



Agreement Between County of Orange and Disability Rights California

Expert Monitor's Report (Second Round)

Rights and Treatment of People Who Identify as Lesbian, Gay, Bisexual, Transexual, Queer or Intersex (LGBTQI)

On-Site Review: February 20-24, 2023

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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 the above-mentioned Negotiations Agreement, which provided a procedural framework for resolving the disputed claims.

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

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 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 Remedial Plan (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 RA. 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.

1. Subsequent to those findings, the County has taken and continues to take steps to enhance Jail mental health care programming.
2. 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.
3. 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.
4. 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. If 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 Remedial Plan 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: 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: Implementation of some components of the relevant RP provision and significant work remains to reach adequate implementation.

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

Un-ratable: 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: 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: Used where two previous successive Compliance Reports have found that the provision has been adequately implemented.

III. Executive Summary

This is the second Expert Monitor Review to measure Orange County's compliance with the Settlement Agreement (SA), which addresses related mandates, including:

- LGBTQI Non-discrimination Policy, Staff Accountability
- Transgender and Intersex Intake & Classification Procedures
- Least Restrictive Setting Appropriate for LGBTQI Population
- LGBTQI Housing/Classification Review Procedures
- LGBTQI Access to Programs, Services, and Activities
- Searches
- Medical and Mental Health Care
- LGBTQI Training For Staff

The second round of monitoring focused on the Theo Lacy Facility (TLF), Central Men's Jail (CMJ), Central Women's Jail (CWJ), and the Intake Release Center & Transportation (IRC). The on-site Monitoring Review was conducted from February 20-24, 2023. The Monitoring Review included a review of pre-monitoring documents produced by the County of Orange (OC); on-site observations (including but not limited to observations of the Intake screening process and classification screening process); interviews of sworn and non-sworn personnel (e.g., housing deputies, HCA CHS healthcare staff (medical and mental health) classification staff, OCSD Inmate Services Division – Correctional Programs Unit staff, grievance office staff; transportation staff, and training staff); and interviews of LGBTQI/transgender/intersex incarcerated persons housed at the OC jails. In total, the Expert interviewed approximately 20 incarcerated persons, and numerous staff members from multiple disciplines. .

An entrance meeting was conducted with representatives from the County of Orange (Jail Administration, HCA CHS staff, representatives from the OC Jails divisions/disciplines, and staff from the county counsel's office). DRC representatives were also present during the entrance meeting and during portions of the monitoring tour. An exit meeting was conducted via Zoom on March 2, 2023, with representatives from the County of Orange (Jail Administration and staff from the county counsel's office). DRC representatives were also present during the exit conference.

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

The Expert recognizes that the OC Jails continue to operate under challenging conditions during the COVID-19 pandemic, all while staff strives to obtain compliance pursuant to the SA and RP and the applicable county policies and procedures.

The Expert finds that some of the provisions as set forth in the SA and RP (and local policies/procedures) have been implemented (some of which continue to be found as

“Adequately Implemented”). In addition, some areas found as “Partially Implemented” have been found as “Adequately Implemented” during the second monitoring tour. However, the Expert finds that more information and evidence are needed to determine compliance with some of the required elements. For rated items found as “Not Adequately Implemented,” a more thorough assessment will be made in future monitoring tours once the remaining policies/procedures are developed, provided, and implemented, proof of practice documentation (in various key areas) is provided, relevant training material is developed and implemented, a related accountability plan is provided, plans for enhanced LGBTQI programming is introduced, and more access to programs, services, and activities is confirmed (to demonstrate equal access as compared to other incarcerated persons). The Expert is confident that once the items listed above are provided, staff will be better informed in their understanding of SA and RP requirements and how that correlates to their respective job duties.

As this was the second monitoring tour, all elements of the SA and RP were evaluated for compliance as the County strives to achieve and maintain “Adequately Implemented” status in the rated areas. Rated items that are found as “Adequately Implemented” in the first and second rounds of monitoring will be moved to “Monitoring Suspended Based on Previous Findings of Compliance.” This will also be the same for future monitoring tours, whereas specific rated items are found to be “Adequately Implemented” for two (2) consecutive ratings. The Expert will continue to review whether the County has adequately implemented a component for which monitoring has been suspended if such review is necessary for determining whether the County has adequately implemented other components of the Remedial Plan for which monitoring has not been suspended. Additionally, the Expert will follow the RP requirements. If areas that have been found as “Adequately Implemented” are identified by DRC as no longer adequately implemented, and the County agrees with DRC’s position. In the event the County disagrees, the Expert will review the Parties’ position and provide a written decision regarding whether to resume monitoring of the remedial plan component(s) at issue.

Once again, all staff was extremely helpful and accommodating to the Expert, and most of the sworn and non-sworn personnel appeared very knowledgeable regarding the LGBTQI/transgender/intersex population and their respective job duties as related to that jail population.

The Expert recommends that the County focus on the following areas:

- Develop and roll out LGBTQI training (including refresher training) for sworn and non-sworn personnel.
 - The County must provide draft training materials to the Expert monitor and DRC for review/comment/recommendations prior to implementation.
- Update LGBTQI-related policies/procedures and ensure that clear OCS and HCA CHS policies/procedures include related job responsibilities for sworn and non-sworn personnel.

- The County must provide draft policies/procedures to the Expert monitor and DRC for review/comment/recommendations prior to implementation.
- Develop and roll out LGBTQI/transgender/intersex-related staff accountability plan.
- Ensure the SOMA tracking system (once online) includes all related LGBTQI information, e.g., names (including preferred names and pronouns for transgender incarcerated persons as applicable), search preference information for transgender incarcerated persons as applicable, related programming information for LGBTQI individuals, and provide staff the ability to track, monitor, and share (amongst staff) related information. Such a tracking mechanism should be accessed by sworn and non-sworn personnel as applicable (e.g., staff assigned to housing units, healthcare, Programs or Inmate Services, court processing, transportation, etc.).
- Disseminate jail and community resource information to all LGBTQI/transgender/intersex incarcerated persons (that are interested) as related to LGBTQI/transgender/intersex programs and services.
- Make LGBTQI reading materials accessible to LGBTQI individuals (regardless of housing unit) if interested (even for housing units that are not predominately LGBTQI).

The Expert also makes the following recommendations:

- Update sworn staff post orders (for posted positions) and job descriptions/duty statements for all other positions (as applicable) with specific related job functions.
- Ensure orientation information is provided to LGBTQI/transgender/intersex incarcerated persons to ensure they understand related rules and understand their access to programs, services, and activities (as pertaining to LGBTQI/transgender/intersex and otherwise).
- Ensure that staff conducting key encounters (e.g., intake, classification, orientation information, healthcare encounters, etc.) effectively communicate with LGBTQI/transgender/intersex incarcerated persons and fully explain related concerns (e.g., housing, programming, clothing, hygiene, etc.).
- Have a workable process to be able to pull (for review purposes) grievances filed by LGBTQI incarcerated persons (regardless of topic, LGBTQI related or not) and to pull grievances related to LGBTQI/transgender/intersex related issues (regardless of who submitted the grievance [whether a self-identified/known LGBTQI/transgender/intersex individual or otherwise]).
- Ensure equal access to all programs, services, and activities for LGBTQI/transgender/intersex incarcerated persons versus other incarcerated persons (e.g., for work assignments, in-person education [including Rancho Santiago Community College], etc.).
- Ensure classifications/re-evaluations of classification, placement, and programming assignments (for LGBTQI/transgender/intersex incarcerated persons) are conducted at least twice annually.
- Provide (through commissary, medical, or indigent kits) hair removal tools, creams, or related products.
- Provide more allowances for razors for transgender/intersex individuals.

- Ensure practices related to identification cards and incarcerated person photos do not lend themselves to LGBTQI individuals to be “outed” to other incarcerated persons.
 - OCJ LGBTQI incarcerated person names, identification photos/identification information must be updated across all platforms (electronic and otherwise) as related to custody (e.g., housing, transportation, programs/services, etc.) and non-custody systems/purposes/functions (e.g., medical, mental, dental, etc.).
- Classification deputies (or “uncuff” deputies) must ask all self-identified transgender new arrivals as to their search preference (staff gender) and must offer the OCSD Voluntary Gender Identity Disclosure and Search Preference Form.
- Pending the eventual roll-out of the formalized staff training curriculum, the County should ensure that staff is aware of and understand the OCSD Voluntary Gender Identity Disclosure and Search Preference Form, where/how to access the information, and their responsibilities regarding the information contained. The form and process must be in place at all jail facilities.
- Classification deputies must fully explain applicable classification and security options and ensure LGBTQI self-identified individuals fully understand the protective custody and general population classifications (and others as applicable) and the jail-wide dynamics associated with those classifications.
- Provide confirmation (examples) that Classification Unit intake staff explain to new arrivals (as applicable):
 - They will not be punished if they choose not to provide requested information pertaining to their gender identity, pronoun, honorific, and search preference.
 - Staff, contractors, and volunteers shall use a person's stated pronoun and honorific, and the failure to do so may be grieved and reported.
- The County recently informed the Expert that the PRIDE program has been moved to TLF, Mod I, Sector 3. The County will need to update the Expert regarding any program expansion and specific recruitment efforts.
- Provide tentative timelines and details surrounding pod/unit porter/worker jobs for LGBTQI PC individuals.
- Examine all feasible options to allow LGBTQI individuals to attend in-person Rancho Santiago Community College classes.

The aforementioned bulleted points of recommendation are not an exhaustive list (please refer to each section of the report). The Expert's report identifies areas deemed as Adequately Implemented, Partially Implemented, Not Implemented, Unratable, and Not Assessed. The areas deemed as Unratable are generally due to a lack of implementation and/or a lack of policy/procedures and/or other supporting documentation. The following reflects the overall ratings given for the 38 major areas rated:

- Adequately Implemented: 1
- Partially Implemented: 28
- Not Implemented: 4
- Un-ratable: 4
- Not Assessed: 1

It is the Expert's belief that as the County implements 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 staff and incarcerated person interviews and includes findings and recommendations/actions the County must make to move towards meeting the mandates of the SA.

IV. Findings

A. LGBTQI Non-discrimination Policy, Staff Accountability

- A. *OCSD Policy 375 (Transgender Policy) prohibits staff from discriminating against incarcerated individuals on the basis of gender, including one's gender identity, gender expression, and sexual orientation. The County requires that staff "shall treat transgender persons in a manner that shows respect for the individual's gender identity and gender expression, which includes addressing them by their preferred name and using gender pronouns appropriate to the individual's gender self-identity and expression."*

The Orange County Sheriff's Department Manual Policy 375 Transgender Policy, Policy 328 Unlawful Harassment and Discrimination Policy, and Policy 402 Bias Free Policy contain the required language.

As was the case with the initial Expert monitoring tour, custody and non-custody staff interviewed stated they treat all incarcerated individuals fairly and respectfully and do not discriminate against incarcerated persons, individuals identified as LGBTQI, transgender, or intersex.

Most of the 20 LGBTQI incarcerated persons interviewed acknowledged that custody and non-custody staff are fair and treat them well. However, there were a few related comments to the contrary. One of the individuals stated some housing unit officers recently belittled an LGBTQI incarcerated person (who has since been released from custody) by calling her "Thing" and "It" and would antagonize her by purposely providing/issuing her incorrect sizes (too small) for her female undergarments (e.g., bras), and at times would not provide a bra at all and would also issue her men's boxers shorts (received a same complaint from two [2] individuals). The individual being interviewed also indicated some deputies do not refer to transgender individuals by their preferred pronouns or proper names (multiple complaints). Another individual interviewed indicated a sergeant had shared grievances/grievance issues with housing deputies, and they openly laughed at the incarcerated individuals. Other complaints gathered from interviews include staff slamming doors (multiple complaints); staff purposely turning on a foreign language channel on television and turning the volume up extremely loud; Intake staff being rude and disrespectful; and a medical staff member referring to a transgender female as "he." There were multiple complaints from LGBTQI individuals (especially transgender) they were being "outed" and misgendered by some custody and medical staff (see Section IV. C. [below] for more detailed information). Additional interview complaints concerned retaliation searches (of cells/rooms) because a staff member said we (LGBTQI persons) have bad attitudes (similar complaints from multiple individuals). Some of the comments were reportedly perceived as possible discrimination, while other comments were taken as a form of disrespect.

A previous complaint from the initial Expert tour (as further detailed in the initial report) pertained to some of the allowances made for other specialized housing unit/group programs versus the GBTQI Program in IRC Mod J. The Expert notes the County's position that they dispute any discrimination by allowing perks in housing units with specialized programs and that if they (LGBTQI individuals) meet the criteria for such a program, they are not excluded. The County indicated it is open to discussions with DRC regarding these concerns and what may constitute discrimination. In any event, it should be a collective goal for the GBTQI Program to succeed. Thus, the use of programming incentives and benefits that have been implemented in other specialized units are worth serious consideration.

Not all complaints raised (above) could be substantiated, and there is no evidence to show the specific intent of discrimination or whether any form of discrimination existed.

The Expert is hopeful that further development of policy/procedures and related staff training will assist in improving communication and understanding between LGBTQI-incarcerated persons and staff of all disciplines.

It is important to note that multiple LGBTQI incarcerated persons interviewed were unaware or not clear as to how to navigate the grievance process (or don't have confidence in the grievance process [as outlined in greater detail later in this report]) or otherwise were unclear as how to submit complaints regarding discrimination.

Overall, the Expert recommends that policies/procedures and staff practices continue to be examined and do not allow for any discriminatory practices toward LGBTQI incarcerated persons.

The Expert notes the County indicated its LGBTQI policies (CHS and OCSD) remain under revision.

Partially Implemented (Previous Rating - Partially Implemented)

B. The County shall develop and implement procedures to ensure accountability for its LGBTQI non-discrimination policy:

- 1. The County shall develop a procedure to track complaints involving LGBTQI-involved discrimination, including as to housing placement, property, privileges, or health/mental health care. Such tracking will be used for continuous quality improvement purposes.*
- 2. The County shall develop an accountability plan intended to timely log and investigate allegations from any source that staff has violated the LGBTQI non-discrimination policies and procedures. Any staff member who the County finds to have violated such policies and procedures shall be subject to relevant, progressive discipline policy.*
- 3. The County shall ensure that any staff, contractors, agents, and incarcerated individuals may submit complaints regarding any failures to comply with*

LGBTQI non-discrimination policies and procedures or components stated herein.

4. *The County shall track and analyze for quality improvement purposes the final dispositions of LGBTQI-related complaints, including staff accountability/discipline outcomes.*

Orange County Sheriff's Department's Policy Manual, Policy 375 Transgender Policy (Section 375.5), contains brief general language that requests for service or complaints by transgender individuals (including citizen complaints against sworn or non-sworn professional staff) shall be addressed or investigated in a manner that is consistent with Department Policy.

Orange County Sheriff's Department Policy 328, Unlawful Harassment and Discrimination, contains general information, but it appears to be written for personnel in mind and not for incarcerated persons.

As was indicated in the Expert's initial report, other than the brief language outlined above (from Policy 375), the County did not provide any relevant documentation for review (to demonstrate related policy/procedures). Further, the County did not provide a status update as to the implementation of a staff accountability plan/process inclusive of tracking discrimination specifically related complaints (LGBTQI), logs/logging related complaints and status throughout related investigations and progressive discipline process, and staff disciplinary outcomes (all for Expert Monitor review). The County did not provide information relevant to County administration analyzing all related data for quality improvement purposes.

The Expert notes the County is reportedly revising its LGBTQI policies and considering using electronic tablets for grievances, which would allow incarcerated persons to enter complaints directly from their tablet (complaints via paper will continue to be an option). Although the County has not yet provided any verbal confirmation that a staff accountability plan (pursuant to LGBTQI) is in progress or whether there is a tentative date for a draft plan (inclusive of related forms/logs) to be available for Expert and DRC review prior to implementation, the County has recently indicated they will be requesting to discuss this issue of a staff accountability plan with DRC. The Expert requests that the County apprise the Expert as to future developments.

Once the County has a draft staff accountability plan (inclusive of related forms/logs), they must provide it to the Expert and DRC for review/comments/recommendations. Once an accountability plan has been approved and implemented, the County will need to provide all associated documents for the Expert's review, e.g., related policies/procedures, staff accountability plan/process, tracking mechanism to track discrimination complaints (inclusive of the investigation process and ultimate disposition/outcome), and information pertaining to OCSD administration personnel analyzing all related data for quality improvement for future monitoring tours.

Future training material content should include at least general staff accountability-related information. Once the revised policy (and training) is drafted, the County must provide it to the Expert and DRC for review/comments/recommendations.

Un-ratable (Previous Rating – Un-ratable)

- C. *The County shall develop and implement procedures to protect against staff and contractors disclosing an individual's LGBTQI identity. The County shall limit disclosures to specific, limited circumstances as for purposes of the individual's safety, such as transporting someone.*

Orange County Sheriff's Department Policy 375 Transgender Policy (Section 375.4) contains brief (but clear) related language.

As was the case with the initial Expert monitoring tour, the staff interviewed were aware of the confidentiality concerns and the "need-to-know" basis regarding incarcerated persons that identify as LGBTQI or transgender.

During the incarcerated person interviews (and as indicated in Section IV.A. [above]), there were complaints from LGBTQI individuals (including transgender persons) about being "outed." For example, former booking photos appearing on identification scanners, being "outed" in front of other incarcerated persons during court processing, and information contained in medical databases that result in staff "outing" them. Previous similar complaints from the initial Expert tour (as described in the initial report) included similar concerns from dental staff, "pill call" nurses, waiting rooms or during medical appointments, and from custody staff, e.g., during incarcerated person counts and asking them why their logbook photos do not match their current appearance and/or their jail identification photos. At least to some degree, this appears to be a recurring concern. Multiple individuals interviewed also indicated there is a problem with ongoing misgendering by both custody and medical staff.

Although the identified complaints could not be substantiated by the Expert during the on-site monitoring review, a staff accountability plan (once developed, approved, and implemented), as well as electronic tablets with grievance form access, will also be a key component of this issue and for the overall LGBTQI program.

The Expert notes the County's action plan to address the provision by policy revision and training. Once the revised policy (and training) is drafted, the County must provide it to the Expert and DRC for review/comments/recommendations.

Future training material content should include confidentiality and nondisclosure-related information.

Partially Implemented (Previous Rating - Partially Implemented)

- D. Staff shall use (1) an individual's pronoun (including the third-person singular, they/them) appropriately and/or (2) the individual's preferred name or last name.*

Orange County Sheriff's Department Policy 375 Transgender Policy (Sections 375.3 and 375.4) contains related language requirements for staff to follow. The policy generally addresses documentation of an individual's preferred name and pronoun, and that the information should be provided to relevant department members for the purpose of ensuring continuity of appropriate treatment.

As was the case during the Expert's initial monitoring tour, the staff interviewed acknowledged the requirement, and all stated that they refer to all incarcerated persons by their respective last names (regardless of whether they are self-identified as LGBTQI, transgender, or otherwise). At least one (1) of the housing officers indicated he uses their preferred name and pronoun if he knows the individual but otherwise generally uses last names. While interviewing a housing officer, and after being told (by the officer) that they have access to their preferred names and pronouns, I asked the officer to show me such documentation (either electronically or via paper document). He pulled a couple of module cards of two (2) transgender individuals housed in the pod, but the information was not contained.

Through LGBTQI interviews, most indicated staff call them by their last names.

The Expert notes the County's action plan for this provision in that preferred pronouns will be tracked by the new SOMA tracking system. The County's action plan also indicates OCSO will provide access to SOMA (assumably meaning it will be provided to staff as applicable to their job duties in relation to working with incarcerated persons). The County also indicated the jail's expectation is that staff refer to all incarcerated persons by their respective last names.

