Q]' in 'Day Room' status, all with 'Meets Time' status.

Inmate	Filtered Housing	Time Type	Min. Time	Credit	Time Left	Time Status	Total Duration	Credit Days	Custody Days
	TLF Modules : TLF-Q [Q]	Day Room	21:00:00	34:32:20	0:00:00	Meets Time	28:13:51	7	7
	TLF Modules : TLF-Q [Q]	Day Room	21:00:00	26:47:38	0:00:00	Meets Time	23:53:37	7	7
	TLF Modules : TLF-Q [Q]	Day Room	6:00:00	6:00:00	0:00:00	Meets Time	2:58:22	1	2
	TLF Modules : TLF-Q [Q]	Day Room	21:00:00	34:31:09	0:00:00	Meets Time	28:06:07	7	7
	TLF Modules : TLF-Q [Q]	Day Room	21:00:00	26:47:13	0:00:00	Meets Time	23:52:49	7	7
	TLF Modules : TLF-Q [Q]	Day Room	21:00:00	26:47:38	0:00:00	Meets Time	23:53:37	7	7
	TLF Modules : TLF-Q [Q]	Day Room	21:00:00	23:23:08	0:00:00	Meets Time	20:29:28	6	7
	TLF Modules : TLF-Q [Q]	Day Room	21:00:00	26:47:13	0:00:00	Meets Time	23:52:49	7	7
	TLF Modules : TLF-Q [Q]	Day Room	21:00:00	34:31:17	0:00:00	Meets Time	28:08:35	7	7
	TLF Modules : TLF-Q [Q]	Day Room	21:00:00	23:47:13	0:00:00	Meets Time	22:52:49	7	7
	TLF Modules : TLF-Q [Q]	Day Room	21:00:00	40:50:36	0:00:00	Meets Time	32:57:35	7	7

CM Alerts (Off)

1072

Wise, David

Back to All Reports List

201
of Inmates

55
Doesn't Meet Recreation Time
(55/201) 27.4%

146
Meets Recreation Time
(146/201) 72.7%

Time Type
Recreation

Inmate	Filtered Housing	Time Type	Min. Time	Credit	Time Left	Time Status	Total Duration	Credit Days	Custody Days
	TLF Modules : TLF-Q [Q]	Recreation	3:00:00	3:00:00	0:00:00	Meets Time	2:23:46	2	7
	TLF Modules : TLF-Q [Q]	Recreation	3:00:00	1:30:00	1:30:00	Doesn't Meet Time	0:00:00	1	7
	TLF Modules : TLF-Q [Q]	Recreation	0:51:26	0:00:00	0:51:26	Doesn't Meet Time	0:00:00	0	2
	TLF Modules : TLF-Q [Q]	Recreation	3:00:00	3:00:00	0:00:00	Meets Time	1:19:56	2	7
	TLF Modules : TLF-Q [Q]	Recreation	3:00:00	5:16:27	0:00:00	Meets Time	5:16:27	2	7
	TLF Modules : TLF-Q [Q]	Recreation	3:00:00	1:30:00	1:30:00	Doesn't Meet Time	0:00:00	1	7
	TLF Modules : TLF-Q [Q]	Recreation	3:00:00	4:04:49	0:00:00	Meets Time	4:04:49	2	7
	TLF Modules : TLF-Q [Q]	Recreation	3:00:00	5:16:38	0:00:00	Meets Time	5:16:38	2	7
	TLF Modules : TLF-Q [Q]	Recreation	3:00:00	7:07:39	0:00:00	Meets Time	7:07:39	2	7
	TLF Modules : TLF-Q [Q]	Recreation	3:00:00	3:34:23	0:00:00	Meets Time	2:04:23	2	7

CM Alerts (Off)

1000

Wise, David

Rec / Dayroom Dashboard

169
of Inmates

256
of Records

93
with Min Days (2)

76
without Min Days (2)

47
with Records Today

122
without Records Today

Create Entry

From: 03/22/2026 To: 03/28/2026 Housing Search: TLF-Q [Q]

Apply Home Location Filters (Off)

Currently at Recreation Rec / Dayroom

List of all Rec / Dayroom activity for the selected time range (current week by default starting on Sundays) and filters (only in custody by default)

Inmate	Housing	Location	Status	Start	End	Duration	Time Credit	Time Type	Officer Name	Details	Media
	F-Q-51 : TLF-Q-51-10	TLF-Q Out of Cell : TLF-Q Outdoor Recreation	Accepted	2026-03-26 12:00:23	2026-03-26 13:34:30	01h:34m:07s	01h:34m:07s	Recreation	Start: MONROY, TONATIUH		
	F-Q-51 : TLF-Q-51-10	TLF-Q Out of Cell : TLF-Q Outdoor Recreation	Accepted	2026-03-26 12:00:23	2026-03-26 13:34:30	01h:34m:07s	01h:34m:07s	Recreation	Start: MONROY, TONATIUH		
	F-Q-51 : TLF-Q-51-11	TLF-Q Out of Cell : TLF-Q Outdoor Recreation	Accepted	2026-03-26 12:00:23	2026-03-26 13:34:30	01h:34m:07s	01h:34m:07s	Recreation	Start: MONROY, TONATIUH		
	F-Q-51 : TLF-Q-51-16	TLF-Q Out of Cell : TLF-Q Outdoor Recreation	Accepted	2026-03-26 12:00:23	2026-03-26 13:34:30	01h:34m:07s	01h:34m:07s	Recreation	Start: MONROY, TONATIUH		
	F-Q-51 : TLF-Q-51-11	TLF-Q Out of Cell : TLF-Q Outdoor Recreation	Accepted	2026-03-26 12:00:23	2026-03-26 13:34:30	01h:34m:07s	01h:34m:07s	Recreation	Start: MONROY, TONATIUH		
	F-Q-51 : TLF-Q-51-16	TLF-Q Out of Cell : TLF-Q Outdoor Recreation	Accepted	2026-03-26 12:00:23	2026-03-26 13:34:30	01h:34m:07s	01h:34m:07s	Recreation	Start: MONROY, TONATIUH		
	F-Q-49 : TLF-Q-49-16	TLF-Q Out of Cell : TLF-Q Outdoor Recreation	Accepted	2026-03-26 10:53:05	2026-03-26 11:56:11	01h:03m:06s	01h:30m:00s	Recreation	Start: MONROY, TONATIUH End: MONROY, TONATIUH	ER: [Early Return: Voluntary / Self Return]	

Although this is only the second monitoring tour using data from Guardian RFID, it does appear the implementation of Guardian RFID will provide the Expert with the cumulative data needed for the Expert – and OCSD's own quality assurance teams – to measure OCSD's compliance with the RP requirements in the future.

Based on the above, the Expert finds OCSD has partially implemented the RP requirements.

Partially Implemented (Previous Rating Partially Implemented)

- a. *OCSD will offer additional dayroom time beyond three (3) hours per day as scheduling and classification needs allow. To do so, OCSD will ensure that dayrooms in celled housing units will be available and occupied for use by incarcerated people from 0600 through 2300 hours daily, except in cases of emergency and as necessary for particular events related to the safety and security of the institution (e.g., counts, searches). Once every incarcerated person in a celled housing unit has been offered use of the dayroom and, if they choose, used the dayroom for three hours a day, OCSD shall offer another opportunity to use the dayroom to incarcerated people who have already used the dayroom or were already offered but declined the opportunity to use the dayroom. OCSD shall make efforts to rotate these opportunities for additional dayroom among the incarcerated people in a housing unit or Sector so that everyone in the unit or Sector can have approximately equal additional dayroom time. If everyone in the unit or Sector has had an opportunity for dayroom time and everyone refuses any subsequent offer of additional dayroom time, the dayroom will be closed for two hours. Incarcerated persons will then be offered dayroom on a recurring two-hour cycle for the remainder of the day. If a pattern develops that an incarcerated person is refusing an offer of dayroom time in an apparent attempt to obtain a specific dayroom time, the incarcerated person will be informed that the specific dayroom time will not be offered and will be given the opportunity to accept the offered time.*

The County reported, "Consistent with the requirement is that OCSD "offer additional dayroom time beyond three (3) hours per day as scheduling and classification needs allow," OCSD is offering additional time to more than 30% of the IPs. That said, more consistent use of Guardian RFID (along with ServiceNow, collectively 'Jail Management System' or 'JMS') and improvement in the system's reporting capabilities will assist OCSD with compliance with the Remedial Plan. OCSD has established a pilot Chronic Mental Health Treatment Unit (CMHTU) at IRC, in which IPs who are approved to program with others will be cohorted into programming groups, which will consist of either a 'PC' or 'GP' cohort. This will allow for potentially larger group size, increased out-of-cell time (e.g., dayroom, outdoor recreation, programming), and increased IP participation in activities. The PC/GP cohorting will be assessed as the pilot progresses."

