

COUNTY OF SACRAMENTO  
CALIFORNIA

For the Agenda of:  
September 14, 2004  
Timed: 10:45 a.m.

To: Board of Supervisors  
From: Countywide Services Agency  
Subject: Response to 2003-2004 Grand Jury Final Report  
Contact: AnnMarie Boylan (874-4627)

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**Overview**

The 2003-2004 Grand Jury Final Report identified issues involving one County department: Correctional Health Services which is now part of the Sheriffs Department. The attached report responds to the findings and recommendations of the Grand Jury.

**Recommendation**

1. Adopt this report as Sacramento County's response to recommendations contained in the 2003-2004 Grand Jury Final Report.
2. Instruct the Clerk of the Board to forward a copy of this response to 2003-2004 Grand Jury Final Report, to the Presiding Judge of the Superior Court.
3. Instruct the Clerk of the Board to forward a copy of this report, Response to 2003-2004 Grand Jury Final Report, to the Grand Jury Foreman, and to the Administrator of the Countywide Services Agency, and the Sheriffs Department.

**Measures/Evaluation**

Not applicable.

**Fiscal Impact**

The costs of responding to this report were not tracked. Both staff from Correctional Health Services and the Countywide Services Agency contributed to this effort. The costs were absorbed by each entity.

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**BACKGROUND:**

Each year the Sacramento County Grand Jury concludes its work and releases its Final Report, typically the last week in June. The report, which can address a variety of activities, functions, and responsibilities of government, typically contains findings and recommendations. State law requires the affected governing bodies to respond to each of these recommendations with a response specifically directed to the Presiding Judge of the Superior Court. This response is required by September 30, 2004.

**The form of the County's responses as required by law is as follows:**

**As to each grand jury finding, the responding person or entity shall indicate one of the following:**

- 1. The respondent agrees with the finding.**
- 2. The respondent disagrees wholly or partially with the finding, in which case the response shall specify the portion of the finding that is disputed and shall include an explanation of the reasons.**

**As to each grand jury recommendation, the responding person or entity shall report one of the following actions:**

- 1. The recommendation has been implemented, with a summary regarding the implemented action.**
- 2. The recommendation has not yet been implemented, but will be implemented in the future, with a timeframe for implementation.**
- 3. The recommendation requires further analysis, with an explanation and the scope and parameters of an analysis or study, and a timeframe for the matter to be prepared for discussion by the officer or head of the agency or department being investigated or reviewed, including the governing body of the public agency when applicable. This timeframe shall not exceed six months from the date of publication of the grand jury report.**
- 4. The recommendation will not be implemented because it is not warranted or is not reasonable, with an explanation.**

**The recommended responses follow these requirements.**

**DISCUSSION:**

**The Grand Jury report for fiscal year 2003-2004 only had one report which related to County operations. The review and subsequent report titled "Sacramento County Jail Health Inmate Psychiatric Services" was undertaken to review whether the County (specifically the Sheriff's Department, Correctional Health Division) was administering psychiatric services to inmates in the Sacramento County Main Jail in a manner that was both effective and efficient. There are two responses to this report, one from the Sheriffs Department and one from the County Executive. Both of these responses are attached.**

**MEASURES/EVALUATION:**

**Not applicable.**

**FINANCIAL ANALYSIS:**

The costs of responding to this report were not tracked. Both staff from Correctional Health Services and the Countywide Services Agency contributed to this effort. The costs were absorbed by each entity.

Respectfully submitted:

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PENELOPE CLARKE  
Agency Administrator  
Countywide Services Agency

APPROVED:

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TERRY SCHUTTEN  
County Executive

Cc: Sheriff Lou Blanas, Sheriff's Department  
Chief David Lind, Sheriffs Department  
John O' Shaughnessy, Chief of Correctional Health

# Sacramento County Agenda and Record Processing Application Approval List

Approval List for Agenda Item 103192

Page 1

Geoff Davey  
Penelope Clarke

09/03/2004  
09/03/2004

Approved  
Approved

Sacramento County Sheriff's Department Jail Health and Inmate Psychiatric  
Services

Sacramento County Grand Jury  
Final Report 2003-2004

Findings, Recommendations, and Responses

In its investigation, the Grand Jury looked into: A) inmate screening, B) training, C) inmate monitoring and assessment, D) prescription drug storage and dispensing, and E) reorganization and delivery of jail health services pertaining to suicide prevention specifically, and mental health generally.