Consistent with the County's expectation, future training material content should include the requirement for staff to use last names for all incarcerated persons but at least have a transgender individual's preferred name and pronoun available to view (e.g., via SOMA). It is assumed the SOMA tracking system (once online with LGBTQI information) will provide staff the ability to track, monitor, and share (amongst staff) related information (e.g., preferred pronouns [including the third-person singular they/them] and/or the person's preferred name or last name). Such a tracking mechanism should be assessed by sworn and non-sworn personnel as applicable (e.g., staff assigned to housing units, healthcare, Programs or Inmate Services, court processing, transportation, etc.).

Prior to implementing the LGBTQI component of SOMA, the County should provide the opportunity for the Expert and DRC to review/comment and make applicable recommendations.

Partially Implemented (Previous Rating - Partially Implemented)

- E. The County shall permit individuals (including people awaiting trial) to update their Jail ID names if they have obtained a legal name change and (in cases where there are pending charges) the criminal court has recognized the name change. The County shall permit individuals to seek legal name changes and to take appropriate steps to update legal documents. During the period of monitoring of remedial plan implementation, the County will notify DRC of any incarcerated person who obtains a legal name change.*

Court & Custody Operation Manual (CCOM), Section 1201.16 Identification Cards and Clothing, does not specifically address this requirement.

The Expert notes the County's action plan that this provision has been implemented in practice, and it will be addressed in revised policy and training.

The County provided documentation regarding a transgender female individual housed at TLF regarding her initiation of a name change (note: the document provided the specific name and changed name). Documentation also indicated a sergeant completed a Gender Identity Search Preference Form and advised the individual that when her name change becomes official with the Orange County court system to inform staff, and her name and information will then be changed within the jail system database. Regarding the same individual, the County also indicated (as part of document production) that a new identification card was made, and a copy was provided to the individual. Additionally, a new mod card was reportedly printed and provided to the housing unit. The documentation further indicates that once the name change becomes official (with the criminal court), the County will move forward with the process of changing the name into their systems.

The Expert interviewed the LGBTQI incarcerated person described above regarding the name change and identification card and photo process. The individual confirmed what the documentation outlined. None of the incarcerated persons interviewed had any related concerns.

Staff interviewed stated that incarcerated individuals may update their jail identification cards if they have a legal name change.

Once the revised policy (and training) is drafted, the County must provide it to the Expert and DRC for review/comments/recommendations. The training material content should include the updating of jail identification cards (post legal name change) related information.

As reported in the Expert's initial report, DRC counsel has offered to provide technical assistance to the County on these procedures. The Expert continues to encourage the Parties to confer on these matters to ensure efficient and successful implementation.

Partially Implemented (Previous Rating - Partially Implemented)

- F. The County shall permit transgender and intersex individuals (whether sentenced or un-sentenced) to update the photo on their jail ID. The County shall permit transgender individuals to update the photos on their ID to minimize the negative impacts of how such photos can "out" them (e.g., if their ID photo and their current gender expression are dissimilar) or cause psychological distress.*

CCOM, Section 1201.16 Identification Cards and Clothing does not specifically address this requirement. The County did not provide any other relevant documentation for review (to demonstrate written policy or staff proof of practice).

The Expert notes the County's action plan that this provision has been implemented in practice, and it will be addressed in revised policy and training.

Staff interviewed stated that incarcerated individuals may request to have their photo updated for their identification card if they feel the need to do so.

As described in more detail in Section IV.A.E. (above), the County provided relevant documentation for a transgender female incarcerated person, describing the issuance of a new photo and identification card (with a name change), with updated information reportedly having been entered into the SDS system, I-TRAC, and her history card, with a copy of the new identification card issued to the individual. The Expert interviewed the individual, who confirmed everything as described.

However, as stated earlier in the report, the issue of identification cards and LGBTQI individuals being "Outed" through former booking photos appearing on identification scanners, during court processing, in medical databases, and in logbooks remains a serious concern.

Once the revised policy (and training) is drafted, the County must provide it to the Expert and DRC for review/comments/recommendations. The Expert understands the provision requirements have been implemented in practice, but the related policy and training should include all related requirements, including that when a jail identification photo is updated, the photo is also updated within the various jail tracking systems as applicable. Future training material content should cover permitting transgender and intersex incarcerated persons to update the photo on their jail identification card.

Partially Implemented (Previous Rating - Partially Implemented)

- G. A person's self-identification as LGBTQI at any point is sufficient to trigger the protections and procedures specific to LGBTQI individuals, as set forth herein. Documentation of a medical diagnosis or legal documentation of an individual's identity, including their gender marker or legal sex, is not required for staff to respect or confirm an individual's gender identity, except in cases where there is specific evidence that a person has falsely asserted a gender identity:*

1. *The fact that a person has not completed a legal name change or has not obtained a government-issued identification that reflects their affirmed sex, gender identity, or name shall not constitute evidence to justify staff not respecting the individual's gender identity.*
2. *The absence of the completed County's Voluntary Gender Identity Disclosure and Search Preference Form shall not constitute evidence to justify staff not respecting the individual's known gender identity.*

Orange County Sheriff's Department Policy 375 Transgender Policy (Sections 375.1, 375.2, and 375.3) contains related language.

The Expert notes the County's action plan in that the requirements of this provision will be addressed in revised policy and training.

As was the case during the Expert's initial tour and staff interviews, staff contend that they respect and protect individuals that self-identify as transgender or LGBTQI.

Most of the incarcerated persons interviewed indicated they are protected and treated respectfully by staff. However, as stated earlier in the report, there were some incarcerated person complaints. Specifically, there were some complaints regarding housing officers belittling LGBTQI individuals; "Outing" them; misgendering them; purposely providing incorrect-sized female clothing for transgender females; not being referred to by their preferred names and pronouns, grievances being shared and discussed between supervisors and housing officers (with staff laughing at them); staff slamming doors; and issues with staff turning on the television to a foreign language channel with the volume extremely loud (see Section IV.A.A. for greater details). The Expert was not able to confirm or refute the claims.

Once the revised policy (and training) is drafted, the County must provide it to the Expert and DRC for review/comments/recommendations. Future training material content should include respect, safety, and protection-related information for LGBTQI-incarcerated persons commensurate to the requirements outlined in this section.

Partially Implemented (Previous Rating - Partially Implemented)

B. Transgender and Intersex Intake & Classification Procedures

A. During intake and classification, Jail staff shall:

1. *Offer each transgender or intersex individual the option to complete the OCSD Voluntary Gender Identity Disclosure and Search Preference Form and continue to maintain documentation of an individual's gender identity, pronoun, honorific, and search preference.*

2. *Explain that the individual will not be punished if they choose not to provide such information.*
3. *Explain that staff, contractors, and volunteers shall use a person's stated pronoun and honorific and that the failure to do so may be grieved and reported.*
4. *Effectively communicate how gender identity impacts classification and housing placement determinations.*
5. *Ask for information about the individual's preferred housing placement (e.g., male-/female-designated unit, general population/protective custody).*
6. *Ensure that the above inquiries and information are communicated in a private setting.*

The following policies/procedures and/or related forms/documentation contain applicable information as follows:

- CCOM, Section 1710.4 Body Searches of Inmates (Gender Restrictions).
- CCOM Policy/Section 1200.4 Location of Classification Interviews.
- CCOM Section 1200.10 Housing Assignments and Changes address housing for gender non-conforming or non-binary individuals.

The County provided approximately 19 completed Orange County Sheriff's Department Voluntary Gender Identity Disclosure and Search Preference Forms for 2022 for transgender/intersex individuals:

- Sections of the form denote an incarcerated person's gender identity, preferred pronoun (e.g., he, she, they), preferred title (e.g., Ms., Mr.), and preference of gender for staff searching purposes (i.e., female, male, or no preference).
- The form contains an area for the incarcerated person's signature and date (and for witnessing deputy and classification sergeant signatures).

The County provided an example of a Classification Interview Page Form containing:

- Classification review information.
- Specialty housing.
- Mental health flags.
- Medical flags.
- PREA.
- The incarcerated person is confirmed or perceived to be gay, lesbian, bisexual, transgender, or intersex.
- Sexual victimization/potential victim/known victim.
- Other classification-related factors.

The following policies/procedures and/or related forms/documentation either were not provided or do not contain applicable information as follows:

- The County did not provide a Classification Plan or other Classification policies (other than what is identified above):
 - It is unclear whether there is a separate existing Classification Plan other than the CCOM Sections as outlined in this section of the report.
- The County did not provide any policies/procedures related to items A.1, A.2, or A.3.

Staff interviewed were aware that the OCSD Voluntary Gender Identity Disclosure and Search Preference Form exists, but most did not know where to access related information. All housing deputies interviewed acknowledged they do (or would) honor a transgender individual's search preference by the staff of the requested gender.

The Expert interviewed two (2) Classification or PMU staff members regarding classification processes. Most of them indicated they effectively communicate how gender identity impacts classification and housing placement determinations, and all of them indicated they ask about the individual's preferred housing placement (e.g., male/female-designated unit, general population/protective custody). Both staff members indicated transgender individuals are assigned housing based on their assigned sex at birth (as well as numerous case factors).

Though most of the 20 self-identified LGBTQI individuals interviewed were generally satisfied with the intake and classification processes, there were some concerns expressed. These concerns included:

- Some transgender individuals indicated custody staff did not explain how gender identity impacts classification. Specifically, they stated custody staff did not explain the meaning of being classified as protective custody or how gender identity or protective custody status impacts classification.
- Similarly, for LGBTQI individuals, there were complaints that custody staff did not explain the impact/meaning of being classified as protective custody:
 - Including differences between programming in PC versus GBTQ-PC (PRIDE Program) versus GP
 - Including explaining the differences in access to out-of-cell time, work assignments, and for other programs, services, and activities.
- Housing Preferences/Gender-Congruent Housing:
 - Most indicated they were not asked about their housing preference (transgender individuals) or consulted or asked as to their own views relative to male versus female housing for transgender and intersex individuals/LGBTQI-specific housing versus non-LGBTQI housing versus GP versus PC.
 - Transgender individuals are not aware of how to request gender-congruent housing (e.g., women's housing for transgender women) and how that may or may not affect their situation and programming as compared to current housing.

- Some transgender individuals indicated they have been given conflicting information regarding how to request a gender-congruent housing placement and whether the conditions will be similar or different from their current conditions.
- Some transgender individuals reported they were not provided with Voluntary Gender Identity and Search Disclosure Forms or asked questions pertaining to gender preference for staff searches and regarding preferred name/pronoun(s).
 - However, many transgender individuals reported they are consistently asked (and accommodated) for their search preference by custody officers and transportation staff.
- Similar to interviews from the initial Expert tour, one (1) individual indicated if he had to go through the intake process over again, he would not admit he was LGBTQI because of housing and lack of programming opportunities.

It is unclear whether semi-annual reviews are occurring, as no transgender individual reported being interviewed semi-annually by classification about their housing preferences or being reassessed for classification.

For Item A.2: As was the case from the initial Expert tour, there was no documentation or proof to support that intake staff (during Intake and Classification) explain that the individual will not be punished if they choose not to provide requested information pertaining to an individual's gender identity, pronoun, honorific, and search preference.

For Item A.3: As was the case from the initial Expert tour, there was no documentation or proof to support that intake staff (during Intake and Classification) explain that staff, contractors, and volunteers shall use a person's stated pronoun and honorific and that the failure to do so may be grieved and reported.

For Item A.4: As was the case from the initial Expert tour, there was no documentation or proof to support that intake staff (during Intake and Classification) effectively communicate how gender identity impacts Classification and housing placement determination.

For Item A.5: As was the case from the initial Expert tour, from interviews of Classification staff and in a review of the Classification forms, the forms lend themselves to ensuring Classification deputies ask about the individual's preferred housing placement (e.g., male/female designated unit, general population/protective custody).

As part of document production, the County provided many completed examples of Specialty Housing Requests (Classification interviews). Classification deputies acknowledge the LGBTQI or transgender, or intersex status of the individual, and both ask and consider the individual housing placement requests and make recommendations (to a classification sergeant) accordingly.

The Expert notes the County's action plan in that previously identified provision concerns will be addressed through policy revision, forms, and training and that the pending SOMA tracking system will enhance the County's ability to ensure continuity of preferred search preference and gender identity. Classification will revise their "script" to explain applicable classification and security options and ensure LGBTQI self-identified individuals fully understand the protective custody and general population classifications (and others as applicable) and the jail-wide dynamics associated with those classifications.

Once the revised policy, forms, and training material are drafted, the County must provide them to the Expert and DRC for review/comments/recommendations.

The Expert's remaining recommendations in this area are continued recommendations from the Expert's initial monitoring tour (pending revised policy and forms [as applicable] and training).

1. Classification deputies (or "uncuff" deputies) must ask all self-identified LGBTQI new arrivals as to their search preference (staff gender) and must offer the OCSD Voluntary Gender Identity Disclosure and Search Preference Form.
2. Pending the eventual roll-out of the formalized staff training curriculum, the County should ensure that staff is aware of and understand the OCSD Voluntary Gender Identity Disclosure and Search Preference Form, where/how to access the information documented on that form, and their responsibilities regarding the information contained. The form and process must be in place at all jail facilities.
3. Classification deputies must fully explain applicable classification and security options and ensure LGBTQI self-identified individuals fully understand the protective custody and general population classifications (and others as applicable) and the jail-wide dynamics associated with those classifications.
 - e.g., must include the meaning of PC, how PC classification impacts programming, out-of-cell time, work, etc.
 - Gender-congruent housing (transgender).
4. The County must ensure that Classification Unit staff comply with OCSD policies and refrain from having a blanket or across-the-board practice of housing transgender or intersex incarcerated persons in housing based on their assigned sex at birth (without strongly considering all classification factors, including the individual's housing preference).
5. To the extent the County can provide documented evidence for future monitoring tours, the County should provide confirmation (examples) that Classification Unit intake staff explain to new arrivals (as applicable):
 - They will not be punished if they choose not to provide requested information pertaining to their gender identity, pronoun, honorific, and search preference.
 - Staff, contractors, and volunteers shall use a person's stated pronoun and honorific, and the failure to do so may be grieved and reported.

6. As related to Items A.4 and A.5 (above), modify CCOM Section 1200.10 Housing Assignments and Changes to clarify that the policy and jail practices regarding addressing housing for gender non-conforming and non-binary individuals also include incarcerated persons that identify as transgender.

Future training material should include related information as outlined in this section.

Partially Implemented (Previous Rating - Partially Implemented)

B. The County shall revise the Voluntary Gender Identity Disclosure and Search Preference Form to specify the following:

- 1. The purpose of the form is to ensure that the County adheres to its own policies concerning transgender and intersex individuals.*
- 2. An individual may update the form at any time by requesting a new form from custody/ classification staff, sending a message slip, or submitting a grievance without fear of retaliation or discipline.*
- 3. The form may be accessed by custodial and classification staff only for purposes of ensuring compliance with Jail policies.*

As part of document production, the County provided approximately 19 completed examples of the Voluntary Gender Identity Disclosure and Search Preference Forms. There are no identified dates or revision dates located on the forms, and the Expert notes the current form version does not capture the requirements for this provision. None of the forms observed contained the required revision language as identified in A.1 – A.3 (above).

Once the revised policy, forms, and training) is revised/drafted, the County must provide it to the Expert and DRC for review/comments/recommendations.

The Expert notes the County's action plan in that the policy and form are currently under revision.

Not Implemented (Previous Rating - Not Implemented)

C. Least Restrictive Setting Appropriate for LGBTQI Population

- A. The County recognizes that LGBTQI individuals and people whose appearance or manner does not conform to traditional gender expectations should not be placed in more restrictive custodial settings based solely on such identification or status or because they receive gender dysphoria treatment.*

CCOM Section 1200 Inmate Classification Procedures does not contain language specific to housing identified LGBTQI individuals, but it does address housing

individuals according to classification level or according to Correctional Health Service (CHS) staff recommendations.

As was the case during the initial Expert tour, Classification Unit personnel interviewed stated they house LGBTQI incarcerated persons (as well as individuals whose appearance may not appear to conform to traditional gender expectations) in accordance with their classification level and factors, the housing matrix, and specialty housing requests (when applicable) and do not house these individuals in more restrictive housing settings (including program access) than their classification level and factors otherwise dictate. As noted in section IV.B.A. (above), being housed in PC or LGBTQI PC results in reduced out-of-cell and programming opportunities.

There were several LGBTQI incarcerated persons interviewed that were not clear (at the time of intake classification) as to the level of programming or lack of programming that would be available once housed at PC or LGBTQI PC, including work assignments and other programming. As outlined in more detail in section IV.B.A. (above), LGBTQI individuals interviewed made the following complaints:

- Some transgender individuals indicated custody staff did not explain how gender identity impacts classification (e.g., the meaning of being classified as protective custody, or the impact/meaning of being classified as PC, and how gender identity or protective custody status impacts classification). For example:
 - No explanation as to any differences between programming in PC versus GBTQ-PC (PRIDE Program) versus GP.
 - No explanation as to any differences in access to out-of-cell time work assignments and other programs, services, and activities in PC versus GBTQ-PC (PRIDE Program) versus GP.

Classification personnel must ensure newly arrived and identified LGBTQI incarcerated persons are made aware of the jail dynamics associated with being classified as general population versus protective custody (or other classifications) and in being housed as such, including how it may impact classification processes in future facilities (CDCR, other jail systems, etc.). This will allow the individuals to make a better-informed request as to their future housing and programming status.

Approximately 86 percent (63 individuals) of the approximately 73 identified LGBTQI individuals housed at the jail complexes (at the time of the on-site tour) were housed in protective custody. As stated in the Expert's initial report, in requesting housing placement, LGBTQI persons should not have to choose between their own safety versus equal access to programs, services, and activities that non-LGBTQI and/or non-protective custody individuals are afforded. LGBTQI-incarcerated persons should have equal access to the jail's programs, services, and activities (e.g., reentry services, academic/vocational education, work assignments, religious services, etc.). The jail administration should consider expanding offerings for protective custody and/or the LGBTQI population (whether assigned to the general population or protective custody

housing) to comply with equal access requirements under the Settlement Agreement and anti-discrimination laws. The pilot GBTQ (PRIDE) program had not yet provided access to jobs in the sector nor substantive and consistent programming activities. The Expert is hopeful that moving the program to TLF (as planned) will expand programming opportunities for LGBTQI individuals.

Through staff and LGBTQI incarcerated person interviews, as outlined earlier in this report, it appears that Classification Unit staff strongly consider the housing request of LGBTQI individuals, and most of the LGBTQI individuals interviewed are satisfied with their housing placement (at least as it pertains to safety concerns). Again, LGBTQI individuals must have the pertinent information to make informed requests for their future housing and programming. The dynamics of jail culture in our society by nature make it at least somewhat challenging to house LGBTQI individuals while ensuring their safety, as well as affording them equal access to programs, services, and activities. But as outlined above, the County must continue to examine avenues to create more opportunities for LGBTQI individuals in all units, especially those assigned to protective custody housing units where there is a lack of (or limited) access to in-person education classes, work assignments, etc. This is discussed further in Section V.A. below.

The Expert notes the County's action plan in that this provision issue will be addressed in CCOM 1200 and training. Once the revised policy and training are revised/developed, the County must provide them to the Expert and DRC for review/comments/recommendations.

Future training material should include related information.

Partially Implemented (Previous Rating - Partially Implemented)

- B. The County shall not house LGBTQI individuals in more restrictive housing than otherwise indicated because of their actual or perceived sexual orientation, gender expression, gender identity, or intersex status. The County shall house LGBTQI people in the least restrictive housing allowed by their classification and security designation.*

CCOM Policy 1200 Inmate Classification Procedures does not contain language specific to housing in the least restrictive housing allowed as related to LGBTQI individuals, but section 1200.10 Housing Assignment and Changes addresses that gender non-conforming or non-binary individuals will be housed in male or female housing after classification deputies have determined that proper classification and housing location. Also, CCOM Section 1200.1 Classification Plan addresses housing individuals according to classification level or according to Correctional Health Service (CHS) staff recommendations.