The revised OCSD Court & Custody Operations Manual (CCOM) 2006 – Recreation states, "Once every inmate or group has been offered or used the dayroom, staff shall offer all inmates or groups additional opportunities for dayroom use between the hours of 0600-2300 hours, even if an inmate or group previously refused. Staff shall make efforts to rotate the opportunities for additional dayroom so inmates in a Sector or unit can have approximately equal additional dayroom time. If every inmate in a Sector or unit refuses additional dayroom time, dayrooms will be closed for two (2) hours. Inmates will then be offered additional

dayroom on a recurring two (2) hour cycle for the remainder of the day. If a pattern develops that an inmate or group is refusing an offer of dayroom time in an apparent attempt to obtain a specific time, the inmate or group will be informed that the specific dayroom time they are attempting to obtain will not be offered, and instead will be given the opportunity to accept the offered time.”

The Expert interviewed fifty-three (53) IPs regarding additional access to dayroom (Recycle). A total of twenty-one (21) or **39%** indicated they receive additional access to dayrooms (Recycle).

- CMJ: Nineteen (19) out of twenty-seven (27) or 70%.
- IRC: One (1) out of eight (8) or 12%
- TLF: Eleven (11) out of eighteen (18) or 60%

All Jails

The Expert reviewed Guardian RFID data received regarding dayroom “Recycle.” Running numbers for all non-dorm facilities during the three one-week periods (July 13-19, 2025; September 21-27, 2025; and November 2-8, 2025) reveal an overall compliance rating of **38%**. Calculated by the total number of opportunities greater than seven (7) (1419) divided by the total number of offenders (3716). That is consistent with IP interviews and with what was calculated in the 7th report (38%). However, as discussed above, the initial Guardian RFID reports had some inconsistencies and anomalies prior to January 1, 2026. The Expert will need to review data from after the January 1, 2026, Guardian RFID improvements before making any definitive assessment of compliance.

CMJ

- Population: 982 IPs
- Additional Access: 195 IPs (19.8%).

IRC

- Population: 318 IPs
- Additional Access: 189 IPs (59.4%)

TLF

- Population: 2416 IPs
- Additional Access: 1035 IPs (42.8%)

IP interviews revealed the hours of dayroom provided to particular IPs vary throughout the week. The Expert notes not all IPs have the opportunity to have additional dayroom access every day because individuals/groups are provided the extra time on a rotational basis.

The Expert examined the raw data provided for this report and was able to gather the following information regarding access to dayroom and recreation from 0600 hours to 2300 hours. The Expert took a snapshot look at all start times and end times on 07/13/25 (First day of document production) and again on 11/08/25 (Last day of document production). The Expert then looked at all start times at or around 0600 hours and end times at or around 2300 hours:

CMJ

- 07/13/25:
 - 88 out of 712 start times were at or around 0600 hours (12%)
 - 47 out of 451 end times were at or around 2300 hours (10%)
- 11/08/25:
 - 60 out of 771 start times were at or around 0600 hours (7%)
 - 49 out of 771 end times were at or around 2300 hours (6%)

IRC

- 07/13/25:
 - 93 out of 564 start times were at or around 0600 hours (16%)
 - 18 out of 380 end times were at or around 2300 hours (4%)
- 11/08/25:
 - 55 out of 455 start times were at or around 0600 hours (12%)
 - 31 out of 291 end times were at or around 2300 hours (10%)

TLF

- 07/13/25:
 - 185 out of 2290 start times were at or around 0600 hours (8%)
 - 97 out of 1835 end times were at or around 2300 hours (5%)
- 11/08/25:
 - 410 out of 2184 start times were at or around 0600 hours (18%)
 - 282 out of 2184 end times were at or around 2300 hours (13%)

The Expert provides these numbers for two reasons: (1) to show, at least at some level, OCSD is making the dayrooms and recreation yards available from 0600 hours to 2300 hours; and (2) there were obviously some data issues with these earlier reports as there should not have been an unequal amount of start and end times for any specific day. The other caveat to this analysis is that as OCSD makes more dayroom and recreation available to IPs, there will be more total start times and total end times. The result may be a decrease in percentage but an overall increase in access to dayrooms and recreation.

The Expert finds OCSD continues to improve on the requirement of providing additional access to out-of-cell (dayroom), opening the dayrooms at 0600 hours, and closing the dayrooms at 2300 hours, absent emergent circumstances. The Expert is hopeful the January 1, 2026, modifications to Guardian RFID will assist OCSD in providing the Expert with the data necessary for the Expert to measure OCSD's compliance with this RP requirement.

Based on this, the Expert finds that OCSD has Partially Implemented the RP requirements.

Partially Implemented (Previous Rating Partially Implemented)

- b. *When people are provided dayroom time, OCSD staff will ensure they have ready access to toilet facilities. This may be accomplished by staff opening their cell door promptly upon request (and allow them to return to dayroom after using the toilet/sink), or other appropriate procedure.*

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. *OCSD shall document if there are exigent circumstances, if a person is at court, or if the person is at an off-site medical appointment, so as to preclude the provision of minimum dayroom time on a given day.*

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. *Scheduled programming in the dayroom may be included in the three hours per day of dayroom time.*

The revised OCSD Court & Custody Operations Manual (CCOM) 2006 – Recreation states, “8. Scheduled programs that take place in the dayroom may be included as part of the minimum required dayroom time.”

Note: This section offers clarifications as to the scope of other requirements in the SA and informs the analysis of the dayroom-related SA requirements. The narrative is provided only as contextual considerations in assessing the implementation of those requirements. Based on this, a Compliance rating is not warranted.

2. *At least three (3) hours per week outdoors for exercise and/or recreation.*

The County reported, “More consistent use of Guardian RFID (along with ServiceNow, collectively ‘Jail Management System’ or ‘JMS’) and improvement in the system’s reporting capabilities will assist OCSD with compliance with the Remedial Plan. OCSD will continue to conduct audits and address deficiencies with training. OCSD has established a pilot Chronic Mental Health Treatment Unit (CMHTU) at IRC, in which IPs who are approved to program with others will be cohorted into programming groups, which will consist of either a ‘PC’ or ‘GP’ cohort. This will allow for potentially larger group size, increased out-of-cell time (e.g., dayroom, outdoor recreation, programming), and increased IP participation in activities. The PC/GP cohorting will be assessed as the pilot progresses.”

The Expert interviewed a total of fifty-six (56) IPs housed in both dorm and celled living.

- Forty (40) or 77.9% indicated they receive the minimum of three hours of recreation weekly:
 - CMJ: Twenty-one (21) out of twenty-seven (27) or 77%.
 - IRC: Five (5) out of eight (8) or 62.5%.
 - TLF: Thirteen (13) out of eighteen (18) or 72.2%.
 - JMF: Three (3) out of three (3) or 100%

Numerous IPs stated they were offered or provided access to recreation at least twice a week. Some reported receiving three (3) hours on a single day, some reported receiving 1.5 hours twice a week, and some reported being offered recreation only one (1) time in a period of two (2) weeks.

OCSD produced the Guardian RFID Reports, All Module Report, and Time Type Tracking Report (Dayroom), Time Tracking Report (Recreation), and Summary Compliance Reports for the weeks of July 13-19, 2025; September 21-27, 2025, and November 2-8, 2025.

All Jails

According to Guardian RFID data provided to the Expert, the overall compliance rating for non-dorm housing Mods for recreation access is **62.36%** (A 2.36% improvement from the 7th Round compliance rating of 60.0%). The Expert will need to see data after the January 1, 2026, Guardian RFID improvements before making any definitive assessment of compliance.

Overall compliance for the separate document production time periods reveals a small but consistent improvement over time:

- July 13-19, 2025, reported an overall recreation access compliance of 60.38%
- September 21-27, 2025, reported an overall recreation access compliance of 62.88%
- November 2-8, 2025, reported an overall recreation access compliance of 63.79%

CMJ

According to Guardian RFID data provided to the Expert, the overall recreation access compliance rating for non-dorm housing Mods at CMJ is **58.78%** (A 4.82% decline from the 7th Round compliance rating of 63.6%).

IRC

According to Guardian RFID data provided to the Expert, the overall recreation access compliance rating for non-dorm housing Mods at IRC is **68.02%** (A 27.8% improvement from the 7th Round compliance rating of 40.20%).

TLF

According to Guardian RFID data provided to the Expert, the overall recreation access compliance rating for non-dorm housing Mods at TLF is **62.84%** (A 17.16% decline from the 7th Round compliance rating of 80.0%).

The Expert finds OCSD does not consistently provide the required three (3) hours minimum per week of outdoor exercise and/or recreation. During the monitoring tour, the Expert observed recreation yards empty in various Mods. The Expert finds OCSD has partially implemented the RP requirements.

