

# SACRAMENTO COUNTY GRAND JURY FINAL REPORT 2022-2023



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## 2022-2023 GRAND JURY



**SACRAMENTO COUNTY  
GRAND JURY**

**Norval Wellsfry  
Foreperson**

**Thomas Atkins**

**Jennifer Barrett**

**Steven Caruso**

**Jane Claar**

**Robert David**

**Carolyn Hamilton**

**Shane Jiang**

**Gerald Johns**

**Mauro Lara**

**Scott McDonald**

**Bill Minor**

**Lisa Odom**

**Trent Pasterski**

**Francina Stevenson**

**Donald Tucker**

**Roscoe Williams**

**Theresa Yip**

June 30, 2023

The Honorable Michael G. Bowman  
Presiding Judge  
Sacramento County Superior Court  
720 9<sup>th</sup> Street  
Sacramento, CA 95814

Dear Judge Bowman,

It is a privilege to submit the 2022-2023 Sacramento County Grand Jury Final Report, "Different Issues But a Continued Lack of Leadership." This document represents thousands of hours of work conducted by the 19-member Grand Jury over a 12-month period, involving extensive research and inquiry. The investigative reports found here reflect the belief that the County's elected officials and leaders must continue to be held responsible for their actions and inaction. The Grand Jury takes its role to serve the residents of Sacramento County seriously and embraces the trust that has been given to it.

As done by the 2021-23 Grand Jury, the investigative reports have been released as they were completed to increase the public's awareness of the information that impacts their lives and brings a more-timely recognition of the community's concerns. This report is a consolidation of the reports that have been released.

Thank you, Judge Bowman and particularly Advisory Judge Stephen M Gevercer for your support in authorizing the Grand Jury to maximize the value of our work. We also acknowledge the support and assistance of Assistant County Counsels Krista Whitman and Janice Snyder, Public Information Officer Brandy Boyd and especially Grand Jury Coordinator Erendira Tapia-Bouthillier.

Sincerely,

Norval Wellsfry, Grand Jury Foreperson  
2022-2023 Sacramento County Grand Jury

## OVERALL SUMMARY

With the lifting of COVID-19 pandemic protocols, the 2022 - 2023 Sacramento County Grand Jury returned to the standard term of twelve months. It had been expanded to an eighteen-month term in the two preceding sessions (2020 - 2021 and 2021 - 2022).

The Sacramento County Grand Jury is comprised of 19 members. Its primary function is to act as the public's "watch dog" by investigating and reporting on the affairs of local government. The Grand Jury is authorized to recommend ways local governments can be more efficient, effective, transparent, and accountable. This year investigations focused on administration and municipal affairs; education; health and human services; criminal and juvenile justice; and special districts.

The included reports were based upon thousands of hours of work including, but not limited to, reviewing public hearings; doing internet research; reviewing various expert and technical documents; media reports; interviewing elected and public officials of the County, various cities, non-profit organizations, law enforcement, and outreach staff; and analyzing statutes and case law. This research revealed to the Grand Jury that:

- The Rancho Murieta Community Services District lost the public trust by failing to: raise fees needed to cover costs of security; adequately fund required capital reserves; replace an antiquated accounting system; follow appropriate labor practices resulting in litigation against the District; and provide data to perform legally required audits.
- Sacramento County and the Sheriff's Department have mismanaged the operation and maintenance of the jails to such an extent it has resulted in violations of Constitutional Rights and compliance with the Americans with Disabilities Act.
- A federal lawsuit was filed on July 31, 2018 citing inadequate mental health care and excessive solitary confinement. In the five years following, the County has only recently formulated plans to address the violations. The plans will take another five to eight years to implement before the violations are alleviated, thereby risking a federal conservatorship of the County jails.
- During the past five years, local governments have spent over \$300 million while homelessness has continued to explode more than 253%. That price tag does not include the enormous cost of law enforcement, public health, sanitation, lost commerce, or the impact on the quality of life of in Sacramento County and its seven incorporated communities.
- The County and seven incorporated cities have failed to cooperate, coordinate, and collaborate to create a comprehensive plan to attack the homeless problem.
- Mental illness and substance abuse continue to proliferate among the homeless due to the lack of a coordinated approach by the County and the seven incorporated cities.

- The absence of measurable process and outcome metrics has resulted in lost opportunities to fund those programs that demonstrate the most success.
- The lack of transparency in financial reporting of mental health and substance abuse services for the homeless is not publicly available and reduces public trust.
- In addition to these findings, the Grand Jury looked into other public entities where no reports were issued.

The underlying theme of these Grand Jury reports is a lack of leadership on the part of elected officials on major issues. These issues have existed for years without effective actions. They remain content to be dragged into solutions - leading from behind.

The Grand Jury did find that some County administrative leaders are aware of weaknesses in the County response to managing homelessness and the issues related to the Mays Consent Decree. They continue to seek improved outcomes. Reported changes in process and approach have yet to take hold.

Each individual report presented below states specific findings and recommendations to address the problems identified in those reports.

A major aspect of the Grand Jury Mission is to tour correctional facilities in the County. In addition to the facilities noted in the Public Confinement Review below, the jury also toured the Sacramento County Elections office prior to the November election, the County Morgue, and the new Eco-Water Treatment plant

The 2022-2023 Sacramento County Grand Jury has been honored to serve Sacramento County as a “public watchdog” to ensure local government performs in the best interest of its citizens.



## **2022-2023 GRAND JURY**



# Rancho Murieta Community Services District Has Lost Public Trust



## SUMMARY

Based on complaints received from the Rancho Murieta community, the Sacramento County Grand Jury (SCGJ) finds after its own investigation that the Rancho Murieta Community Services District (District) Board has lost the public trust by:

- Failing to perform its fiduciary responsibility to the community,
- Failing to raise fees over time to cover the increasing costs of security,
- Failing to adequately fund its required Capital Reserves,
- Failing to recognize that the removal of key accounting staff resulted in collapse of its billing and accounting systems,
- Failing to take immediate action to replace the poorly functioning accounting system,
- Failing to follow appropriate labor practices resulting in litigation against the District. and
- Failing to provide the data needed to perform legally required accounting audits for the last two fiscal years.

These and other lapses in leadership created a high pressure and “toxic work environment” among staff, resulting in unusually high staff turnover. As a result of these and other failures, the District has lost the public trust, exposed itself to a high risk of financial fraud, and failed to meet its current and future financial obligations.

The District has begun to take actions to address the problems noted above but has been late in starting that process. This report provides findings and recommendations to assist the District to address these failures, allowing the District to be compliant with its legally mandated role in serving the Rancho Murieta community.

## BACKGROUND

### History

Rancho Murieta is a gated community about twenty-five miles east of Sacramento off of Highway 16. A feasibility study done by the Local Agency Formation Commission (LAFCo) recommended that a Community Services District be formed under California Law to be responsible for the services needed to support this developing community.

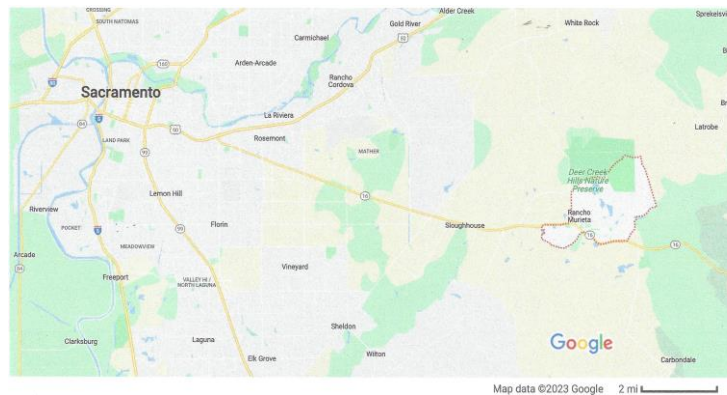
In June 1982 the Rancho Murieta Community Services District (District) was formed. The District is about 3,500 acres with residential acreage of 1,920 acres.

Rancho Murieta was a private development that later resulted in establishing the Rancho Murieta Association (RMA) and Murieta Townhouse, Inc. (MTI) in the early 1970s. There is an overlapping relationship between the District; Rancho Murieta Association (RMA), which is a homeowner's association; and the Rancho Murieta Country Club (RMCC), which operates two golf courses in the community.

The District performs five vital functions for this gated community of about 5,000 people. Those functions are water, sewer, garbage, drainage, and security. Fees are assessed for each of these services in monthly billings to property owners. The District Board is responsible for the performance of these services and has a fiduciary responsibility to properly account for the expenditure of these funds collected to provide these services.

There are 5,189 single family, townhouse, and mobile home units. The 2010 census shows the population as 5,488. The District holds over \$56 million in operation plant, property, and equipment assets.

Figure 1  
Rancho Murieta Community Services District



## Governance

The District is governed by a locally elected five-member board. The Board members can receive up to \$300.00 per month depending on how many meetings they attend. District Board members often have served as Board members of the other two organizations. Actions taken by the District have led to perceptions of conflict of interest with the RMA and RMCC.

The District's 2022-23 fiscal year operating budget is about \$8.3 million. It has about forty (40) employees. Approximately 87% of the funds collected by District are fees for specific services. The District also receives \$775,000.00 in County property taxes each year. The District provides the following services:

1. Water supply collection, treatment, and distribution;
2. Wastewater collection, treatment, and reuse;
3. Storm drainage collection, disposal, and flood control;
4. Security for this gated community; and
5. Solid waste collection and disposal.

## Administration

The District has a General Manager who supervises the operations and financial aspects of all District functions. The General Manager has a staff of about 39 people who report to him through the Director of Administration, Security Supervisor, and Director of Operations.

## **METHODOLOGY**

The Grand Jury received three complaints regarding the District. The issues identified are interrelated. They included concerns about the status of annual financial audits, high turnover among District staff, unusually high annual fee increases proposed by the District's Board, and the questionable use of District funds.

During its investigation the Grand Jury obtained information from, but not limited to:

### Documents:

1. Three citizen complaints which were submitted to the Sacramento County Grand Jury;
2. Correspondence, emails, and documentation received by the Grand Jury;
3. The District's public website ([www.ranchomurieta.com](http://www.ranchomurieta.com)).
4. District meeting agendas, meeting board agenda packets, and minutes (FY 2021, 2022, and 2023);
5. Agreement and amendment for availability and use of reclaimed water (1988 and 1994);
6. Water rights agreement between Cosumnes Irrigation Association, Rancho Murieta Properties, Inc., and Rancho Murieta Community Services District (RMCCSD) (1987);
7. Professional services agreement between the District and The Pun Group, a privately held CPA firm with offices in Sacramento and other cities (FY 2022);
8. District audited financial statements including FY 2018-19 and FY 2019-20;
9. A loan agreement between the District and RMCC to repair a reclaimed water pump (FY 2021); and
10. District annual budgets from FY 2013-14 through FY 2022-23.



### Interviews:

1. Interviews with ten individuals, including the complainant, District staff, and others.

### Observation:

1. District Board meeting audio recordings (FY 2022).

## **DISCUSSION**

### Financial Structure and Issues

The District serves five major functions: water development, treatment, and distribution; sewer water collection and treatment to recycled water standards; solid waste garbage collection and disposal; storm drainage, collection, and disposal; and security.

The first three functions are funded by general taxes assessed each month to property owners, governed under Proposition 218 provisions. This allows for annual increases in those fees, unless over 50% of those who are charged oppose the increase.

The last two functions are funded by special taxes governed under Proposition 13, which only allows increases of a limited amount each year, depending on the authorizing legislation that established those taxes. For example, Measure J, which established the taxes for security in Rancho Murieta allows for increases of up to 2% each year.

Each tax must be billed, collected, and accounted for separately. The funds for each service must be spent only on those services for which the tax was collected. This can be a complicated process from an accounting standpoint, but is typically accomplished with appropriate accounting structures and management oversight. The District also receives county property taxes billed to each property owner by the County on a semiannual basis.

An example of how money is collected is shown in the 2022-23 budget as shown below. In the adopted budgets the District uses the term “sales” to represent the fees it receives in taxes it assesses for the services it provides to both residential and commercial customers. We use the term “fees” in this report for these sources of funds to alleviate possible misunderstandings. The revenue budget represents the income expected from the bills that are sent out each month to landowners for each of the five services provided by the District.

Figure 2  
District Revenue Sources

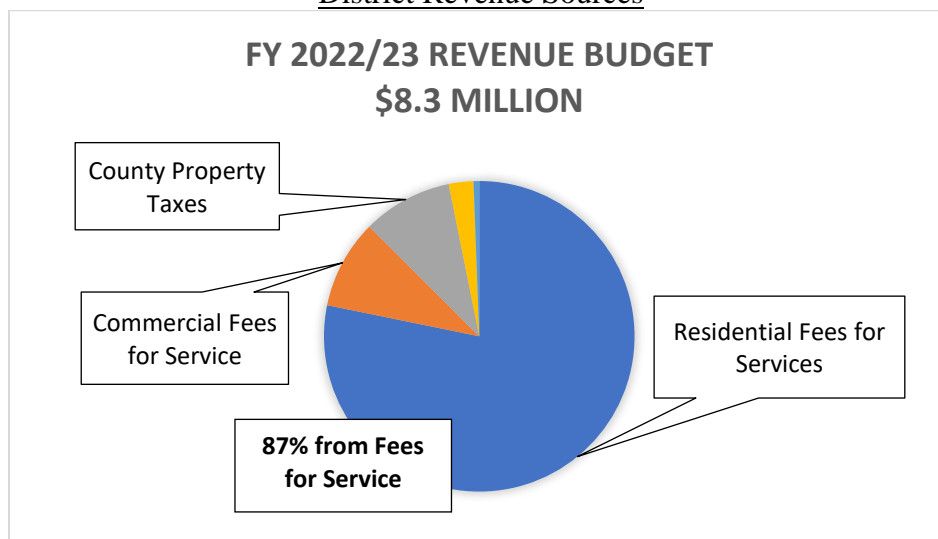


Table 1

ADOPTED BUDGET FY 2022-23 Revenue Summary

Category	Amount in Dollars
Sales Residential Service	6,470,917
Sales Commercial Service	765,678
Property Tax	775,000
Other Income	212,370
Interest Earnings	49,150
<b>Total</b>	<b>8,273,115</b>

FY 2022-23 Expense Summary

Expenditures by Fund Source	Amount in Dollars
Administration	1,977,780
Water	2,076,091
Sewer	1,372,539
Drainage	247,781
Solid Waste	1,032,280
Security	1,438,206
<b>Total Expenditures</b>	<b>8,144,683</b>

*Rancho Murieta Community Services District FY 2022-2023  
Adopted Budget from RMCS D Website*

The tables show 87.5% of the District’s income comes from the bills that are sent out each month for the five services provided by the District. As these bills are sent out and payments are received, California law requires that the District accounting system keep these fund sources separate and track expenditures during the year to each fund source.