Classification Unit personnel interviewed stated that they house LGBTQI incarcerated persons in accordance with their classification level and factors, the housing matrix (despite their actual or perceived sexual orientation, gender expression, gender identity, or intersex status), and specialty housing requests (when applicable), and do not house these individuals in more restrictive housing settings (including as it impacts program access) than their classification level and factors otherwise dictate. As outlined in an earlier section of the report, the Expert reviewed a sampling (of about 20 Specialty Housing Requests – Classification) from many that the County provided as part of document production. From the review, it appears that classification staff is strongly considering LGBTQI incarcerated person housing requests when recommending housing and program placement to a classification sergeant.

LGBTQI incarcerated persons interviewed primarily expressed concerns and complaints regarding the lack of work and programming opportunities being housed in protective custody and PC protective custody housing (as was described earlier in this report). There were concerns about the lack of work opportunities and the reduced out-of-cell time and in-person educational and other programming opportunities for incarcerated persons in PC housing due to the LGBTQI status.

The Expert notes the County's action plan in that the requirements of this provision will be addressed in policy and training.

Once the revised policy and training are revised/developed, the County must provide them to the Expert and DRC for review/comments/recommendations.

Future training material should include related information.

Partially Implemented (Previous Rating - Partially Implemented)

- C. *The County will establish a voluntary GBTQI Program Sector unit once the use of the housing unit is no longer necessary for social distancing, isolation, or quarantine of incarcerated persons due to COVID-19. The unit will provide expanded out-of-cell time (i.e., doors open during daytime hours), access to jobs in the sector, and enhanced programming activities. Attached as Appendix 1 is the County's planned GBTQ+ Program Sector Pilot overview and programming schedule.*
1. *Once the GBTQI Program Sector unit has been fully operational for 90 days, the County will provide a status report on the program. The Parties will then discuss whether the County will terminate the program or whether there are any appropriate program modifications, including efforts towards adequate inclusion of transgender individuals consistent with safety and other applicable considerations.*

The County has not yet developed pertinent policies/procedures. However, the County has implemented a GBTQI (PRIDE) Program at IRC Mod J (Sector 3), but the County

recently reported the program has recently been moved to TLF, Mod I, Sector 3, with possible plans of expansion to additional housing as well. It is currently unclear as to the maximum capacity of the program in the new unit. From the initial and second Expert tours, PRIDE program staff have indicated desired numbers (LGBTQI incarcerated persons) for maximum effectiveness is between 8-12 participants. Reportedly TLF, Mod I, Sector 3, contains 16 cells/32 beds. The Expert notes the County's action plan in that the County is considering discontinuing all in-person classes and using electronic tablets instead due to the contractor's class size requirements. With this in mind, it is not clear as to whether the program would or could expand to approximately 32 individuals in a given pod.

The PRIDE schedule notes specific programming in the mornings, afternoons, and evenings Monday thru Friday. The County identified the following scheduled programs:

Pride Program Schedule

Monday:

- 0800-1000: Individual Case Management: one-on-one case management to assist LGBTQI incarcerated persons with discharge planning, provide resources and facilitate access to the post-custody treatment program.
 - Reportedly, this is on an “as necessary” basis and usually limited to individuals with whom staff know will soon be released from custody.
- 1300-1500: Great Escape: Pre-release planning class and referrals to a variety of community-based organizations and county agencies, including direct linkage to residential substance abuse treatment upon release, if needed. Group facilitation includes topics on substance abuse, relapse prevention, and life skills.
- 1900-2000: Alcoholics Anonymous Panel: Alcoholics Anonymous is a fellowship of people who share their experience, strength, and hope with each other that they may solve their common problem and help others to recover from alcoholism.

Tuesday:

- 0800-1000: Pride Process Group (OCSO Correctional Programs Staff): A space allowing LGBTQI+ identifying incarcerated persons to explore issues surrounding themselves and current events.
- 1300-1500: RECLAIM (APAIT Facilitators): Addresses experiences prevalent within the LGBTQI community related to substance abuse/use, mental health, and trauma.

Wednesday:

- 0800-1000: Seeking Safety (OCHCA clinician): An evidence-based, present-focused counseling model curriculum designed to help people attain safety from trauma and/or substance abuse by incorporating healthy coping strategies.

- 1300-1500: Mindfulness/Yoga (Yoga Project): In-person yoga and mindfulness sessions guided by facilitators experienced in offering trauma-informed yoga and mindfulness practices.

Thursday:

- 0800-1000: Book Study: Offers an opportunity for participants and staff to read the same books and have structured conversations as they move through the books.

Friday: Nothing currently scheduled.

As part of document production, the County provided the following GBTQI Pilot Program – 90-Day Follow-Up Report:

The GBTQI Pilot Program commenced on May 12th, 2022. Eight (8) inmates were selected for initial placement into the program. A document outlining program activities/procedures were created and posted inside the guard station of the housing unit for all staff. Inmates housed in the program are also provided a copy of this document, and program privileges/expectations are also explained to inmates during their initial orientation.

Approximately once per week, PMU staff monitors the population of the program sector and, when necessary, screens and interviews additional candidates for possible placement into the program. PMU has also forwarded any inmate requests for placement into the program (via inmate message slip) and screens them accordingly.

A tracking log was also created to monitor all inmates in the program and is updated daily by Classification Staff. The log includes all inmates that were interviewed for the program (PMU), the reason for placement (or non-placement) into the program (PMU), and the reason for the removal (Classification – "Released from custody," "Inmate requested removal," "Staff removal," etc.).

As of 8/8/22:

All male GBTQI inmates were initially screened for placement (75). Twenty-six (26) of those passed the initial screening and were interviewed for placement. Most of the remaining inmates were disqualified due to incompatibility of their classification/security level. Of the 26 inmates interviewed:

- Seven (7) declined to participate during their initial screening interview.
- Three (3) requested removal from the program after initial placement.
- One (1) was removed by staff due to criminal activity and violation of jail rules.
- Seven (7) have been released from custody.
- Eight (8) are currently still in the program.

As part of document production, the County also provided the following Three-Month Briefing-GBTQI Update – OCSD Memo (dated August 10, 2022) from the Programs and Services Manager:

“The Orange County Sheriff's Department's Correctional Programs Unit officially started programming services in the GBTQI mod on May 12, 2022. Since the program started, there have been a total of 18 participants. Six of the 18 participants have completed the program, and three more are set to complete the program this month. The Correctional Programs Unit has assigned one Reentry Coordinator to oversee the program. Our Reentry Coordinator facilitates groups within the GBTQI mod, coordinates with our security team on moving new participants into the program, works through any challenges in the mod, and collaborates with various community-based agencies to provide additional programs and services for the participants both in custody and post-release.

Although the GBTQI mod (which we now refer to as the Pride Program) has only been in existence for three months, we have made great strides in bringing community-based agencies into the jails to assist with providing educational classes, counseling, and resources. The community-based agencies currently working with the Correctional Programs Unit include Orange County Health Care Agency (OCHCA), The LGBTQ Center OC, Access to Prevention Advocacy Intervention & Treatment (APAIT), Rancho Santiago Community College, and the Orange County Department of Education.

In speaking with the participants in the program, they have been extremely grateful for the opportunity to participate in the Pride Program. They appreciate the targeted programs, services, and resources being provided to them. Although the Pride Program has only been in existence for three months, we are confident that the therapeutic community we have developed for the GBTQI participants, combined with the support from our security team and community-based agencies, can truly have a positive impact on these individuals' lives, increase public safety and reduce recidivism rates. In speaking with the participants in the program, they have been extremely grateful for the opportunity to participate.”

The Expert interviewed a housing deputy assigned to the unit, although he was only recently assigned to the unit. In response to the Expert's questions, he provided the following information:

- Dayroom is open from 0600 – 2300 hours.
- Three (3) hours of yard (over a two day period per week).
- Shower curtains cover their body parts when showering.
- Common issue: they want grievance forms.
- The issue with razors has not been mentioned.
- No clothing complaints.

- Hair clippers and nail clippers are available at outdoor recreations (no raised concerns).
- LGBTQI reading books in the unit (no incarcerated person complaints).

Several non-sworn staff members (facilitators) of some of the programs were interviewed, including personnel from Correctional Mental Health Program and the Inmate Services Division (Correctional Programs Unit). Some of the acknowledged responsibilities of the staff included:

- Case Management Services.
- Routine sick calls.
- Crisis intervention.
- Grief Counseling.
- Supportive counseling.
- Mental health therapy.
- Routine follow-ups (e.g., 30 days, 60 days, 90 days).
- Coordination efforts with Rancho Santiago Community College District.
- Partner with OC LGBTQ Center of Orange County.
- Connect with APAIT to provide services:
 - Safe sex, substance abuse, etc.
- PRIDE program intake orientation.
- Recruitment.
- Ensure LGBTQI reading materials are provided.
- Working on the development of a new resource brochure.

Staff stated the program is expanding, and new classes and opportunities will be available. Specific programs mentioned included group therapy (facilitated by the County Correctional Programs Unit and an MFT trainee from the LGBTQI Center of Orange County), APAIT (administered by outside APAIT personnel), Mindfulness (facilitated by County mental health/behavioral health), and reentry services (facilitated by County Correctional Programs Unit). There are additional workshops and more reportedly coming soon (e.g., employment workshops with the Santa Ana Work Center). The SPARK program recently concluded, and Project Reclaim (a six [6]-week course) just commenced. PRIDE participants are also offered access to classes through Rancho Santiago Community College (via study packets, e.g., Academic Skills for Success (to help transition into college or vocations upon release from jail)); Money Matters; Substance Abuse; and the GED program for non-high school graduates. In speaking with two (2) additional staff members from the Correctional Programs Unit, they explained that Rancho Santiago Community College could not justify conducting in-person classes for less than 15 participants.

Staff informed the Expert that Programs (PRIDE) staff are now involved in not only the recruitment process but also maintaining a role in the decision-making process as to which individuals are accepted into the PRIDE program and any other LGBTQI-specific programming.

LGBTQI incarcerated persons interviewed who are part of the PRIDE Program (in IRC Mod J [Sector 3] at the time of the onsite review) gave positive feedback as to the program overall. Some of the comments included:

- Individuals in the LGBTQI PC units (including TLF Mod J) are not able to equally access programs, services, and activities available to other incarcerated individuals:
 - Specific areas of concern include work opportunities (including for in-pod porter/pod worker), and in-person programming (namely education)
 - Also received concerns regarding the amount of dayroom time afforded.
 - Individuals report that if they have already taken APAIT courses, they have no additional programming opportunities available to them:
 - The County should provide additional programming, not solely APAIT courses that last about 3-6 weeks.
- Education distance learning (self-study packets) only (no in-class study).
- We get 3 hours of recreation yard weekly, and for the past two (2) weeks, they have given us six (6) hours each week.
- Dayroom from 0600 – 2300 hours.
- We don't have access to the upstairs outside yard (we are told it's a staffing issue).
- No concerns with showers or access to showers (except for raised lip at the entrance).
- Difficulty getting new books (not LGBTQI).
- We have LGBTQI books, but not many, and we have been told more are being ordered.
- We stopped writing grievances about three (3) months ago because a sergeant was sharing our grievances with officers, and we watched them laugh at us and make jokes.
 - The grievance response would indicate resolved, but they were not.
- I personally don't submit grievances out of fear of retaliation.
- Deputies are not calling us by our proper names or pronouns.
- The message slip process is good.
- The commissary does not have "durags" for African American hair.
- Hair clippers (on the yard) are old and pulls our hair.
- No real mental health therapy (they just give us a coloring book).
- Mental health visits are conducted in the attorney booths where the mental health clinician opens the document hatch and is sitting in the pass through area, or they are conducted behind glass in the visiting booths on the phone:
 - We believe the conversations are taped, so we don't want to participate.
- Staff is professional with their searches.
- Deputies at Intake are childish in how they talk to us.
 - A deputy told me I was going to get raped and "They are going to love your blond hair."

- The hair removal product from the commissary does not work.
- The sizing of gender-affirming clothing is off.
- We need better razors or double-bladed razors.
- The custody staff is good about being professional and using our last names or preferred names and pronouns.
- The new yoga program is very good.
- Grievances are supposed to now be forwarded to PRIDE staff, but it does not always happen.
- We now have a full shower curtain.
- Lack of privacy with medical staff.
- Lack of legitimate effort to recruit LGBTQI persons into the PRIDE program.
- Medical staff will not approve or prescribe hair removal creams.

Despite some of the negative complaints/comments listed above, all incarcerated persons interviewed enjoy the PRIDE Program.

The Expert notes the County's action plan in that policies will be revised to address these items from this provision, and work opportunities in the sector will be made available per the remedial plan. Due to the contractor's class size requirements, the County is considering discontinuing all in-person classes and using tablets instead. Programs staff, including the LGBTQI Coordinator, will be working closely with OCSD staff to "recruit" interested persons for LGBTQI programming.

Once the revised policy and training are revised/developed, the County must provide them to the Expert and DRC for review/comments/recommendations.

The Expert has some recommendations as the County moves forward.

The Expert's recommendations are as follows:

- Upon completion, provide the draft policy/procedures to the Expert and DRC for review/comment/recommendations.
- With the reported recent PRIDE program move to TLF, Mod I, Sector 3, as soon as feasible, update the Expert and DRC as to program expansion and specific recruitment efforts.
- Per the County's action plan, provide tentative timelines and details surrounding pod/unit porter/worker jobs for LGBTQI PC individuals.
- As recommended from the Expert's initial tour, the County should examine all feasible options to allow LGBTQI individuals to attend in-person Rancho Santiago Community College classes, including allowing individuals from different housing units/pods to participate together (consistent with reasonable classification considerations), which will provide equitable opportunities to LGBTQI individuals as required by the RP and state anti-discrimination law (e.g., Gov't Code 11135):

- Note: Though all incarcerated persons are permitted to take education courses via study packets, there are concerns that the large majority of LGBTQI individuals do not have equal opportunity to attend in-person classes. Reportedly, Rancho Santiago Community College cannot justify conducting in-person classes for less than 15 participants. This poses a problem for the PRIDE participants as for program effectiveness, and the cap of participants appears to now be at eight (8). But this same concern is shared by nearly all LGBTQI incarcerated persons (regardless of assigned housing unit). Most LGBTQI individuals are in protective custody status, and that limits the number of like-classified individuals within a given housing unit.
- Recommend the County consider creative methods to maintain in-person programming, and to deliver it to LGBTQI individuals at the jail. For example, exploring feasibility for PRIDE program participants to attend classes with other like-classified (i.e., PC) individuals from different housing units.

Partially Implemented (Previous Rating - Partially Implemented)

- D. The County shall continue its efforts to ensure that lesbian and transgender/intersex individuals housed in the Jail's women-designated housing units are placed in the least restrictive setting with programming access as appropriate to their individual circumstances.*

The County did not provide any policies/procedures (or related forms with applicable language) to alert staff or incarcerated persons of such requirements.

At the time of the on-site monitoring tour, two (2) incarcerated LGBTQI female incarcerated persons were housed at the women's jail.

The Expert interviewed two (2) identified LGBTQI incarcerated persons housed in the women-designated housing units. One (1) of the individuals provided the following information:

- Assigned kitchen worker.
- Substance abuse classes are available.
- Reentry classes are available.
- Roof outdoor recreation is offered daily or every other day (90 minutes each).
- Dayroom offered "all day."
- Access to LGBTQI reading materials for books that have been sent in, but nothing provided from the County.
- Regular book exchange weekly, but there is a shortage of books.
- No concerns with the grievance or message request processes.

There do not appear to be any provision-related concerns.

The Expert notes the County's action plan in that the requirements of this provision will be addressed in policy revision.

Once the revised policy is completed, the County must provide it to the Expert and DRC for review/comments/recommendations.

Partially Implemented (Previous Rating – Un-ratable)

- E. The County shall not place LGBTQI individuals in LGBTQI-specific housing without the individual's consent to such housing.*

The County did not provide any policies/procedures (or related forms with applicable language) to alert staff or incarcerated persons of such requirements.

The Expert notes the County's action plan in that the requirements of this provision will be addressed in policy revision. Further, the County will revise its "script" to explain applicable classification and security options and ensure LGBTQI self-identified individuals fully understand the protective custody and general population classifications (and others as applicable) and the jail-wide dynamics associated with those classifications.

The Expert notes that LGBTQI-incarcerated persons are housed in many types of units (e.g., general population, protective custody, administrative, LGBTQI-specific, etc.) at the jail facilities.

As was the case during the Expert's initial onsite tour, Classification staff interviewed indicated they would refrain from forced placement into LGBTQI-specific housing without consent to do so from identified LGBTQI individuals.

From the LGBTQI incarcerated person interviews, there were no complaints specific to forced LGBTQI housing placement or regarding housing without the individual's consent. Also, as detailed earlier in the report, through a sampling review of about 20 OCSD Specialty Housing Requests (Classification interviews), classification staff are asking the LGBTQI incarcerated persons as to their housing preference, whether PC mainline, PC LGBTQI, or GP, and staff are strongly considering an individual's request, and seeking and ultimately gaining approval from a Classification sergeant. During the Expert's initial tour, there were some concerns with classification staff not informing the self-identified LGBTQI new arrivals (at intake) that by being housed in LGBTQI-specific housing units, the (incarcerated persons) would be classified as protective custody, and as-a-result, a few individuals expressed concerns that if they had to do it over again, they would have opted to remain quiet as to their sexual identity or LGBTQI status to not be compelled to be labeled and classified as protective custody. However, it is unclear whether this is still a present concern.

For the next monitoring tour, the County should provide related policies, procedures, and/or forms and/or a "script" that would alert Classification staff and incarcerated

persons of the requirement that the County shall not place LGBTQI individuals in LGBTQI-specific housing without the individual's consent to such housing, and as to ensure individuals fully understand the protective custody and general population classifications (and others as applicable) and the jail-wide dynamics associated with those classifications.

Once the revised policy is completed, the County must provide it to the Expert and DRC for review/comments/recommendations.

Partially Implemented (Previous Rating – Partially Implemented)

D. LGBTQI Housing/Classification Review Procedures

- A. *The County shall house LGBTQI individuals in LGBTQI-designated housing only if an individual requests such housing. If an individual requests such housing, the County may deny such a request if the individual would present specific, articulable threats to the security or safety of other individuals in such a placement.*
1. *The County shall conduct individual housing/classification assessments for each transgender and intersex individual. The County shall give "serious consideration" to each individual's views of their own safety regarding the prospective housing placement (i.e., male vs. female housing for transgender and intersex individuals; LGBTQI-specific housing vs. non-LGBTQI housing) and classification (i.e., general population vs. protective custody).*
 2. *Denial of a transgender or intersex individual's stated preference is permissible only where there is a determination that the individual's stated preference presents specific and articulable management or security concerns, and that the County's alternative placement ensures the individual's health and safety."*
 3. *The County shall document decisions described in subsection (2) above, and the Classification Sergeant will review and approve the decision.*
 4. *The County shall not consider an individual's status of transition or inquire into the individual's genitalia when determining housing placement.*
 5. *The County shall document all denials of a transgender or intersex individual's stated preference for housing, including the classification staff and supervisor's rationale for the decision. Such denials shall be reviewed periodically for continuous quality improvement purposes.*
 6. *If the County denies a transgender or intersex individual's preferred housing placement, the County shall inform the incarcerated individual of the right to file a grievance about the decision.*
 7. *The County shall prohibit retaliation against LGBTQI individuals who grieve or appeal housing placement or classification decisions.*

The County provided the following policies/procedures and/or related forms/documentation for review (either from the current document production period or

from the Expert's initial tour's document production period) (see the Expert's initial report for detailed information):

- CCOM Section 1200.
- CCOM Section 1200.10, Housing Assignment and Changes.
- CCOM Section 1200.7 Specialty Housing Request Form.
- CCOM Section 1201.2, Specialty Housing Inmates.
- CCOM Section 1600.5 Grievance Procedure.
- OCSD Inmate Classification Form J-200 (Revised 1-2020).