Partially Implemented (Previous Rating Partially Implemented)

- a. *OCSD will offer additional outdoor exercise and/or recreation time beyond three (3) hours per week as scheduling and classification needs allow. To do so, OCSD will ensure that all outdoor Recreation areas are in use by incarcerated people from 0600 through 2300 hours daily, except in cases of emergency and as necessary for particular events related to the safety and security of the institution (e.g., counts, searches). For the outdoor space adjacent to the Theo Lacy Barracks (the "Green Sector"), where artificial lighting is unavailable, OCSD will ensure that the Green Sector is in use by incarcerated people during daylight hours, except in cases of emergency and as necessary for particular events related to the safety and security of the institution (e.g., counts, searches). Once every incarcerated person has been offered use of the outdoor Recreation area and, if they choose, used the outdoor Recreation area for three hours per week, OCSD shall offer additional opportunities to use the outdoor Recreation area to incarcerated people who already used the outdoor Recreation area or were already offered the opportunity to use the outdoor Recreation area. OCSD shall make efforts to rotate these opportunities for additional outdoor recreation among the incarcerated people so that everyone can have approximately equal additional outdoor Recreation time. If everyone in the unit or Sector has had an opportunity for outdoor Recreation time and everyone refuses any subsequent offer of additional outdoor Recreation time, outdoor recreation will be closed for two hours. Incarcerated persons will then be offered outdoor recreation on a recurring two-hour cycle for the remainder of the day. If a pattern develops that an incarcerated person is refusing an offer of outdoor Recreation time in an apparent attempt to obtain a specific outdoor Recreation time, the incarcerated person will be informed that the specific outdoor Recreation time will not be offered and will be given the opportunity to accept the offered time.*

The County reported, "More consistent use of Guardian RFID (along with ServiceNow, collectively 'Jail Management System' or 'JMS') and improvement in the system's reporting capabilities will assist OCSD with compliance with the Remedial Plan. OCSD will consider whether a change in policy and/or a memo are needed to ensure it is documented in JMS when/why Green Sectors are closed. OCSD will continue to conduct audits and address deficiencies with training or corrective action as needed. OCSD has established a pilot Chronic Mental Health Treatment Unit (CMHTU) at IRC, in which IPs who are approved to program with others will be cohorted into programming groups, which will consist of either a

‘PC’ or ‘GP’ cohort. This will allow for potentially larger group size, increased out-of-cell time (e.g., dayroom, outdoor recreation, programming), and increased IP participation in activities. The PC/GP cohorting will be assessed as the pilot progresses.”

The Expert spent considerable time attempting to determine if the Guardian RFID data provided could show OCSD’s compliance efforts for this RP requirement. The Expert utilized the “Total Opportunities for Recreation” column on the “Combined Data” tab of the Summary Compliance Report to manually calculate compliance. Since each opportunity equates to 1.5 hours of recreation, three or more opportunities signifies additional recreation access.

There was a total of 6,569 recreation opportunities for non-dorm Mods during the twenty-one day document production period (July 13-19, 2025; September 21-27, 2025; November 2-8, 2025). There were 1,474 recreation opportunities over the minimum required number of two (2). That results in **22.4%** of IPs being offered “Recycle” recreation. (A reduction from the 7th Round of 30%). This percentage is not intended to reflect a level of compliance. It is provided only to show the percentage of IPs who were offered additional recreation time during the reporting period. It has been suggested that the measurement of compliance for this requirement should be the level to which recreation yards are utilized when available. The Expert will need to gather more information and gain a better understanding of the parties’ agreement on this proposed measurement standard before making a decision on compliance.

The Expert did not extend the analysis to separate facilities based on the low compliance rating and the concern with the veracity of the compliance data for this document production period. It is the hope modifications made to Guardian RFID effective January 1, 2026, will provide the OCSD and the Expert with less labor-intensive access to more accurate information moving forward.

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

Partially Implemented (Previous Rating Partially Implemented)

- b. OCSD shall document if exigent circumstances or inclement weather affecting the safety of the outdoor Recreation area preclude the provision of the minimum outdoor time in a given week.*

The County reported, “More consistent use of Guardian RFID (along with ServiceNow, collectively “Jail Management System” or “JMS”) and improvement in the system’s reporting capabilities will assist OCSD with compliance with the Remedial Plan, including whether circumstances or weather preclude the provision of the minimum outdoor time in a given week. The Guard Station Daily Log in JMS should reflect time opened, time closed, and if not opened, the reason why. OCSD will consider whether a change in policy and/or a memo are needed to ensure it is documented in JMS when/why Green Sectors are closed.”

The implementation of the Guardian RFID and subsequent modifications effective January 1, 2026, will assist OCSD in providing the Expert with cumulative data to ensure compliance with the RP requirements. Future document production requests will also include requests for Guard Station Logs/Recreation Guard Station Logs filtered to show Recreation only entries. This should assist the Expert in determining compliance with this RP requirement.

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

Partially Implemented (Previous Rating Partially Implemented)

3. *OCSD will offer additional programming, including through electronic tablets, that will be available for use when people are confined to their cells, among other times.*

The County reported, “OCSD will remind deputies: 1) to provide additional oversight of inmate workers handing out tablets to ensure every incarcerated person has the opportunity to utilize a tablet daily, and 2) that tablets are not to be taken away unless through the official discipline process pursuant to CCOM 1602.5. OCSD will continue to work with the tablet vendor to ensure compliance with contract requirements, including tablet counts and maintaining a 2:1 tablet ratio.”

The OCSD previously advised the Expert there is currently one (1) tablet for every two (2) IPs. The IPs alternate access to the Electronic Tablets, such as alternating access during the AM and PM (by tier or sector). The Tablets are collected in the evening and charged during the nighttime hours. The OCSD also reported all IPs, with the exception of those housed in the IRC Mods J, K, and L and TLF Mod J Sector 12, have access to the Electronic Tablets unless restrictions are placed due to disciplinary sanctions. For the IPs housed in the IRC Mods J, K, L and TLF Mod J Sectors 12 (mental health units), access to the Electronic Tablets is determined on a case-by-case basis and with input from mental health staff. The Sabot report on the Rights of People With Disabilities summarizes the access to electronic tablets and staff assistance to people with disabilities in accessing the tablets in Sections E.D., E.E., F.F., and I.D.

The RP states, “available for use.” There is no minimal length of time nor mandated ratio of tablets to IPs required by the RP. However, CCOM Policy 1906-Inmate Computerized Devices (Tablets) does attempt to describe what “available for use” means.

CCOM 1906.3(a) TABLET PROCEDURES states, “Tablets are distributed to eligible inmates *for daily use* ... (emphasis added).

CCOM 1906.5(a) INMATE TABLET DISTRIBUTION AND EARBUD ISSUANCE states, “Each eligible inmate may be provided a tablet”

Discussion: No empirical data regarding tablet distribution was requested or provided to the Expert for this monitoring period. Such a request will be made for future rounds of monitoring. Absent the existence of such data, the Expert can only rely on personal observation and staff/IP interview responses to measure compliance with this RP requirement:

- During this tour, the Expert interviewed forty-eight (48) IPs regarding access to tablets. Of these, forty-two (42) or **87%** indicated they had access to tablets on a daily basis.
 - Based on a limited number of interviews, at a minimum the following Mods appear to not consistently provide daily access to tablets:
 - CMJ-O

- IRC-M
 - TLF-I
 - TLF-J
- Of these forty-eight (48) IPs, thirty-five (35) or **72%** indicated they were issued the tablets on a one for one basis. If one includes the eleven (11) IPs who indicated they shared the tablet with their cellmate, the percentage increases to 95%.
 - There were only two IPs (Interview #1 and Interview #2) who indicated the ratio was more than 2:1. Both IPs were housed in CMJ-A.

CCOM 1906.8(e)(4)(ii) states, “For any inmate tablet suspension beyond an immediate termination of a real time video visit, staff shall follow the below listed procedures to properly document any suspension.”

Discussion: One IP (Interview #3) indicated he had his tablet taken from him by a Deputy as punishment for an undocumented infraction. This is one IP making an allegation, but it is a concern and has been raised in previous reports.

During the eighth monitoring tour, the IP interviews reveal a widespread and consistent access to tablets by IPs. The issuance of tablets is not one-for-one consistently, but all IPs interviewed seemed satisfied with the amount of time they were allotted.

There was one complaint (Interview #3) regarding customer service. The IP indicated the devices are not user friendly and his family got “hung up” on several times when they contacted customer service regarding technical difficulties with the tablet. However, it does not appear to be a widespread concern at this time.

IP regulated tablet sharing: The Expert was concerned when IPs consistently indicated they internally police the sharing of tablets within the housing Mods. The Expert’s first thought was “how many physical altercations have occurred as a result of this policy?” The answer appears to be none based on the disciplinary packets reviewed. However, this is something that needs to be monitored more closely during future on-site tours. It also raises concerns regarding ID/DD IPs who may not be able to advocate for themselves to ensure they have equal access to the tablets. For example, one IP with IDD at TLF reported not receiving access to a tablet. The Expert will want to see actual tablet usage for this population during future tours. (One simple solution would be to ensure any ID/DD IP is issued a tablet one for one and document the issuance.)