The only fund source that can be allocated to support any of the five services (and the general administration of the District) are the County property taxes that the District receives during the year. These County taxes are approximately 10% of the annual budget.

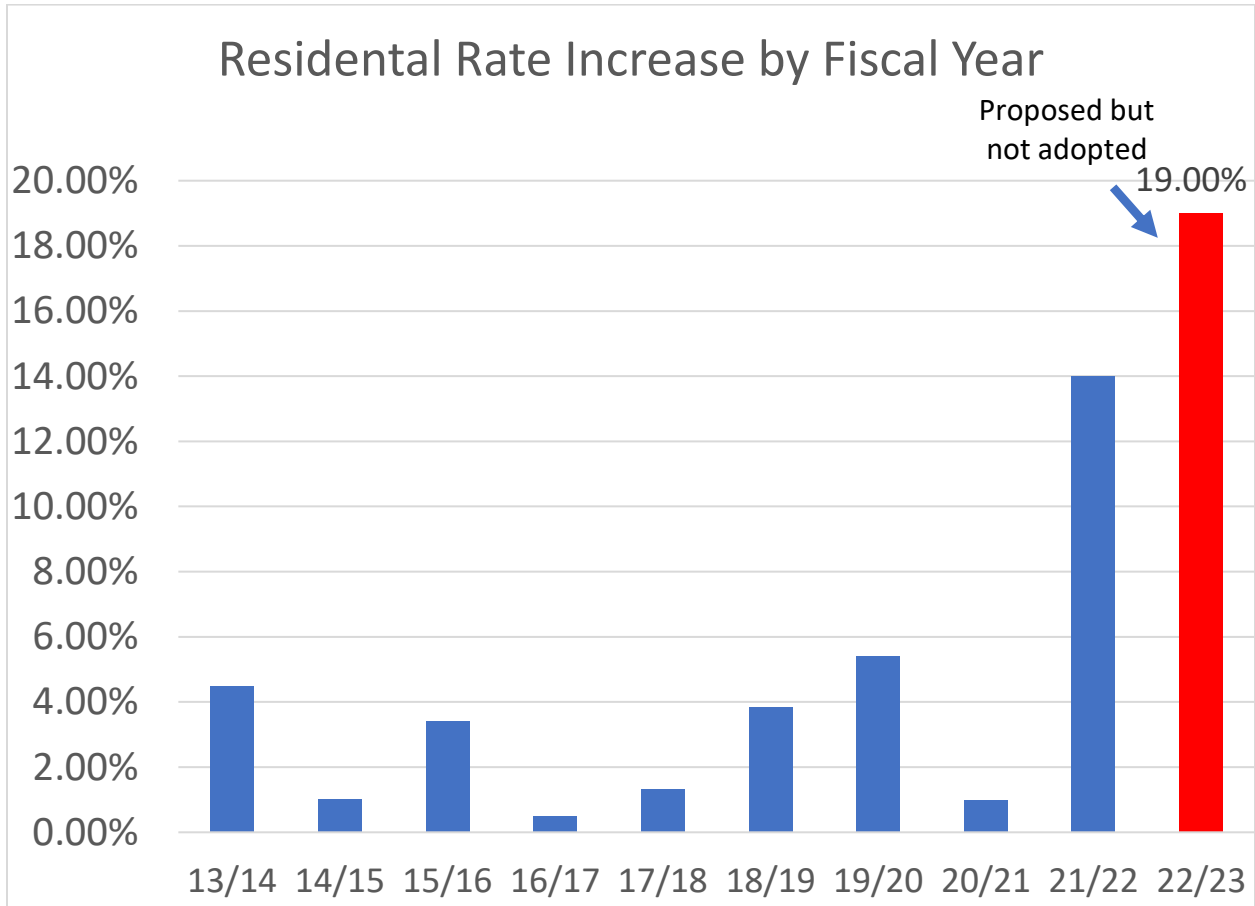
Accounting systems can be set up to perform the detailed accounting of income and expenses separately for each service provided by the District to comply with California law. The District's accounting system does not perform this function automatically. It is a time consuming and manual process. The expected expenditures for Administration in FY 2022-23 are over twice that of previous years due to the large amount of work needed to update the accounting data and system.

Outside auditors have found that the District has developed a series of spreadsheets that do not link to the general ledger. These spreadsheets required multiple entries and extensive knowledge to maintain. This has made the operation of the District's accounting system and the production of accounting reports complex. As a result, annual financial audits have not been completed for the past two fiscal years.

#### Insufficient Rate Increases

The District fiscal year is from July 1 to June 30. A review of the District budgets shows that they have increased fees slightly over time. Figure 3 shows the average annual Residential Rate Increases for the five services the District provides for nine fiscal years, FY 13-14 through FY 20-22. It also shows the rate increase proposed for FY 22-23 but was not implemented. The average annual rate increase for the eight years FY 13-14 through 20-21 was 2.6% with a compounded rate increase over those eight years of 22.85%.

Figure 3  
 Average Annual Residential Rate Increases  
*(from District Adopted Annual Budgets)*



In early 2021, the District proposed a rate increase of approximately 14%. This rate was accepted by the customers of the District. By early 2022, when the District proposed another large rate increase of about 19%, the customers of the District then organized and rejected the increase. The 2022 proposed rate increase was in response to the fact that the District had been subsidizing security costs with approximately \$500,000.00 per year in County property tax revenue and not appropriately funding its needed capital reserves.

Audit Concerns

Community Services Districts are required by California law to have an independent financial audit performed each year. Historically, District staff has been able to produce reliable accounting data from its complex accounting system to conduct these audits. The most recent audits for the District finances were conducted for 2018-19 by Larry Bain, CPA Accounting Firm and 2019-20 by Richardson and Company. The audit for fiscal year ending June 2020 noted five material weaknesses that created a reasonable possibility that a material misstatement of the entities financial statement could occur. The same audit noted five other significant deficiencies

in internal controls that were less severe than material weaknesses, yet important enough to merit attention. In addition, the management letter attached to the 2019-20 audit noted 13 findings that needed to be addressed. A few of the significant findings are summarized below:

1. Accounts Payable:

The District did not prepare a listing of what makes up the accounts payable imbalance on June 30, 2020, and upon review during the audit, it was determined that certain amounts were incorrectly accrued.

2. Billing System Integration:

The District's billing system does not currently interface with the general ledger, resulting in the District preparing extensive spreadsheets each month to record the customer billings and payments in the general ledger. The auditors recommended the District consider a new system that includes the billing system as a module within the general ledger system.

3. Procedure Manuals:

Procedures manuals have not been updated since 2010. An updated procedure manual aids proper internal control and continuity with turnover of positions.

4. Reserves and Reserve Policy:

The district has not funded adequate reserves considered standard practice of Special Districts. The District does not have a current Capitol Reserve Policy. Several of the reserve accounts were in a negative position. These include: Water Capital Improvement Fee Reserve, Water Treatment Plant Construction Fund Reserve, and Security Capital Improvement Fee Reserve.

5. General Fund Allocations:

The District maintains a General Fund in their accounting system. For financial recording purposes, this fund is not identified as a line item in the balance sheet or income statement. These general fund allocations require a cumbersome process to reconcile financial statements. The allocation process from the general fund to other accounts is performed outside the accounting system, creating discrepancies in audits.

The audit also stated that: "The District recognizes the limitation in the current financial system and is working to set up the correct accounts to ensure proper fund accounting. The District is looking into implementing a new Enterprise Resource Planning (ERP) system that is specifically designed for governmental fund accounting. The District anticipates the new ERP implementation for the FY 2021-22."

### District Responses to Financial Issues

The new accounting system was not implemented in FY 2021-22. Although the District has retained outside consultants to help with accounting, it has yet to implement an integrated accounting system to address the flaws in their current system. The current accounting system has not produced reliable data to allow the 2020-21 audit to start on time. From 2021 to at least January 2023, the District has not produced financial reports because of a loss of confidence that their accounting system was able to produce reliable data.



The District has attempted to hire consultants to conduct the 2020-21 audit. At the May 18, 2022 Board meeting, a CPA firm (Eide Bailly) was contracted to perform external accounting services. This firm resigned the account, citing "capacity and risk concerns".

### Administration Issues

The 2019-20 audit noted that the District had a high turnover in key accounting staff and was having trouble hiring accounting staff to keep the system functioning properly. This was exacerbated by the COVID-19 pandemic. The current system is complex to operate and labor intensive. The workload for existing staff is excessive and stressful. This system has contributed to the high turnover rate, about twelve permanent staff in two years. This does not include a similar number of temporary staff members who have rotated through the District during the same time period.

The problems with the accounting system started in late 2018 with the removal of a key long-time accounting staff person that "held the keys to the accounting system". This resulted in the resignation of another key accounting staff person who had critical information on how the accounting system worked. The District has no succession plan to prepare for what followed.

The new staff that came on board had little training in this complex system and was hampered by outdated accounting manuals. These new staff employees did all they could to keep daily accounting operations functioning. The resulting workplace was stressful and described as "toxic" with ongoing tension between accounting staff and District management.

In September 2022, the District entered into a contract with the Pun Group, a CPA accounting firm, to accurately revise its accounting data. The Pun Group is working with District staff to prepare the FY 2020-2021 and FY 2021-22 accounting data to allow for the external audits of those years to begin. The FY 2020-21 audit will likely not be completed until April 1, 2023 at the earliest, about 16 months late.

The extensive review, correction, and preparation of the accounting data for FY 2021-22 has not begun and it will take months before that audit can start. These audits will be performed by Richardson and Company, CPAs.

The audits are described as high risk due to the current condition of the District's accounting system and data. The District's audits for both years are past due. The late audits, combined with the unreliable existing accounting system, have created an environment that exposes the District to a high risk of fraud.

The District is working with Tyler Technologies to implement an Enterprise Resource Planning system known as Tyler Incode to integrate the District's accounting information into a modern easier to manage system that addresses the issues from prior audits. Implementation of that new accounting system will be an extensive process. Certain modules of that system may come on-line in early 2023, but the earliest expected date to fully implement the system is the end of 2023. Tyler Technologies will train staff on this new system, develop training manuals, and establish new procedures.

### Subsidizing Security Costs

The total number of positions for gate and patrol staff has stayed the same from 2013 through 2021, at 17 positions. This is approximately 45% of the total staff of the District of 37.5 positions in 2021. The distributed administrative overhead for security services was assessed at 20% of the total administrative costs until recently. A Cost Allocation Study (CAS) in 2020 indicated that the appropriate percentage of security funds allocated to administrative costs should be increased to 32% beginning in FY 2020-21.

The direct cost for security for the Gate and Patrol Services has increased from \$963,000 in the FY 2013-14 to \$1.5 million in the FY 2021-22, a 56% increase over nine years. The 2% increase allowed under Measure J does not cover those increases. The District has resorted to subsidizing security costs with the use of approximately \$500,000 per year from the County taxes it receives.

### Capital Reserve Fund Issues

Prudent capital reserves make for sound budgeting. For countless families, saving for a rainy day is common sense. For special districts, like that of the RMCSO, reserve funds are not just money in a bank, they are fundamental resources for ensuring reliable core services and community security. Critical infrastructure like that managed by the District needs to be repaired or replaced from time to time. Special districts designate money toward capital reserves in order to respond to emergencies and repair and replace critical infrastructure. This can stabilize rates for rate payers and save them money in the long run. A special district can either implement a policy to have those funds on hand when needed or go into debt and pay interest payments to meet those needs. It is a case of “pay me now or pay me more later”.

The existing District capital reserve policies do not provide clarity to the public so that the public may provide proper oversight of the District’s reserve funds. The reserve accounts are woefully underfunded. Current reserve balances were estimated to be between \$8.5 and \$10.9 million in the capital reserve study that was done in a recent finance report presented to the District Board. The actual Capital Reserves on hand are under review as the financial system is being upgraded.

Capital assets are valued at \$32 million to \$36 million<sup>1</sup>. A reserve fund for repair and replacement of 60% of those assets would be a little over \$20 million. A reserve fund report to the District prepared by Association Reserves™ (a company specializing in guiding capital asset management) recommended that such a fund should be at least 70% of capital assets. However, Board minutes indicate the desire to have reserves funded at 60%. This goal is not stated in the current District Reserve policy. With the current funds believed to be on hand, the District has less than one-half of what it needs to reach even the 60% goal.

In 2022, when the District tried to achieve the goal of funding reserves equaling 60% of the value of capital assets, the rate payers rejected this proposal. The District proposed a new tax under Proposition 13, to fully fund its security costs in the form of Measure R for the November 2022 ballot. If Measure R had passed, the District would have been able to stop subsidizing the growing security costs with its County property tax funds and use those property taxes to help rebuild the Capital Reserve accounts. Since Measure R did not pass in November 2022, the District must find an acceptable solution for the Capital Reserve funding needs of the District.

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<sup>1</sup> The 2020-2021 Budget notes capital assets of plants, equipment and property at \$65 million. Excluding property, the assets that are subject to repair and replacement needs are estimated at about \$32 to \$36 million.

### Perceived Conflicts of Interest

Rancho Murieta is a development community. The District was formed to provide public services to this development. The Rancho Murieta Association (RMA) is the homeowner's association that oversees the Covenants, Conditions, and Restrictions (CC&Rs) for the community. The Rancho Murieta Country Club (RMCC) with two 18-hole golf courses provides open space and recreation for the community. The developers of property within Rancho Murieta are an influential group within the community.

The Boards that oversee these various organizations in the community are largely volunteer. Board members may serve on any one of these boards, and some have served on multiple boards over time. Board members from one organization may at times move to govern the other organizations. While this participation across various boards might help with overall understanding of the communities' needs, it also creates perceptions of conflicts of interest when it comes to funding certain projects or of special treatment by one organization by another.

A good example of such a perceived conflict of interest is the \$115,816 loan the District provided to RMCC in 2021 to repair the pumps the Country Club uses to obtain reclaimed water provided to it by the District. RMCC is responsible for the maintenance of these pumps, but lacked the funds to repair them. The repayment of this five-year loan is at not less than 2% annual interest. It is reasonable to question why such a long-term loan was given and why RMCC did not procure its own loan when the District was not sufficiently funding its own capital reserves.