**A. INMATE SCREENING**

**Grand Jury Finding 1.** The Lindsay M. Hayes Report found that the intake forms being utilized were inadequate. In addition, these forms were not automatically being forwarded to the Jail Psychiatric Services (JPS).

In response, the Main Jail staff has revised its current intake forms in accordance with national standards. All appropriate and relevant medical screening forms are now transmitted by fax to the JPS in a timely manner. Also, arresting officers complete newly developed forms to communicate medical information to the county jail medical staff.

**Grand Jury Recommendation 1.** A yearly review should be conducted to determine the effectiveness of intake screening forms.

**Sheriff's Response 1. Agree with Finding -** After more than 12 months of study and revisions prompted by recommendations from several correctional consultants and the Sheriff's Suicide Prevention Task Force, the three intake forms were revised and then initiated on October 1, 2003. These forms include the Receiving Screening Form, the Arresting Officer Observation Form and the Special Needs Form.

A subsequent review of the Receiving Screening Form conducted in December of 2003 determined that the new revised version of the form generates the information required to successfully detect suicidal ideation and to appropriately refer new inmates to inpatient and outpatient psychiatric services.

**These forms must be restocked approximately every six months. Prior to printing, they are reviewed for necessary modifications or additions. Any significant changes must be approved by the Joint Custody, JPS, CHS Committee and the Sheriff's Suicide Prevention Task Force prior to implementation.**

**Grand Jury Finding 2. The Lindsay M. Hayes Report stated that classification deputies conduct inmate interviews, examine forms and review two screening fields to capture information on an inmate's prior history. These deputies then use individual discretion to make referrals to the JPS staff. These referrals are not always made on consistent criteria.**

**In response to the Lindsay M. Hayes Report, new classification forms have been implemented, which include questions regarding mental health and suicide.**

**Grand Jury Recommendation 2. A software program should be developed to access quickly and accurately an inmate's prior health history for use by the classification deputies to ensure consistency in evaluation and referral.**

**Sheriff's Response 2. Agree with Finding - The Sheriff's Department is currently partnering with the Department of Health and Human Services to develop a Request for Proposal for a software program and database which can access information on any inmate who has been prescribed medications for medical or mental health conditions which were provided by the Sacramento County Pharmacy. This pharmacy database will include most of the arrestees brought to the Sacramento County Jail.**

**Grand Jury Finding 3. The Lindsay M. Hayes Report states that contrary to some national correctional standards, JPS staff does not conduct a mental health assessment on each inmate within 14 days of confinement.**

**In response, the Sheriff's Suicide Prevention Task Force indicated that it would be cost prohibitive to conduct reviews of health records for every inmate. However, there is a mental health screening of all inmates at intake.**

**Grand Jury Recommendation 3. Inmates who have been in the system before should have their records checked for mental health issues within 14 days.**

**Sheriff's Response 3. Disagree with Finding - All inmates are interviewed in person by a Registered Nurse at intake. They are screened for mental health issues during this interview. This includes a review of any past mental health problems including previously diagnosed psychiatric issues, hospitalizations, medications and any prior or present suicidality. As stated in the Lindsay M. Hayes Report, it would be cost prohibitive to conduct reviews of health**

records for every inmate. In December 2003, Jail Psychiatric Services contracted with another consultant, Dr. Joel Dvoskin to review the program. Dr. Dvoskin stated that the initial intake screening was generating a much higher percentage of referrals than most other jails. Sacramento County intake policies are erring on the side of precaution rather than running the risk of missing any cases. Dr. Dvoskin also states that on average 10-15% of all new inmates will end up receiving mental health services. Sacramento County Jail Psychiatric Services provides care for approximately 16% of the total jail population.

## **B. TRAINING**

**Grand Jury Finding 1.** The Lindsay M. Hayes Report found that only two hours of suicide prevention training was included in the basic Sacramento County Sheriff's Department academy training. The burden of suicide prevention falls on the custodial officers. Intensive training of custodial officers is essential in detecting mental health issues and in the prevention of suicides. The national recommendation for such initial training is eight hours.