In conclusion, although the RP does not specifically require one-for-one access to tablets, OCSD policy does appear to require “daily” access. The Expert finds OCSD is close to Adequate Implementation but needs to improve daily access in some Mods and ensure susceptible IPs are not taken advantage of by other IPs.

Partially Implemented (Previous Rating Partially Implemented)

- C. Consistent with safety and security needs, the County shall take steps to maximize opportunities for people in celled housing units to interact with others during the out-of-cell time.*

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)

- D. The County will make best efforts to accommodate individual needs regarding the time of day for out-of-cell time (e.g., for people with disabilities impacting fatigue, on sleep medications, 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 Adequately Implemented)

- E. The County will make best efforts to ensure all people are offered opportunities for out-of-cell time during normal daylight hours each week.*

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

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

- F. The County shall utilize an effective electronic system for documenting and tracking the amount of out-of-cell time that each person in custody is offered and receives with respect to each of the above categories.*

The County reported, “More consistent use of Guardian RFID (along with ServiceNow, collectively ‘Jail Management System’ or ‘JMS’) and improvement in the system’s reporting capabilities will assist OCSD with compliance with the Remedial Plan. During the next site visit, OCSD can provide clarification to the Expert and DRC regarding the opening and closing of dayrooms and recreation yards, which should be included in Guard Station Daily Logs provided via document production. OCSD has established a pilot Chronic Mental Health Treatment Unit (CMHTU) at IRC, in which IPs who are approved to program with others will be cohorted into programming groups, which will consist of either a ‘PC’ or ‘GP’ cohort. This will allow for potentially larger group size, increased out-of-cell time (e.g., dayroom, outdoor recreation, programming), and increased IP participation in activities. The PC/GP cohorting will be assessed as the pilot progresses.”

As discussed above, Guardian RFID was implemented in 2025 with major modifications made effective January 1, 2026. The Expert is confident the OCSD’s expertise and commitment to accurately tracking and documenting out-of-cell time (as well as other RP requirements) will bear fruit moving forward.

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

Partially Implemented (Previous Rating Partially Implemented)

- G. The County shall conduct electronic audits at least weekly to ensure that OCSD is offering the required out-of-cell time consistent with the provisions set forth herein. Supervisory Staff will regularly review this data for quality assurance and take steps to address any deficiencies.*

The County reported, “The supervisory electronic audits did not go live in JMS until June, which is why they were not reflected in the document production completed in July. More consistent use of Guardian RFID (along with ServiceNow, collectively ‘Jail Management System’ or ‘JMS’) and improvement in the system’s reporting capabilities will assist OCSD with compliance with the Remedial Plan. OCSD will ensure the process is standardized so that they are being done and recorded in the same place.”

The revised OCSD Court & Custody Operations Manual (CCOM) 2006 – Recreation states, “The Sergeant responsible for the housing area shall review dayroom usage as part of the required housing area checks and ensure the three-hour dayroom minimum has been met. If the three-hour dayroom minimum has not been met, the Sergeant will confirm the reason(s) are clearly documented in the Guard Station Daily Log.”

The OCSD did not produce documentation of supervisory electronic audits to ensure OCSD is offering the required out-of-cell time consistent with the RP requirements. Based on the lack of documentation and on supervisory staff interviews, the Expert finds OCSD was not conducting the required weekly electronic audits consistently and was not documenting them consistently during the document production period for this report.

The implementation of the Guardian RFID and modifications effective January 1, 2026, will assist OCSD in providing the Expert with data to measure OCSD’s compliance with the RP requirements. OCSD indicates, effective January 1, 2026, these audits are being documented in the Guardian Supervisor Logs. The Expert will be requesting these logs (filtered by “log audit”) as part of document production requests moving forward. These logs should greatly assist OCSD in complying with this RP Requirement.

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

Partially Implemented (Previous Rating Not Implemented)

- H. OCSD, in coordination with CHS, may place temporary restrictions on dayroom and outdoor Recreation access, such as for issues related to infectious disease control.*

The revised OCSD Court & Custody Operations Manual (CCOM) 2006 – Recreation states, “Correctional Health Services (CHS) may place temporary restrictions on dayroom access, such as for inmates with contagious diseases or inmates who pose a danger to themselves or others.”

Note: This section offers clarifications as to the scope of other requirements in the SA and informs the analysis of the dayroom/outdoor recreation SA requirements. The narrative is provided only as contextual considerations in assessing the implementation of IV.A.1, IV.A.1.a

(Dayroom), IV.A.2, and IV.A.2.a (Outdoor recreation). Based on this, a Compliance rating is not warranted.

- 1) *OCSD may place temporary restrictions on dayroom and outdoor Recreation access for the count, the escort of CHS or other non-custodial personnel, and for any lockdown of a facility/housing unit for security reasons.*

The revised OCSD Court & Custody Operations Manual (CCOM) 2006 – Recreation states, “Events related to the safety and security of the facility (e.g., counts, searches), emergencies, or inclement weather, may necessitate the cancellation or reduction of scheduled recreation time. In the event of a cancellation or failure to provide the minimum required opportunities for recreation, the assigned supervisor shall be notified and the reason for the cancellation or failure shall be documented in the appropriate log.” In addition, the OCSD Court & Custody Operations Manual (CCOM) 2006 – Recreation states, “Staff may temporarily close the dayroom only for as long as necessary to facilitate the daily operations of the housing area, such as counts, inmate safety checks, meals, searches, clothing exchange, commissary, med call, etc., and shall reopen the dayroom when the activity is complete. All activities shall be documented in the Guard Station Daily Log.”

Note: This section offers clarifications as to the scope of other requirements in the SA and informs the analysis of the dayroom /outdoor recreation SA requirements. The narrative is provided only as contextual considerations in assessing the implementation of IV.A.1, IV.A.1.a (Dayroom), IV.A.2, and IV.A.2.a (outdoor recreation). Based on this, a Compliance rating is not warranted.

- J. *In cases where a person refuses out-of-cell time repeatedly (e.g., more than 3 times in one week) and the reason for such refusals may be related to their mental health, medical, or disability status, Jail staff will make a referral to CHS (urgent or higher) for assessment and appropriate clinical follow-up.*

The County reported, “More consistent use of Guardian RFID (along with ServiceNow, collectively ‘Jail Management System’ or ‘JMS’) and improvement in the system’s reporting capabilities will assist OCSD with compliance with the Remedial Plan. OCSD will remind staff to track out-of-cell time refusals and make referrals to CHS where the refusal may be related to their mental health, medical, or disability status. Corrective action will be taken as necessary.”

The revised OCSD Court & Custody Operations Manual (CCOM) 2006 – Recreation states, “In cases where an inmate refuses dayroom or outdoor recreation for more than three (3) times in one week and the reason for such refusal may be related to their mental health, medical, or disability status, staff will make an urgent referral to CHS for assessment and appropriate clinical follow up. Staff will document the referral in the dayroom or outdoor recreation log. If an inmate has an Individual Inmate Activity Log, the referral will also be documented there.” The OCSD Court & Custody Operations Manual (CCOM) 8000 – Inmates with Disabilities states, “If during the interview, the ADA Compliance Unit discovers that an inmate with a disability has refused offers for outdoor recreation three times in a row or has refused offers for dayroom three times in 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, medical or mental health referral or other action is needed to afford meaningful access and shall document the action in the inmate's ADA Inmate Activity Log. During the monthly meeting, the ADA Compliance Unit will also provide the inmate with a message slip to contact the ADA Compliance Unit regarding any disability issues. If at any time prior to the monthly interview, a member of the ADA Compliance Unit becomes aware that an inmate 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 inmate and document the action taken in the ADA Inmate Activity Log."

During a previous monitoring tour, the Expert noted this provision relates in part to ADA RP Section IX.E.2 ("The ADA Compliance Unit shall interview IPs 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..."). Section IX.E.2 is covered in OCSD Policy 8000 (at p. 19), while this provision (RH RP Section J) ("In cases where a person refuses out-of-cell time repeatedly (e.g., more than 3 times in one week) and the reason for such refusals may be related to their mental health, medical, or disability status, Jail staff will make a referral to CHS (urgent or higher) for assessment and appropriate clinical follow-up.") is only partially covered (at p. 7 – requiring documentation of referrals but providing no direction as to custody staff referral requirements). The Expert notes referrals for disabled IPs are being made by the ADA Unit staff. However, it does not appear referrals are being made and tracked for IPs who are not designated as disabled and who refuse out-of-cell time when the refusals may be related to their mental health status. Further policy/training development may be warranted regarding this provision. The Expert will need to evaluate the Guardian RFID reports in future monitoring to determine if the Guardian reports track the refusals.