While this loan expedited the repairs, it could have been done in a more transparent fashion and at more favorable terms for the District. RMCC does not pay anything for the reclaimed water provided to it by the District. This reclaimed water is a valuable commodity and is critical for the operation of the golf courses. We know of no other water agency in California and certainly not in the Central Valley that does not charge a reasonable fee for the commercial use of reclaimed water.

For example, the Sacramento County Water Agency (SCWA) charges for the use of its reclaimed water at 70% of its irrigation rates. Using this basis, the District could generate revenue of over \$100,000 per year for the reclaimed water used on the two RMCC golf courses. While this loan may not be an actual conflict of interest, it does raise the perception of a conflict of interest in the community. The District Board and staff need to be sensitive to those perceptions and avoid them in their fiduciary responsibilities.

## **FINDINGS**

- F1** The District Board has lost the trust of the community to make prudent financial decisions.
- F2** The current accounting system is inadequate to meet the legal requirements related to financial reporting to the public which has resulted in two legally required financial audits being overdue.
- F3** The late audits, combined with the unreliable existing accounting system, have created an environment that exposes the District to a high risk of fraud.
- F4** The District Board cannot expect to recover public trust sufficient to propose any tax/fee increases until it replaces its antiquated billing and accounting system to produce reliable billings and financial records.
- F5** The District has at times taken actions against staff that has interfered with the operation of the District.
- F6** High employee turnover indicates poor employee retention that has interfered with the operation of the District.
- F7** The lack of an effective succession strategy has impaired the ability of the District to maintain adequate competent staff which has resulted in the loss of critical accounting system knowledge among the District staff.
- F8** The lack of an updated Capital Reserve Policy has contributed to poor management and inadequate Capital Reserve.
- F9** The use of County Property Tax funds to subsidize its growing security costs without raising the security fees has jeopardized the financial stability of the District.
- F10** The Capital Reserves are underfunded by over \$10 million, jeopardizing the financial stability of the District.
- F11** The District has inappropriately subsidized the cost of reclaimed water to RMCC.
- F12** A perceived conflict of interest exists in the community due to a close relationship between the District, the RMA and the RMCC and their respective Board members.

## **RECOMMENDATIONS**

- R1** The District board should upgrade the District's billing and accounting system with the new Enterprise Resource Planning (ERP) accounting system by January 1, 2024.
- R2** The District Board should insure that the audit for 2020-21 is completed no later than April 1, 2023, and the FY 2021-22 audit by September 1, 2023.

- R3** The District Board should task its ERP consultant to implement a program to fully train District accounting staff on this new accounting system and prepare new accounting manuals acceptable to the General Manager or designee by January 1, 2024.
- R4** The District Board should retain a controller to ensure proper accounting procedures are followed and the integrity of the accounting data is maintained by January 1, 2024.
- R5** The District needs to ensure invoices are tracked within the accounting system and that the accounts payable listing be generated on a monthly basis by September 1, 2023.
- R6** The District should create an ongoing training program for the Board and staff regarding the Brown Act, compliance, accounting procedures, and work place practices and behaviors including prevention of sexual harassment and hostile work environment. This should be fully implemented in 2024.
- R7** The District Board should either adopt a practice of reviewing personnel actions by someone not in the chain of command to ensure that proper procedures are followed or engage an outside expert in personnel matters or legal counsel to review such actions, to make sure proper procedures are followed.
- R8** The District Board should require administration to report quarterly on staff development and staff identified concerns beginning October 1, 2023.
- R9** The District should reduce its security services funding to a level that is supported by fees paid by residents specific to fund security services.
- R10** Effectively immediately, County tax funds should not be diverted to security services, deleted expenditures should be allocated to the Capital Reserves.
- R11** The District Board should develop and implement a capitol reserve fund policy with supporting fees sufficient to fund the long-term infrastructure needs of the District.
- R12** The District Board should revise its agreement with the RMCC and begin charging for the use of reclaimed water on the RMCC golf courses at rates typical in the Sacramento area by January 1, 2024.
- R13** The District Board and staff should avoid perceptions of conflicts of interest in their fiduciary responsibilities to protect the interests of the District and its rate payers.

### **Required Responses**

Pursuant to Penal Code sections 933 and 933.05, the Grand Jury requests responses as follows:  
From the following elected officials within 60 days:

Tim Maybee, President, Board of Directors  
Rancho Murieta Community Services District  
15160 Jackson Road  
Rancho Murieta, CA 95683



## **Invited Responses**

Mr. Neil McCormick, Chief Executive Officer  
Office California Special Districts Association  
1112 I Street, Suite 200  
Sacramento, CA 95814

Ms. Sue Frost, Board Member of District 4  
Sacramento County Board of Supervisors  
700 H Street  
Sacramento, CA 95814

### **Mail or deliver a hard copy response to:**

The Honorable Michael Bowman  
Presiding Judge for Grand Jury  
Sacramento County Superior Court  
720 9<sup>th</sup> St.  
Sacramento, CA 95814

### **Please email a copy of this response to:**

Ms. Erendira Tapia-Bouthillier, Grand Jury Coordinator  
Sacramento County Superior Court  
Email: [TapiaE@saccourt.ca.gov](mailto:TapiaE@saccourt.ca.gov)



## **2022 – 2023 Grand Jury of Sacramento County**

## What's Taking So Long? County Delays Mandated Jail Improvements



### SUMMARY

"The true measure of our character is how we treat the poor, the disfavored, the accused, the incarcerated, and the condemned. We are all implicated when we allow other people to be mistreated." -- Bryan Stevenson, founder and executive director of the Equal Justice Initiative and law professor at New York University School of Law.

The County of Sacramento (County) and Sacramento Sheriff's Department (SSD) are required by law to operate and maintain County detention facilities to safely house inmates awaiting trial and those serving their sentence. Due to alleged violations of constitutional rights and compliance failures of the Americans with Disabilities Act (ADA), a lawsuit was filed on July 31, 2018: *Mays v. County of Sacramento*. Allegations included:

- Lack of adequate staffing.
- Unnecessary and harmful use of isolation.
- Failure to provide good medical and mental care.
- Discrimination against inmates with disabilities.

Mays plaintiff's counsel summed up their case: "Like many counties across the State, Sacramento County failed to allocate the resources necessary to provide humane conditions in its jails. In particular, Sacramento County drew our attention because of its jails' woefully inadequate mental health care system and its excessive use of solitary confinement."

The County eventually settled the case and agreed to a number of changes at the Sacramento County Main Jail (Main Jail) and Rio Consumnes Correctional Center (RCCC). The Court approved the "Mays Consent Decree" on January 13, 2020.

Unfortunately, the County has been exceedingly slow to implement many of the agreed-upon changes at the Main Jail and RCCC as mandated by the Mays Consent Decree. The plaintiffs' counsels co-authored a letter to the Sacramento County Board of Supervisors (BOS), dated September 1, 2022, that stated the "conditions in the Jails remain deplorable." The County responded and agreed to "develop a plan for addressing the physical plant deficiencies" by December 21, 2022.

Although the BOS approved the building of an Annex to address a portion of the deficiencies, it will take at least five years to design and construct the Annex, and there are no immediate plans to address the many outstanding violations. Vigorous interim plan execution is vital to avoid the threat of federal receivership, increased liability for non-compliance, preventable illness for the jail staff and inmate population, and higher costs due to escalation of capital costs interest.

## **BACKGROUND**

In 2011, the California Public Safety Realignment Act (AB109) was passed and implemented. The legislation transferred responsibility for housing low-level offenders from the State to the counties in California, which has impacted county detention facilities and county probation services throughout the State. Subsequent legislation provided both ongoing and one-time funding to each County to support the housing and supervision of these offenders. The passage and implementation of AB109 have greatly affected the operation of both the Main Jail and RCCC.

In 2018, the *Mays* class action lawsuit was filed. It alleged the County failed to provide the following:

- Adequate medical and mental health care and the facilities to provide that care.
- Resolution of ADA violations.
- Reduction of excessive use of solitary confinement.

A County consultant wrote as part of the settlement agreement, "[W]hile it may not have been our choice, it is now our moral and legal obligation to find ways to appropriately respond and provide for the humane and constitutional care for this vulnerable population." The parties agreed, in lieu of litigation, to a consent decree which was approved by the Court and outlined the agreed-upon requirements.

Historically, the County has approved only a few construction projects related to the expansion of healthcare facilities in County detention. Instead, it has directed most of the available funding towards programs that are alternatives to incarceration. On December 8, 2022, the BOS approved the County's recommendation to "construct an Intake and Health Services Facility" (Annex) to address Health Insurance Portability and Accountability Act (HIPAA) and ADA requirements. The final approval is contingent upon the architectural design, cost estimate, and bond financing. The Annex was projected to take approximately five to eight years to complete.

According to several mandated expert reports submitted in 2022, the requirements of the Mays Consent Decree will not be fully met until these deficiencies are addressed.

## **METHODOLOGY**

During the course of this investigation, the Grand Jury conducted the following research:

1. Reviewed the 2019-2020 Jury report entitled "Senate Bill 1022: A Gift Too Good to Ignore."
2. Conducted interviews with County staff, SSD staff, and members of the County Board of Supervisors.
3. Reviewed the Board of Supervisors' meeting minutes and documents regarding the Mays Consent Decree.
4. Reviewed various court filings in the *Mays* case, including the Complaint and Consent Decree Order.
5. Reviewed more than 18 consultant and court-appointed expert witness reports.
6. Reviewed various County and SSD policies, procedures, and general orders.
7. Conducted site visits at the Main Jail and RCCC.

## **DISCUSSION**

### Structural Limitations of the Main Jail and RCCC Create Risk of Federal Receivership.

The construction of the Main Jail in downtown Sacramento was completed in 1989. RCCC was initially built as an Air Force base. It was deeded to the County in 1947 and converted into a jail facility in 1960. In 1990, the ADA was passed, which imposed substantial new building access requirements. The Health Insurance Portability and Accountability Act (HIPAA) was passed in 1996 with additional requirements. The Main Jail and RCCC were not designed with these requirements. They cannot provide the proper medical and mental health care or appropriate access for persons with physical disabilities.

The Grand Jury reviewed six consultants' reports commissioned by the BOS. These consultants inspected the Main Jail and RCCC to determine the progress in the issues described in the Mays Consent Decree. They noted numerous structural deficiencies at both facilities, and a lack of approved custody positions dedicated to essential healthcare functions. One consultant noted there were serious space restrictions at the Main Jail, which prevented that facility from meeting the requirements of the Mays Consent Decree.

At the time of this report, the lack of suicide prevention facilities at the Main Jail remains a major Constitutional violation. The building's structure results in a lack of privacy and confidentiality during the assessment of suicide risk. Temporary suicide housing is inadequate. One consultant found inmates at risk for suicide were housed in non-suicide-resistant cells while they await suicide assessment. Most inmates who have been placed on suicide precautions continue to be housed in the booking cells, where they may be held for well over six hours. There were concerns that classrooms may be used on occasion for housing inmates, including suicidal inmates. Federal law requires that suicidal inmates be housed in cells without blind spots, however, suicidal inmates are still being housed in such cells. The option of placing actively suicidal inmates on constant observation is not standard practice at the Main Jail. One expert concluded that space limitations at the Mail Jail impact the ability to provide services consistent with the Jail Psychiatric Services (JPS) overview.

### The Structure of The Main Jail is Non-compliant with ADA and HIPAA.

The booking and medical screening area is non-compliant with the ADA. The Grand Jury personally observed an arrestee confined to a wheelchair who had difficulty entering the medical intake area during the booking process. The medical intake area lacked sufficient space for private interview rooms, which resulted in a violation of the arrestee's right to privacy, a HIPAA violation. The medical infirmary and the dental area are not ADA-compliant. Consultants noted the Main Jail is non-compliant in placing inmates with disabilities in appropriate, assessable long-term housing.

Consultants commented that all inmates in suicide prevention are virtually locked down and have no dayroom or other out-of-cell access. Mental health treatment is not addressed in segregated housing units. Despite limited space, excessive jail population, and limited hours in the day, many inmates, including those with mental illness, are denied access to the outdoor recreation yard.

The SSD has housed people with serious mental health illnesses in restrictive housing, violating the Mays Consent Decree. In 2021, at least 58 inmates in restrictive housing were identified as mentally ill. The jail's restrictive housing units serve as a warehouse for people with mental health needs. Consultants fear this will result in severe and foreseeable harm to those with mental health illnesses.

### The New Jail Annex Will Take a Minimum of Five Years to Complete.

Regardless of the population of the Main Jail, compliance with the Mays Consent Decree cannot be achieved without structural modifications.

To comply with the Mays Consent Decree, the BOS directed staff on December 8, 2022 to pursue the plan to design and construct an intake and health services facility, referred to as the Annex. The design and construction of the Annex are expected to take at least five years to complete. The Annex will be located on adjacent, existing County property. The facility will include a new booking loop, medical clinic, medical housing, and housing units for patients requiring higher levels of mental health care.

The BOS also approved two interim projects to comply with the Mays Consent Decree, pending design and construction. These interim projects will take at least three years to complete. For the first project, the County will construct two new control rooms at RCCC to provide a higher level of security to monitor barracks. Once completed, barracks C, D, G, and H at RCCC will be sufficiently secure to accommodate the high security, level three inmates currently housed on the third floor of 300 West Pod at the Main Jail. The second project will convert 300 West Pod into an acute psychiatric unit known as 3P Project once the current inmates are moved to RCCC.

One interim solution to the lack of medical/psychiatric interview space is being addressed with the proposed construction of plexiglass partitions installed in the indoor recreation area of each inmate housing wing of the Main Jail. Each of these partitions will include an affixed patient



chair and should allow for confidential conversation and examination, will alleviate wait time for inmates and medical staff.

#### Concerns with the Current Booking Process.

The recent actions taken by the BOS to begin construction of the Annex, modify the barracks at RCCC, and convert the Third Floor West Pod at the Main Jail to comply with the Mays Consent Decree do not address the current concerns with the booking process in the Main Jail. In particular, inmates' current medical and mental health care continues to be substandard. This is repeatedly documented in consultant reports.

These issues include:

- Medical/social history intake process.
- Proper privacy and confidentiality during treatment.
- Adequacy of examination facilities.
- Preventive health measures.
- Access to appropriate treatment for acute and chronic conditions.