In response, the Main Jail staff has since instituted a multi-session approach for new officers consisting of eight hours of suicide prevention training. These sessions are divided between the academy and the Main Jail orientation of new custodial officers. Suicide prevention training for all other jail staff consists of one-hour yearly training in addition to fifteen-minute quarterly sessions offered during briefings.

**Grand Jury Recommendation 1.** The quarterly trainings should be increased from 15 minutes to one half hour. Attendance should be required and records kept in each officer's training file. Attendance at makeup sessions should be required.

**Sheriff's Response 1.** Agree with Finding - Jail Psychiatric Services increased the length of quarterly training from fifteen to thirty minutes effective August 2004. These training sessions are conducted during the custody briefings. Attendance is mandatory.

Rather than placing documentation in each employee file as recommended in the report, a record of all suicide prevention training will be kept in the Main Jail Administrative Office. The records will be maintained by quarterly training date and will identify which employees were in attendance.

**Grand Jury Finding 2.** One area of concern identified by the jail staff is the line of communication between the courts and the correctional staff when the inmate is returned to jail after court proceedings. Court actions can have a detrimental effect on the mental state of an inmate.

**Grand Jury Recommendation 2. A process of communication should be developed that alerts the correctional staff to the result of court proceedings regarding a particular inmate, when the inmate is returned to the Main Jail.**

**Sheriff's Response 2. Disagree with Finding - The Sacramento County Court staff routinely communicates results of court proceedings that may result in a negative inmate response to the clinicians of Jail Psychiatric Services. The clinicians evaluate the inmate and make a determination as to whether or not crisis mental health interventions are needed. The clinicians communicate any concerns to the custody staff. JPS provides yearly training for court personnel and the Public Defender's Office regarding suicide prevention and high-risk court events.**

**Additionally, all defendants who are remanded to custody after a Court appearance are screened at Intake regarding medical and psychiatric conditions.**

**Grand Jury Finding 3. The SCSD should be commended for its efforts in evaluating and revamping its training program and increasing the attention focused on suicide prevention. In addition to the increased training, they have created a "Suicide Risk" informational pocket card for officers and correctional health staff. A workshop for public defenders has also been developed and will be given annually. Great efforts have been made to improve communications between the correctional staff and JPS.**

**Grand Jury Recommendation 3. None.**

**Sheriff's Response 3. Not Applicable.**

### **C. INMATE MONITORING AND ASSESSMENT**

**Grand Jury Finding 1. The Lindsay M. Hayes Report stated that monitoring of the inmate population is the primary responsibility of the custodial officers. Inmates housed in special housing units, where most suicides have occurred, are presently required to be observed once an hour. The Lindsay M. Hayes Report recommended that the custodial staff be required to physically observe inmates placed in special housing units at 30-minute intervals.**

**In response, Main Jail staff concluded that to conduct 30-minute cell checks in designated high-risk special housing units would demand an additional 35 custodial deputies. The Sheriff's Suicide Prevention Task Force stated it was unknown what the financial effects or feasibility of such an increase would be. Correctional officers have since been directed to walk the floors and observe inmates with greater frequency.**

**Grand Jury Recommendation 1. Main Jail staff should adopt the suggested standard of observation of the Lindsay M. Hayes Report due to the possibility of suicide among high-risk inmates.**

**Sheriff's Response 1. Partially agree with Finding - In addition to the cell checks currently conducted by deputies, it should be noted that direct or incidental observations of inmates in their housing locations are conducted routinely by other jail staff, such as medical and psychiatric personnel. As stated in the report, the additional 30 minute interval checks would result in a demand for additional custody deputies.**

**Grand Jury Finding 2. The Lindsay M. Hayes Report noted that inmates discharged from the JPS acute inpatient psychiatric unit back to the general population of the Main Jail should have regular follow-up assessment.**

**In response, JPS does a follow-up within 72 hours but has not adopted the standard as outlined due to the cost of additional personnel. However, there has been an effort to centralize outpatients so they can be more closely monitored. Inmates with suicidal ideation assigned to the medical unit receive a 15-minute check.**

**Grand Jury Recommendation 2. An effort should be made to develop a regular monitoring and assessment schedule for every inmate released from the acute psychiatric unit. Currently, the nurse doing pill delivery has been delegated the added responsibility of assessing the inmate's condition. This policy is unsatisfactory due to the time constraint on nurses.**