During this eighth monitoring tour, with the exception of referrals made by the ADA Unit Staff for disabled IPs, the Expert found staff are not tracking which IPs are refusing dayroom or recreation, how many times an IP refuses dayroom or recreation, and whether IPs were referred to CHS when the refusals for dayroom or recreation were related to their mental health, medical, or disability status. Furthermore, several Deputies who were interviewed indicated they open cell doors for dayroom groups, and those who do not want to come out close their doors. The Deputies do not appear to be documenting these "refusals." Based on this, the Expert finds OCSD has partially implemented the RP requirements insofar as a policy has been established, but that policy has not been implemented at this time. It should be noted that the parties have conferred and will be discussing how best to address refusal documentation and response.

Partially Implemented (Previous Rating Partially Implemented)

B. Closure Of Disciplinary Isolation (DI) Cells And Central Men's Sheltered Living Cells To End Housing Of People In Areas Of Extreme Sensory Deprivation And Lack Of Program Space

- A. It is the intent of OCSD to end the system of DI that has historically applied in Orange County jails. This commitment includes ending the use of the 72 DI cells, including 24 cells at the Intake and Release Center (IRC), 32 cells at Theo Lacy, 12 cells at Central Men's Jail, and four (4) cells at Central Women's Jail.*
- B. The DI cells at IRC were recently deactivated and will no longer be used for disciplinary or any other form of housing, effective. The DI cells at IRC are designated to be repurposed for meeting space available for people in custody (legal counsel meetings, mental health contacts, etc.).*
- C. OCSD recently deactivated and will no longer use the DI cells at Theo Lacy, Central Men's Jail, and Central Women's Jail for disciplinary or any other form of housing.*
- D. Notwithstanding the above, OCSD may use the above-referenced cells on a temporary basis for infection control or exigent security reasons.*

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)

C. Creation Of Special Management Unit (SMU) Status

On July 5, 2023, OCSD advised the Expert that they had decided not to move forward with having a Special Management Unit. The Expert also notes that DRC proposed that "in the coming weeks, the parties work on an addendum to the DRC-Orange County SA that memorializes this path forward. We anticipate that several provisions in Section III will be made inapplicable and go away, while some discrete provisions will need to be revised to ensure the necessary protections as to the relevant disciplinary/classification procedures moving forward (e.g., disciplinary sanctions matrix; access to religious activities, showers, mail, telephone, legal counsel; etc.)." The parties are in discussions as to an addendum to the DRC-Orange County SA that memorializes this agreement, to include revision of this RP section with appropriate modifications as to relevant disciplinary/classification procedures, which the Expert will monitor once completed. Based on this, the Expert is not monitoring all of Section III (Creation of Special Management Unit (SMU) Status) of Topic 2 (Restrictive Housing) of RP during this eighth round of monitoring.

During a previous monitoring tour, the DRC requested that, as the parties move forward with discussions regarding discipline and alternatives to SMU, it is important to address the need for proportional, consistent, and reasonable disciplinary practices. Reductions in out-of-cell time and other serious sanctions should remain limited to "only egregious and violent" rule violations. To ensure the disciplinary sanctions match the seriousness of the charges and to ensure fundamental fairness is afforded during the disciplinary process, the Expert recommended that OCSD create a disciplinary matrix that identifies egregious behavior or conduct versus minor rule infractions. This matrix should identify a series of sanctions that match the behavior and also allow the disciplinary Sergeant to have latitude to increase or reduce the sanctions based on aggravating or mitigating factors. During the last monitoring tour, OCSD produced a revised OCSD Jail Rule Violation Discipline (Bail Schedule). The Bail Schedule states, "This is a general guideline and can vary from incident to incident. Consider the totality of the circumstances and the inmate's write-up history prior to issuing punishment. (Progressive) Inmates may be issued Loss of Good Time as a punishment. For Habitual Violators (3rd violation or more), progressive discipline will be assigned no less than discipline recommended for a 2nd offense." The Expert notes that Bail Schedule includes:

- Egregious Offenses
- Major Jail Rule Offenses
- Minor Jail Rule Offenses

The Expert also noted that the "Bail Schedule" includes sanctions for the 1st and 2nd offenses. The Sanctions for the Offenses are as follows:

Egregious Offense 1st Offense

Assault on Staff (Code Alpha)	30 Days LOA
Creating a Disturbance	30 Days LOA
(Egregious &/or Results in large scale-multi inmate disturbance)	
Possession of Drugs or Weapons	10-15 Days LOA
Assault – Multiple Suspects / One victim	15 Days LOA
Assault – Mutual Combat	10 Days LOA

Egregious Offense 2nd Offense

Assault on Staff (Code Alpha)	30 Days LOA, Loss of Good Time
Creating a Disturbance	30 Days LOA, Loss of Good Time
(Egregious &/or Results in large scale-multi inmate disturbance)	
Possession of Drugs or Weapons	10-15 Days LOA, Loss of Good Time
Assault – Multiple Suspects / One victim	15 Days LOA, Loss of Good Time
Assault – Mutual Combat	10 Days LOA, Loss of Good Time

Major Jail Rule Offense 1st Offense

Disrespect to staff (egregious)	15-20 Days LOA
Failure to obey a directive (egregious)	10-15 Days LOA
Tampering with a security device (egregious)	10-15 Days LOA
Tampering With a Security Device (I.D. Card)	10-15 Days LOA
Unauthorized Movement (egregious)	7-10 Days LOA
Destruction of Jail Property (egregious)	7-10 Days LOA
Possession of contraband (egregious)	5-10 Days LOA
Court Refusal	5-10 Days LOA

Major Jail Rule Offense 2nd Offense

Disrespect to staff (egregious)	30 Days LOA, Loss of Good Time
Failure to obey a directive (egregious)	15-20 Days LOA, Loss of Good Time
Tampering with a security device (egregious)	20-30 Days LOA, Loss of Good Time
Tampering With a Security Device (I.D. Card)	15-20 Days LOA
Unauthorized Movement (egregious)	10-15 Days LOA
Destruction of Jail Property (egregious)	10-15 Days LOA
Possession of contraband (egregious)	10-15 Days LOA
Court Refusal	10-15 Days LOA

Minor Jail Rule Offense 1st Offense

Disrespect to staff (simple)	7-10 Days LOA
Creating a Disturbance (Simple)	5-10 Days LOA
Destruction of Jail Property (simple)	5-10 Days LOA
Lying to staff (egregious)	5-10 Days LOA
Hoarding medication	5-10 Days LOA
Tampering with a security device (simple)	5-10 Days LOA
Unauthorized Communication (Including Kites)	5-10 Days LOA
Lying to staff (simple)	3-5 Days LOA
Unauthorized Movement (simple)	3-5 Days LOA

Failure to obey a directive (simple)	3-5 Days LOA
Possession of contraband (simple)	3-5 Days LOA

Minor Jail Rule Offense 2nd Offense

Disrespect to staff (simple)	10-15 Days LOA
Creating a Disturbance (Simple)	10-15 Days LOA
Destruction of Jail Property (simple)	10-15 Days LOA
Lying to staff (egregious)	10-20 Days LOA
Hoarding medication	10-15 Days LOA
Tampering with a security device (simple)	10-15 Days LOA
Unauthorized Communication (Including Kites)	10-15 Days LOA
Lying to staff (simple)	5-10 Days LOA
Unauthorized Movement (simple)	5-10 Days LOA
Failure to obey a directive (simple)	5-10 Days LOA
Possession of contraband (simple)	5-10 Days LOA

Once any further agreement is reached by the parties, the Expert will conduct monitoring of such agreement, as appropriate.

- A. *With the deactivation of the Disciplinary Isolation cells, OCSD shall revise its Disciplinary system to instead utilize an SMU. The SMU will be in designated general modular housing unit(s) and serve as housing for people on a temporary housing status for prescribed periods of time due to a disciplinary violation. SMU will be utilized for only egregious and violent rule violations.*
- B. *OCSD and CHS will implement new procedures to limit the number and length of placements in the SMU, including as set forth below.*
- C. *OCSD shall utilize a disciplinary matrix of penalties that will include alternatives to SMU disciplinary housing status. The matrix shall set forth maximum penalties for each disciplinary violation. SMU disciplinary housing status shall be reserved for offenses involving violence, escape, possession of drugs or weapons, or posing a serious threat to the facility's safety and security or by encouraging others to engage in such misconduct.*
- D. *No SMU disciplinary term for a rule violation will exceed 30 days. Disciplinary SMU placements for violations that arise out of the same episode shall be served concurrently.*
- E. *CHS will be notified prior to the placement of any person in the SMU. A medical evaluation will be conducted within 72 hours prior to a person's placement in the SMU. A mental health evaluation will be conducted within 24 hours prior to a person's placement in the SMU.*
- F. *No person will be placed in the SMU prior to a disciplinary hearing, except in rare cases in which there is a current threat to safety and security of the facility that requires immediate SMU placement.*
 1. *Such placement may occur only with approval of the Watch Commander. CHS will conduct a medical and mental health evaluation within eight hours of the placement.*
 2. *Placement in the SMU pending a disciplinary hearing will not include the loss of any regular privileges.*
- G. *Upon placement in the SMU, OCSD will provide each individual, in writing and with effective communication accommodations as needed, notice as to the conditions,*

privileges, expectations, and incentive-based system that applies in the SMU. OCSD staff shall document that this information is communicated effectively to individuals with disabilities affecting communication.