The arresting officer initiates the booking process. The arrestee is searched, personal items are removed and tagged, things considered a threat to safety (belts, shoe laces, etc.) are confiscated, and the arrestee's weight is obtained. The arrestee is placed in a confined area with other arrestees until the medical and social history is taken. Following intake, the arrestee is placed in the same restricted area until formal booking is completed. Jail clothing is then issued, and the inmate is placed in a holding cell with several other inmates. When classification is completed, the inmate is transferred to an appropriate cell. These crowded settings violate the six-foot separation recommendation of the Mays Consent Decree.

Before formal booking, the medical and social intake process occurs in a small room with three stations, each staffed by a Licensed Vocational Nurse (LVN). The arrestee sits in a slotted space separated from the LVN by a plastic shield. The LVN is masked, but the arrestees generally are not. The LVN uses a computer template to ask extensive medical, mental health, germane to medical, mental health, and social history questions. The form process is lengthy; it takes from 15 to 45 minutes.

Any arrestee with an acute health condition is often "sent out" to an Emergency Department (ED) for care before formal booking. This requires an escort of two arresting officers to accompany them. All may have to stay at the ED for several hours, resulting in fewer officers on patrol. Exorbitant expense is said to be attached to this practice. The Grand Jury was unable to obtain a valid estimate of this cost.

The space for the inmate does not accommodate a standard wheelchair, which forces the inmate to remain in the hallway and defeats the purpose of the plastic shield.

With only three stations, the intake results in over-crowding of the booking waiting area. The crowding is exacerbated because arresting officers must stay with an arrestee until they are formally booked and handed off to custody. There is no compliance with the six feet social

distancing standard. The holding cells are also crowded, which contributes to a preventable risk of infectious disease for staff and inmates.

Privacy and confidentiality of inmate-protected medical and social information are minimal. The officer responsible for the safety and security of any particular arrestee is considered a healthcare team member and qualified to have limited access to this information. During the history intake, the responses by the inmates to questions about HIV status, prior history of communicable disease, sexual orientation, and mental health issues can be heard anywhere in the room. This is a specific violation of the HIPAA requirements.

#### Medical Care While Incarcerated at the Main Jail.

Spaces designated for mental health appointments are plexiglass cubicles with open ceilings. There are no designated mental health treatment areas except for medical examination rooms on some floors, which requires the transport of inmates off the floor for many of these appointments. There is a languishing project to add 18 plexiglass cubicles to various floors in the Main Jail for mental health care.

The situation is somewhat better at RCCC —designated space is provided for women, including several exam and treatment rooms. A similar layout is available for the treatment of men. While stark, exam rooms have basic equipment: a computer station for the clinician, an exam table, a sink with running water, vital signs stand, and drawers for standard items like gloves and cotton swabs. Basic laboratory services are available with slow turn-around times. No imaging facilities are on site. The medical staff is comprised of County-employed physicians and nurse practitioners on-site for eight hours on weekdays. On nights and weekends, medical staff are on call by phone to assist evaluation of acute problems by nurses, which often results in a send out. Specialty care is contracted with private physicians who provide service at designated times. Some specialty care is another form of send out if the specialist does not come to the Main Jail.

The issue of send outs creates tension between the County-employed medical staff and the sworn officers of SSD. Officer time is negatively impacted by time away from primary duties and the associated overtime costs. The medical staff feels compromised by the duty to provide quality patient care and the lack of diagnostic facilities at the jails. The result is that treatment decisions become overly conservative and result in a high transfer rate out of the Main Jail.

Staff physicians see inmates by appointment for chronic health conditions in a clinic in the Main Jail and at RCCC. Electronic medical records are used for documentation. In the jails, there is the same access to the medical records of care provided in other County facilities. This promotes continuity of care and supports preventive care.

Comprehensive preventive care is a challenge in the jail setting. The medical staff in the Main Jail do not have access to records outside of the County system, such as local emergency rooms. This compromises the ability to properly administer vaccines because of inaccurate histories, and the transient nature of the inmate population hampers the continuity of basic recommended screening.

Although there are hospital-like rooms with beds for patients convalescing from a hospital stay, hospital care is not available inside the jails. These rooms are also used for infusion therapy. There is a dialysis unit in the Main Jail but presently it is unused due to staffing limitations.

Mental health care is available through a contract with the University of California, Davis Mental Health Department (UCD). These services are provided by Licensed Clinical Social Workers (LCSW) and Licensed Family and Marital Therapists (LFMT). A psychiatrist is available on-site for referral, consultation, and sometimes ongoing care.

#### Insufficient Staffing to Support a Constitutional Level of Medical and Mental Health Care.

As part of the negotiated actions to address findings in the Mays Consent Decree, the parties agreed to a Remedial Plan incorporated as Exhibit A into the Consent Decree. The Remedial Plan stipulates, "The County shall maintain sufficient medical, mental health, and custody staff to meet the requirements of the Remedial Plan."

The Third Monitoring Report of the Medical Consent Decree, submitted on October 25, 2022, identified 27 clinical vacancies. Some positions may have been filled since the report, but a Vacancy Report dated February 8, 2023, lists 68.5 medical and administrative positions still vacant. It should be noted that several of these positions may have been recently approved by the BOS without enough time for recruitment and hiring. Vacant positions include 4.5 Physician III positions (45% vacancy rate), 7 Medical Assistant positions (33% vacancy rate), 21 Licensed Vocational Nurse positions (44% vacancy rate), 16 Registered Nurse positions (23% vacancy rate), and 6 Registered Dental Assistant positions (100% vacancy rate).

The same report stated, "According to ACH (Adult Correctional Health) leadership, maintaining filled positions is difficult due to recruitment challenges, staff retirements, and magnitude of changes required by the Remedial Plan. Salaries for selected positions (e.g., physicians, registered and licensed vocational nurses) have not been competitive, and labor agreement negotiations are in process or recently completed for multiple health disciplines." The report stated the concern that hiring permanent physicians was difficult and that the County should invest resources in recruiting nurse practitioners to address fragmentation of care, delayed diagnosis and treatment, and preventable harm to patients. There are no nurse practitioner positions listed in the vacancy report.

In addition to the medical vacancies by the County, a separate consultant's report was required for Adult Correctional Health (ACH) contracts with Jail Psychiatric Services (JPS) through UCD to provide mental health care for the County correctional facilities. Although the Mental Health Expert's Second Round Report of Findings, dated September 21, 2021, states "JPS has not calculated treatment hours for the Consent Decree and judged staffing sufficiency in that manner.

Therefore, it remains uncertain whether staffing is sufficient to meet the Consent Decree requirements." However, according to the Vacancy Report, there are 35.7 vacant positions in the UC Davis program, which include 16 mental health workers (100% vacancy rate), Eight Licensed Clinical Social Workers (24% vacancy rate), and six social workers (21% vacancy rate). The adequacy of staffing for compliance with the Mays Consent Decree will be further

evaluated in the next monitoring round. To date, the County is in "partial compliance" with the Mays Consent Decree as listed in consultant reports.

There are approved medical and mental health positions in accordance with a "Multi-Year Staffing Plan" pursuant to the County's agreement with Class counsel that have not been filled, and there are a number of positions in the medical and mental health arena that have not been filled. According to an informal report, current physician staffing is at capacity.

It was further reported by court consultants that there are insufficient designated custody escorts to ensure access to medical and mental health services, including medication administration. The Grand Jury was unable to ascertain whether the SSD was adequately staffed or planned to increase the number of custody officers to meet the Mays Consent Decree requirements. Continuing to ignore the need to hire custody escorts delays the necessary provision of medical and mental health services to those incarcerated.

### Poor Sanitation Processes

According to subsection K of the Medical Care Remedial Plan of the Mays Consent Decree, the County must consult with an Environment of Care (EOC) expert to evaluate the County's correctional facilities where inmates receive medical and mental health treatment.

In consultation with Class counsel, the County retained a consultant to complete the required review. The Sacramento County Jail EOC report was submitted to the County on June 21, 2022, and filed with the Court on August 17, 2022. The EOC report states the SSD operates the facility, but the Sacramento County Department of General Services (DGS) provides custodial operations and facility maintenance.

The findings listed in the EOC report documented several sanitary and hygiene issues throughout the Main Jail. These issues adversely impact the health of the inmate population and staff. State statutes and Correctional Health and Safety rules set standards because adequate sanitation is fundamental to safeguard the health of inmates at the Main Jail and RCCC.

Grand Jurors observed some of these sanitation issues during the site visits to the Main Jail and RCCC. At the Main Jail, inmates were seen lying on the floor in the holding cells, and the booking waiting room was overcrowded. The Grand Jury also observed milk cartons sitting in a plastic container on the floor and observed lunches with the time of 10:45 a.m. written on the at 2:00 p.m. At RCCC, mattresses were left outdoors in the Central Yard and the J/K Dorm. This could increase the risk of spreading infectious diseases among inmates and staff. The EOC report identified many cleanliness and sanitation issues throughout the Main Jail, such as:

- Soiled floors in the Intake areas, holding areas, housing units, and medical exam areas.
- The flooring was deteriorated and needed repairs.
- A floor was in disrepair with spider cracks and chipping around the center floor drain.
- Clogged drains and drain flies were noted throughout the Main Jail's shower rooms.
- Clean inmate clothing, various laundries, and mattresses were stored on the floor in the intake area.

- Poor and unsanitary conditions of most, if not all, of the showers in the housing units at the Main Jail.
- Most of the vent grilles were clogged with dust, preventing adequate ventilation and promoting mold and mildew growth. Food service utility carts were filthy with old food spills and dried food debris, and other issues creating cross-contamination can often lead to foodborne-illness outbreaks, which creates another medical emergency for the facility.
- In the medical areas of the Main Jail, the EOC report identified multiple exam tables with severely cracked vinyl covers that exposed the inner cushion, which can harbor pathogenic microorganisms leading to harmful infections, including Methicillin-Resistant Staphylococcus Aureus (MRSA).

### Leadership

The successful compliance with the Mays Consent Decree requires detailed and consistent management to achieve the goals. The frequent rotation of leadership at the Main Jail and RCCC - every two years - leaves the Sheriff's Office with no single person accountable for compliance in the long term.

This issue was cited in the Second Monitoring Report on Restrictive Housing, Discipline and Classification Practices in the Sacramento County Jails dated July 2022 (Compliance Report): "New leaders scarcely have time to gain an understanding of the Consent Decree and its implications for jail practices conditions before they are rotated back out of the jail."

The SSD practice of routinely rotating high-level officers between corrections and patrol results in the management's tenure in positions being too short. This has been the practice for the Compliance Commander positions at the Main Jail and RCCC. It takes significant time to acclimate a new person into this complex role because they must be trained for critical tasks, often delaying attention to the actual work.

Learning the bureaucratic procedures necessary for policy approval further delays the implementation of required policies. This lack of consistency in remedying the demands of the Mays Consent Decree increases the risk of Federal Receivership, which would remove County control of this issue.

The Grand Jury specifically witnessed this because there were leadership changes between its mandated tours and subsequent follow-up visits at RCCC and the Main Jail.

The Compliance Report states: "It is essential for the SSO to create a permanent position to handle Consent Decree compliance and oversee the major changes needed. The SSO needs stable leadership to set, engage in long-range planning, report on progress and setbacks, and hold custody staff accountable to the County's legal obligations."

### Consultant and Court-Appointed Expert Witness Recommendations

Over the course of the Mays case, the County has procured a number of consultants to review the policies and practices at the Main Jail and RCCC. These consultants wrote reports which detail

findings and recommendations. Many of the recommendations presented a roadmap for the County to comply with the requirements of the Mays Consent Decree.

The Court has appointed experts in mental health, medical, and suicide prevention to periodically monitor the County's progress in meeting the Consent Decree requirements. The Court's experts have written and filed at least eleven monitoring reports which detail their findings and recommendations.

The Grand Jury has reviewed 18 consultant and court-appointed expert witness reports, which contained over 200 recommendations to assist the County and SSD in meeting the requirements of the Mays Consent Decree.

Based on the Grand Jury's investigation, it is clear the County and SSD have implemented a number of the recommendations and made progress to comply with the Consent Decree. Unfortunately, the County and SSD have ignored key recommendations in the areas listed below, which have led to continued constitutional violations, including violations of ADA and HIPAA. The following significant recommendations are compiled from various County consultant and Court-appointed expert reports. These have been largely ignored by the County and SSD, which has led to continued non-compliance with the Mays Consent Decree.

#### Physical Plant Deficiencies:

- "SSO, ACH, JPS must review the intake process and areas to identify what changes can be made so that nursing and mental health providers can complete timely intake screening and assessments in a confidential area." - Mental Health Expert's Second Round Report of Findings.
- "The County should focus on developing immediate, interim measures to ensure such privacy and confidentiality, rather than focusing on preliminary plans for 'jail annex' construction or attempting to mitigate the problem by purchasing 'white noise' machines." - First Report of Compliance in Mental Health Services Based on Consent Decree.
- "It is strongly recommended that SCSD and CHS officials look at options better ensure reasonable sound privacy in the booking area when multiple nurses are conducting intake screening at the same time period." - Report on Suicide Prevention Practices Within the Sacramento County Jail System.
- "Implement plans to provide adequate space, privacy, sanitation, and disinfection in the booking area." - Third Monitoring Report of the Medical Consent Decree.

#### Staffing Deficiencies:

- "Utilize staffing analysis to evaluate existing staffing plans and caseloads to determine what an appropriate caseload would be at each level of care. Ratio-based staffing allows for additional staff if the population increases and provides specificity for each level of care." - Mental Health Expert's Second Round Report of Findings
- "Establish custody posts for the purposes of health care escorts, not to be redirected for non-health care duties." - Third Monitoring Report of the Medical Consent Decree

#### Leadership structure:

- "The lack of a consistent correctional administrative staff overseeing the jail does not give their overall policy structure the importance it deserves. In fact, due to the frequent movement of jail administrators and line staff between patrol and jail responsibilities, the existence of explicit, current, and audited policies is even more critical for the safe, secure and constitutional operation of the jail. I recommend that a civilian staff member be assigned the responsibility for reviewing and updating all the SCSD jail policies and be assigned that responsibility on an ongoing basis." - Sacramento County Jail, Mentally Ill Prisoners and the Use of Segregation: Recommendations for Policy, Practice, and Resources.
- "Class counsel urges the County to make adjustments such that the Compliance team members remain in their roles for a sufficient period, with professional advancement pathways consistent with the importance of these positions" – Plaintiffs' Counsel.
- "It is essential for the SSO to create a permanent position to handle Consent Decree compliance and oversee the major changes needed. The SSO needs stable leadership to set, engage in long-range planning, report on progress and setbacks, and hold custody staff accountable to the County's legal obligations." – Second Monitoring Report on Restrictive Housing, Discipline, and Classification Practices in the Sacramento County Jails.