The following policies/procedures and/or related forms/documentation either were not provided or did not contain applicable information as follows:

- CCOM Section 1200:
 - Does not contain language relative to the County giving "serious consideration" to each individual's views of their own safety regarding the prospective housing placement (i.e., male vs. female housing for transgender and intersex individuals; LGBTQI-specific housing vs. non-LGBTQI housing) and classification (i.e., general population vs. protective custody).
- For item #2: there is no related policy language.
 - RE: *Denial of a transgender or intersex individual's stated preference is permissible only where there is a determination that the individual's stated preference presents specific and articulable management or security concerns, and that the County's alternative placement ensures the individual's health and safety.*
- For items #2 and #3: it is unclear as to which specific document(s) the denials (as pertaining to item #2) will be documented on:
 - RE: #2 (above).
 - RE: #3:
 - *The County shall document decisions described in subsection (2) above, and the Classification Sergeant will review and approve of the decision.*
- For item #4: there is no related policy language:
 - RE: *The County shall not consider an individual's status of transition or inquire into the individual's genitalia when determining housing placement.*
- For item #5: there is no related policy language:
 - RE: *The County shall document all denials of a transgender or intersex individual's stated preference for housing, including the classification staff and supervisor's rationale for the decision. Such denials shall be reviewed periodically for continuous quality improvement purposes.*
- For item #6: there is no related policy language specific to transgender, intersex, or LGBTQI individuals:

- RE: *If the County denies a transgender or intersex individual's preferred housing placement, the County shall inform the incarcerated individual of the right to file a grievance about the decision.*
- Though the CCOM Grievance Procedure contains general applicable language, such information to grieve/appeal housing request denials would not be known to new arrivals at the time of classification.
- For item #7: there is no related policy language:
 - RE: *The County shall prohibit retaliation against LGBTQI individuals who grieve or appeal housing placement or classification decisions.*

All three (3) Classification Unit or PMU staff interviewed stated they conduct individualized housing assessments and strongly consider requested housing from LGBTQI, transgender, and intersex individuals.

In a review of a sampling (approximately 20) of the completed OCSD Specialty Housing Requests (Classification interviews), the Expert confirmed what staff and incarcerated persons stated, in that individualized program and housing assessments are conducted with strong consideration given to the respective LGBTQI individual's request. In fact, from all related forms reviewed, the classification deputy recommended housing based that matched the respective individual's request, and all related recommendations were approved by a classification sergeant.

As identified in earlier sections of this report, some of the LGBTQI incarcerated persons interviewed stated related complaints. Some of the complaints included:

- How gender identity impacts housing and programming.
- Did not understand the meaning of PC.
- Whether and how transgender females can be housed with non-transgender female incarcerated persons.
- Not asked (at Classification as to their own personal views regarding their own safety).

There are still concerns pertaining to LGBTQI incarcerated persons (new arrivals) not being properly informed by Classification staff as to the dynamics and long-term effects associated with agreeing to protective custody status.

The Expert believes it is important here to reiterate that there is a shared feeling amongst some of the transgender individuals that they would prefer to be housed in a gender-congruent setting, i.e., with other women instead of LGBTQI protective custody housing. However, it is unclear whether any related requests have been submitted during the present monitoring period and, if so, whether classification staff has followed up with a classification interview. As outlined in the Expert's initial report, some transgender individuals reported that this was not an option. Although staff now appear to have a better understanding of the practice, some of the interested transgender individuals may now be hesitant to consider asking for such a request (after reportedly being told this was not an option).

There were four (4) completed OCSD Responses to Inmate/Detainee Grievances submitted to the Expert as part of pre-tour document production that were pertinent to LGBTQI-related complaints. Three (3) grievances were from TLF, and one (1) was for the Men's Jail. The Expert's review of the grievances includes the following general information and concerns:

- Grievance #1:
 - TLF.
 - Concern: Another incarcerated person tried to come from behind him and pull his pants down from the individual's waist.
 - Staff response:
 - The allegation was investigated – Unfounded.
- Grievance #2:
 - TLF.
 - An individual requested to go to GBTQ PRIDE Program:
 - The individual was released from custody, but a note of his request was made in his classification profile in the event he returns to custody.
- Grievance #3:
 - TLF.
 - Individual stated another incarcerated person was harassing him and other individuals and having a sexual relationship with a cellmate:
 - This was investigated by Special Victims Detail and was determined to be "Unfounded."
- Grievance #4:
 - Men's Jail.
 - Individual claims another incarcerated person exposed himself to him:
 - The grievant was released from custody, but the claim was investigated (no further information was provided).

On the surface, the low number of related grievances submitted appears to be a positive sign in that it seems there are not many LGBTQI-related concerns (at least not many that rise to the level of needing to file grievances). However, as detailed earlier in the report, there were multiple concerns raised (during the Expert's incarcerated person interviews) regarding at least one (1) sergeant sharing grievance information with housing deputies and laughing and telling jokes in the presence of the LGBTQI individuals regarding their grievances and related concerns. As also identified earlier in the report, there were concerns raised regarding PRIDE program staff not consistently receiving copies of all PRIDE program-related grievances as per OCSD's reported new practice. Some of the LGBTQI incarcerated persons simply do not have confidence in the grievance process. This could be another factor regarding the

apparent low number of grievances submitted by LGBTQI individuals for the document production period for this monitoring tour.

The Expert notes the County's action plan in that the Expert's identified concerns for this section will be addressed by policy revision(s) and training. Once the revised policy is completed, the County must provide it to the Expert and DRC for review/comments/recommendations.

For the next monitoring tour, the County should provide the following:

- Revise the policy(ies)/procedures and other related documentation outlining the following requirements (and ensure related staff practices):
 - The County shall give “serious consideration” to each individual’s views of their own safety regarding the prospective housing placement.
 - Denial of a transgender or intersex individual's stated preference is permissible only where there is a determination that the individual's stated preference presents specific and articulable management or security concerns, and that the County's alternative placement ensures the individual's health and safety.
 - The County shall not consider an individual's status of transition or inquire into the individual's genitalia when determining housing placement.
 - Every individual requiring specialty housing upon initial classification shall have a Specialty Housing Request Form (J-201) completed detailing the justification.
 - Document all denials of a transgender or intersex individual's stated preference for housing, including the classification staff's and supervisor's rationale for the decision.
 - Copies of periodic reviews (for quality improvement purposes) or information pertaining to denials of a transgender or intersex individual's stated preference for housing, including classification staff's and supervisor's rationale for the decision.
 - If the County denies a transgender or intersex individual’s preferred housing placement, the County shall inform the incarcerated individual of the right to file a grievance about the decision.
 - Ensure all grievances/appeals related to LGBTQI classification/housing (and all other related concerns) are appropriately investigated and complete and meaningful grievance/appeal responses are issued to the grievant/appellant.
 - The County should, during its next round of PREA-required housing/classification reviews of transgender individuals, ask which gender facility the individual would prefer to be housed in and document their preferences. The County should work with DRC and the experts on these issues to ensure successful implementation.

- Though the complaints (through the Expert interview process) could not be substantiated, to the extent there may be validity to the claims, sergeants /custody supervisors must not discuss the LGBTQI-specific grievances with the housing officers (unless through the proper grievance investigation protocols), and staff must refrain from laughing, belittling, and/or telling related jokes, etc.

Classification staff appear to be knowledgeable and are abiding by the remedial plan provision requirements as related to classification interviews, consideration of all factors, including the housing/programming preferences for LGBTQI incarcerated persons, making appropriate recommendations (with documentation), and ultimately obtaining supervisory classification approval for the housing/programming recommendations. However, as was also previously addressed (Expert's initial report), Classification deputies must properly inform identified LGBTQI incarcerated persons that being housed in an LGBTQI-specific housing unit means they will be classified as having protective custody status, and staff must explain the jail dynamics (including long-term effects) associated with agreeing to protective custody status. Classification personnel must also consider and house (in keeping with classification policies and guidelines and with the individual's specific request) housing transgender individuals in a congruent setting (i.e., transgender women with other non-transgender women) instead of LGBTQI protective custody housing.

Policy revision, staff training, and close collaboration with supervisory staff and jail leadership in charge of these aspects of remedial plan implementation will be essential to achieve compliance.

Partially Implemented (Previous Rating – Partially Implemented)

- B. The County shall re-evaluate classification, placement, and programming assignments of each transgender or intersex individual at least twice a year, including as part of any regular classification reviews.*
- 1. At each review, the County shall inquire as to the transgender or intersex individual's current preferences and shall re-assess the individual's classification, placement, and programming assignments, consistent with the process in Section IV. A above.*

The following policies/procedures and/or related forms/documentation either were not provided or do not contain applicable information as follows:

- The CCOM Classification Procedures do not contain related language to guide and ensure compliance with this remedial plan provision.

Staff interviewed confirmed that transgender/intersex incarcerated persons are not being classified twice per year.

The transgender/intersex incarcerated persons interviewed confirmed that they are currently not being reclassified or are not being classified twice annually.

Based on the document review not showing evidence of semi-annual Classification reviews (for transgender/intersex incarcerated persons), staff admission, and transgender/intersex incarcerated person interviews, the County does not appear to be conducting semi-annual Classification reviews for transgender/intersex individuals.

For the next monitoring tour, the County must provide relevant policy/procedures pertaining to conducting classifications/re-evaluations of classification, placement, and programming assignments at least twice annually (as outlined in Section IV. A [above]).

The Expert notes the County's action plan in that the Expert's identified concerns will be addressed through policy revision and training. Once the revised policy(ies) is completed, the County must provide it to the Expert and DRC for review/comments/recommendations.

Not Implemented (Previous Rating – Not Implemented)

- C. *If an individual self-identifies as LGBTQI at any time after intake and states a preference to be assigned to a different housing placement, the County shall conduct a classification review and evaluate the individual's housing preference within 24 hours of receipt of a classification review form.*

The following policies/procedures and/or related forms/documentation either were not provided or do not contain applicable information as follows:

- The CCOM Classification Procedures do not contain related language to guide and ensure compliance with this remedial plan provision.

The housing unit deputies interviewed indicated they would immediately refer LGBTQI individuals back to the Classification Unit for all requests for different housing assignments. Classification staff interviewed indicated they would conduct another classification interview to examine such requests and all factors involved in making a housing/programming decision, including the individual's request.

As part of the document production review, the Expert reviewed a small sampling of numerous completed OCSO Specialty Housing Requests (Classification interviews). From the sampling, the Expert notes a few related examples:

- An LGBTQI incarcerated person self-identified as transgender (post-intake) and requested LGBTQI housing:
 - The individual was recommended and approved for such housing.

- Unclear as to whether the individual was reviewed by Classification staff within 24 hours of the request.
- An incarcerated person (not previously identify as LGBTQI at intake) self-identified post-intake and requested LGBTQI housing:
 - The individual was recommended and approved for such housing.
 - Unclear as to whether the individual was reviewed by Classification staff within 24 hours of the request.
- An LGBTQI incarcerated person in fear for his safety (post-intake) and requested PC housing:
 - He was offered PC Mainline or PC LGBTQI.
 - He requested and was approved for PC LGBTQI.
 - Unclear as to whether the individual was reviewed by Classification staff within 24 hours of the request.

The Expert notes the County's action plan in that the Expert's identified concerns will be addressed through policy revision and training. Once the revised policy(ies) is completed, the County must provide it to the Expert and DRC for review/comments/recommendations.

For the next monitoring tour, the County should provide the following:

- Policy/procedures regarding conducting classification reviews within 24 hours of an LGBTQI incarcerated person's request for different housing placement.
- Documented proof (if applicable) of classification actions as-a-result of an LGBTQI individual's request for a different housing placement. The documentation must include the timeline (i.e., date of requests, date of classification interviews/actions, date of housing reassignments, and information regarding the custody status and housing units moved from and to for each respective individual).

Partially Implemented (Previous Rating – Not Implemented)

- D. *If an individual requests housing reassignment based on LGBTQI status, the County shall develop and implement a safety plan for that individual pending review and any reassignment. The interim placement shall not be Special Management Unit, "Total Sep," or other restrictive housing or classification unless the individual requests such a placement for their own safety or unless serious, specific, and articulable security or management concerns require such placement.*

The following policies/procedures and/or related forms/documentation either were not provided or do not contain applicable information as follows:

- The CCOM Classification Procedures do not contain related language to guide and ensure compliance with this remedial plan provision.

The County should provide the Expert with related policies/procedures governing a safety plan as related to LGBTQI individuals requesting housing reassignment, including any interim housing placements (including specific types of units) and any associated safety concerns. Also, the County should provide documentation/safety plan related to any specific cases during the next monitoring tour document production period.

The Expert notes the County's action plan in that the Expert's identified concerns will be addressed through policy revision and training. Once the revised policy(ies) and training curriculum are completed, the County must provide them to the Expert and DRC for review/comments/recommendations.

Not Implemented (Previous Rating – Not Implemented)

- E. *If Jail staff identify serious, specific, and articulable security or management concerns regarding an LGBTQI individual in their housing placement, staff shall document the basis for their concerns, and the housing determination shall be referred for a classification review, consistent with the above procedures.*

The following policies/procedures and/or related forms/documentation either were not provided or do not contain applicable information as follows:

- The CCOM Classification Procedures do not contain related language to guide and ensure compliance with this remedial plan provision.

Housing staff interviewed stated they would immediately refer LGBTQI incarcerated persons through their chain of command and to the Classification Unit if they determine there is a serious security concern related to their housing placement. However, there was no related documentation provided as part of the pre-tour document review.

Classification Unit staff indicated they follow up on all requests for housing changes, whether submitted by staff or incarcerated persons.

As part of pre-tour document production, the County provided many completed OCSD Specialty Housing Requests (Classification interviews). The Expert noted numerous related examples where Classification interviews were conducted (at intake as well as post-intake) regarding safety and security concerns and rehousing requests, and Classification deputies considered all case factors and the LGBTQI individual requests and made appropriate recommendations to Classification sergeants accordingly. However, although it is assumed that all post-Classification interviews were a result of either staff or incarcerated person self-referrals, there was no documentation provided to confirm, and there were no

associated dates to determine when the respective referrals may have been submitted.

The Expert notes the County's action plan in that the Expert's identified concerns will be addressed through policy revision and training. Once the revised policy(ies) and training curriculum are completed, the County must provide them to the Expert and DRC for review/comments/recommendations.

For the next monitoring tour, the County should provide policy/procedures as related to referrals to management and classification pertaining to security/management and housing concerns for LGBTQI individuals, and any relayed documentation (including the referrals or a tracking log of referrals).

Partially Implemented (Previous Rating – Not Implemented)

E. LGBTQI Access to Programs, Services, and Activities

- A. *The County shall ensure that all LGBTQI persons are informed of and have equal access to programs, services, and activities available to similarly situated individuals, consistent with their health and security needs and classification level. Such programs, services, and activities include, but are not limited to:*
1. *Dayroom and out-of-cell time;*
 2. *Outdoor recreation and exercise equipment;*
 3. *Showers;*
 4. *Telephones;*
 5. *Television;*
 6. *Reading materials;*
 7. *Religious programming;*
 8. *Educational, vocational, re-entry, and substance abuse programs;*
 9. *Work Assignments, including the Community Work Program;*
 10. *Self-help groups and similar programs;*
 11. *Medical, mental health, and dental services and treatment;*
 12. *Public visiting;*
 13. *Attorney visiting;*
 14. *Commissary.*

The following policies/procedures and/or related forms/documentation contain applicable information as follows:

- CCOM Sections 1600, 1710, 2002, 2900, and 6206 (and various subsections within each section) address some of these areas.

The County provided a copy of the OCSD Custody Operations Inmate Orientation Pamphlet (and Orientation video), which contained information relative to the following topics:

- Medical Request (Inmate Health Message).
- PREA.
- Clothing/Linen Exchange.
- Hygiene Items.
- Inmate Message Slip.
- Classification.
- Visiting.
- Indoor Recreation / Outdoor Recreation.
- Rules & Regulations.
- Disciplinary.
- Grievance Procedures.
- Programs / Education / Re-Entry / Activities.
- Religious Services.
- Commissary.
- Inmate Property.
- Other topics.

The County provided community provider information available to in-custody LGBTQI incarcerated persons:

- APAIT (RECLAIM).
- AA Panels.
- Prison Yoga Project.
- Rancho Santiago Community College.

The County provided documentation regarding various classes/programs offered:

- Attitudes for success.
- Attitudes for success correspondence packets.
- Great Escape packets.
- Money matters.
- Money Matters correspondence packets.
- Parenting.
- Substance abuse.
- Substance abuse correspondence packets.
- Workforce Prep correspondence packets.
- Workforce prep.
- Academic skills.
- GED.
- GED correspondence.
- Academic Skills correspondence.
- Computers correspondence.
- Food Services.

- Food Services correspondence.
- Job Development correspondence.
- PRIDE Program.
- Others.

The County also provided documentation regarding available resources for LGBTQI individuals:

- OC LGBTQ Organization List (includes services offered):
 - APAIT:
 - Group Therapy.
 - HIV/STI Testing.
 - Psychosocial Education.
 - Support Groups.
 - OC Healthcare Agency:
 - Counseling.
 - Case Management.
 - Support Groups.
 - Educational & Vocational Support.
 - LGBTQ Center OC:
 - Counseling.
 - Hormone Services.
 - Groups.
 - Events.
 - UCI Health:
 - Counseling.
 - Hormone Therapy.
 - Community and Support.
 - Provider and trainee education.
 - TG Rainbow Support Group:
 - Safe space.
 - Support group.
 - Radiant Health Care:
 - Support groups.
 - Case management.
 - HIV medication treatment.
 - Shanti Orange County:
 - Counseling.
 - Support group.
 - Case management.
 - Viet Rainbow OC:
 - Support group.
 - Counseling.
 - Alianza Translatinx:
 - Food distribution.
 - Patient navigation.

- Health education.
- Linkage to care.

The County provided a one (1) page pamphlet/flyer titled APAIT RECLAIM (Your LGBTQ+ Identity):

- Recovery for transgender individuals (18+) & men who have sex with men (30+).
- Six (6) sessions.
- Lists program contact information.

The County provided a one (1) page document regarding APAIT Services.

- The listing of services includes:
 - HIV/AIDS Testing, Education & Counseling.
 - Comprehensive Risk Counseling.
 - Social Support Groups & Workshops.
 - Patient Navigation.
 - Housing Services.
 - PREP Navigation.
 - Behavioral Health Treatment & Counseling.
 - Substance Abuse Prevention & Treatment.
 - Case Management.
 - Food Pantry.

The County provided a pamphlet/flyer titled APAIT SPARK for review (The conversation for safer sex & drugs for gay, bisexual, trans men & all men who have sex with men):

- Three (3) sessions (ages 18-40).
- Lists program contact information.

Staff interviewed acknowledged there are different opportunities amongst the jail population regarding access to education and work assignments, especially when individuals are placed on protective custody status. At the time of the onsite monitoring tour, there were approximately 73 self-identified LGBTQI incarcerated persons housed in the OCSD jail facilities. As stated earlier in the report, approximately 86 percent of the 73 were classified as protective custody. The Expert understands the County is transitioning from a majority of programs and classes being facilitated via distance/correspondence modalities to more in-class sessions. However, for PC-classified individuals (including PC LGBTQI), the programming opportunities are fewer, particularly for in-class courses/sessions. The Expert also notes the County's recent assertion that consideration is being given to moving from GBTQI (PRIDE) program in-class activities to a self-study packet format. It is unclear as to whether this may extend to other programs for LGBTQI incarcerated persons other than for the GBTQI (PRIDE) program.