H. Conditions and Incentive-Based System in the SMU

- 1. A person placed in the SMU will be offered a minimum of two (2) hours per day of out-of-cell time, with opportunities for interaction with others (e.g., shared Dayroom time) consistent with safety and security needs.*
- 2. When a person is placed in the SMU, certain privileges may initially be suspended, as determined at the disciplinary hearing.*
- 3. OCSD will develop an incentive-based system to facilitate reinstatement of privileges based on compliance with Jail regulations. The incentive-based system will include consideration – at the Weekly Review (discussed below) – of early discharge from the SMU and/or reinstatement of privileges based on positive behavior, including:*
 - a. Outdoor recreation*
 - b. Dayroom time beyond the required two (2) hours per day*
 - c. Public visiting*
 - d. access to commissary items*
 - e. access to newspapers, magazines and more than one book (the one book will be in addition to any religious materials, with a process for book exchange promptly upon request)*
 - f. access to personal telephone calls*
 - g. Electronic tablets*
 - h. Cards or games*
 - i. Return of personal property items*
- 4. OCSD will develop clear rules that are effectively communicated to incarcerated persons held in the SMU that explain under what circumstances a person can achieve early release from the SMU and/or reinstatement of privileges.*
- 5. Any person placed in the SMU will not be denied exercise of religion. OCSD will ensure that people in the SMU may participate in religious programming, absent a specific security concern that is documented.*
- 6. Access to showers will not be restricted in the SMU. Additional showers will be provided upon reasonable request and in cases where personal hygiene and sanitation warrant, including where necessary to accommodate people with disabilities (e.g., extra showers for individuals with incontinence). OCSD will ensure adequate documentation as to the provision of showers to each person in the SMU.*
- 7. Any person placed in the SMU will have normal personal mail/correspondence privileges except in cases where the person has been found to have violated correspondence regulations, in which case correspondence may be suspended for no longer than seventy- two (72) hours without the review and approval of the Administrative Captain.*
- 8. Any person placed in the SMU will have access to the telephone on request to contact an attorney, the courts, or for personal emergencies.*
- 9. Access to legal counsel shall not be restricted as a disciplinary measure.*
- 10. Any person in the SMU will always be permitted one book from the Orange County Jail Library, which can be exchanged for another book promptly upon request.*
- I. Regular Classification Review Process in SMU*
 - 1. For each person held in the SMU, custody staff will conduct a review at least every seven (7) days (the “Weekly Review”), regardless of any assessed SMU term*

- imposed, to evaluate the person's current circumstances and determine whether the person should be removed from the SMU and/or have some or all privileges reinstated.*
- 2. The Weekly Review will include a face-to-face interview in a private, out-of-cell setting, consistent with individual security needs, to discuss progress and compliance with the SMU-detained person's individual case plan.*
 - 3. As part of the Weekly Review, custody staff shall confer with mental health and medical Staff about whether the SMU setting and/or denial of privileges/property is causing harm or risk of harm to the individual's well-being and if so, the appropriate steps to address the issue (including removal from SMU or reinstatement of privileges/property (in particular, phone contact/visits with family/loved ones or access to reading/writing/art materials) pursuant to the incentive-based system). Mental health and medical staff input should be documented.*
 - 4. Completion of the Weekly Review process will be overseen by the Watch Commander or other Commander-level-or-higher Staff.*
 - 5. Absent extraordinary circumstances that include a person's persistent failure to comply with facility regulations in a manner that poses a specific threat to safety and security, no SMU placement will exceed thirty (30) days.*
 - 6. If a person is held in the SMU for 28 days, the Administrative Captain will conduct a review (the "28-Day Review"), which shall include a face-to-face interview with the person in a private out-of-cell setting (consistent with individual security needs), consultation with mental health and medical Staff, and consultation with custody staff in the housing unit.*
 - 7. If a person is retained in the SMU following completion of a Weekly Review or 28-Day Review, OCSD will document and provide the person with written notice explaining (a) the reasons for retention in the SMU, and (b) clear expectations for how the person may earn reinstatement of privileges and progress to a less restrictive setting. This information will be effectively communicated to the individual consistent with any applicable communication- and/or disability accommodation-related needs.*
 - 8. Appropriate SMU Review form(s) will be implemented consistent with the provisions set forth herein.*
- J. Hygiene Items and Writing Supplies*
- 1. OCSD will ensure that persons placed in the SMU receive a welfare pack containing appropriate personal hygiene items and writing supplies.*
 - 2. Staff will provide replacement items for all allowable hygiene items and writing supplies promptly upon request, except in cases where the individual is using a particular item improperly.*
 - 3. OCSD will ensure complete and adequate documentation of initial and replacement provision of welfare pack items, including all requests and any refusals.*
 - 4. Any person placed on SMU restrictions will be provided reasonable access (including promptly upon request) to nail clippers, with appropriate restrictions and supervision based on individualized safety concerns.*
- K. OCSD shall not restrict access to Inmate Request forms or Grievance forms in the SMU.*
- L. CHS health care staff will conduct rounds in the SMU at least once per shift, and mental health staff will conduct rounds in the SMU at least once per week.*
- 1. These contacts will include, at a minimum: (a) conversation with each person housed in the SMU; b) visual observation of the person's cell, including the cleanliness of*

- clothing and bed linens; (c) inquiry into whether the person would like to request a confidential meeting with a mental health or medical provider.*
- 2. If a person requests a confidential medical or mental health care contact or Staff identify a mental health or medical need warranting follow-up, Staff shall arrange for timely evaluation and treatment in an appropriate confidential setting.*
- M. In recognition of the distinct risks of Restrictive Housing placement in detention, OCSD will not place people with the following risk factors in the SMU absent rare and extraordinary circumstances in which such placement is necessary to address current, specific safety concerns that are documented, with Watch Commander review and approval, and in such cases only for the minimum time necessary to identify an alternative appropriate placement:*
- 1. People diagnosed with Serious Mental Illness or who have an Intellectual or Developmental Disability;*
 - 2. People with significant medical or daily nursing care needs, consistent with CHS's clinical input;*
 - 3. People who are pregnant, post-partum, who recently had a miscarriage, or who recently had a terminated pregnancy, consistent with CHS's clinical input.*
- N. Safety checks to maintain the safety and health of the persons in SMU and the security of the facility shall be conducted for all individuals on SMU status at least every 30 minutes, at staggered intervals. Completion of safety checks will be timely documented.*
- O. Return of Personal Property Taken During SMU Status*
- 1. Any personal property that is taken from an individual who is subject to SMU disciplinary status will be clearly logged and documented, and the personal property will be held in a secure location until returned.*
 - 2. Return of personal property should be considered during the period of discipline as part of the incentive-based system.*
 - 3. OCSD will return all personal property that was taken during the SMU disciplinary period promptly following the end of the SMU disciplinary period (i.e., within 24 hours). OCSD will document the return of property.*

Not Assessed (Previous Rating Not Assessed)

D. Prohibition On Discipline for Behaviors That Are Related To Mental Health Or Disability, Prohibition On Sanctions That Pose Risk Of Serious Harm

- A. *OCSD and CHS policies and procedures shall require meaningful consideration of the relationship of each person's behavior to any mental health disability or Intellectual/Developmental Disability, the efficacy of disciplinary measures versus alternative interventions, and the impact of disciplinary measures on the health and well-being of incarcerated people with disabilities.*

The Expert was provided a copy of Policy 1602 "Discipline."

1602.1 GENERAL: This section states misconduct "will be" documented and sanctions "will be" imposed. Section 1602.1(e) states, "Violations of law or jail rules **will** (emphasis added) result in disciplinary action."

Discussion: The Expert interviewed several Deputies and Sergeants who report they will many times refer IPs to Mental Health "instead of" documenting a violation. The Expert did not ask whether they did this for just minor violations or for both minor and major violations. The Expert will be assessing this issue during the next on-site tour. Although the end result may be the same (no disciplinary sanctions imposed), this practice may be circumventing mandatory reporting/documentation requirements and eliminating the ability of OCSD to track these types of incidents.

1602.5(c)1. Documentation of Major Violations states, "The Disciplinary Sergeant will check the ADA Tracking List for the inmate and ensure that effective communication and any required accommodations are provided to the inmate during the disciplinary hearing."

Discussion: It is the Expert's understanding that the ADA Tracking List does not include Mental Health status. Most of the Disciplinary Sergeants the Expert interviewed were unable to identify where they would look for this information and admitted they did not look for it. Any assessment regarding a nexus between a violation and mental health (as well as ensuring effective communication) starts with knowing whether the IP was in the Mental Health system at the time of the offense. If staff are looking up this information, it needs to be documented somewhere to show proof of practice.