#### Sanitation Deficiencies:

- "The County needs to institute a sanitation and disinfection program in all areas of the jails, but with particular attention to the booking and intake area, sobering cell, safety cells and all health care areas of the jail." - Third Monitoring Report of the Medical Consent Decree.
- "Implement a formal policy and procedure for cleaning and disinfecting mattresses between every use." - Environment of Care Report Sacramento County Jails.
- "Store mattresses off of the floor. Clearly separate and label mattresses that have been cleaned, disinfected, and ready for reissue from those that have not yet been cleaned and disinfected after use. As a best practice, dirty and clean mattresses should be stored in physically separate locations." - Environment of Care Report Sacramento County Jails.
- "Food should not be served on the floor. The process for serving food and meals should be immediately evaluated, and ensure that a food service plan is in place that complies with applicable standards, including California Retail Food Code, Chapter 4. General Food Provisions, Article 1 Protection from Contamination, 113980 states that all food shall be protected from dirt, vermin, unnecessary handling, droplet contamination, overhead leakage, or other sources of contamination and FDA Food Code 2017, including 3-302.11(A)(4) stating, "All food shall be protected from contamination by storing the food in packages, covered containers, or wrappings." - Environment of Care Report Sacramento County Jails.

## **FINDINGS**

- FI The passage and implementation of AB109 has resulted in an increase in the inmate population and the length of stay within the County's detention facilities which places an enormous burden on the County to meet the needs of a much larger, more serious, and more violent inmate population.
- F2 New facilities are needed to achieve compliance with the Mays Consent Decree.
- F3 There are continuing ADA and HIPAA violations due to the lack of adequate health-related facilities while projects approved by the BOS are completed.
- F4 There are interim measures that could be implemented at the Main Jail and RCCC to address Mays Consent Decree non-compliance issues while the Annex and interim projects are being designed and constructed.
- F5 There are limited healthcare facilities and staffing in the Main Jail.
- F6 Mandatory rotations in leadership positions at the Main Jail and RCCC have adversely impacted the County's ability to meet the requirements in a timely fashion.
- F7 The sanitation of the Main Jail and RCCC is substandard, and there are inadequate written procedures in place to ensure cleaning is effective.
- F8 The Sheriff's Department and the County BOS have not acted upon key recommendations by consultants and court-mandated experts to address non-compliance issues.

## **RECOMMENDATIONS**

- R1 The BOS should approve the funding for the design and construction of the Annex by July 1, 2024.
- R2 The BOS should approve the funding for the design and construction of the two interim measures by July 1, 2024.
- R3 The SSD, in collaboration with the County, should increase the number of intake stations by at least three to reduce overcrowding in the booking area by December 31, 2023.
- R4 The SSD, in collaboration with the County, should install temporary trailer(s) located in the enclosed Main Jail parking garage to reduce continuing HIPAA and ADA violations and allow for increased acute treatment and diagnostic (lab and basic imaging) capability by December 31, 2023.
- R5 The BOS should rapidly fund and implement the construction of an additional 18 mental health treatment rooms in the Main Jail by December 31, 2023.



- R6 The SSD and the BOS should quantify the costs of unnecessary send outs and redirect these funds to pay for the improved interim facilities by July 1, 2024.
- R7 As long as the requirement of the Mays Consent Decree remain in place, the SSD should create a non-rotating executive leadership position (non-sworn) to oversee the Mays Consent Decree compliance at the Main Jail and RCCC.
- R8 The BOS and SSD should develop and implement a sanitation and disinfection program at the Main Jail and RCCC in accordance with the recommendations of the EOC report by March 31, 2024.

### **REQUIRED RESPONSES**

Pursuant to Penal Code sections 933(c) and 933.05, the grand jury requests responses as follows:

From the following governing body of a public agency within 90 days:

Sacramento County Board of Supervisors  
700 H Street, Suite 2450  
Sacramento, CA 95814

From the following elected county official within 60 days:

Jim Cooper, Sheriff  
Sacramento County Sheriff's Department  
4500 Orange Grove Avenue  
Sacramento, CA 95841

**Mail or deliver a hard copy response to:**

The Honorable Michael Bowman  
Presiding Judge  
Sacramento County Superior Court  
720 9th St.  
Sacramento. CA 95814

**Please email a copy of this response to:**

Ms. Erendira Tapia-Bouthillier  
Sacramento County Grand Jury Coordinator  
*Email: [TapiaE@saccourt.ca.gov](mailto:TapiaE@saccourt.ca.gov)*

### **INVITED RESPONSES**

Eric Jones, Deputy County Executive  
Sacramento County Public Safety & Justice  
700 H Street, Room 7650  
Sacramento, CA 95814

Chevon Kothari, Deputy County Executive  
Sacramento County Social Services  
700 H Street, Room 7650  
Sacramento, CA 95814



**2022 – 2023 Grand Jury of Sacramento County**

## **2023 Grand Jury Addresses Support for Homeless**

As the 2022-23 Sacramento County Grand Jury reviewed its investigative possibilities for the year, the issue of homelessness — which has ballooned 253% in the County the past five years — compelled their attention, as it has with Grand Juries in previous years. Nearly 10,000 men, women, and children are unhoused in the County every night, and data shows that 50-80% of all homeless men and women suffer from mental illness and/or substance use.

The Grand Jury focused on two major aspects of the homeless crisis: (1) lack of coordinated and cooperative local leadership in the effort to reduce the impact of homelessness, and (2) the mental health and substance abuse issues that cripple the homeless community.

The first set of recommendations addresses the coordinated planning and accountability needed on the part of the County and its incorporated cities. The second set of recommendations deals with the implementation processes to address the homeless problem.

The first report: “Homeless Should Not Mean Hopeless,” discusses the need to create collaborative and comprehensive governance solutions to a problem shared by Sacramento County and its seven incorporated cities. There is a desperate need for a County-wide solution. This report recommends the creation of a Joint Powers Authority (JPA), with budgetary and implementation authority, which would consist of elected officials from the County and the seven incorporated cities. The JPA would develop and manage a County-wide strategic plan to address homelessness.

The second report, “Mental Health Care for the Homeless - Who Cares?” focuses on the need for accountability and strategic planning among County decision makers to effectively address mental illness and substance use within the homeless community. Coordination of mental health and substance use services is imperative to ensure collaboration and prevent duplication. It is also imperative that the accountability processes include outcome measures and transparency that demonstrate movement toward a solution to the homeless problem.

A new Deputy County Executive position should be created to lead the strategic planning and implementation of a comprehensive, collaborative program focused on the homeless crisis, especially for those who suffer from mental illness and substance abuse.

The fragmented system of homeless services in the County fails to serve the homeless and their mental health and substance abuse challenges. Sacramento County community and its taxpayers should receive a detailed accounting of budget expenditures which emphasize coordination of mental health efforts and address gaps in services for our homeless.

The Grand Jury encourages you to read both homeless reports below, as well as the Grand Jury’s other reports issued throughout 2022-2023.



**2022-2023 GRAND JURY**



HOMELESS SHOULD NOT MEAN HOPELESS:  
HOMELESS SOLUTIONS ELUDE LOCAL LEADERS  
INVESTIGATIVE REPORT - 2022-2023 SACRAMENTO COUNTY GRAND JURY

## Homeless Should Not Mean Hopeless

### SUMMARY

Nearly 10,000 unhoused men, women, and children sleep on Sacramento County streets every night. Families crammed into thread-bare tents, doubled up in the broken backseats of aging cars, huddled on sidewalks in front of local stores, state office buildings, and neighborhood churches.

The numbers skyrocket year after year and local government has failed to respond effectively. This occurs despite spending more than \$300 million on homeless services over that period. That price tag does not include the enormous cost of law enforcement, public health, sanitation, lost commerce, or the impact on the quality of life of in Sacramento County and its seven incorporated communities.

This is an endless loop of failure. Leaders in Sacramento County must prioritize a more effective regional approach to solve the burgeoning homelessness problem.

County and city leaders must band together to form a comprehensive homelessness strategy. Too often, jurisdictions work independently or informally together, spend hundreds of millions of dollars, and they fail. The current Grand Jury saw a need to revisit this idea and investigate the feasibility and effectiveness of a comprehensive organizational model.

## BACKGROUND

The 2022-2023 Sacramento County Grand Jury (SCGJ) initiated an investigation into the strategies, programs, and working relationships between the County and the seven incorporated cities (Sacramento, Rancho Cordova, Elk Grove, Citrus Heights, Galt, Isleton, and Folsom) as they sought solutions to the homelessness problem. In 2017, the homeless population Point in Time Count (PIT) was 3,665 persons. In 2019, it was 5,570; in 2022, it rose to 9,278, a 253% increase in five years.

Local leaders interviewed by the Grand Jury agreed these counts are understated. In addition, deaths among the homeless population have also risen to record levels.

Most funding for homeless programs resides with the County, but the cities experience most of the impact.

In December 2010, the County Board of Supervisors (BOS) and the Sacramento City Council each passed a resolution to form a Joint Powers Authority (JPA) intended to resolve homelessness. A JPA is an organizational model to coordinate homelessness efforts among governments. No JPA was established.

In March 2011, the BOS and the Sacramento City Council passed a resolution to endorse Sacramento Steps Forward (SSF) as a new agency to monitor and coordinate homeless programs throughout Sacramento County. This decision outsourced the management of the homeless problem and abandoned the JPA idea. The SSF Board does not have any elected officials from either the BOS or the City Councils of any of the seven cities. The governance of SSF and the plans it develops lack accountability and effectiveness to respond to community needs.

Twelve years later, the problem has worsened drastically. Despite repeated efforts among elected officials and staff throughout the region to meet and discuss the issue, there is no effective regional authority to implement decisions. Media reports in 2022 continuously pointed this out. Jurisdictions work in silos to seek solutions within their borders with no real plan for this shared problem.

In November 2022, Sacramento City voters passed Measure O which requires "the City and County of Sacramento to approve a legally-binding partnership agreement" that "would improve the homelessness crisis." The City and County adopted the agreement in December 2022. The agreement represents small steps to address the issue of the homeless on City sidewalks and impact the surrounding community. The agreement does not provide a comprehensive strategy. It fails to include the other six cities or entities such as schools, public transportation, and services agencies impacted by homelessness.





Homelessness is a regional problem that requires a regional solution. A new plan must include all seven cities and the County. The 2018-2019 SCGJ recommended a new or restructured governing authority led by elected officials directly accountable to all citizens of the County. This approach has been successful in other regions of California as will be shown below.

## **METHODOLOGY**

In its investigation, the 2022-2023 SCGJ reviewed numerous documents and conducted interviews:

Documents:

1. Previous Grand Jury reports provided information on narrowly focused efforts addressing narrow aspects while assessing the effectiveness of specific strategies.
2. Media reports on ballot measures and the status of inter-agency cooperation.
3. Correspondence and documentation received from city, county, and agency leadership.
4. Website policy review and assessment for the County and the cities of Sacramento, Rancho Cordova, and Elk Grove.
5. BOS and various City Council meeting agendas, board meeting agenda packets, and board meeting minutes and recordings.
6. Annual reports and PIT counts from relevant agencies in California.
7. Existing ordinances and agreements among governing jurisdictions in the County regarding homelessness.
8. State Assembly bills and State Senate bills.
9. The investigation focused on three cities (Sacramento, Elk Grove, and Rancho Cordova) and Sacramento County.

Interviews:

1. Thirteen individuals in leadership and policy positions in conjunction with a review of materials they provided.

Observation:

1. Members of the Grand Jury, like other citizens of the County, witnessed the ever-increasing population of homeless living on our streets, in parks, on sidewalks, and in other open areas.

## **DISCUSSION**

### A Common Refrain

A common theme emerged from the SCGJ interviews with county, city, and non-profit leaders regarding the explosion in the number of homeless in Sacramento County. All believed their organization's efforts were successful, but expressed frustration with the lack of coordination with other jurisdictions. The SCGJ fails to understand why these leaders believe their organizations are successful while the homeless population has tripled in the last five years.

Previous SCGJ reports on homelessness have addressed the lack of coordination and the need for a comprehensive strategy. This will be the fourth SCGJ in the past seven years to recommend the County and cities develop a county-wide approach to homelessness. Findings were made, and recommendations were provided:

- The 2015-2016 SCGJ focused on a comprehensive plan not limited to Housing First (HF).
- The 2016-2017 SCGJ affirmed the issue of insufficient affordable housing in the County and recommended additional coordination to address the issue.
- The 2018-2019 SCGJ elaborated further on the extent of the challenge, the increase in the number of homeless, and some of the underlying causes. The Grand Jury identified the entities within the County involved in efforts to reduce homelessness. It was again emphasized there was a lack of an organizational model to coordinate efforts. The sole recommendation from this SCGJ was for the County to identify and implement a different model. A Joint Power Authority was suggested as a feasible approach.

### Different Cities Face Vastly Different Challenges

Rancho Cordova has a unique challenge with its proximity to the American River Parkway. The Parkway is managed and policed by Sacramento County; any homeless enforcement or policy change impacts Rancho Cordova. In one example, the County removed a homeless camp only to have it reappear in other parts of Rancho Cordova. There is no governance structure to ensure a cooperative approach.

Elk Grove City leaders describe ongoing efforts to incentivize affordable housing and push developers to expand affordable housing as a part of an overall City plan. Such plan was rejected by the City which recently led the State Attorney General to warn Elk Grove of the need to follow through and expand the plan. Elk Grove is fortunate enough to have sufficient funds and staffing to understand and manage its homeless population, a fact for which city leaders are rightfully proud. Most of the other cities in the County do not have this enviable level of resources.

### Sacramento Steps Forward (SSF) and Sacramento Housing and Redevelopment Agency (SHRA).

In 2010-2011, Sacramento County faced extreme economic fallout following the 2008 financial crisis. Tax resources dwindled, housing prices shrank, and homes were abandoned. This created a financial shortfall for the County. In response, the County outsourced the coordination of homeless services to SSF.

SSF is the designated lead agency for the federally-regulated Continuum of Care (COC). SSF uses real-time data, PIT counts, and analytics to develop best practices and recommendations to help enhance programs and services to address homelessness. SSF has the data but no authority to direct or implement solutions. There are no elected officials on the SSF board, so there is no accountability among governmental jurisdictions to propose or implement solutions.