Most of the LGBTQI incarcerated persons interviewed acknowledged the Orientation video, but there were concerns with volume level or otherwise not being able to hear or understand. One (1) individual stated he could not read the closed captioning as he is nearly blind but was never provided any verbal orientation. A small number of the individuals interviewed acknowledged receiving the Orientation handbook. Several individuals stated they had to learn about programs, services, and activities from other incarcerated persons. Only one (1) individual acknowledged ever receiving any type of verbal orientation.

In general (regarding access to programs, services, and activities), the Expert notes some of the related comments (from LGBTQI incarcerated person interviews – from different housing pods) below (note: some comments are individual, while others are from multiple incarcerated persons):

- LGBTQI Program/Programming:
 - LGBTQI incarcerated persons are widely not aware of the remedial plan or their rights pursuant.
 - No real LGBTQI programming (other than the GBTQI [PRIDE] program).
- GBTQI (PRIDE) program (Note: some issues are repeated for other areas – below):
 - Lack of effort to effectively recruit into the program.
 - New program coordinator.
 - Concerns (from both TLF and CJX complex regarding recruiting for the GBTQI (PRIDE) program.
 - Nothing is scheduled for Fridays.
 - No jobs are available either inside or outside the sector.
 - Reluctant to submit grievances (retaliation, laughing, jokes, sharing our grievances with the staff we grieved).
 - Waiting on more LGBTQI books to arrive.
 - Verbal disrespect by housing officers.
 - Housing officers are not using our preferred names and pronouns.
 - Hair and grooming concerns.
 - Razor concerns.
 - Hair clippers are not functioning properly.
 - Need more professional therapy.
 - No prescription hair removal creams (e.g., Vaniqa).
- TLF Mod J LGBTQI PC Units:
 - Not able to equally access programs, services, and activities available to other incarcerated individuals:
 - Specific areas of concern include work opportunities, in-person programming (namely education), and dayroom time.
- APAIT Programming:

- LGBTQI individuals report if they have already taken APAIT classes (3-6 weeks), they have no additional programming opportunities available to them.
- LGBTQI Resource Information:
 - Yes, we have (e.g., regarding housing, food, jobs, gender-reaffirming resources, healthcare, etc.).
 - Lacking information.
- Work Assignments:
 - No work opportunities.
 - Can only work as a unit worker/porter.
- Education/Learning:
 - Distance/packet learning only.
- Yard:
 - Concrete yard – no concerns.
 - Very inconsistent.
 - Do not have access to the upstairs outside yard.
 - No sunlight.
 - IRC Mod J (Sector 4) individuals receive yard almost every day, whereas we only go once weekly (sometimes twice).
 - The yard is not sanitary:
 - Sometimes pepper spray is still in the air, feces on the toilet; the toilet is flooded, and feces on the wall.
 - Sometimes we can get more than the minimum time required, but we must ask for it.
- Dayroom:
 - Extended hours, no concerns.
 - Inconsistent.
- Showers/shower access:

It is fine (but there is a slight lift at the entrance (which requires an over-step).

 - The shower curtain is non-see-through and full-length.
 - Eight (8) inch raise in the entry and a slippery surface.
 - Water takes up to 20 minutes to get hot/warm.
 - Shower leaks, floods.
 - Three (3) of the four (4) shower curtain rings have been removed/pulled off (in December and still have not been repaired/replaced:
 - As a result, people can see the full left-hand side of a person's body (while showering).
 - Lack of privacy curtains in TLF Mod J:
 - One (1) individual indicated the County attempted to install a privacy curtain, but the curtains had fallen and had not been repaired.
- Searches:
 - The staff is professional.

- I was never asked my search preference and have been searched by male and female staff (at intake).
 - Some transgender individuals reported that they were not provided with a Voluntary Gender Identity and Search Preference Disclosure Form or asked questions pertaining to gender preference for staff searches and regarding preferred name/pronouns.
- “Fish Kits”/Welfare Packs:
 - Sometimes we don’t receive.
 - We receive incomplete kits/packs.
- Telephones:
 - Two (2) free five (5) – minute calls weekly.
 - Sometimes calls will not go through.
- Reading Books (Non-LGBTQI):
 - Difficulties getting new reading books (non-LGBTQI).
 - Not a good rotation of books.
- Reading Books (LGBTQI):
 - Have some reading books but waiting for more to be ordered and delivered from an approved list of books.
 - We have less than 20 books.
 - Other than the PRIDE program, none are available.
- Church/Religious Services and Activities:
 - Only Protestant religious services are available.
 - Services on Mondays are at the same time as Alcoholics Anonymous (we must choose between the two [2]).
 - We can request one-on-one counseling sessions.
 - No church services or Bible study.
- Self-Help Groups:
 - None are available.
 - Literature only.
- Grievances:
 - The same officers that we grieve come talk to us (negatively) even before we receive a written response from the appropriate jail staff.
 - Some LGBTQI individuals get retaliated against for submitting grievances.
 - I have never filed grievances due to fear of retaliation.
 - The overall process is handled poorly:
 - LGBTQI staff non-custody staff member is supposed to receive copies (for the PRIDE program), but it isn't happening.
 - Grievances get “tossed” and “destroyed.”
 - I was not aware of the grievance process and had to learn about it from other incarcerated persons.
- Message Requests:

- No concerns.
 - Hard to get a blank request slip.
- Commissary:
 - Expensive hair removal products.
 - No “durags” for textured hair.
 - Would like more purchase options, e.g., a jar of hair removal cream or laser hair removal.
- Law Library/Recreation Library:
 - We have access to the law library by request.
- Visiting:
 - About fifty percent of the time, we are left in visiting for an extended period of time after our visits have concluded.
- Gender-Affirming Clothing Products/Grooming/Hygiene:
 - Have access to razors.
 - Razors are single-blade and dull.
 - No additional razor allotment for transgender individuals.
 - Pod officers allow transgender individuals to trade in razors between commissary deliveries, but transgender individuals reported that this is often at the discretion of the officers or based on their availability during shifts.
 - Have access to bra and undergarments.
 - Transgender females reported a need for compression undergarments to alleviate gender dysphoria:
 - Referred to as “Tucking” undergarments.
 - A transgender individual reportedly had to submit multiple grievances to receive her gender-appropriate religious garment (hijab). Note: she has since received it.
 - No makeup for transgender females.
 - Clothing sizes are not accurate.
 - The medical department will not approve prescription hair removal creams.
 - Access to nail clippers (on the yard).
 - Access to hair clippers (on the yard).
 - Hair clippers snag/pull our hair:
 - Coach is not responding to our message requests.
 - They cut me.
 - No access to gender-affirming hygiene items.
- Classification:
 - Some transgender individuals stated that custody staff did not explain how gender identity or protective custody status impacts classification (including Mainline PC versus LGBTQI PC versus GP).
 - Complaints that they were not consulted or asked as to their own views relative to male versus female housing for transgender and

- intersex individuals/LGBTQI-specific housing versus non-LGBTQI-specific housing/GP versus PC.
- Transgender individuals are not aware of how to request gender-congruent housing and how that may or may not affect their situation and programming as compared to current housing.
- It is unclear whether semi-annual (though it does not appear to be happening) as no transgender individual reported being interviewed semi-annually by classification about their housing preferences or being reassessed for classification.
- Mental Health:
 - Mental health staffing shortages.
 - Very few resources.
 - Need more access to therapeutic professionals:
 - In LGBTQI (PRIDE) program, the staff listens to us, but we don't get any feedback (just a coloring book).
 - No psychology therapist.
 - A lot of us don't request to see mental health (due to the reasons described in the two [2] bullets above).
 - Mental health visits/appointments are conducted through a "hatch," or they are conducted behind glass in a visiting booth:
 - We all believe they are tape-recorded, so we don't request or go.
 - Video medicine/therapy is not conducive to confidentiality or toward a legitimate mental health session.
- Medical:
 - Medical is quick to respond to requests.
 - Not getting HRT hormone bridge treatment/medications.
 - Transgender individuals not seeing an Endocrinologist (just seeing a regular doctor), and they don't discuss/explain the medications or dosages.
 - The medical provider changes our medications without telling us the reason(s).
 - Some of the medications are related to transgender inmates (hormone medication).
 - Difficult to be able to see a doctor.
 - It's simple to be able to see a nurse.
 - No privacy (when seeing doctors or nurses):
 - The door to the satellite clinic is left wide open.
 - Recently an officer was standing outside the opened door, was listening to my medical appointment, and stated, "I have taken that same medication," referring to the medication being discussed between medical professionals and patients.
 - Referrals to the eye doctor and other specialists take a lengthy period of time.

- Dental:
 - No concerns.
 - Refuses to give us antibiotics (post-surgery).
- Miscellaneous:
 - Staff needs sensitivity and diversity training.

The Expert notes the County's action plan in that the County is developing an orientation for LGBTQI inmates and reportedly reviewing programming and work assignments. Once the draft orientation materials are completed, the County must provide them to the Expert and DRC for review/comments/recommendations.

Though most of the comments varied and could not be confirmed, many of the various complaints were made by multiple individuals and often from different housing pods. To the extent these are legitimate concerns, the County should examine the apparent disparity and lack of equal access to some of the programs, services, and activities offered to LGBTQI-incarcerated persons versus other individuals. Obviously, the piloted GBTQI (PRIDE) program, as outlined earlier in this report, is one creative avenue, but the Expert encourages the County to explore additional means to ensure the LGBTQI, transgender, and intersex population enjoys equivalent access to the many programs offered to other individuals throughout the facilities.

Core components of this remedial plan provision that require concerted attention are *educational, vocational, re-entry, and substance abuse programs (#8) and work assignments, including the Community Work Program (#9).*

Partially Implemented (Previous Rating – Partially Implemented)

- B. The County shall offer regular in-custody programs and support groups specifically serving the needs of LGBTQI individuals (e.g., APAIT).*
- 1. The County shall make such LGBTQI-specific programming available to all LGBTQI individuals (i.e., pretrial, pre-sentenced, and sentenced; general population and restrictive custody, etc.), consistent with individualized safety and security assessments.*
 - 2. The County shall identify and collaborate with LGBTQI community groups to deliver programming in the Jail facilities.*

The following policies/procedures and/or related forms/documentation contain applicable information as follows:

- For items #1 and #2: the County previously (for the initial monitoring tour) provided a memorandum citing that incarcerated persons have access to programming through the PRIDE Mod (IRC Mod J) (now

TLF, Mod I, Sector 3) and APAIT for Mod I at the Theo Lacy facility. The memo indicated the Programs department purchased LGBTQI reading material and received a book donation from the Center (LGBTQI Community Group) and will continue to add appropriate reading material as it becomes available.

- For item #1: the County previously (for the initial monitoring tour) provided a one (1) page document titled "GBTI Program Sector Procedures."
- For item #2: from the OCSD Inmate Services Division – Correctional Program, the County previously (for the initial monitoring tour) provided a pamphlet titled "PRIDE Program (LGBTQIA+ Community Resource Guide), which contained various resource information (e.g., hotlines, employment, legal, housing, supportive services, health & wellness (low-cost clinics, trans services, HIV/AIDS, and counseling), recovery (residential, outpatient, and twelve steps), and basic needs (food, health insurance).

As reported in the Expert's initial report, in the review of the "GBTI Program Sector Procedures," it indicated "the program sector (formerly in IRC J Mod Sector 3 – now TLF Mod I, Sector 3) shall consist only of PC3 incarcerated persons that identify as GBTI. All other individuals are prohibited from being placed in that sector." It also requires all individuals in the program sector to have unrestricted access to the dayroom (cell doors open) from 0600-2300 hours every day (with exceptions for exigent circumstances).

As was the case with the Expert's initial onsite tour, the Expert walked through IRC Mod J Sector 3, TLF Mod I, and other pods. In interviewing both staff and LGBTQI individuals, it was once again evident that the consensus among the programs (e.g., the PRIDE program at IRC Mod J Sector 3 [at the time of the onsite review] and APAIT program at TLF Mod I) is very positive and encouraging. There were some minor concerns with individuals assigned to the GBTQI (PRIDE) program, in that there is new leadership within the program facilitators, but they understand there is a bit of a transition with getting new leadership onboard. There are a few new structured classes and a few that are no longer part of the program, as described earlier in this report. The County continues to collaborate with outside organizations within the LGBTQI community.

As was reported in the Expert's initial report and regarding LGBTQI individuals housed in TLF, they were happy to have the APAIT program. However, a common complaint was that it's a one (1) time 3-6 week program that rotates from one (1) yard/dayroom group to another. Some of the individuals interviewed stated that there have been lapses in the program. A related complaint (as outlined earlier in this report) is that the County should implement additional programs other than the same APAIT material that repeats.

Please refer to Section IV.E.A.A. for LGBTQI incarcerated person interview comments.

The Expert notes the County's action plan in that the County reportedly is working to contact outside LGBTQI community groups via the LGBTQI Coordinator. With the lifting of COVID restrictions, programming will be more consistent and ongoing.

The Expert notes the County's report that the LGBTQI (PRIDE) program was recently moved to TLF, Mod I, Sector 3.

The Expert provides the following recommendations:

- As was recommended in the Expert's initial report, the County should examine ways to expand the programs (e.g., LGBTQI [Pride] Program, APAIT, or similar programs) to make them available to all LGBTQI individuals (e.g., pretrial, pre-sentenced, and sentenced; general population and restrictive custody, etc.) with appropriate modifications to meet different groups' safety, security, and other needs. The classification team should work closely with LGBTQI programming staff to expand the number of individuals eligible for this programming, through offering the program to more classification groups, working with individuals to step down into lower classification groups, considering eligibility based on individual case factors (similar to what is done in the mental health units), etc.
- As was recommended in the Expert's initial report, the County should examine all reasonable avenues to maintain the programs without lengthy lapses between program offerings and with programming opportunities that are most consistent and ongoing.
- As was recommended in the Expert's initial report, the County should continue its efforts towards ensuring that specialized LGBTQI programs (PRIDE, APAIT) have resources and amenities similar to the jail's other special program units (e.g., televisions with remotes to control their volume and content, class media/teaching aides, games, moveable chairs, microwaves, etc.).
 - The Expert notes the County's position in that the County does not believe the differences in perks/privileges within the different specialized units constitute discrimination and that the County is willing to discuss with DRC regarding these concerns and what may constitute discrimination. In any event, it should be a collective goal for the LGBTQI Program to succeed. Thus, the use of programming incentives and benefits that have been implemented in

other specialized units are worth serious consideration.
The Expert is continuing with the recommendation.

Partially Implemented (Previous Rating – Partially Implemented)

- C. *The County, with input from DRC, shall identify and procure LGBTQI community resource information and disseminate such information to incarcerated LGBTQI individuals.*

The following policies/procedures and/or related forms/documentation contain applicable information as follows:

- The PRIDE Program (LGBTQI+ Community Resource Guide) pamphlet contains various community resource information.

The following policies/procedures and/or related forms/documentation either were not provided or do not contain applicable information as follows:

- The County did not provide a related policy or procedures.

Staff program facilitators interviewed from the Correctional Programs unit and Correctional Mental Health Programs unit indicated they provide LGBTQI-related resource information, as does staff from APAIT and The LGBTQI Center of Orange County.

The LGBTQI-incarcerated persons interviewed had differing responses as to whether outside community LGBTQI information is provided or available. Some stated there is good information available (as outlined earlier in this report), while most indicated there is minimal or no related information provided to them.

The Expert notes the County's action plan in that the County reportedly will discuss the community resource issue with DRC representatives.

It is unclear whether the LGBTQI resource information the County provided (as listed in Section IV.A. (above) is provided to the LGBTQI incarcerated persons (or whether such resource information was being provided at the time of the Expert's interviews.

The Expert provides the following recommendations:

- The County should update the Expert on the outcome of related discussions with DRC and any new community resource materials introduced that result from the discussions.
- The County should provide policies/procedures pertaining to identifying and procuring LGBTQI community resources and

information and disseminate the information to LGBTQI-incarcerated persons.

- The County should disseminate LGBTQI resource information to all LGBTQI incarcerated persons, regardless of their housing assignment (if they are interested).
- The County must discuss and coordinate with DRC representatives for this provision.

Partially Implemented (Previous Rating – Partially Implemented)

- D. The County shall identify, procure, and make accessible LGBTQI reading materials to LGBTQI individuals.*

The following policies/procedures and/or related forms/documentation contain applicable information as follows:

- The County provided a listing of authorized LGBTQI-related reading materials.
- For the Expert's initial monitoring tour, the County provided a listing of individuals authorized to pass out LGBTQI-related reading materials.

The following policies/procedures and/or related forms/documentation either were not provided or do not contain applicable information as follows:

- The County did not provide a related policy or procedures.

For the Expert's initial monitoring tour and in the review of the program literature/information provided as part of pre-tour document production, the list identified approximately ten (10) different books (from nine [9] different authors) as being approved to serve the needs of LGBTQI individuals, with six (6) of each book to be divided by two (2) sectors (TLF Mod I, and IRC Mod J). The County has since informed the Expert that new approved books are being ordered and will be available to LGBTQI individuals upon receipt from the publisher or vendor.

The County provided (as part of document production for the initial tour) a listing of ten (10) individuals authorized to pass out reading materials. The list included four (4) staff members from OCSD, two (2) from OC Health Care Agency, two (2) from APAIT, one (1) from the LGBTQ Center of OC, and one (1) from the OC Department of Education.

As was the case during the Expert's initial tour, the Expert observed LGBTQI-related books in the PRIDE unit. But none of the other units had any related books or reading materials (including TLF Mod I).

As was the case during the Expert's initial tour of the LGBTQI incarcerated persons interviewed from the GBTQI (PRIDE) unit (IRC Mod J Sector 3), all of them acknowledged that LGBTQI-specific reading material is available. Of the LGBTQI individuals interviewed living in other housing units (LGBTQI, general population, etc.), only one female LGBTQI individual (Women's Jail) indicated that LGBTQI-related books are available. There are still some complaints regarding regular books/reading material, as related to not being able to rotate books and not enough books for everyone.

During LGBTQI incarcerated person interviews, they provided the following related comments:

- Reading Books (Non-LGBTQI):
 - Difficulties getting new reading books (non-LGBTQI).
 - Not a good rotation of books.
- Reading Books (LGBTQI):
 - Have some reading books but waiting for more to be ordered and delivered from an approved list of books.
 - We have less than 20 books.
 - Other than the PRIDE program, none are available.

The Expert notes the County's action plan in that the County is reportedly collecting multiple sets of books recommended by DRC. In recent discussions with ViaPath, the County was reportedly informed that ViaPath is unable to provide any books on electronic tablets at this time. The County will reportedly request that ViaPath include a list of available books on the tablet so incarcerated persons may request a particular book.

The Expert provides the following recommendations:

- For the next monitoring tour (or upon completion), the County should provide policy/procedures pertaining to identifying, procuring, and making accessible LGBTQI reading materials to LGBTQI individuals (regardless of housing unit).
- The County will need to apprise the Expert and DRC as to progress with ViaPath toward adding LGBTQI-approved books on the tablets.
- The County will need to apprise the Expert and DRC as to the status of adding new LGBTQI-approved books to the approved list (once the County discusses it with DRC).

Partially Implemented (Previous Rating – Partially Implemented)

E. Showers

1. *Transgender and intersex individuals shall be given an opportunity to shower separately from others – i.e., at a separate time and/or with appropriate physical separation.*
2. *Transgender and intersex individuals shall be permitted to use showers with privacy screens.*

The following policies/procedures and/or related forms/documentation contain applicable information as follows:

- The County provided CCOM 2900.3 Prevention Planning.