Another related concern is an apparent inconsistency in how disciplinary actions are processed as it relates to a mental health nexus to the offense. As noted above, there appear to be some instances where staff do not document violations. Furthermore, some Disciplinary Sergeants I interviewed indicated they will usually find charges "Unfounded" if they determine there is a nexus between the behavior and the offense. Other Disciplinary Sergeants indicated they will still make a "Founded" determination regardless of a mental health nexus. OCSD should work to improve consistency in staff practices on this topic.

The OCSD and CHS have implemented a mental health review process to comply with the Remedial Plan's requirement of mental health assessments for discipline for people with mental health disabilities or who have an Intellectual/Developmental Disability. The OCSD

has modified the Sergeant's Disciplinary Hearing Report form to include the following checkboxes:

11. ☐ There is reason to believe the inmate's behavior was unusual, uncharacteristic, or a possible manifestation of mental illness. Classification to refer inmate to CHS M/H for evaluation.
12. ☐ Inmate is (ID) Intellectually Disabled or (DD) Developmentally Disabled. Refer to daily ADA Tracking List. Classification to refer inmate to CHS M/H for evaluation.
13. ☐ (EC) Form Required. Refer to the daily ADA Tracking List.

The Expert did not observe any clinical evaluations of IPs initiated as a result of pending disciplinary sanctions during this on-site tour. However, the Expert did review CHS "Jail Rule Violation Review Findings" attached to almost all disciplinary packets received. It should be noted these forms are filled out some time after the disciplinary hearing. Sometimes, a few days later (Disciplinary Packet #1), sometimes months later (Disciplinary Packet #2).

1602.5(c)2. Documentation of Major Violations states, "For all major write-ups, if any staff has reason to believe the behavior was unusual, uncharacteristic, or a possible manifestation of mental illness and would warrant a Mental Health referral, staff will write 'Refer to Mental Health' in the report."

1602.5(c)4. Documentation of Major Violations states, "For all inmates identified as requiring Effective Communication (EC), effective communication will be used, and an EC Form shall be completed for the following steps of the discipline process: serving the inmate, disciplinary hearing and delivery of discipline. The completed EC Form will be scanned and emailed to ADACompliance@ocsheriff.gov."

Discussion: The Expert did not see any language in any of the violation reports reviewed mentioning "Refer to Mental Health" nor any language regarding the IPs mental health status or possible effective communication needs documented in the violation report, nor any related EC Forms. As stated above, any assessment made by staff regarding a mental health nexus to the violation (and/or effective communication needs) must start with identifying whether the IP was in the Mental Health system (or had effective communication needs) at the time of the offense. It is imperative to provide this critical information to staff from the beginning of the process as the violation packet moves through the process. Having the first documented identification done at the end of the disciplinary hearing is too late. That information needs to be known by the reporting Deputy, the staff member providing the 24-hour waiver form, the Disciplinary Sergeant "before" the hearing, the Classification Sergeant after the hearing, CHS staff conducting assessments, staff issuing the Advisement of Punishment, and any staff involved in the appeal process following the Advisement of Punishment. Furthermore, demonstrating compliance with the RP will require documentation of this identification and consideration at each step to ultimately provide proof of practice.

Although OCSD's efforts to this point should be commended, the Expert's review of disciplinary packets reveals a glaring gap in OCSD's ability to show compliance with the

Remedial Plan requirements under this section. Although this gap was not identified in previous monitoring rounds, the parties have agreed to work constructively and expeditiously to address the Expert's concerns. As a result, the Expert recommends the rating of "Adequately Implemented" remain in place. However, the Expert will continue to monitor this provision closely to ensure the policies and procedures as written (or revised) result in The County being able to show compliance with all the elements of this plan.

Adequately Implemented (Previous Rating Adequately Implemented)

B. People alleged to have committed a rules violation shall be reviewed by a qualified mental health professional if any of the following apply:

- 1. The person is housed in, or is currently referred for placement in, any designated Mental Health Unit.*
- 2. The Disciplinary Hearing Officer or other jail staff have reason to believe the person's behavior was unusual, uncharacteristic, or a possible manifestation of mental illness, including where referral for CHS evaluation is warranted.*
- 3. The person is on the mental health caseload and may be subject to (a) Special Management Unit (SMU) placement, or (b) loss of good time/work time credit as a consequence of the disciplinary violation as charged.*
- 4. If any of the above criteria is met, a mental health clinical staff member who is not the treatment provider for the patient shall complete a Rules Violation Mental Health Review form, indicating:*
 - a. Whether or not the reported behavior was related to mental illness, adaptive functioning deficits, or other disability.*
 - b. Whether the person's behavior is, or may be, connected to any of the following circumstances:*
 - i. An acute or otherwise significant psychiatric episode*
 - ii. An act of self-harm or attempted suicide*
 - iii. A cell extraction related to provision of medical/mental health treatment*
 - iv. Placement in clinical restraints or seclusion.*
 - c. Any other mitigating factors regarding the person's behavior, disability, and/or circumstances that should be considered.*
 - d. Whether particular disciplinary sanctions should be avoided in light of the person's mental health disability or intellectual disability, treatment plan, or adaptive support needs (e.g., the potential adverse mental health impact of denial of phone contact/visits with family members).*
 - e. CHS staff will consider issues of brain development and psychosocial development for young adults (generally, anyone 24 years old or younger) as part of this evaluation, including as they relate to the appropriateness of discipline for the behavior and the potential adverse impacts of particular disciplinary sanctions.*

The OCSD and CHS have implemented a mental health review process to comply with the Remedial Plan's requirement of mental health assessments for discipline for IPs with mental health disabilities or who have an Intellectual/Developmental Disability.

The Expert did not interview CHS Staff during the on-site tour. The Expert will make such interviews a priority during future on-site tours. However, documentation of CHS post hearing assessments were provided as part of pre-tour document production. The Expert did interview the Classification Sergeants regarding the mental health/developmentally disabled/intellectually disabled disciplinary process. This process is new and will continue to be monitored.

The Expert conducted a review of OCSD Rule Violations and CHS MH documentation of OCSD Jail Rule Violations by IPs produced by OCSD. This review consisted of 12 completed Jail Rule Violation packets.

The Expert reviewed twelve disciplinary cases completed between July 1, 2025, through December 31, 2025:

- One case has an incident date of 05/26/25 (Disciplinary Packet #2). Although the incident date is prior to the document production period for this report, it was not completed until the CHS form was signed on 08/02/25. It is a good example of the problem with waiting until after the disciplinary hearing to document mental health and/or ID/DD issues. The violation facts include the IP filing over eleven (11) grievances with allegations such as, “I was not allowed to breath for 5 seconds,” “I wasn’t a growth,” and “I’m a number.” He was issued a Notice of Violation on 06/03/25, where he refused to sign. The Disciplinary Hearing occurred on 06/14/25, where charges were “Founded” and no boxes (#11, #12, or #13) were checked by the Disciplinary Sergeant. It appears the Classification Sergeant referred the packet to CHS, who conducted an assessment on 08/02/25 (over two months after the incident), recommending no penalties based on the IP’s “Psychosocial development/brain development (ID/DD).” The 08/02/25 CHS Violation Review Findings document is the only document in the packet that mentions mental health/ID/DD issues. Unless there were EC Forms generated for every step of the disciplinary process that were not provided to the Expert, there was no identification, documentation, or provision of Effective Communication for a potential ID/DD IP throughout the disciplinary process. The packet did not include an Advisement of Punishment. But it did include an undated screen print showing “No Action.” As a result, it is not clear whether the IP was issued a punishment prior to CHS submitting their findings two months later. It should be noted that after making an inquiry, the Expert was provided documentation of a CHS assessment (Form J-112) of the IP dated 08/25/26 stating, “Cleared DD- Does not meet criteria.” The Expert notes the three (3) month delay between the incident date and final assessment.
- One case (Disciplinary Packet #3) did not include a CHS Violation Review Findings nor an Advisement of Punishment. Absent any documentation of a potential mental health/ID/DD issue in the packet, it is unknown if the IP met any of those categories of disability or if he was given a penalty.
- One case (Disciplinary Packet #1) is missing the violation report (Incident dated 07/26/25) and the Hearing Report (dated 07/28/25) appears to be documented on an older form (revised 01/24) and is missing check boxes #12 and #13.
- One case (Disciplinary Packet #4) is an example of the CHS referral process working. Although there were no mental health issues identified or documented in the violation

packet, the Classification Sergeant followed the CHS recommendation of not assessing “Loss of Telephone” as a penalty.