SHRA is a Joint Powers Agency whose members include the City of Sacramento, the City Housing Authority, the County of Sacramento, and the County Housing Authority. None of the other cities are represented on the board. Representatives of each of these agencies sit on the SHRA Board. SHRA has an inventory of thousands of residential units throughout the County. Local leaders and key staff members from the cities of Sacramento, Rancho Cordova and Elk Grove expressed frustration with SHRA's extensive requirements to fund new projects that limit local leadership's access to SHRA's housing inventory. Some interviewees stated SHRA's requirements hindered new housing development and did not support a comprehensive response to homelessness. SHRA's mission is to deliver fully operational projects with complete "wrap-around services" to meet the needs of the potential occupants. These requirements are seen as too restrictive by the civic leaders because it often takes years of planning to develop this level of service.

### Measure O

Measure O provides conditional enforcement against camping in city limits, allows citizens to bring an action for damages against the City, and limits the City's annual financial support for that measure to \$5 million.



Measure O only supports the City of Sacramento. Other cities within Sacramento County have concerns and fear the problem may be pushed to less affluent and more diverse neighborhoods due to the enforcement of the new encampment regulations.

None of the requirements in Measure O were to take effect until the City of Sacramento and the County completed and adopted a legally-binding Partnership Agreement on the roles and responsibilities of each.

### City and County Partnership Agreement

On December 6, 2022, the County and the City of Sacramento approved the Homeless Services Partnership Agreement. It emphasized jurisdictions would work together to decrease the homeless population. This Partnership Agreement is designed to improve coordination and increase services and programs to meet the unhoused needs and move individuals out of homelessness in the City and the unincorporated of the County.

- The County will place all shelter beds into the upcoming Coordinated Access System; some beds may be prioritized based on population served or geography.
- The County is opening 200 new shelter beds within 12 months and an additional 200 beds within 36 months in the unincorporated County (County Funded).
- The County will operate 200 additional shelter beds in the City jurisdiction, provided the City provides a shovel-ready site (County/City funded).

### A Case of Supply and Demand

Real estate prices in Sacramento County, as well as homelessness data provided by SSF, show a severe lack of affordable housing in the County. Many of those interviewed acknowledged this

as a primary driver of initial homelessness. Housing costs in Sacramento County nearly doubled over the past decade. Homelessness has inevitably followed.



Sacramento has more unsheltered people than the entire state of New York. The majority of homeless in New York state live in transitional housing or emergency shelters. In Sacramento, the opposite is true—the majority sleep in tents, cars, and doorways.

A lack of housing can be fatal. Homeless deaths from hypothermia

are rising. Eight homeless people died in Sacramento County in the unhoused community due to hypothermia in 2021. More recently, two individuals have died from hypothermia, a 74-year-old man and a 66-year-old woman. Analysis of deaths within the homeless community indicates underlying medical conditions can shorten the life of a homeless individual by up to a one-third when compared to the general population.



### Best Practices and Successful Models for Homelessness

The SCGJ studied other California counties that successfully coordinated efforts to address the homeless issue. They have formed JPAs through legislation to develop housing trusts. All of these JPAs use a governing board comprised of elected officials from each jurisdiction. This is a critical model of successful JPAs. These efforts reflect the best practices and solutions to homelessness as demonstrated by reductions in the PIT counts.

### Solano County

In July 1999, the Solano County Board of Supervisors established a JPA: the Community Action Partnership of Solano County (CAP Solano). This JPA commissioned the development of a five-year regional plan that includes all jurisdictions of Solano County. The plan included a strategic process which defines measurable outcomes as a key element. The plan discusses strengths, weaknesses, funding, impacts, and opportunities for better homeless outcomes.

CAP Solano is a governmental agency coordinating efforts across Solano County to reduce homelessness. The decision to develop a regional strategic plan was made by the jurisdictions that realized a regional approach was necessary in order to respond effectively to homelessness.

Solano County is much like Sacramento County in several respects. It consists of seven incorporated cities within the County. The square miles, geography, and climate are similar. The total population of Solano County is about one-third of that of Sacramento County, but the percentage of homeless per capita is about one-half of that of Sacramento's. CAP Solano has



been updated to ensure each of the seats on the Board will be an elected official from each jurisdiction. This change created a high level of accountability among leaders.

Solano County 2022 PIT count showed 1.3% reduction in unhoused citizens. During this same period the Sacramento County PIT count showed a 66% increase in unhoused citizens.

### Riverside County

Riverside County is significantly larger yet similar to Sacramento County. Its larger population and incorporated cities resulted in a 35% increase in homeless in the last four years since 2018. Riverside County presented and authored AB 687 in July 2021.

AB 687 was introduced to develop a JPA, the Riverside County Housing Finance Trust. The Bill authorizes the creation of the Western Riverside County Regional Housing Trust (Trust), a JPA, to fund housing specifically to assist the homeless population and persons and families of extremely low, very low, and low income within the County of Riverside. The Trust helps to create housing opportunities as defined in the Health and Safety Code. The Trust may receive funding from public and private sources and has the ability to authorize and issue bonds. A separate Board of Directors governs the Trust, comprised of elected officials representing the County of Riverside and cities within the County, The Bill passed both the Assembly and Senate Floors in July 2021. The Governor signed it into law in July 2021.

Riverside County 2022 PIT count showed an 8% reduction in unhoused citizens. During this same period, the Sacramento County PIT count showed a 66% increase in unhoused citizens.

### San Gabriel Valley Regional Housing Trust

SB 751 authorized the creation of the San Gabriel Valley Regional Housing Trust (SGVRHT) as a JPA among several cities throughout the San Gabriel Valley. According to the SGVRHT, the Trust received \$1 million in matching grant funds from the Local Housing Trust Fund program for construction of 71 affordable housing units in the cities of Claremont and Pomona scheduled for completion in 2022. This Trust is in the very early stages of implementation and it is reasonable to expect it will see improvements in outcomes as the organization matures, similar to the experience of Solano County and Riverside County.

San Gabriel Valley 2022 PIT count showed a 2% increase in unhoused citizens. During this same period the Sacramento County PIT count showed a 66% increase in unhoused citizens.

### Orange County

AB 448 authorized the creation of Orange County Housing Finance Trust (OCHFT), which is a JPA among the County of Orange and cities in the County. To date, 23 of the 34 cities in the County are members of the JPA. The JPA duplicated much of the affordable housing goals and language found in the other Southern California JPAs, but without direct tax funding mechanisms. The OCHFT and its members plan to create 2,700 permanent supportive housing and affordable housing units by June 30, 2025. As of January 2022, OCHFT began construction of 1,676 units, with another 961 awaiting sufficient funding. OCHFT funded these units by

leveraging matching grant funds from the state's Local Housing Trust Fund (LHTF) program to issue deferred payment loans to developers.

Orange County 2022 PIT count showed a 28% decrease in unhoused citizens. During this same period the Sacramento County PIT count showed a 66% increase in unhoused citizens.

### Burbank, Glendale, and Pasadena

SB 1177 created the Burbank, Glendale, and Pasadena Regional Housing Trust (RHT) to fund the planning and construction of housing for the region's homeless and low-income people and families. The bill establishes a board of directors and governing structure for the RHT. Its governing agreement requires maximum transparency concerning public funds administered by the RHT.

The combined 2022 PIT count for Burbank, Glendale, and Pasadena showed a 10% increase in unhoused citizens. During this same period the Sacramento County PIT count showed a 66% increase in unhoused citizens.

### Housing Trusts

The Legislature supported the counties and created the Trusts to fund housing development for homeless and low-income individuals and families. Local governments can follow these best practices by creating JPAs for a housing trust without state approval. Several bills over the last few years have provided examples for these JPAs governed by elected officials. Although these housing trusts are focused on housing, they represent a first step in the process to develop and implement county-wide coordinated homeless services.

## **FINDINGS**

- F1 There is no cooperative, collaborative, and coordinated effort among all eight governments in the County to create comprehensive solutions to this shared problem.
- F2 The problem of homelessness in Sacramento County has drastically worsened over the past five years, as demonstrated by the dramatic increases in Point in Time counts.
- F3 A lack of affordable housing is the primary cause of homelessness and the most difficult one to solve due to the high cost of new development.
- F4 Sacramento Steps Forward does not have any elected leaders on its Board and lacks decision-making authority over the eight governmental jurisdictions in the County, making it powerless to implement needed changes.
- F5 The legally binding agreement mandated by Measure O and the Partnership Agreement is a step in the right direction, but it applies only to the City and County of Sacramento.

## RECOMMENDATIONS

- R1 The 2022-2023 Sacramento County Grand Jury recommends that the County and the seven incorporated cities implement a Joint Powers Authority (JPA) to address homelessness by December 1, 2023.
- R2 The newly formed JPA should be governed by elected officials who are directly accountable to citizens of the County.
- R3 The Joint Powers Authority should develop and manage a comprehensive County-wide strategic plan to address homelessness by July 1, 2024.
- R4 The County/City Partnership Agreement should be used as a model for the other six cities as an interim measure pending the creation of a Joint Powers Authority.

## REQUIRED RESPONSES

Pursuant to Penal Code sections 933(c) and 933.05, the grand jury requests responses as follows:

From the following governing bodies of a public agency within 90 days:

Sacramento County Board of Supervisors  
700 H Street, Suite 2450  
Sacramento, CA 95814

Rancho Cordova City Council  
2729 Prospect Park Drive  
Rancho Cordova, CA 95670

Sacramento City Council  
915 I Street  
Sacramento, CA 95814

Elk Grove City Council  
8401 Laguna Palms Way  
Elk Grove, CA 95758

### Mail or deliver a hard copy response to:

The Honorable Michael Bowman  
Presiding Judge  
Sacramento County Superior Court  
720 9th St.  
Sacramento, CA 95814

### Please email a copy of this response to:

Ms. Erendira Tapia-Bouthillier  
Sacramento County Grand Jury Coordinator  
*Email: [TapiaE@saccourt.ca.gov](mailto:TapiaE@saccourt.ca.gov)*

## INVITED RESPONSES

Darrell Steinberg, Mayor  
City of Sacramento  
915 I St., 5th Floor  
Sacramento, CA 95814

Linda Budge, Mayor  
City of Rancho Cordova  
2729 Prospect Park Drive  
Rancho Cordova, CA 95670

Bobbie Singh-Allen, Mayor  
City of Elk Grove  
8401 Laguna Palms Way  
Elk Grove, CA 95758

Mr. Phil Serna, Supervisor  
District 1  
Sacramento County Board of Supervisors  
700 H Street, Suite 2450  
Sacramento, CA 95814

Mr. Patrick Kennedy, Supervisor  
District 2  
Sacramento County Board of Supervisors  
700 H Street, Suite 2450  
Sacramento, CA 95814

Mr. Rich Desmond, Supervisor  
District 3  
Sacramento County Board of Supervisors  
700 H Street, Suite 2450  
Sacramento, CA 95814

Ms. Sue Frost, Supervisor  
District 4  
Sacramento County Board of Supervisors  
700 H Street, Suite 2450  
Sacramento, CA 95814

Mr. Pat Hume, Supervisor  
District 5  
Sacramento County Board of Supervisors  
700 H Street, Suite 2450  
Sacramento, CA 95814

Ms. Ann Edwards, County Executive  
Sacramento County  
700 H Street, Room 7650  
Sacramento, CA 95814

Mr. Howard Chan, City Manager  
City of Sacramento  
915 I Street  
Sacramento, CA 95814

Mr. Jason Behrmann, City Manager  
City of Elk Grove  
8401 Laguna Palms Way  
Elk Grove, CA 95758

Ms. Porsche Middleton, Mayor  
City of Citrus Heights  
6237 Fountain Square Dr.  
Citrus Heights, CA 95621

Mr. Christopher W. Boyd, City Manager  
City of Citrus Heights  
6360 Fountain Square Drive  
Citrus Heights, CA 95621

Ms. Rosario Rodriguez, Mayor  
City of Folsom  
50 Natoma St.  
Folsom, CA 95630

Ms. Elaine Andersen, City Manager  
City of Folsom  
50 Natoma St.  
Folsom, CA 95630

Mr. Jay Vandenburg, Mayor  
City of Galt  
380 Civic Drive  
Galt, CA 95632

Mr. Lorenzo Hines Jr., City Manager  
City of Galt  
380 Civic Drive  
Galt, CA 95632

Mr. Micah Runner, City Manager  
City of Rancho Cordova  
2729 Prospect Park Drive  
Rancho Cordova CA 95670

Ms. Pamela Bulahan, Mayor  
City of Isleton  
101 Second Street  
Isleton, CA 95641

Mr. Charles Bergson, City Manager  
City of Isleton  
101 Second Street  
Isleton, CA 95641



**Grand Jury  
Investigative Report**

**MENTAL HEALTH  
CARE FOR THE  
HOMELESS: WHO  
CARES?**

**MENTAL HEALTH CARE FOR THE HOMELESS: WHO CARES?**

**SUMMARY**

Drive down dozens of busy thoroughfares in Sacramento County, and you can't miss them.

Men and women, exhausted and defeated, huddled on curbs or jammed into makeshift encampments.

With no home and no immediate future, many numb that jarring reality with drugs or drift toward psychosis.

There are the mothers who hide among the bushes or in neglected cars, shielding their children from the angry streets. To stay awake at night some of these moms ingest methamphetamines, to protect their children who sleep awkwardly in crowded back seats.

Homelessness in Sacramento County has ballooned 253% in the last five years — some experts even contend that number is far too conservative. Among the nearly 10,000 men and women who sleep on the streets each night, between 50% - 80% suffer from a mental illness and/or substance abuse.

Who are these homeless people relentlessly tormented by mental illness or drug abuse? How do we fix this epidemic among our unhoused men and women?

The County of Sacramento, aided by funding from local, state, and federal sources, holds the major responsibility for the treatment of the homeless mentally ill and drug abusers.

The 2022-23 Sacramento County Grand Jury, after a months-long investigation, found the County’s overall strategy to tackle this responsibility largely ineffective, scattered, and wanting better leadership. Despite millions of dollars, multiple programs, and an almost endless array of boards and commissions, mental illness and substance abuse among the homeless continues to proliferate.

Instead of meaningful progress, the Grand Jury’s investigation observed political infighting among County and City of Sacramento officials, minimal coordination, and very few measurable goals and outcomes. Most glaring of all, the Grand Jury noted the absence of a comprehensive, collaborative strategic plan among the County and its seven incorporated cities to reduce homelessness and treat the mental illness and substance abuse that abounds within the Countywide homeless community.