The following policies/procedures and/or related forms/documentation either were not provided or do not contain applicable information as follows:

- The County did not provide a related policy or procedures (pertaining to showering and privacy screens as related to transgender or intersex incarcerated persons).

In a review of CCOM Section 2900.3, it is written in the context of PREA concerns (prevention planning), as it outlines some general showering (including modesty screens) and searching concerns, but it does not specifically address this issue as related to transgender and intersex individuals being afforded the option of showering separately from others and/or with physical separation.

Most of the related shower concerns voiced by LGBTQI incarcerated persons for the Expert's initial tour have been resolved. There was a concern with one (1) of the shower curtains.

During LGBTQI incarcerated person interviews, they provided the following related comments:

- Showers/shower access:
 - It is fine (but there is a slight lift at the entrance (which requires an over-step)).
 - The shower curtain is non-see-through and full-length.
 - Eight (8) inch raise in the entry and a slippery surface.
 - Water takes up to 20 minutes to get hot/warm.
 - Shower leaks, floods.
 - Three (3) of the four (4) shower curtain rings have been removed/pulled off (in December) and still have not been repaired/replaced.
 - As a result, people can see the full left-hand side of a person's body (while showering).
 - Lack of privacy curtains in TLF Mod J:

- One (1) individual indicated the County attempted to install a privacy curtain, but the curtains had fallen and had not been repaired.

As was the case during the Expert's initial onsite tour, the Expert observed various types of shower barriers or modesty screens. Some contained curtains, while others had steel or aluminum screens (primarily half screens).

All pod officers interviewed (amongst the different jails) stated that transgender/intersex individuals shower individually, and all have the option of showering at times of the day that may be different from the time period that others shower (if they so choose). Some of them also stated that the view from the "bubble" to a sector shower is obstructed by a metal privacy door and only allows for a view from the individual's neck upward.

The Expert notes the County's action plan in that the County reportedly will address related issues with policy revision.

The Expert provides the following recommendations:

- For the next monitoring tour (or upon completion), the County should provide a related policy/procedures (pertaining to showering and privacy screens as related to transgender or intersex incarcerated persons).

Partially Implemented (Previous Rating – Partially Implemented)

F. Commissary

1. *The County shall, in consultation with DRC, facilitate transgender and intersex individuals to access gender-affirming commissary items, hygiene products, and beauty products.*
2. *The County shall provide transgender and intersex individuals additional allowances of personal hygiene products (i.e., razors) to alleviate the negative mental health impact of body hair for some individuals, consistent with jail safety and security.*

The following policies/procedures and/or related forms/documentation either were not provided or do not contain applicable information as follows:

- For items #1 and #2: CCOM Section 2002 Commissary and Inmate Welfare Fund does not address gender-affirming commissary items, hygiene products, or beauty products. Likewise, it does not address additional allowances of razors for transgender and intersex individuals.

While previously onsite for the Expert's initial tour, the Expert interviewed the Commissary Manager. The commissary staff member stated that all items sold are

considered gender-neutral products and that no items are limited based on an individual's sex, gender, or housing designation. He indicated he reviews and considers requests to add new commissary items and can add them on a trial basis to do an analysis to determine feasibility for long-term sales. He makes all final decisions in conjunction with the Jail Commander. He was not able to recall whether he had ever received any requests from or concerning LGBTQI-incarcerated persons. He indicated that the commissary sells ponytail holders.

While previously onsite for the Expert's initial tour, the Expert interviewed a CSA employee from the jail's warehouse. He stated the warehouse supplies clothing (except shower shoes, which can be obtained from the commissary), feminine hygiene products, and hand sanitizer to the jail's population. All authorized clothing decisions are made by the Jail Compliance & Training Team (JCAT). He stated there are no exclusionary criteria or preclusion regarding clothing preference for transgender/intersex individuals.

During interviews of transgender/intersex incarcerated persons for the current tour, most of the same concerns were expressed (as compared to the initial tour). The Expert notes the County's position that hair removal cream is available to all incarcerated persons (male and female) through the commissary. Based on concerns identified by a couple of incarcerated persons interviewed (identified in the bullets [below]), available commissary hair removal cream is limited and has reportedly caused rashes and skin breakouts. The Expert reiterates the previous recommendation that the County consider other alternatives (especially for these types of cases) pertaining to indigent individuals who may need hair removal cream.

During the current LGBTQI incarcerated person interviews, they provided the following related comments:

- The commissary does not offer makeup, hair-removal tools, creams, or hair products.
- Denied "Vaniqa" by a doctor for facial hair growth.
- Another individual stated that an endocrinologist prescribed "Vaniqa" cream, but a nurse later informed the individual that it was a mistake to prescribe it and that as of August 26, 2022, it would no longer be approved as a prescription.
 - A second individual had a similar claim.
- Need more access to razors and more shaving cream (two [2] razors per commissary draw is not sufficient).
 - This complaint was common amongst the large majority of the LGBTQI population.
 - Some pod officers allow transgender individuals to trade in razors in between commissary deliveries, but it is at the discretion of individual officers.

- I was recently told by jail administration staff that our razor allotment would be increased to be unlimited (should at least be 7 per week), but nothing has changed yet.
- Only hair removal cream is available (that is made for African American men), I tried it, and it “ripped my skin off.”
- Commissary only offers Noxzema, and one (1) hair burner, which causes me a rash and breakout (I need more options).
- Asked the nurse practitioner for hair cream (for hair removal), but it was denied.
- No options to purchase hair wraps or "scrunchy" hair ties (I use a t-shirt).
- Commissary slips are sometimes not available.

The WPATH Standards of Care make clear that hair removal treatment may constitute medically necessary transgender-related care. The Expert notes DRC's position that the County (including CHS) needs to develop policies and procedures for providing such care on a case-by-case, individualized basis to comply with the LGBTQI Remedial Plan provisions requiring the County to provide "allowances of personal hygiene products" to alleviate the negative mental health impact of body hair for some individuals" (Section V.F.) and to provide gender-affirming items that include "[m]ake-up, hair products, hair removal tools, and other gender-affirming hygiene products" (Section V.G.1).

The Expert will further examine WPATH standards and seek further input from healthcare professionals with expertise in the WPATH Standards of Care regarding this issue.

The Expert notes the County's action plan in that the County will address the related concerns through policy revision. Currently, OCSD offers one (1) gender-neutral commissary slip for all incarcerated persons. Makeup is not offered on commissary. The County is in the process of adding "Nair" to the commissary as an option for hair removal in addition to Magic Shave, which is currently offered.

The Expert provides the following recommendations:

- The County should provide policy/procedures or other documentation that addresses gender-affirming commissary items, hygiene products, or beauty products, and the allowance of razors for transgender and intersex individuals:
 - Once implemented, the County will need to show proof of practice.
- The Expert had recommended a hair removal product be added to the commissary list for purchase and acknowledged that the County now reports that the product "Nair" is now an approved commissary item.

Not Implemented (Previous Rating – Not Implemented)

G. Clothing

1. *The County shall provide gender-affirming clothing, including, but not limited to:*
 - a. *Undergarments, including bras, underwear, and boxer shorts, depending on the individual's stated preference;*
 - b. *Footwear in all sizes;*
 - c. *Binders and chest compression garments and other types of compression garments;*
 - d. *Religious items in accordance with their gender; and*
 - e. *Makeup, hair products, hair removal tools, and other gender-affirming hygiene products.*
2. *The County shall apply grooming standards based on an individual's gender identity. For example, if the County permits non-transgender women to wear their hair at a certain ponytail length, transgender women shall be allowed to wear their hair similarly.*

The following policies/procedures and/or related forms/documentation contain applicable information as follows:

- For item #1: CCOM Section 1600.2 Jail Clothing addresses gender identity (including if gender identity differs from their assigned gender at birth), and individuals shall be permitted to wear clothing items of the gender with which they identify, as clothing room supply permits if those clothing items are their preference. It also covers transgender individuals having the option of choosing clothing items and underwear/undergarments. It further addresses that transgender Women have the option of choosing to wear a bra and panties and transgender men have the option of not wearing a bra. Also, transgender men should be able to access boxers and binders/compression tops.

The following policies/procedures and/or related forms/documentation either were not provided or do not contain applicable information as follows:

- For item #1: CCOM Policy 1600.2 Jail Clothing does not specifically address footwear in all sizes; binders and chest compression garments, and other types of compression garments; religious items in accordance with their gender; and makeup, hair products, hair removal tools, and other gender affirming hygiene products.
 - Note: CCOM Section 2002 Commissary and Inmate Welfare Fund does not address any of the applicable items either.
- For item #2: The County did not provide a related grooming policy or procedures.

All pod officers interviewed indicated that transgender/intersex incarcerated persons are permitted to maintain the jail clothing of choice regardless of their gender or gender identity, including undergarments.

During interviews of transgender/intersex incarcerated persons, they indicated they are permitted to wear clothing compatible with the gender with which they identify.

During the current LGBTQI incarcerated person interviews, they provided the following related comments:

- Gender-Affirming Clothing Products/Grooming/Hygiene:
 - Have access to razors.
 - Razors are single-blade and dull.
 - No additional razor allotment for transgender individuals.
 - Pod officers allow transgender individuals to trade in razors between commissary deliveries, but transgender individuals reported that this is often at the discretion of the officers or based on their availability during shifts.
 - Have access to bra and undergarments.
 - Transgender females reported a need for compression undergarments to alleviate gender dysphoria:
 - Referred to as “Tucking” undergarments.
 - A transgender individual reportedly had to submit multiple grievances to receive her gender-appropriate religious garment (hijab). Note: she has since received it.
 - No makeup for transgender females.
 - Clothing sizes are not accurate.
 - The medical department will not approve prescription hair removal creams.
 - Access nail clippers (on the yard).
 - Access to hair clippers (on the yard).
 - Hair clippers snag/pull our hair:
 - Coach is not responding to our message requests.
 - Cut me.
 - No access to gender-affirming hygiene items.

The Expert notes the County’s action plan in that the County will address the related concerns through policy revision and training and ensure proper implementation. Additionally, OCSD will purchase binders/chest compression garments.

The Expert provides the following recommendations:

- Once the related draft policy(ies)/procedures are completed, the County should provide them to the Expert and DRC for review/comment/recommendations.
 - E.g., as related to footwear (and sizes), chest compression garments, and other types of compression garments; religious items in accordance with their gender; and makeup, hair products, hair removal tools, and other gender-affirming hygiene products.
- The County should provide a policy/procedures related to grooming.
- To the extent there may be validity to the allegations, staff must issue properly sized undergarments to transgender (and all LGBTQI individuals).
- The County should confirm with the Expert and DRC for information regarding compression undergarments.

Partially Implemented (Previous Rating – Partially Implemented)

H. Visitation

1. *The County shall ensure that rules on contact and affection during visiting are the same for LGBTQI and non-LGBTQI individuals, including in-person visitation and approved contact visits.*

The following policies/procedures and/or related forms/documentation either were not provided or do not contain applicable information as follows:

- CCOM Section 1600.3 Orange County Jail Rules (Visiting and Communications) states that if contact visits are permitted, they will comply with the facility policy. However, no additional relative policy/procedure information was provided for review.

The OCSD jail facilities allow for non-contact (behind glass) visiting (including attorney visits). It is unclear as to whether contact visits are ever approved (as CCOM Section 1600.3 eludes) and, if so, under what circumstances.

During interviews of LGBTQIA incarcerated persons, some related concerns included:

- Visiting:
 - About fifty percent of the time, we must remain in the visiting area for an extended period-of-time after our visits have concluded.

The Expert notes the County's action plan in that the County will address the related concerns through policy revision. Stemming from a previously identified concern (Expert's initial report), OCSD has reportedly implemented a new Visiting

Call Center service that puts callers in a phone queue instead of them getting a busy signal.

The Expert provides the following recommendations:

- The County must provide policy/procedures specific to an unnamed apparent related policy articulated in CCOM 1600.3 ("that if contact visits are permitted, they will comply with facility policy") or address in another policy.

Partially Implemented (Previous Rating – Partially Implemented)

F. Searches

A. Policy

- 1. For incarcerated persons who are transgender or intersex or whose appearance or manner does not conform to traditional gender expectations, the County shall allow the individual to identify the preferred gender of Jail staff who will perform pat and strip searches of them, including through the use of the Voluntary Gender Identity Disclosure and Search Preference Form.*
 - a. The County shall conduct searches in accordance with the individual's search preference, except in exigent circumstances (i.e., "temporary and unforeseen circumstances that require immediate action in order to address a threat to safety or institutional security") or when performed by medical practitioners in a hospital setting.*
 - b. If an individual's search preference cannot be determined, the search shall be conducted in a manner consistent with their gender identity or expression.*
 - c. Temporary staffing issues (e.g., not enough staff on the unit of a specific gender) shall not meet the criteria for "exigent circumstances."*
- 2. The County shall ensure that strip searches of transgender and intersex individuals occur with enhanced and appropriate privacy (e.g., outside the view of others not participating in the search).*
- 3. The County shall not conduct genital inspections (visual or pat) to determine a transgender or intersex person's anatomy, to otherwise harass or embarrass the individual, or for any other improper purpose.*
- 4. The County shall not conduct searches to punish or retaliate against incarcerated people, including people who identify as LGBTQI.*

The following policies/procedures and/or related forms/documentation contain applicable information as follows:

- For item #1, CCOM Section 1710.4 Body Searches of Inmates, language addresses staff search requirements for cases where an individual is gender non-conforming or has a gender identity that differs from their genital status. It

also requires staff to take-into-account the individual's gender expression for cases where an individual declines to state their gender identity. Further, it requires staff to ask the individual as to their preference regarding the gender of staff who will conduct the search, and the preference will be documented on the search preference form.

- For items #3 and #4, CCOM Section 1710.4 requires staff to conduct searches in a professional and dignified manner; staff will not use searches to punish, harass, or embarrass any "inmate"; and at no time will any search be conducted solely for the purpose of determining an incarcerated individual's genital status.

The following policies/procedures and/or related forms/documentation either were not provided or do not contain applicable information as follows:

- For item #1: CCOM Section 1710.4 does not contain language pertinent to temporary staffing issues (e.g., not enough staff on the unit of a specific gender) and shall not meet the criteria for "exigent circumstances."
- For item #2: CCOM Section 1710.4 (as well as other sections pertaining to searching, showers, etc.) does not contain language pertinent to enhanced privacy for strip searches of transgender or intersex individuals.

The Expert interviewed two (2) Classification deputies and one (1) PMU deputy. All acknowledged the OCSD Voluntary Gender Identity Disclosure and Search Preference Form is used. The deputies indicated that at the time of intake processing, a staff member (e.g., "uncuff deputy") has the LGBTQI/transgender/intersex new arrival complete the form, and a Classification deputy then enters the information into the electronic I-TRAC system. The pod officers have access to the I-TRAC system. However, there was some confusion and differing answers as to how and where to obtain search preference information.

The Expert interviewed several pod officers from most of the jail facilities. They all stated that for conducting searches of transgender/intersex individuals, they ask the individual as to their search preference (gender of staff) and ensure that the individual's search preference (requested gender of staff) is accommodated. One (1) of the pod officers indicated that he would contact his supervisor (sergeant). All agreed that strip (unclothed) searches are conducted in private settings away from other incarcerated persons. All pod officers interviewed are aware of the OCSD Voluntary Gender Identity Disclosure and Search Preference Form. But there are still inconsistencies as to where the document and related form information can be found, whether mod cards, J-112 form, I-TRAC, etc. As identified earlier in this report, one (1) of the pod officers indicated related information was located on the mod cards, but when the Expert requested that he pull a mod card for a specific transgender person, the information was not contained on the card.

During interviews of LGBTQIA incarcerated persons, some related concerns included:

- Searches:
 - The staff is professional.
 - I was never asked my search preference (transgender) and have been searched by male and female staff (at intake).
 - Some transgender individuals reported that they were not provided with a Voluntary Gender Identity and Search Preference Disclosure Form or asked questions pertaining to gender preference for staff searches and regarding preferred name/pronouns.

The Expert notes the County's action plan in that the County will address the related concerns through policy revision and training. The County must provide the completed draft policy and training materials to the Expert and DRC for review/comments/recommendations.

The Expert provides the following recommendations:

- The County should -provide policies/procedures pertinent to temporary staffing issues (e.g., not enough staff on the unit of a specific gender) that meet the criteria for "exigent circumstances."
- The County should provide policies/procedures pertinent to enhanced privacy requirements for strip searches of transgender or intersex individuals.
- During the Intake/Classification processes, staff must be consistent in completing the OCSD Voluntary Gender Identity Disclosure and Search Preference Form and entering the information into the I-TRAC system.
- Staff must be trained regarding where to locate the information contained in the OCSD Voluntary Gender Identity Disclosure and Search Preference Form, e.g., the I-TRAC system.
- The County must implement related policies, ensure searches are conducted pursuant to the policy, and ensure transgender or intersex individuals have their search preference or refusal (to identify search preference) documented. To assess this recommendation in the future, the Expert will review the accuracy and completeness of search preference forms.
- All staff that conduct searches of transgender/intersex incarcerated persons (e.g., housing deputies, sworn staff that works court processing, transportation deputies, etc.) must be trained on related policies/procedures and ensure transgender/intersex individuals are searched in accordance with their search preference (staff gender), with enhanced and appropriate measures as to privacy.

Partially Implemented (Previous Rating – Partially Implemented)

G. Medical and Mental Health Care

- A. *The County's standards of care for transgender and gender-variant individuals shall reflect community-based standards of care, including relevant UCSF guidelines and World Professional Association for Transgender Health (WPATH) Standards of Care.*

Health Care Agency (HCA) Correctional Health Services (CHS) Policy 6206 Gender Diverse/LGBTQIA+ Patient Health Care (effective date 1/12/23) indicates all CHS clinical staff receive biennial training on gender diverse/LGBTQI+ patient health care following established community (i.e., Asian Pacific Aids Intervention Team [APAIT], ICSF, or World Professional Association for Transgender Health [WPATH] Standards).

The procedure outlines gender diverse/LGBTQI+ biennial training (including refresher training), gender self-identification screening, patient safety, confidentiality, gender-affirming Health Care Management, mental health evaluations, and counseling services, mental health client care plan, discharge planning, grievances/quality improvement. However, despite the January 12, 2023, effective date, it is unclear whether Policy 6206 is still under revision. All Expert reviews will include evaluations of electronic health records (as outlined later in this section) to evaluate compliance against various related community standards or guidelines, e.g., WPATH Standards of Care (for the Health of Transgender and Gender Diverse People - 8th Edition), and the UCSF LGBT Health Guidelines. The WPATH Standards (8th Edition) were published on September 15, 2022, and the standards apply to the implementation of Section IV.G. (of this report).

The Expert interviewed eight (8) HCA CHS healthcare professionals, including medical and mental health/behavioral health staff members, and management personnel. Staff indicated they are trained and work under HCA CHS Policy 6206 Gender Diverse/LGBTQIA+ Patient Care and the community-based standards of care, including relevant UCSF guidelines and World Professional Association for Transgender Health (WPATH) Standards of Care.

The Expert notes the County's action plan in that the County will address the related concerns (proof of related biennial training on gender diverse/LGBTQI+ patient care) as identified in the Expert's initial report. The County indicated that initial related training of Clinical Staff was done with a doctor during the 2022 Skills Fair in September, and the County contracted with APAIT for education and training. The first round of training will start on January 2023.

The Expert provides the following recommendations:

- For the next Expert tour (or upon completion), identify all current and future required training components, and provide documented proof of biennial training that has been conducted (first round) on gender diverse/LGBTQI+

patient care to meet all aforementioned guidelines and standards of care for HCA CHS staff (as applicable). The County must also provide a calendar year or fiscal year schedule for the remaining staff to be trained. The training material must be consistent with WPATH Standards of Care and UCSF LGBT Health Guidelines. The County must share all training materials with the Expert and DRC for review and comment.