- One case (Disciplinary Packet #3) is an example of the CHS referral process not working. On 08/01/25, the CHS clinician noted “Other Disability,” “Refusing health treatment/medications,” and all listed penalties were checked as ones that should be avoided. On 08/04/25, the Classification Sergeant revoked all privileges for ten (10) days.
- One case (Disciplinary Packet #5) is the only violation packet received with a checked box (#11) documenting the Disciplinary Sergeant’s belief the violation may have a nexus to a mental health issue and requesting a referral. The CHS Violation Review Findings did not identify any such nexus nor did the clinician recommend avoiding any penalties. It appears the Classification Sergeant assessed no penalties anyway.
- 12 out of 12 violation packets were missing documentation of the checking of ADA Tracking Lists and Mental Health status lists at any stage of the process.
- 3 out of 4 violation packets show CHS recommendations for no penalties to be assessed were followed by the Classification Sergeants.
- Of the 12 cases reviewed, there was one case where the Disciplinary Sergeant identified that the behavior was unusual or uncharacteristic.

Based on the document review, the Expert finds that CHS QMHP staff are conducting an MH assessment according to CHS Policy 6602 Health Evaluations for OCSD IPs who violate Jail Rules and the RP requirements.

However, as described above, there are still instances of Disciplinary Sergeants failing to identify IPs who may need to be referred to Mental Health (Disciplinary Packet #2) and Classification Sergeants who ignore CHS recommendations to not assess the loss of certain privileges as punishment (Disciplinary Packet #3).

The Expert did request additional violation packets for IP’s interviewed during the on-site tour. However, no additional violation packets were received by the Expert as of the writing of this report. Based on this, and the number of inconsistencies discovered in such a small sampling of violation packets, the Expert finds OCSD has not adequately implemented the RP requirements and therefore should be rated as Partially Implemented until more consistency is demonstrated.

Partially Implemented (Previous Rating Adequately Implemented)

C. Consideration of Mental Health Input and Other Disability Information in Disciplinary Process.

- 1. The Disciplinary Hearing Officer shall ensure that incarcerated people are not disciplined for conduct that is related to their mental health disability or Intellectual/Developmental Disability.*
- 2. The Disciplinary Hearing Officer shall consider the mental health clinician's findings and any other available disability information when deciding what, if any, disciplinary action should be imposed.*
- 3. The Disciplinary Hearing Officer shall consider the qualified mental health professional's input on minimizing the deleterious effect of disciplinary measures on the person in view of their Serious Mental Illness, any other relevant disability, or adaptive support needs.*
- 4. OCSD shall not subject any person to discipline for refusing treatment or medications, or for engaging in self-injurious behavior or threats of self-injurious behavior.*

The technical wording of this RP section specifically names "Disciplinary Hearing Officers" as those who are required to consider CHS findings regarding disciplinary actions. Although it is the Disciplinary Sergeants who conduct the hearing and make a finding, it is the Classification Sergeants who determine penalties, if any. As a result, the Expert will limit the requirements of this RP section to Classification Sergeants. Discussion of Classification Sergeant's implementation of the CHS Violation Review Findings was discussed in the previous section. At least 2 of the 12 cases discussed above (Disciplinary Packet #2 and Disciplinary Packet #3) violate this section of the RP. It is the opinion of the Expert that proof of compliance, including through a larger sample size, is necessary before a rating of "Adequately Implemented" can be granted.

Partially Implemented (Previous Rating Adequately Implemented)

D. Disability-Related Accommodations During the Disciplinary Process

- 1. OCSD and CHS shall provide reasonable accommodations (e.g., staff assistant) during the hearing process for people with mental health or intellectual disabilities.*
- 2. OCSD and CHS shall take reasonable steps to ensure the provision of effective communication and necessary assistance to people with disabilities at all stages of the disciplinary process.*
- 3. The Disciplinary Hearing Officer will check the ADA Tracking System and ensure provision of reasonable accommodations and effective communication during the disciplinary process.*

The County reported, "OCSD will review the Expert's recommendation and make any necessary updates to CCOM 1602.5. OCSD will seek clarification from the Expert and DRC regarding the RP requirement since OCSD's understanding of it is not that a staff assistant is required as an accommodation in all cases, but that reasonable accommodations must be provided, which may include, *for example*, a staff assistant. With regard to proof-of-practice, currently there is a checkbox on the Sergeant's Disciplinary Hearing Report form, which requires an EC form and check of the ADA Tracking List, as is required by the RP. OCSD will consider a recommendation from the Expert and DRC as to a different proof-of-practice."

During previous monitoring tours, the Expert noted OCSD Court & Custody 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 policy did not include the following RP requirements:

- That OCSD and CHS must provide staff assistants during the hearing process for people with mental health or intellectual disabilities;
- Ensure the provision of effective communication and necessary assistance to people with disabilities at all stages of the disciplinary process; and
- The requirement for the Disciplinary Hearing Officer is to check the ADA Tracking System and ensure the provision of reasonable accommodations and effective communication during the disciplinary process.

The Expert notes OCSD has implemented CHS Policy 6602 Health Evaluations for OCSD Inmates who violate Jail Rules. The policy states, "When clinically indicated, CHS mental health clinical staff will provide assistance to patients suspected or diagnosed with an intellectual/cognitive or developmental disability or mental health disability throughout the disciplinary hearing process. CHS staff will check the ADA Tracking System and, as necessary, work with the ADA Compliance Unit to ensure that reasonable accommodations and effective communication are provided to the patient at all stages of the disciplinary process."

The Expert also notes OCSD has modified the Sergeant's Disciplinary Hearing Report form to include a check box for Effective Communication:

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

As noted above, the Expert's review of 12 disciplinary packets reveals no evidence of anyone (except CHS staff after the hearing) identifying mental health/ID/DD disabilities, no evidence of anyone (except CHS staff after the hearing) documenting mental health/ID/DD disabilities, and no evidence of anyone (including CHS staff) providing or documenting effective communication or the assignment of a Staff Assistant at any point in the disciplinary process.

Furthermore, interviews with Deputies and Sergeants revealed an overall lack of knowledge of this process. None of the staff interviewed were able to identify the term "Staff Assistant." When asked what they would do if an IP did not appear to understand the interaction (Notice of Charges/24-hour Waiver, Disciplinary Hearing, Advisement of Punishment, Appeal), nobody indicated they would ask for a Staff Assistant. Only one Sergeant indicated he might contact the ADA Unit for direction.

For OCSD to comply with this RP requirement, staff will need to identify and document mental health/ID/DD issues at the beginning of the process (i.e., Rules Violation Report), provide and document effective communication accommodations (i.e... Staff Assistant) for the Notice of Charges/24-hour waiver, the Disciplinary Hearing, the Advisement of Punishment, the Appeal, as well as the Appeal Response.

In April 2026, the parties met and had constructive discussions on this topic, including as to (1) for whom staff assistants should be assigned, (2) which staff members may serve as the staff assistant, and (3) what role the staff assistant should play. The County will work, with input from the Experts and DRC as warranted, on policy, procedure, and training for this Staff Assistant requirement.

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

Partially Implemented (Previous Rating Partially Implemented)

Disciplinary Process Recommendations:

- Revise OCSD Court & Custody Operations Manual (CCOM) 1602.5 – Discipline Policy to include the following RP requirements:
 - That OCSD and CHS must provide reasonable accommodations, which may include staff assistants when necessary and appropriate, during the hearing process for people with mental health or intellectual disabilities.
 - Ensure the provision of effective communication and necessary assistance to people with disabilities at all stages of the disciplinary process; and,
 - The requirement for the Disciplinary Hearing Officer (and all staff interacting with the IP) to check the ADA Tracking System/Mental Health Tracking System and ensure the provision of reasonable accommodations and effective communication during all stages of disciplinary process.
- Provide proof-of-practice within the adjudicated rules violation documents and/or within an EC Tracking System.
- The Expert recommends ADA Tracking system and Mental Health Services Tracking system checks, effective communication, and documentation of both at every stage of the disciplinary process in order to fully comply with the RP requirements.
- Although not explicitly required by the RP, the Expert also recommends OCSD consider providing a copy of the violation report narrative to the IP at the time of notice of charges. (With the obvious exception of charges based on confidential informants.) Major rules violations create a risk to liberty interests should any loss of work/good time credits be assessed. Minimum due process protection (even for administrative hearings) is required. Failure to provide the factual basis for the violation charges makes it difficult (if not impossible) for an IP to effectively develop a defense to the charges or identify potential witnesses to call at his/her hearing.

E. Supervision and Oversight of Disciplinary Processes

1. *OCSD shall designate a supervisory-level Disciplinary Hearing Officer for each facility, to be responsible for ensuring consistency in disciplinary practices and procedures as set forth herein.*

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)**

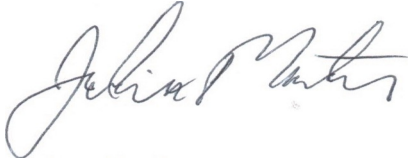
- 2. CHS shall designate a supervisory-level clinician for each jail facility, who shall be responsible for ensuring consistency in disciplinary practices and procedures as set forth herein.*

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)**

V. Signature

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

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

Julian Martinez
Director
Sabot Consulting

June 4, 2026

Date