As its investigation into homeless mental health and substance abuse unfolded, the Grand Jury realized that any findings and recommendations needed to encompass the entire system of service delivery. The system includes the stakeholders, the quality of mental health care and substance abuse programs, housing, resources and program coordination. Other critical considerations include the strategy, metrics and goals, communication, transparent access to reporting of funds and expenses, and accountability. Without such a focus, no significant improvement can be realized because successful service delivery is dependent on each part of the system flourishing together.

As the Grand Jury proceeded with its investigation, it was reminded of a favorite quote often used by the late, great UCLA basketball coach, John Wooden: “Never mistake activity for achievement.” Just because dollars are flowing, boards are meeting, and new policies are being introduced doesn’t guarantee substantive progress is being made.

When it comes to the battle to conquer mental illness and substance abuse among the homeless, the County is clearly “active.” Lots of meetings. Lots of plans. Lots of public concern. Real achievement, however and unfortunately, remains an illusion.



## **METHODOLOGY**

The Grand Jury spent many hours reviewing documents, searching for helpful data, interviewing people, and visiting locations.

Documents – more than one hundred were reviewed:

Difficult searches for Information on the County web site, often without finding what should be available.

- Media articles (Opinion pieces used only when facts could be verified.).
- Web searches for information on how others in the country are addressing these issues.
- Fifty-three links to information provided by various entities.

Interviews – 22 in all:

- Elected officials.
- County department leaders and staff.
- Administrators of nonprofit entities.
- Law enforcement.
- Clinicians who provide care.
- Outreach staff.

Direct Observation - through site visits that included:

- Full-Service Partnership site.
- Community Outreach Recovery Empowerment (CORE) site.
- Sobering center.
- Homeless encampment.

## **INTRODUCTION**

The road to homelessness is filled with variables and yet is remarkably consistent but complicated. To understand the mental health and substance abuse crisis in the homeless, we must recognize their journey from stability to homelessness is a multi-step process including:

- Living paycheck to paycheck.
- The loss of a job.
- Inability to pay bills.
- Reliance on food banks, etc.
- Repossession of the car.
- Electricity and gas shut down.
- Finally: eviction.

These experiences don't necessarily occur in this order, but they are remarkably consistent events in the life of a person forced to live on the street. Most of these losses are often accelerated by alcohol and/or substance abuse and some mental health impairment.

Mental health and substance abuse are huge factors in the homeless dynamic. Between 50-80% of the homeless are faced with one or both issues. The most common afflictions are post-traumatic stress disorder (PTSD), depression, anxiety, and a small number with psychosis.

Appropriate mental health treatment for the homeless requires a roof where a substance free stable environment can be assured and proficient mental health treatment can be provided. Government rules and regulations that restrict the ability to provide that roof have not resulted in a decrease in homelessness.

Often overlooked to successfully address mental health and substance abuse issues are issues, seemingly unrelated but directly contribute to these problems. The City, and the County in particular, have made several decisions that have made the problems worse. Some glaring examples include:

- The large inventory of multiple trailers and tiny homes sitting vacant.
- The recent attempt to close the Miller Park encampment despite its success in providing basic services and getting people off the sidewalks.
- The closing of the Bannon Island camp near Discovery Park, where elderly homeless were displaced without alternative housing.

The Grand Jury began its investigation with a narrow focus on mental health issues. The relationship between mental illness and substance abuse became clear as the investigation progressed. It is apparent that government action - or inaction - has had a broad impact. The homeless population has increased along with mental health and substance abuse problems. Only treating those who are ill is not enough.

## **DISCUSSION**

### Stakeholder Engagement

Simply put, there are too many boards, committees and subcommittees that are stakeholders in the Sacramento County arena. Community leaders meet while the people living on the street wait. While they wait, their problems worsen. There are more tents on the sidewalks, higher rates of mental illness and drug use, and increased numbers of the homeless, especially women and children.

There are too many stakeholders presumably trying to solve the mental health and substance abuse crisis among the homeless. The Grand Jury identified at least 30 boards, committees, agencies, and entities with hundreds of individuals that include staff, elected officials' appointees and volunteers.

Most entities have members that are elected officials or their appointees. Lots of boards, lots of committees, lots of staff – more mentally ill and/or drug addicted homeless men and women. The problem is worse.

The most important stakeholder? The homeless themselves. There have been many who participate in planning who say they speak for the homeless. The Grand Jury investigation could



not find any actual homeless people who were provided with a way to give formal feedback about how they got there and what it would take to get them back home.

### Strategy

A Homeless Action Plan was developed by the former Department of Homeless Services and Sacramento Steps Forward (SSF) and approved by the Sacramento County Board of Supervisors (BOS) in 2018 with total funding of \$7.8 million over 4 years.

A Gaps Analysis with a strategic plan proposed by SSF and the Continuum of Care (CoC) Board was approved by the Sacramento County Board of Supervisors (BOS) on June 28, 2022.

There were few people interviewed during the investigation that had any knowledge of the existence of these plans or of the specific strategies they contained. The plans emphasize their check-in with stakeholders in the community. Few of them were aware of these plans or their role in implementation. Nearly all of those interviewed were supportive of a comprehensive plan to address these issues.

There is a perception by those who participate in the multiple advisory boards established by the County, some mandated by state or federal government, that they only serve as a stamp of approval for whatever the County and its contracted entities propose. This perception, as opposed to a ground-up involvement in the development of strategies by the various entities represented on these boards and committees, is disheartening to community participants.

Fragmentation of efforts occurs as multiple entities pursue the same strategies, redundantly using up precious resources. There are many dedicated, selfless people who work hard to make a difference. They include most of those who are employed or volunteer in the organizations listed above. They are working hard yet not achieving positive County wide measurable results.

There are models of successful strategic plans that provide care to the homeless in California and across the nation. There is no need to start from scratch.

The California State Association of Counties recently published a template for homeless strategic planning. These include the City of Riverside in California and San Antonio in Texas. They all have a process to bring together essential stakeholders to determine and coordinate the best strategies and tactics to tackle these problems.

Lack of stakeholder engagement in strategic planning results in poor accountability and inability to achieve goals.

A recent meeting of several stakeholders resulted in the announcement of aggressive outcome goals for homeless programs. These goals are laudable but fall short of the creation of a strategic plan with the resources to implement. Perhaps these actions are a sign of real progress.

### Quality of Mental Health Care, Substance Abuse Programs, and Housing

Between 50% and 80% of homeless people have mental health conditions and/or substance abuse issues. “People experiencing homelessness die on average at age 50 years – 27 years

sooner than the average person in the US,” according to an article in the Journal of the American Medical Association.

### Tracking Progress

It is extremely difficult to assess the quality of mental health care that is provided to the homeless. The simple reason - it is not tracked in Sacramento County.

Process measures are used to assure that certain tasks are accomplished in the process of care, while outcome measures are used to determine if the care provided was effective.

County Behavioral Health Services (BHS) monitors process issues in mental health treatment programs. These measures are not tracked by homeless versus other clients. This is also true for the Sacramento County Mental Health Center (SCMHC), the facility for acute inpatient mental health care.

There are few if any outcome measures for mental health treatment being monitored by the County, either for care provided by the County or for care provided by contracted nonprofit provider organizations. There is no determination specifically for the homeless.

The lack of outcomes data, especially for the homeless, does not allow for an assessment of effectiveness. In several interviews, it was pointed out that treatment for substance abuse is hindered unless the client is in a substance free environment. Very few of the housing programs have this requirement, and many specifically prohibit a requirement for a clean and sober environment as a qualifying criterion for housing support funding.

### Care Delivery:

The County is responsible for all the mental health care and substance abuse treatment provided to County residents. This excludes those with private health insurance who must seek care with their health plan. Patients eligible for County benefits with mental health diagnoses categorized as mild or moderate receive treatment from contracted provider organizations or Medi-Cal Managed Care Plans. The County provides direct care to those with a diagnosis of severe and/or acute mental health issues when patients are at risk to harm themselves or others.

The services provided by the contracted provider organizations include program navigation, administrative assistance, and treatment for mental health and substance abuse issues.

County Homeless Engagement and Response Teams (HEART) and Sacramento Police Department IMPACT Teams, homeless outreach teams in the County and City, respectively, have been established to personally engage with those living in encampments and shelters. The teams consist of a navigator, mental health professional, peer counselor, and support staff. They do their best to provide services where the homeless reside. The HEART teams have been hampered by lack of coordination and communication with other agencies, especially law enforcement. The HEART teams are not fully staffed. The plan is for five HEART teams, but progress is slow. The current IMPACT team has difficulty in meeting the needs of those they engage.

The outreach teams are directed by the program administrator to go where the need is greatest. The Grand Jury discovered that elected officials, at times, direct the activities of the outreach teams based on constituent demands and complaints. This is despite the acute need for outreach team services in other locations.

An important feature of any mental health system is the ability to obtain an appointment in a reasonable time period. This is especially true for those with mental health challenges who are homeless. Our investigation shows that often, after intensive efforts by outreach teams to gain trust and for a person to commit to engagement with treatment, the time until appointment exceeds two weeks, and many times up to a month or more. During this interval, the commitment to engagement by the client often wanes, and the commitment to seek an appointment vanishes. An opportunity is lost.

The County has approved and is proceeding with the construction of the County Mental Health Rehabilitation Center, a step-down facility, with 64 beds, in addition to 30 acute mental health inpatient beds at SCMHC. This falls far short of the estimated need by the County for 251 such beds, documented in a RAND study in 2022. The County closing of multiple acute mental health beds in the past has had dire consequences for access to appropriate care by those most in need.

#### Administrative Barriers:

While this report focuses on mental health care and substance abuse for the homeless, housing is an important factor. An additional barrier to better mental health and substance abuse outcomes is the housing application process. Clients may be required to go to DMV to obtain a valid ID, but they have no transportation. They must document a permanent address they don't have, produce a birth certificate, and obtain other documents that may be required, but which are frequently lost in the decline to homelessness. Another obstacle may be the battle to escape an eviction history. They must leave their belongings and go to various locations to build this paper foundation, risking loss or destruction of what few things they possess. All of this prolongs the time they remain homeless, and increases the risk they will remain so.

#### Coordination of Resources and Programs

In the face of a raging mental health crisis among the homeless population in Sacramento County, no accountable party has emerged to coordinate the abundance of resources available to County decision-makers. Minimal, if any, collaboration exists among County leaders, employees, or providers.

With millions of dollars available to manage the momentous task of appropriate treatment for mentally ill homeless men and women or those locked in the desperate jaws of substance abuse, the County's approach seems clumsy and inefficient. As the crisis proliferates, the County's public response fails to match its intensity.

Providers of clean-and-sober transitional housing can provide documentation of successful programs but are denied state and federal funding while the county does little to support their

efforts. The County Mental Health Board (MHB), charged with the review and evaluation of the County's mental health needs, do not have their recommendations acted upon directly by the Board of Supervisors. This uncoordinated approach fails to produce meaningful results.

Funds from the state's Homeless Housing and Assistance Prevention 3 (HHAP-3) program are not transparently allocated for services and are not tied to best performance or outcomes. Funds from the Mental Health Services Act (MHSA) are governed by a separate board that rarely communicates with the MHB or the CoC. Hospital emergency departments house homeless mental health patients for days — and sometimes weeks — while they wait for mental health bed capacity to open due to a severe shortage of inpatient and step-down unit beds.

Not surprisingly, politics sometimes interferes. Deployment of outreach service teams to homeless encampments are often determined by those elected officials whose constituents complain the loudest rather than where the highest need for services reside. Those same outreach teams, whose mission is to earn the trust of the homeless encampment residents, are often undermined when the encampments are targeted for clearing with little or no notice from law enforcement, especially when cleared by the Sacramento County Sheriff's Department.

The County contracts out more than 90-percent of its homeless mental health and substance abuse services, but typically in only one-year time frames. Such short terms create instability in relationships between County employees and providers, and fosters the notion the County is pushing its administrative costs to the providers.

If the adage, "show me your budget, and I'll tell you what you value," is true, the County's general fund budget is not subtle: in the 2022 – 23 County budget, 4.9 -percent of \$529.9 million in funds to support mental health is provided directly by the County.

Think what a difference could be made for the taxpayers, the staff, and the homeless if the money available from all sources was allocated in a way that made the greatest difference to solve the problem. If all these entities could put aside their silo thinking, invest in coordination, relate to each other productively in search of solutions, then they can make a difference in mental health for the homeless.

#### Innovation in Mental Health Services for the Homeless

The homeless have many needs. What will work for some groups may not work for others. This is an expensive undertaking, which cost hundreds of millions of dollars, \$529.9 million for mental health care alone in Fiscal Year (FY) 2022/23. The amount specifically directed to homeless mental health services could not be determined.

Treatment and prevention for mental illness and substance abuse issues are not one-size-fits-all. Many solutions have been tried or are being formulated, such as wrap-around services, outreach services, one stop shops (such as, Community Outreach Recovery Empowerment, known as, CORE), mobile treatment services (treat them where they are), sobering locations, transitional housing, and Housing First.

Innovative programs can be found. For instance, the County has the Crisis Receiving for Behavioral Health (CRBH) referred to as “the crib.” This is a voluntary short-term program that is staffed 24/7 with health care professionals who provide short term recovery and recuperation from the effects of alcohol or drug intoxication. Some are homeless, and this provides a brief respite from the challenges of their lives.

Freedom to innovate helps to address complicated problems. But, innovation is often difficult in bureaucratic organizations. Best practices across the country have been developed and could be applied in Sacramento County. Fostering innovation within and among County entities may provide a way forward for some of the mental health and substance abuse problems associated with homelessness. Organizations that succeed exhibit the courage to innovate.

### Improved Communication Among Agencies and Entities

*“Alone, we can do so little; together we can do so much.”* – Helen Keller.

Successful engagement, enrollment, diagnosis, and provision of homeless mental health and substance abuse services to the homeless will take collaboration and improved communication between law enforcement and the service providers. Law enforcement is responsible for clearing homeless encampments while several different organizations provide outreach and these vital services to the men, women, and children who live in those encampments.

When one agency acts without coordination and collaboration with the other, the unintended consequences can be severe. For example, a service provider was working with unhoused individuals in an encampment and the next day the encampment was notified it was being cleared by law enforcement. This led the unhoused individuals to believe the service provider reported the encampment to law enforcement and the unhoused individuals refused future services. Their trust had been broken. Better communication may have avoided the loss of needed services for this group.

Other examples include the lack of referral to the CRBH by County agencies. As a result, those who are inebriated or high in public, but pose no other threat, are arrested and jailed, which results in increased health risk and high cost of incarceration as opposed to these alternatives.