Partially Implemented (Previous Rating – Partially Implemented)

B. The County's standards of care and practice shall ensure that documentation or evidence of prior gender-affirming care is not a prerequisite to receiving gender-affirming care while in Jail custody.

In relation to Gender Self-Identification Screening and in relation to Gender Affirming Medical and Surgical Management, HCA CHS Policy 6206 addresses this item. Specifically, it indicates that documentation of a medical diagnosis or legal documentation of a patient's identity, including their gender marker or legal sex, is not required for staff to respect or confirm a patient's gender identity, except in cases where there is specific evidence that a patient has falsely asserted gender identity. It also specifically states that documentation or evidence of prior gender-affirming care is not a prerequisite for receiving gender-affirming care.

Healthcare staff interviewed indicated they perform gender-performing care without required or needed evidence to show prior poor gender-affirming care.

At the time of the onsite review, the Expert reported that despite the (then) January 12, 2023, effective date for CHS Policy 6206, it was unclear whether the policy was undergoing additional revisions. Policy 6206 was reportedly on hold while the County was reportedly working on training material. It was previously reported that policy will be rolled out once staff training is done by February. It is now reported there is a revised policy with an effective date of February 17, 2023. Both the revised policy and training material (upon receipt) will be reviewed and addressed for the next monitoring review.

Partially Implemented (Previous Rating – Partially Implemented)

C. The County shall ensure that medical and mental health staff have specific knowledge of and training on gender dysphoria and the treatment thereof, including as to the WPATH Standards of Care.

HCA CHS Policy 6206 indicates all CHS clinical staff receive refresher training on gender dysphoria and its treatment.

Healthcare staff interviewed indicated they received training regarding gender dysphoria and related treatment. The Expert interviewed two (2) medical professionals that provided the following related information:

- LVN:
 - Training:
 - We recently received a 2-hour training course (although mostly general LGBTQI-related information).
 - We have also had separate training on hormone therapy, which included:
 - Ensuring we administer proper doses.
 - Inform the patient as to potential side effects.
 - Educate the patient as to the intervals for taking the medications.
 - Information regarding HIV versus hormone injections:
 - No difference in the process, except that the type of medications is different (hormone versus antibiotic).
- Medical Doctor:
 - Training:
 - I have received training for Policy 6206.
 - I have also received related training through general medicine and continuing medical education.

The Expert interviewed four (4) transgender incarcerated persons that provided the following related information:

- Question #2 (WPATH Standard 4.1 – 4.3): What should staff know about working with transgender and gender-diverse people?
 - Transgender Incarcerated Person #1:
 - We are people and deserve respect.
 - Transgender Incarcerated Person #2:
 - Treat us with dignity and respect and acknowledge our identity.
 - Classification and management should be more stringent regarding “sleepers” (individuals who are not LGBTQI and have other motives for living with us).
 - Transgender Incarcerated Person #3:
 - Staff should use our preferred pronouns.
 - The staff has not been trained yet, but I have seen some improvement.
 - Transgender Incarcerated Person #4:
 - Staff should be trained on search preferences (Note: this applies to custody staff [not medical staff]).

The Parties have indicated that CHS was utilizing Transgender Care training developed by the UCI Gender Clinic. On October 10, 2022, DRC counsel provided feedback as to that training. CHS has stated it intends to utilize LGBTQI training developed by APAIT moving forward. This training should be shared with the Expert and DRC for review and comment.

The Expert notes the County's action plan in that the CHS will address it, and attendance logs will be provided.

The Expert provides the following recommendations:

- For the next Expert tour (or upon completion), provide documentation proof of training/refreshers training for HCA CHS personnel (as applicable). The training material must be consistent with WPATH Standards of Care and UCSF LGBT Health Guidelines.

Partially Implemented (Previous Rating – Partially Implemented)

D. The County shall ensure that a qualified medical professional and a qualified mental health professional coordinate to evaluate, diagnose, and treat patients for gender dysphoria.

HCA CHS Policy 6206 contains language relative to gender-affirming care; transition-related care (including medical gender affirmation); documentation or evidence of prior gender-affirming health will not be a prerequisite for receiving gender-affirming health care; CHS will provide gender health care management, including:

- Patients who are receiving hormone medications, with or without a prescription, relate to feminization/masculinizing hormonal therapy.
- CHS will schedule patient preventative testing.
- CHS medical director or assigned designee will review patient requests for gender-affirming surgery on a case-by-case basis.
- CHS may refer, upon patient's request, patients diagnosed with gender dysphoria to mental health to aid in-custody counseling services and referrals to programs that assist in social gender role transition.
- CHS prescribers will provide transgender patients with patient education materials on gender dysphoria, hormonal and supportive mental health treatments, transitioning, and gender affirmation options; CHS administrative managers may recommend to OCSD leadership that commissary and undergarments consistent with an individual's gender identity be provided, regardless of a gender dysphoria diagnosis, as well as hygiene items needed due to anatomy.
- CHS will refer patients to contracted specialty health care providers whenever care exceeds professional expertise within CHS.

- CHS does not provide psychotherapy such as “reparative” or “conversion” therapy or attempts to alter gender identity.

The Expert interviewed two (2) medical professionals that provided the following related information:

- Nurse Practitioner:
 - Hair Removal:
 - I will not prescribe “Vaniqa”:
 - Both Vaniqa and electrolysis (in the community) are considered cosmetic.
 - I will refer the patient to an Endocrinologist.
- Medical Doctor:
 - I have diagnosed for gender dysphoria.
 - Includes:
 - Diagnosis, setting goals, lab work, and treatment monitoring (which, over time, may become less frequent).
 - Communications:
 - I refer to my transgender patients by their last name or preferred name/pronoun(s).

The Expert interviewed four (4) transgender incarcerated persons that provided the following related information:

- Question #3 (WPATH Standard 5.3 – 5.5): Have you ever been diagnosed with gender dysphoria (community/jail)?
 - Transgender Incarcerated Person #1:
 - Yes, at Saint John's (LA) and the jail.
 - Don't remember what the assessment entailed.
 - The impact from diagnosis was good – received hormone medication.
 - There was discussion regarding hormone reproduction, but it was vague.
 - It was not really provided information regarding the impact of gender-affirming therapy on future reproduction.
 - Transgender Incarcerated Person #2:
 - No, diagnosed on the streets.
 - A male nurse injected with too high of a dosage and jammed the needle in my thigh because he didn't like the way I answered a question:
 - I asked for (and submitted) a grievance to have a female nurse administer in the future, but I was denied, so I opted

- for pills instead, but then I quit the pills due to the possibility of incurring a blood clot and/or cancer.
 - The medical staff never discussed hormone reproduction with me.
 - Never received any information pertaining to the impact of gender-affirming therapy on future reproduction.
 - Transgender Incarcerated Person #3:
 - Yes, in the community in 2015 (not in jail).
 - No mental health or other factors that impacted my ability to get gender-affirming care.
 - Medical staff discussed the impact of hormones when they discussed my testosterone levels.
 - I was never provided any information about the impact of gender-affirming therapy on future reproduction.
 - Transgender Incarcerated Person #4:
 - No, but I am going to talk with a specialist in the community.
 - No mental health or other factors that impacted my ability to get gender-affirming care.
 - The medical staff never discussed the impact of hormone therapy regarding reproduction with me.
 - Never received any information pertaining to the impact of gender-affirming therapy on future reproduction.
- Question #5 (WPATH Standard 11.3): What did you know about the process to get hormones?
 - Incarcerated Person #1:
 - Through word-of-mouth from other incarcerated persons:
 - The medical staff never brought it up.
 - From message request to receipt of hormones took about one (1) week.
 - I requested to take progestogen, but they prescribed estradiol and spironolactone.
 - My request is still being examined.
 - Transgender Incarcerated Person #2:
 - Learned about hormones in the community.
 - It took about one (1) month from the request I submitted to receive hormones.
 - Transgender Incarcerated Person #3:
 - Learned about hormones in the community.
 - From message request to receipt of hormones, it was immediate.
 - Transgender Incarcerated Person #4:
 - Learned about hormones in the community.
 - After arrival at the jail, I filled out a pink slip. The information was already in my records from a previous jail stay, but I had to request the hormones again. I had to request hormones one (1)

week after intake. I got my pills the same evening. I still take the pills.

- Question #6 (WPATH Standard 11.4): What did you know about the process to get gender-affirming surgery?
 - Incarcerated Person #1:
 - I want feminization surgery (not gender affirming surgery).
 - I have not asked, nor have I received any resource information.
 - What information I do know, I learned in the outside community.
 - Transgender Incarcerated Person #2:
 - They don't tell us anything.
 - I am interested and will inquire.
 - Transgender Incarcerated Person #3:
 - I asked the doctor and was provided with the information.
 - Transgender Incarcerated Person #4:
 - I did not have any knowledge and have not received any information.
 - I will inquire once I get released from jail.
 - I heard from other inmates we had to be on hormones for a while first.
- Question #7 (WPATH Standard 11.5): Do you have gender-affirming clothes? Hygiene items?
 - Incarcerated Person #1
 - Yes, bras and panties.
 - However, the sizing is off (we usually get larger than our actual size).
 - We have a single-blade, but a double-blade would be better.
 - Hair clippers pull.
 - Message requests for gender-affirming issues are sent to a CSA.
 - Transgender Incarcerated Person #2:
 - Yes, bras, panties, and female blue jail pants.
 - Don't have access to tweezers.
 - Transgender Incarcerated Person #3:
 - Yes, bras, panties, female blue jail pants, and a sweater.
 - Have access to hair clippers (dayroom).
 - Have access to nail clippers (yard).
 - Don't have access to tweezers (could use plastic tweezers).
 - No make-up, I use colored pencils.
 - Need better razors (only have dull single blade).
 - Transgender Incarcerated Person #4:
 - Yes, a bra.
 - Have access to nail clippers (yard).

- Would like plastic tweezers.
 - Commissary has products.
 - No make-up, no foundation (we use colored pencils).
- Question #8 (WPATH Standard 11.6): Do medical staff use your chosen name and pronoun(s)?
 - Incarcerated Person #1:
 - Yes (both medical and custody staff).
 - Transgender Incarcerated Person #2:
 - No (at times, they do, but they usually call us by our last names).
 - Transgender Incarcerated Person #3:
 - Yes (medical staff).
 - No (custody staff). Sometimes I believe they do it on purpose.
 - Transgender Incarcerated Person #4:
 - They refer to us by our last names.
- Question #22 (WPATH Standard 15.14): What options do you have for hair removal? How do you know that? What options have you asked for? What were you told?
 - Incarcerated Person #1:
 - Hair removal prospects are very expensive, and single-blade razors don't suffice.
 - I would like to see more options, such as a jar of hair removal cream or laser hair removal.
 - I have not asked. They would tell me to go to the commissary.
 - Transgender Incarcerated Person #2:
 - I asked for a prescription hair removal cream (message request) and was denied.
 - Staff "rub it in our faces that we were not born female."
 - Transgender Incarcerated Person #3:
 - We can order hair removal products from the commissary, but we should have something more for facial hair.
 - We have access to razors and hair clippers.
 - Transgender Incarcerated Person #4:
 - Answered above.

A review of four (4) Tech Care electronic health records provided the following information (Note: all Expert notes as related to the Medical and Mental Health Section (of this report) from the four [4] Tech Care electronic health care reviews are captured below:

- Transgender Incarcerated Person A:

- Current medications include estradiol (intramuscular) and spironolactone (oral).
 - SOAP notes acknowledge the preferred name and pronoun.
 - The plan includes education and reassurance.
 - On 12/9/22: Notes patient is considering gender-affirming surgery.
 - The patient states she is now ready for surgery and is requesting related education materials.
 - On 12/12/22: Notes patient is sleepy and refused education information (but was not related to hormone therapy or gender-affirming surgery).
 - 1/15/22: Patient started on hormone therapy again.
 - 1/19/22: Patient referred to sick call to assess and discuss patient's hormone therapy request.
 - Entries from 1/19/22 and 1/31/22 regarding the patient's medications and information indicates (1/31/22) the patient was informed of risks and benefits were explained (but not regarding medications).
 - 3/8/22: Increased dosage of estradiol and Aldactone:
 - Indicates patient is considering gender-affirming surgery.
 - 4/13/22: Patient requested HRT medications be increased.
 - 4/4/22: Patient was educated on HRT length of time transformation.
 - Over a period of time, there were several more requests for increases in hormone medications.
 - 7/27/22: The patient requested to speak with the medical provider regarding hormone therapy (lab results were also discussed).
 - 8/10/22: The patient legally changed her name to XXXXX XXXXXX.
 - 9/6/22: Nurse practitioner advised patient regarding change of estradiol dosage.
 - 11/9/22: Patient states she has missed her spironolactone for six (6) days:
 - Nurse practitioner addressed with pharmacy.
 - 12/8/22: Patient requested a decrease of estradiol:
 - The medical provider explained the risks of high estradiol levels, which the patient understood.
 - The medical provider answered the patient's questions pertaining to gender-affirming surgery, educational material was requested and provided, and counseling was provided.
 - 1/8/23: Patient engaged in therapeutic discussions regarding anxiety and hormones.
- Transgender Incarcerated Person B:
 - Current medications include estradiol valerate (intramuscular), spironolactone (oral), and others.
 - 5/13/19:
 - Transgender progression plan: Will have the patient sign medical release forms to determine hormone dosages.
 - Date(s) unclear:

- Diagnosed with a gender identity disorder.
 - Lab tests done – Patient education Information about testosterone and estradiol levels and other information, including hormones.
 - Assessment – Gender-Identity Disorder.
- 1/19/23:
 - Indicates patient's preferred name and pronoun.
 - The patient started HRT at 19 years old.
 - The patient claims estradiol and progesterone injections for the last two (2) years.
 - No plans for gender-affirming surgery.
 - Education was provided regarding HRT.
 - Start estradiol valerate and spironolactone.
 - Educated patient on risks and benefits and monitoring levels (Note: unclear if this is referring to hormone levels).
- Date Unclear:
 - The patient has anxiety due to gender dysphoria.
- 2/16/23:
 - The patient requested medications (spironolactone) and was provided.
- 2/22/23:
 - The patient was added to the PRIDE program.
- Transgender Incarcerated Person C:
 - Has a discharge plan (dated 2/16/23).
 - Discharged on 3/23/23.
 - Shows mental health requests and mental health appointments.
 - Lists patient's preferred name and pronoun.
 - The patient expressed interest in enrolling in APAIT's in-custody psychological group.
 - 3/14/22:
 - The patient requested hormone therapy.
 - The patient reported to last receiving hormone therapy toward the end of 2019 – does not remember which hormones.
 - 3/15/22:
 - The patient was previously on estradiol/Aldactone in the community.
 - The patient is thinking about gender-affirming surgery but wants to do research first.
 - 3/29/22:
 - Began injections of estradiol valerate and spironolactone.
 - The patient was educated on the risks and benefits and adherence.
 - 3/30/22:

- Medical staff met with the patient and assessed their level of interest in participating in APAIT'S in-custody psychoeducational support group, and the patient signed and completed an application.
 - 4/11/22: The patient was seen by a nurse practitioner regarding hormone treatment on 3/29/22.
 - 4/17/22:
 - The patient was given a copy of a sweater Chrono.
 - Dates unclear:
 - Multiple requests for the APAIT program.
 - 5/12/22:
 - The patient requested to go back to hormone injections but wants them administered by a female nurse only.
 - Will follow up with patient education.
 - 5/24/22:
 - The patient requested "Vaniqa" cream to reduce facial hair growth.
 - The patient was referred to MDCR for a medication request.
 - 5/27/22:
 - Indicates patient's preferred name.
 - 6/17/22:
 - The patient requested "Vaniqa" and hormone injections again.
 - The patient changed her mind about estradiol injections and is agreeable to continue orally.
 - 7/12/22:
 - Discussed "Vaniqa" with the patient. Advised it will be ordered.
 - Education was given regarding cosmetics.
 - The patient was advised to shave and continue spironolactone/estradiol as prescribed.
 - The patient verbalized understanding.
 - Dates unclear:
 - Numerous mental health requests and appointments.
 - 7/15/22:
 - The patient was released from custody and given a discharge summary and community resource packet.
 - Note: the patient has since come back (for a short stint) and was released with similar entries regarding the discharge summary.
- Transgender Incarcerated Person D:
 - Identified patient's preferred name.
 - 11/21/22:
 - The patient requested an increase of estradiol and spironolactone.
 - Medical staff will follow up for assessment.
 - 11/29/22:

- On HRT for gender-affirming care.
- Requested estradiol valerate injections to be increased and spironolactone dosage to be increased.
- Doses were ordered increased.
- Discussed lab results and goals, and the patient agrees with the plan of care.
- 12/29/22:
 - The patient requested therapy with hormones.
- 12/30/22:
 - The patient wants to talk about gender-affirming surgery.
- 1/4/23:
 - The patient requested gender-affirming surgery.
 - Information on gender-affirming surgery will be brought to her.
- 1/21/23:
 - The patient requested to increase estradiol and spironolactone.
- Dates unclear:
 - The requested dosages increased.
 - Application completed for APAIT.
 - The patient is aware of an upcoming appointment to talk about gender-affirming surgery.
 - Educational information on gender-affirming surgery was provided.

The Expert notes in the County's action plan that the CHS will address, CHS is actively seeking experts in the field to consult/refer patients to, and a copy of resource materials will be provided.

The Expert provides the following recommendations:

- Ensure LGBTQI-related resource information (including as related to transgender/intersex individuals) is provided to all LGBTQI-incarcerated persons.
- Monitor all LGBTQI requests and HCA CHS staff responses for LGBTQI-related issues (including requests for hormone therapy or requests for related information).
- CHS must ensure LGBTQI incarcerated persons receive access to care in a timely manner as related to Hormone Replacement Therapy and other healthcare related to gender dysphoria in a timely manner.

Partially Implemented (Previous Rating – Partially Implemented)

E. The County shall give transgender and intersex patients uninterrupted access to clinically indicated hormone therapy based upon an individualized assessment of the patient's medical needs in accordance with community-based standards of care.

HCA CHS Policy 6206 provides related language (see Section IV.G.D.).

The Expert interviewed five (5) medical professionals that provided the following related information:

- Supervising Nurse (who administers hormone therapy):
 - Triaged (e.g., at intake or at sick call).
 - They disclose hormone information and specifics.
 - CHS wants to continue care, so identification is important.
 - We refer to medical provider via screening (e.g., at intake or from pill-call or appointment):
 - Identification of specific medications previously prescribed and where they received the medication from.
 - We document information in electronic health records (e.g., in the intake screening field or in progress notes).
 - Through the pink slip medical request process - the patient is placed in the medical sick call queue (generally seen within a couple of days).
- The patient is then seen by a medical provider. Hormone treatment-related education is provided and entered-into progress notes or SOAP notes (entered into the Tech Care system by the medical provider).
- Behavioral Health Clinician (patients are provided hormone treatment-related education by medical professionals).
- Nurse Practitioner:
 - Specializes in HIV medicine and is a certified HIV specialist.
 - I have a community health background and am familiar with community clinics where I will refer and send my patients.
 - Patients initially go through the sick call process for hormone replacement therapy (HRT).
 - I refer to transgender patients by their preferred name/pronoun(s) (I update in my notes).
 - I provide related education, including the risks and benefits:
 - This includes written format as well.
 - I do not use a template or script to cover the required related topics.
 - CHS administers medications through injections or pill form:
 - CHS is working to obtain trans-dermal patches to administer via that process, but that process is more costly.
 - They are simple to use and safe.
 - Although, they have not yet been used in the OCSD jails (due to associated costs).
 - I do not have any concerns regarding the long-term usage of the patches or having patients transition to continue using the patches once released back to the community.