**Sheriff's Response 2. Disagree with Finding - Jail Psychiatric Services performs a follow up assessment within 72 hours on every inmate released from the acute psychiatric unit. A determination is made at this point as to what level of continuing care the inmate will need. If the inmate meets high-risk criteria, he or she will receive follow up care every 7-10 days. All inmates on medications are seen routinely by the psychiatrists for assessment and on-going care. In addition, a step-down mental health unit for general population inmates is being developed. Both levels of one pod have been designated for mental health inmates. Group therapy has been initiated for these inmates. The therapy focuses on education regarding the symptoms of mental illness and the need for medication management of these symptoms.**

**Grand Jury Finding 3. The Lindsay M. Hayes Report noted the need for more beds designated for outpatient mental health housing. This need was corroborated by the "Medical-Mental Health Inspection Report" of December 5, 2003.**

In response, the jail staff has stated that space limitations of the present jail and budget restraints are barriers to fully address this issue. However, additional beds have been found for inmates discharged from acute psychiatric care, and needing closer supervision than can be supplied in a regular jail unit.

**Grand Jury Recommendation 3.** Since space at the jail is a premium, the County should aggressively pursue plans to build another tower to accommodate the general need, as well as the need for appropriate housing for inmates requiring medical and psychiatric care.

**Sheriff's Response 3.** Disagree with Finding - Sacramento County has a Criminal Justice Cabinet. A sub-committee of this Cabinet is the Adult Facilities Planning and Operations Committee (AFPOC). The AFPOC is charged with determining the needs of Adult Facilities for Sacramento County. The committee meets regularly, as needed, to discuss, plan, and formulate the needs of increasing jail space for inmates, to include those requiring medical and psychiatric care. This committee has members from all affected County Departments and stakeholders. An outside consultant has been retained to prepare a report assessing future needs by projecting inmate populations. When this report is finalized and reviewed by AFPOC, the issue will be brought back to the Criminal Justice Cabinet for further evaluation and direction.

#### **D. PRESCRIPTION DRUG STORAGE AND DISPENSING**

**Grand Jury Finding 1.** The "Medical-Mental Health Inspection Report" indicated that there are some serious problems with the storage of drugs and the dispensing program at the Main Jail. Recommendations made over the past several years have not been fully implemented. The County has contracted with a software company to develop a database program to aid the health staff with prescription records. This program has yet to be developed.

**Grand Jury Recommendation 1.** The County should explore other contractors to develop this database program if the contracted company cannot deliver in a specified period of time.

**Sheriff's Response 1.** Agree with Finding - The County is in the process of terminating the existing contract due to non-performance. A new Request for Proposal (RFP) is being developed for the automated pharmacy system, which will be a joint project of the Sheriff's Department and the Department of Health and Human Services. The Departments are seeking proposals for a County Medication Management System to manage inpatient institutional and outpatient pharmacy systems. It is anticipated the new system will be implemented in late 2005.

## **E. REORGANIZATION AND DELIVERY OF JAIL HEALTH SERVICES**

**Grand Jury Finding 1.** In the spring of 2003, the reorganization of Jail Health Services resulted in the transfer of management from the Coroner to the Sheriff. The improvement in coordination and communication between the health and custodial staff has been noted by the chief administrators and staff members, and is verified by the less frequent health care complaints made by inmates. In its December 2003 report, the Medical-Mental Health Inspection team also commented on the improvements in jail health services. Training is better coordinated as well as the communication between custodial and health care staff regarding the status of inmate health issues.

Most importantly, the health care providers have been given more autonomy in the areas of health issues and decision making. Problems are solved more rapidly because of the open lines of communications and the frequent meetings between the health care and custodial staff and their administrators. The creation of a Sheriff's Suicide Prevention Task Force, including a mortality review of inmate suicides, has been a force for change. Medical staff has been increased as their needs were communicated. All of these changes have contributed to improvements in jail health care and hopefully the lessening of future suicide attempts.

**Grand Jury Recommendation 1.** Even though the County of Sacramento is facing budget cuts, the Board of Supervisors should maintain the present level of staffing of the Medical Housing Unit and its support of Jail Psychiatric Services.

**Sheriff's Response 1.** Agree with Finding - At this time there is no plan to reduce the staffing in either correctional health or psychiatric services. Future staffing levels may be impacted by budgetary constraints. Due to the increased number of patients, Jail Psychiatric Services will be requesting a small increase in staffing to manage discharge planning, group therapy, and verification of medications prescribed from outside agencies.