- I enter all related healthcare information into the Tech Care SOAP notes via free text (no template or drop-down menu to enter the information).
 - There is no Tech Care alert for entering education-related information – unfortunately, the system will allow the user to proceed without entering education-related information.
- Interrupted/uninterrupted therapy:
 - Treatments are uninterrupted, but occasionally if I need to refill the medication(s), there may be a slight interruption, but the refills are usually filled quickly.
- HRT Upon Release:
 - Although the patients receive injections onsite (some receive via pill form), patients receive a supply of hormones in pill form (if they want the medication) at the time of jail release:
 - We generally provide medication to cover a 7-14-day period (sometimes for 30 days) until the patient can get their next injection in the community (usually within about two [2] weeks):
 - I refer them to Radiant Health Care.
 - We work to link them with the proper community resources for continued usage.
- General/Miscellaneous:
 - Message requests:
 - I respond to message requests within 1-2 days (sometimes on the same day).
- LVN:
 - Communications:
 - I address all patients by their last name.
 - I don't believe we have transgender patient pronoun information in Tech Care unless nurses maintain their own notes.
 - HRT:
 - Mental health personnel is also involved in the process.
 - Injections:
 - We verbally provide general education-related information (and we provide it in written form when asked), including side effects, etc.
 - Seeing Medical Provider:
 - The timeline from request to appointment is usually 2-3 days.
 - Sometimes we receive complaints about the timeline.
- Medical Doctor:
 - HRT Education:
 - I educate patients regarding risks, side effects, and benefits.

- I use patient medication transgender education information I put together from information I obtained through medical conferences, research from the San Francisco Department of Public Health, the American Academy of Family Medicine database, and through other resources.
- I have reviewed the WPATH Standards of Care (though not lately):
 - I research their website.
- I have the WPATH Standards of Care Manual (2012):
 - I attended the conference in 2017.
- I provide treatment, monitoring, and testing.
- Tech Care:
 - I document my appointments, diagnosis, education information provided, etc., in the Tech Care Progress Notes:
 - I admit my documentation (e.g., documenting the related education I provide may not be consistent).
- Interruptions in Hormone Treatment:
 - Only if the patient refuses medications/treatment.

The Expert interviewed four (4) transgender incarcerated persons that provided the following related information:

- Question #1: What language do healthcare staff use to talk about your gender? Do feel respected? Do you feel “outed”?
 - Incarcerated Person #1:
 - She has no concerns
 - Transgender Incarcerated Person #2:
 - They disrespect us (refer to us as “he.”)
 - The nurse practitioner who administers hormones is disrespectful, as well as the nurses that work for her.
 - Transgender Incarcerated Person #3:
 - The medical staff is good.
 - Some deputies are good, and others are disrespectful and don’t use our preferred names/pronouns.
 - Transgender Incarcerated Person #4:
 - By our last names. The staff is respectful, and they communicate very well.
 - Staff does not “out” us.
- Question #9 (WPATH Standard 12.11): What information were you given about the potential adverse outcomes of hormone replacement therapy?

- Incarcerated Person #1:
 - I was not provided with any related risk factors.
- Transgender Incarcerated Person #2:
 - None.
- Transgender Incarcerated Person #3:
 - They mentioned erectile dysfunction, no reproduction (or difficulty), and possible blood clots.
- Transgender Incarcerated Person #4:
 - No.
- Question #10 (WPATH Standard 12.12): What information were you given about the time course of physical changes?
 - Incarcerated Person #1:
 - Nothing – Just that I would notice changes.
 - I would have liked to know more, and a pamphlet would have been helpful.
 - I can put in a request to the GBTQI program staff for information.
 - Transgender Incarcerated Person #2:
 - None.
 - Transgender Incarcerated Person #3:
 - Nothing.
 - I would like to write a pink slip to medical to get some information.
 - Transgender Incarcerated Person #4:
 - I was provided information (Note: the individual did not elaborate).
- Question #11 (WPATH Standard 12.16): Has staff discussed this with you? *(We recommend healthcare professionals prescribe testosterone-lowering medications (either cyproterone acetate, spironolactone, or GnRH agonists) for eligible transgender and gender diverse people with testes who are taking estrogen as part of a hormonal treatment plan if the individual's goal is to approximate circulating sex hormone concentrations in cisgender women).*
 - Incarcerated Person #1:
 - They prescribed Spironolactone.
 - Very minimal education provided:
 - A pamphlet would have been helpful.

- I receive bi-weekly injections of Estrogen.
- Transgender Incarcerated Person #2:
 - No, not discussed with us.
 - I don't take estrogen because I take shots (not pills), and I am waiting to hear back from the doctor.
- Transgender Incarcerated Person #3:
 - Yes
 - I am also on Spironolactone and estradiol.
- Transgender Incarcerated Person #4:
 - No.
 - I am on estrogen and spironolactone.
- Question #12 (WPATH Standard 12.17): Has staff discussed this with you? *(We recommend health care professionals monitor hematocrit [or hemoglobin] in transgender and gender-diverse people treated with testosterone).*
 - Incarcerated Person #1:
 - Yes, they said I need to monitor my hormone levels (e.g., blood, liver).
 - Transgender Incarcerated Person #2:
 - No, and not sure if medical tracks my hematocrit levels.
 - Transgender Incarcerated Person #3:
 - Yes.
 - Every three (3) months, they draw blood and give us our estrogen levels.
 - Yes, they track hematocrit levels.
 - Transgender Incarcerated Person #4:
 - No, and not sure if medical tracks my hematocrit levels.
- Question #14 (WPATH Standard 12.20): Has staff ever interrupted your access to hormones?
 - Incarcerated Person #1:
 - No.
 - Transgender Incarcerated Person #2:
 - Yes (explained above).
 - Transgender Incarcerated Person #3:

- No interruptions.
- Transgender Incarcerated Person #4:
 - No.
- Question #15 (WPATH Standard 15.1): Has staff discussed this with you? (*We recommend healthcare professionals obtain a detailed medical history from transgender and gender-diverse people that includes past and present use of hormones, gonadal surgeries, as well as the presence of traditional cardiovascular and cerebrovascular risk factors with the aim of providing regular cardiovascular risk assessment according to established, locally used guidelines*).
 - Incarcerated Person #1:
 - I informed them about my information from St. John's Hospital and my doctor's name, but I was never asked to sign a waiver.
 - So, they must not have followed up on the process.
 - I think this would just slow the process of what I want to do.
 - Regarding assessment for cardiovascular issues, I have had blood work done.
 - Transgender Incarcerated Person #2:
 - No, and I have never been assessed for cardiovascular issues.
 - Transgender Incarcerated Person #3:
 - Not really. No Q&A or dialogue.
 - Just some written information.
 - I would have liked to have my questions answered and to learn more.
 - I think I have been assessed for cardiovascular issues. They did a complete diagnostic within three (3) days of arrival.
 - Transgender Incarcerated Person #4:
 - No, and I have never been assessed for cardiovascular issues.
- Question #16 (WPATH Standard 15.5): Has staff discussed this with you? (*We recommend healthcare professionals discuss and address aging-related psychological, medical, and social concerns with transgender diverse people*).
 - Incarcerated Person #1:
 - No.
 - Transgender Incarcerated Person #2:
 - No.

- Transgender Incarcerated Person #3:
 - No.
- Transgender Incarcerated Person #4:
 - No.
- Question #17 (WPATH Standard 15.6): Has staff discussed this with you? (*We recommend healthcare professionals follow local breast cancer screening guidelines developed for cisgender women in their care of transgender and gender-diverse people who have received estrogens, taking into consideration the length of time of hormone use, dosing, current age, and the age at which hormones were initiated*).
 - Incarcerated Person #1:
 - Vaguely.
 - I have never been screened for breast cancer.
 - Transgender Incarcerated Person #2:
 - No, and have never been screened for breast cancer.
 - Transgender Incarcerated Person #3:
 - No, and I have not been screened for breast cancer.
 - Transgender Incarcerated Person #4:
 - No, and I have not been screened for breast cancer.
- Question #18 (WPATH Standard 15.8): Has staff discussed this with you? (*We recommend healthcare professionals apply the same respective local screening guidelines (including the recommendation not to screen) developed for cisgender women at average and elevated risk for developing ovarian or endometrial cancer in their care of transgender and gender diverse people who have the same risks*).
 - Incarcerated Person #1:
 - No, and I have not been screened for cancer.
 - Transgender Incarcerated Person #2:
 - No, but would like more education.
 - Transgender Incarcerated Person #3:
 - No, and I have not been screened for cancer.
 - Transgender Incarcerated Person #4:
 - No, and I have not been screened for cancer.

- Question #19 (WPATH Standard 15.11): Has staff discussed this with you?
(*We recommend healthcare professionals counsel transgender and gender-diverse people that the use of antiretroviral medications is not a contraindication to gender-affirming hormone therapy*).
 - Incarcerated Person #1
 - No.
 - Transgender Incarcerated Person #2:
 - No.
 - Transgender Incarcerated Person #3:
 - No.
 - Transgender Incarcerated Person #4:
 - No.
- Question #20 (WPATH Standard 15.12): Has staff discussed this with you?
(*We recommend healthcare professionals obtain a detailed medical history from transgender and gender-diverse people that includes past and present use of hormones, gonadal surgeries as well as the presence of traditional osteoporosis risk factors to assess the optimal age and necessity for osteoporosis screening*).
 - Incarcerated Person #1:
 - No, and I have not been screened for osteoporosis.
 - Transgender Incarcerated Person #2:
 - No.
 - Transgender Incarcerated Person #3:
 - No.
 - Transgender Incarcerated Person #4:
 - No.
- Question #21 (WPATH Standard 15.13): Has staff discussed this with you?
(*We recommend healthcare professionals discuss bone health with transgender and gender-diverse people including the need for active weight bearing exercise, healthy diet, calcium, and vitamin D supplementation*).
 - Incarcerated Person #1:
 - No, but they did prescribe me vitamin D.

- Transgender Incarcerated Person #2:
 - No.
- Transgender Incarcerated Person #3:
 - No.
- Transgender Incarcerated Person #4:
 - No.

The Expert notes the County's action plan in that the CHS will address, updated policy 6206 is on hold while the County is working on training, and the policy will be rolled-out once staff training is done.

Partially Implemented (Previous Rating – Partially Implemented)

- F. Sex reassignment surgery should be considered on a case-by-case basis and provided when determined to be medically necessary for a patient.*

HCA CHS Policy 6206 indicates requests for gender-affirming surgery shall be reviewed on a case-by-case basis by the medical director or assigned designee.

The Expert interviewed two (2) medical professionals that provided the following related information:

- Nurse Practitioner:
 - Gender-affirming Surgery:
 - One (1) of my patients inquired.
 - I provided related verbal education, I asked and answered related questions, and I provided printed materials.
 - I am still in discussions with the patient.
- Medical Doctor:
 - I have not had any related requests.

The Expert interviewed four (4) transgender incarcerated persons that provided the following related information:

- Question #13 (WPATH Standard 12.19): Has staff discussed this with you? (*We suggest healthcare professionals counsel transgender and gender-diverse people about the various options available for gender-affirming surgery unless surgery is not indicated or is medically contraindicated*).
 - Incarcerated Person #1:
 - No.

- Transgender Incarcerated Person #2:
 - No.
- Transgender Incarcerated Person #3:
 - Only when I brought it up to the Nurse Practitioner when I explained I wanted bottom surgery. She gave me the information.
- Transgender Incarcerated Person #4:
 - No.

The Expert notes the County's action plan in that the CHS will address; CHS is actively seeking experts in the field to consult/refer patients to. At the time of the onsite tour document review the updated policy (6206) was previously revised in January 2023 and further and updated policy was reportedly on hold while the County was working on training. It has since been reported that policy was revised in February 2023. The Expert will examine the revised policy and related training as part of the next monitoring review.

Not Assessed (Previous Rating – Partially Implemented)

- G. *The County shall prohibit psychotherapy such as “reparative” or “conversion” therapy or attempts to alter gender identity.*

HCA CHS Policy 6206 provides related language (see Section IV.G.D.).

When asked about psychotherapy such as "reparative" or "conversion" therapy or attempts to alter gender identity, a medical professional interviewed stated, "We do not do that."

Adequately Implemented (Previous Rating – Adequately Implemented)

H. LGBTQI Training For Staff

- A. *The County shall provide at least biennial live/real-time training to staff and contractors, including anyone who has contact with LGBTQI individuals in custody, on LGBTQI policy, procedures, and legal requirements, including the following topics and as appropriate to their position:*
1. *The County's non-discrimination policy.*
 2. *The County's complaint and grievance process for reporting alleged incidents of abuse and harassment.*
 3. *The Prison Rape Elimination Act.*
 4. *How to communicate with LGBTQI individuals professionally, effectively, and consistent with this Agreement.*

5. *The impact of discrimination against LGBTQI incarcerated people.*
6. *Classification, housing, programming, education, work opportunities, and integration of LGBTQI individuals in the jails.*
7. *Basic information about gender identity, sexual orientation, gender expression, and privacy rights.*

For the Expert's initial monitoring tour, as part of pre-tour documentation, the County provided an OCSD external memo (dated 7/12/22) which indicated that next fiscal year (July 2023), the training would be included in the annual STC training block. Jail administration at that time reportedly planned to have the training conducted at the jails before and after the briefing, and LGBTQI materials are pending completion. After completion and approval approved (along with the ADA training materials), the County reportedly was to begin planning with the jails to conduct the training onsite.

The County also provided the following information regarding LGBTQI staff training:

- Course Completion HCA Skills Fair CHS Staff:
 - Training completed between 6/28/22 – 12/28/22.
 - 16 pages.
 - Lists approximately 170 staff member names (also includes job titles and final exam scores).
 - Job titles:
 - RN/CHS RN.
 - CHS LVN/JHS LVN.
 - CHS MA.
- Course Completion Overview of LGBTQIA+ Cultural Competence Completions:
 - Training completed between 7/4/22 – 1/4/23.
 - 23 pages.
 - Lists approximately 242 staff member names (Some staff listed twice) (also includes job titles and final exam scores).
 - Job titles:
 - CHS LVN/JHS LVN.
 - CHS BHC.
 - CHS MA.
 - Dental Assistant.
 - Dentist.
 - CHS Admin.
 - RN/CHS RN.
 - NP.
 - CHS MD.
 - CHS MFT.
 - CHS CSW.

- CHS MHS.
- PREA Course Completion:
 - Training completed between 1/1/22 – 12/31/22.
 - 32 pages.
 - Lists approximately 426 staff member names (also includes job titles and final exam scores) (Some staff listed twice).
 - Job titles:
 - CHS LVN/JHS LVN.
 - CHS Office Specialist.
 - CHS Office Supervisor.
 - CHS BHC.
 - CHS MA.
 - Dental Assistant.
 - Dentist.
 - CHS Admin.
 - RN/CHS RN.
 - NP.
 - CHS Pharmacist.
 - CHS Pharmacy Tech.
 - CHS CSW.
 - CHS Psychiatrist.
 - CHS MD.
 - Office Tech.
 - CHS MHS.
- APAIT:
 - PowerPoint Slide “LGBTQ+ 101 (LGBTQ identities, mental healthcare, and integration (by an LCSW):
 - 46 slides.
 - Objectives:
 - 1) Learn and improve knowledge of sexual and gender identities, LGBTQ+ experiences, and the significance of pronouns.
 - 2) Discuss trauma and minority stress in relation to LGBTQ+ individuals and barriers to specific healthcare needs.
 - 3) Explain the importance of trauma-informed care and how to integrate affirming and inclusive protocol and documentation.
 - Includes:
 - Terminology, language, and acronyms.
 - Sex, gender, and sexuality.
 - Gender dysphoria.
 - Pronouns.
 - Mental healthcare and well-being.
 - Minority stress.
 - Barriers to health care for transgender individuals.

- Facts about traumatic experiences of the LGBTQ+ community.
 - Post-traumatic stress responses.
 - Trauma-informed care.
 - Key assumptions.
 - Transgender Standards of Care Overview (WPATH).
 - Hormonal Replacement Therapy Overview.
 - Guidelines and considerations.
 - Guidelines for respectful conversations.
 - APAIT OC Initial Intake Form.
 - Personal Conversations.
 - Key Takeaways.
 - The Gender/Sex Binary.
 - References.
- Email (January 2023) regarding mandatory CHS LGBTQIA+ Live Online Training provided by APAIT:
 - Offered on January 10, 11, 17, and 18, 2023.

For the Expert's initial tour, the Expert also interviewed a sworn staff member from the Training Division. He indicated the County recently began using the "CORR I "System for STC Classes." It reportedly tracks completion, statistics, tests, which staff members are delinquent in taking training classes, etc. The County also uses the "Eureka" system to track training classes. The training staff member also provided the following information (at that time):

- For sworn staff:
 - Still developing / PPT in process:
 - It will be reviewed by DRC and County Counsel.
 - Instructors will be trained.
 - There will be an associated knowledge-based assessment (quiz).
 - Upon completion, the material will be taught to custody the first year, and it will become part of STC training the following year.
 - Will be formalized in-class training.
 - No current training (other than some academy cultural diversity training).
 - There will also be a refresher course:
 - Two (2) hours ADA and two (2) hours LGBTQIA annually.
 - The Refresher course will be for sworn and non-sworn personnel.

For the Expert's initial tour, the Expert also interviewed a mental health professional regarding training. The mental health staff member stated (at that time) that training "is in the works" (in the final stages of contract development) for mental health and medical staff in conjunction with APAIT (for formal onsite

biennial training). She stated that some training has already been provided by a doctor (Public Health Director at UC Irvine). She cited the class as being titled “Affirmative Responses and working with LGBTQIA the Community,” which is “several hours” in length and is designed as in-person training. She indicated the training was provided last month.

However, despite the listed (above) training documents provided, the Expert is unclear as to specific training components currently being drafted for the custody and healthcare staff. The Expert notes the County’s action plan in that the County is revising policy and developing training and will share those materials with the Expert and the DRC team.

The Expert provides the following recommendations:

- The County should provide an update as to the training materials (and anticipated timelines) being developed (including refresher courses) for both CHS and OCSD, future fiscal or calendar year training schedules, and confirmation of training certifications through STC.
- Training materials should be shared with the Expert and DRC for review and comment.

Un-ratable (Previous Rating – Un-ratable)

- B. Training, including refresher training as appropriate to their position, will be provided to all staff at least biennially. The County shall maintain records of training history.*

As outlined in Section VIII. A. (above) from interviewing a staff member from Training Division (during the Expert’s initial tour), there is a refresher course under development. Reportedly, the course will be designed for two (2) hours ADA and two (2) hours LGBTQIA, to be required biennially for both sworn and non-sworn personnel.

The Expert notes the County’s action plan in that the County is revising policy and developing training and will share those materials with the Expert and the DRC team.

Un-ratable (Previous Rating – Un-ratable)

- C. The County shall provide DRC draft LGBTQI training materials (including any updates or revisions) and shall meaningfully consider any DRC input on the content and method of delivery of the training. DRC agrees to complete a prompt review (e.g., within 30 days) of draft training materials to accommodate the County’s training and operational needs.*

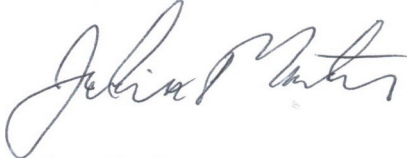
Training staff and other key County personnel stated that all LGBTQI training materials (including any future revisions) would be reviewed by DRC to allow for their review and input.

The Expert notes the County's action plan in that the County is revising policy and developing training and will share those materials with the Expert and the DRC team.

Un-ratable (Previous Rating – Un-ratable)

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 1, 2023

Date