**Grand Jury Recommendation 2.** The Sheriff's Suicide Prevention Task Force should remain in service and continue to review the progress of implemented changes and to monitor jail policies and procedures.

**Sheriff's Response 2.** Agree with Finding - The Sheriff's Suicide Prevention Task force has already initiated numerous changes directed at reducing suicides in the inmate population. The Sheriff's Department and Jail Psychiatric Services concur that the Sheriff's Suicide Prevention Task Force should remain in service and will continue to monitor jail policies and procedures as well as conduct reviews of the implemented changes.

The responses to the Sacramento County Grand Jury Final Report for 2003-2004 regarding Sacramento County Sheriff's Department Jail Health and Inmate Psychiatric Services have been reviewed and approved.

Lou Blanas, Sheriff  
County of Sacramento

Date

Sandra Hand, M.D., Medical Director  
Correctional Health Services

Date

Gregory Sokolov, M.D.  
Jail Psychiatric Services

Date

# **County Executive's Office Response to Sacramento County Grand Jury's Final Report 2003-2004**

**Regarding Sheriff's Department Jail Health and Inmate Psychiatric Services**

## **Findings, Recommendations, and Responses**

**In its investigation, the Grand Jury looked into: A) inmate screening, B) training, C) inmate monitoring and assessment, D) prescription drug storage and dispensing, and E) reorganization and delivery of jail health services pertaining to suicide prevention specifically, and mental health generally. In the other attachment to this item, the Sheriff's department provided responses to each of the grand jury's findings and recommendations. The County Executive is in agreement with the Sheriff's responses. However, the County Executive would also like to provide additional information in regards to two of the Grand Jury's recommendations. The findings, recommendations and responses are provided below:**

### **C - INMATE MONITORING AND ASSESSMENT**

**Grand Jury Finding 3. The Lindsay M. Hayes Report noted the need for more beds designated for outpatient mental health housing. This need was corroborated by the "Medical-Mental Health Inspection Report" of December 5, 2003.**

**In response, the jail staff has stated that space limitations of the present jail and budget restraints are barriers to fully address this issue. However, additional beds have been found for inmates discharged from acute psychiatric care, and needing closer supervision than can be supplied in a regular jail unit.**

**Grand Jury Recommendation 3. Since space at the jail is a premium, the County should aggressively pursue plans to build another tower to accommodate the general need, as well as the need for appropriate housing for inmates requiring medical and psychiatric care.**

**County Executive Response 3. Disagree with Finding -The County has and continues to aggressively pursue alternatives to incarceration that mitigate the need for building an additional jail facility. Alternative sentencing programs and other programs that work to avoid incarceration have been implemented and are monitored by Committees of the Criminal Justice Cabinet. There are also efforts to expand the continuum of prevention,**

intervention and alternative sanctions for use by the Court. At this point, there is no information or data to suggest the need to build another jail facility.

## **E - REORGANIZATION AND DELIVERY OF JAIL HEALTH SERVICES**

**Grand Jury Finding 1.** In the spring of 2003, the reorganization of Jail Health Services resulted in the transfer of management from the Coroner to the Sheriff. The improvement in coordination and communication between the health and custodial staff has been noted by the chief administrators and staff members, and is verified by the less frequent health care complaints made by inmates. In its December 2003 report, the Medical-Mental Health Inspection team also commented on the improvements in jail health services. Training is better coordinated as well as the communication between custodial and health care staff regarding the status of inmate health issues.

Most importantly, the health care providers have been given more autonomy in the areas of health issues and decision making. Problems are solved more rapidly because of the open lines of communications and the frequent meetings between the health care and custodial staff and their administrators. The creation of a Sheriff's Suicide Prevention Task Force, including a mortality review of inmate suicides, has been a force for change. Medical staff has been increased as their needs were communicated. All of these changes have contributed to improvements in jail health care and hopefully the lessening of future suicide attempts.

**Grand Jury Recommendation 1.** Even though the County of Sacramento is facing budget cuts, the Board of Supervisors should maintain the present level of staffing of the Medical Housing Unit and its support of Jail Psychiatric Services.

**County Executive Response 1.** Agree with Finding - The Final County Executive Recommended Budget for Fiscal Year 2004-2005 does not include any reductions in this area.