The paltry rates of referral to the Acute Intake Center at SCMHC is another lost opportunity to manage people with acute mental health and substance abuse with an option besides incarceration to protect the public.

Whether this is lack of communication between service organizations and law enforcement, or by leadership in law enforcement to patrol officers, it is still a lack of communication.

Communication between entities does not occur at a level that influences the allocation of resources. We could find no instance where leadership in the MHB, the CoC, the MHSA Board, BHS, and Law Enforcement, ever met together to plan how to marshal and coordinate resources in support of the homeless to resolve their mental health and substance abuse problems. The same is true, until recently, of the political leadership of the County and other cities in the region.

Communication among County departments responsible for homeless mental health and substance abuse care and to outside agencies was anemic. The people in these roles are passionate and want to make a difference, but they want to do it their way. To break down the silos that exist in this sphere may improve mental health and substance abuse outcomes.

Improved transparency of communication in all facets of the programs to resolve the homeless mental health and substance abuse crisis in Sacramento County is likely to improve the trust of the community in our government to effectively address this issue.

Transparent Access to Reporting of Funds and Expenses

The Grand Jury could not uncover any transparent report that showed where this \$529.9 million was being spent. Instead, this information is embedded in the budget which makes it difficult to determine where the funds are being allocated.

In information provided in the Behavioral Health Services FY 2022-23 Budget Overview, the total Sacramento County mental health funding for FY 2022-23 is \$529.9 million, as shown in the table below. Funding sources for Behavioral Health are available at a high level but there are no reports that show where these millions are being spent.

<b>Behavioral Health Services Budget Overview FY22/23</b>	
Revenue Source	Revenue (Rounded in millions)
Realignment	\$165.2
Medi-Cal	\$139.1
State General Fund	\$7.6
Mental Health Service Act	\$145.8
County General Fund	\$10.9
System Partners and Grants	\$62.6
Total	\$529.9

Sacramento County government websites have little data available that allow taxpayers and decision makers to evaluate efforts to reduce homelessness or to judge the effectiveness and efficiency of mental health and substance abuse programs.

A good example that might be useful to identify specific allocations of funds relating to homeless mental health in other counties, including one being used by Yolo County. The following table specifically illustrates the sources and uses of funds being allocated towards the reduction of homelessness.

Supportive Services \$6,361,075.40 700 Individuals served in CY2020		
Contract	Amount	Funding Source
Yolo County Children's Alliance	\$50,000.00	CESH
Yolo Wayfarer Center (Fourth & Hope)	\$75,000.00	CESH
Yolo Wayfarer Center (Fourth & Hope)	\$82,454.40	CESH Round 2
CommuniCare Health Centers	\$91,099.50	HDAP
City of Davis	\$67,304.35	Pathways to Employment
Interfaith Rotating Winter Shelter	\$11,131.83	HEAP
Resources Independent Living	\$36,521.74	HEAP
Yolo County Children's Alliance	\$41,379.31	HEAP
A1 Protective Services LLC	\$197,142.86	Project Roomkey
Allied Universal Security Services	\$220,000.00	Project Roomkey
CommuniCare Health Centers	\$1,091,172.70	Project Roomkey
Empower Yolo Inc.	\$254,514.00	Project Roomkey
Turning Point Community Programs	\$368,945.74	Project Roomkey

### Metrics and Goals

The Grand Jury could not obtain reporting specific to homeless patients and was unable to identify any specific metrics for homeless service outcomes.

As a standard practice, mental health providers typically submit process metrics as part of the contract management system, and they are well tracked. These reports are robust and are key to maintaining the quality of documentation provided by non-profits with whom the County contracts.

It was less apparent whether such data collected related to services provided by Medi-Cal Managed Care Plans, which provide mild and moderate mental health services to patients for whom the County is required to care.

The accumulation of this kind of outcome data is not a new phenomenon. In 2003, the U. S. Department of Health and Human Services developed core performance measures for homeless data tracking that could be adopted for County planning. These are useful today and easily obtained.

It is essential to specifically define achievable goals on a regular basis that are assessed and updated. Transparency is provided when key metrics are regularly updated and published.

### Accountability

Accountability for the mental health and substance abuse programs in the County homeless population is lacking. While great sums of tax dollars are expended, the results are disappointing when large homeless encampments persist. A high number of homeless have mental health and/or substance abuse issues, and yet, integrated and coordinated treatment remains inadequate.

The County retains control over most mental health funding for the cities and the unincorporated areas of Sacramento County. They contract with many non-profit providers for approximately

90% of these services which makes it difficult to coordinate and focus on results. County programs often work in “silos” and are focused more on process rather than outcomes. Interviews with service providers conducted by the Grand Jury reflected their frustration that they were frequently stymied by the County and other government bureaucracies.

There is also a disconnect among County elected leaders, senior staff and those providing services. There are five co-equal County supervisors vying for political points with city leaders criticizing County inaction, which makes it difficult to hold specific people publicly accountable for results.

Authoritative, focused coordination of the resources of all stakeholders is desperately needed in the administration of mental health and substance abuse homeless programs. Successful administrative models within the County that have implemented this strategy include the Executive Director position of Sacramento Regional Transit and the Deputy County Executive position for Public Safety and Justice.

Under normal conditions, the treatment of mental health and substance abuse issues is extraordinarily difficult, but deeply compounded for the unhoused. More than 50% of the homeless population suffers from mental illness and/or substance abuse.

The following recommendations are not the ultimate solution to the problem. The Grand Jury is hopeful they ideas to improve service delivery and results.

## **FINDINGS:**

- F1:** The current fragmented system of homeless services fails to serve the homeless and their mental health and substance abuse challenges nor the Sacramento County community and its taxpayers.
- F2:** The County lacks a comprehensive strategic plan to include the mental health and substance abuse issues that face the homeless.
- F3:** The current strategic plan, the Homeless Action Plan published by SSF, has not been successful in addressing the mental health and substance abuse needs of the homeless because goals are not quantified, accountability is not assigned, and performance is not monitored.
- F4:** The County does not have a senior executive position that holds budget and policy implementation authority for all homeless services provided in the County, including mental health and substance abuse programs.
- F5:** Lack of measurable process and outcome metrics correlated with funding and expenses of homeless mental health and substance abuse programs has resulted in lost opportunities to fund those programs that demonstrate the most success.



- F6:** Lack of transparency in financial reporting of mental health and substance abuse services and access to other funding for the homeless is not publicly available and reduces public trust.
- F7:** There are too many boards, committees, and government entities which create waste and redundancy in the planning and distribution of mental health and substance abuse treatment resources.
- F8:** Mental health and substance abuse issues among the homeless are aggravated by poor government planning.
- F9:** The outreach teams (County HEART teams, Sacramento PD IMPACT Team) are poorly supported and understaffed which results in lost opportunities to positively engage the homeless to accept mental health and substance abuse treatment and other services.
- F10:** Poor communication between law enforcement and outreach teams erodes the trust of and negatively impacts the mental health of the unhoused population.
- F11:** There is a shortage of mental health professionals which continues to exacerbate the inability of the County to meet the need for mental health services for the homeless.

#### **RECOMMENDATIONS:**

- R1:** The County should complete a comprehensive strategic plan to address homelessness by July 1, 2024, to improve mental health and substance abuse services for the homeless, to include timelines and measurable goals and objectives, building on The Homeless Action Plan, using templates and examples from other communities and organizations such as the California State Association of Counties.
- R2:** The County should immediately begin to develop and implement an interim plan that incorporates all or some of the recommendations in this report and will result in measurable improvement in the delivery of mental health and substance abuse services in the short term.
- R3:** The County should appoint a new Deputy County Executive position by January 1, 2024, that holds budget and policy implementation authority for all homeless services provided in the County, including mental health and substance abuse programs, and to the extent possible, authority over other governmental entities.
- R4:** The County should dedicate funds in the 2023-2024 budget for innovative solutions that may not be supported by the County's flow of external funding (Ex: more CRBH sites, outreach teams, substance free transitional housing, board and care facilities).
- R5:** The County should immediately begin a process to establish and track outcome data related to the treatment of mental health and substance abuse for the homeless.
- R6:** The County should track funding and spending specific to support homeless, including treatment for mental health and substance abuse, and post this information at least quarterly on the County website in a manner that is easily accessible to the public by the end of 2023.

- R7:** Elected officials should immediately take a more active role to lead, coordinate, and consolidate various advisory boards and committees to assume direct accountability for improved outcomes in mental health and substance abuse prevalence and result in a reduction of duplicate efforts, administrative costs, and inefficiency.
- R8:** Sacramento County should immediately fully staff a total of six HEART teams and the City of Sacramento should immediately establish at least two additional IMPACT Team within Sacramento PD to increase engagement with County and City homeless encampments and improve access to mental health and substance abuse treatment services.
- R9:** Law enforcement should communicate at least weekly with all outreach teams to collaborate in decisions as to which encampments to clear and when, and post this information on a shared web site to increase the trust of the homeless and support offered by outreach teams.
- R10:** A communication plan should be developed to timely inform all stakeholders and staff of goals, actions, and events related to planning and execution of homeless mental health and substance abuse services.
- R11:** The County should continue to improve incentives and hiring of mental health professionals to meet the demand for mental health services in the County.

**Required Responses**

Pursuant to Penal Code sections 933(c) and 933.05, the grand jury requests responses as follows:

From the following governing bodies of a public agency within 90 days:

<p>The Sacramento County Board of Supervisors          County Administration Building          700 H Street, Suite 2450          Sacramento, Ca 95815</p>	<p>The Sacramento City Council          City Hall          915 I Street, 5th Floor          Sacramento, CA 9581</p>
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From the following elected official within 60 days:

Jim Cooper, Sheriff  
 Sacramento County  
 4500 Orange Grove Avenue  
 Sacramento, CA. 95841

**Invited Responses**

<p>Ms. Ann Edwards,          County Executive of Sacramento County          700 H Street, Room 7650          Sacramento, CA 95814</p>	<p>Mr. Howard Chan,          City Manager of City of Sacramento          915 I Street          Sacramento, CA 95814</p>
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Ms. Cathy Lester, Chief of Police  
Sacramento City Police Department  
5770 Freeport Boulevard  
Sacramento, CA 95822

Mr. Jay Vandenburg, Mayor  
City of Galt  
380 Civic Drive  
Galt, CA 95632

Ms. Chevon Kothari,  
Deputy County Executive, Social Services  
700 H Street, Room 7650  
Sacramento, CA 95814

Ms. Rosario Rodriguez, Mayor  
City of Folsom  
50 Natoma St.  
Folsom, CA 95630

Ms. Linda Budge, Mayor  
City of Rancho Cordova  
2729 Prospect Park Drive  
Rancho Cordova, CA 95670

Ms. Porsche Middleton, Mayor  
City of Citrus Heights  
6237 Fountain Square Drive  
Citrus Heights, CA 95621

Ms. Bobbie Singh-Allen, Mayor,  
City of Elk Grove  
8401 Laguna Palms Way  
Elk Grove, CA 95758

**Mail or deliver a hard copy response to:**

The Honorable Michael Bowman  
Presiding Judge  
Sacramento County Superior Court  
720 9<sup>th</sup> Street  
Sacramento, CA 95815

**Please email a copy of this response to:**

Ms. Erendira Tapia-Bouthillier  
Sacramento County Grand Jury Coordinator  
*Email: [TapiaE@saccourt.ca.gov](mailto:TapiaE@saccourt.ca.gov)*



**2022 – 2023 Grand Jury of Sacramento County**

# **PUBLIC CONFINEMENT REVIEW SACRAMENTO COUNTY GRAND JURY APRIL 2023**

## **INTRODUCTION**

As required by Penal Code Section 919(b), the 2022-23 Sacramento County Grand Jury toured five of the six detention facilities located in Sacramento County. These include: Sacramento County Main Jail (Main Jail), Rio Cosumnes Correctional Center (RCCC), Youth Detention Facility (YDF), Folsom State Prison (FSP), and California State Prison at Sacramento (CSPS). The Folsom Women's Facility was closed in January 2023 prior to the Grand Jury's scheduled tour due to the reduction of inmate population statewide. This report documents the Grand Jury's observations from these five tours and information provided by the facility.

## **BACKGROUND**

As we neared the end of the COVID-19 pandemic, the operations of County detention facilities continued to grapple with AB 109 - Public Safety Realignment, the *Mays vs. County of Sacramento* class action lawsuit, and SB 823 - Juvenile Offender Realignment. These issues have severely impacted the normal operations of the facilities leading to early release of inmates, increased costs to the County, and amplified legal issues. At the time of the Grand Jury's tours, FSP and CSPS had returned to normal programs and visiting with the exception of the occasional COVID -19 outbreak.

## **METHODOLOGY**

Before each tour, the Grand Jury requested an overview from the facility which included the following information:

1. Facility's mission and history.
2. Layout of the facilities.
3. Facility's population and demographics.
4. A description of the facility operations including:
  - a. Staffing.
  - b. Grievance and Complaint Process.
  - c. Health Care and Mental Health Services.
5. Description of programs at the facilities.
6. Current accreditations.
7. Impact of Covid-19.
8. Other significant impacts to operations.
9. Recent accomplishments.

## **SACRAMENTO COUNTY MAIN JAIL**

The members of the Grand Jury toured the Sacramento County Main Jail (Main Jail) on September 22, 2022. The tour encompassed the following areas: booking, intake, medical care, mental health care, dental care, dietary services, pharmacy, reentry process, and inmate housing.

### **Background and History**

The Main Jail was constructed in the late 1980's and opened in April 1989. It was designed and built as a pre-sentence detention facility with a capacity of 1,250 beds. The Main Jail is located in downtown Sacramento with close proximity to the Sacramento County Courthouse. The building is comprised of two towers which are each nine stories tall connected by a vertical spine. Inmates are housed on the upper seven floors, while the bottom two floors are utilized for jail administration and Superior Court operations.

All law enforcement agencies within Sacramento County bring arrestees to the Main Jail for booking. During the booking process, all arrestees are screened by health care staff to determine if there are any medical concerns which would make them unsuitable for incarceration. Based upon the booking information retrieved at that time, the arrestees may be released or may be housed in the Main Jail. In 2021, there were a total of 26,826 bookings/intakes and the average monthly booking/intake total was 2,331 (June 2022).

Once inmates are booked into the Main Jail, they are interviewed by classification to determine where they will be housed and what services they will need. Inmates are also reviewed periodically to ensure appropriate housing and personal needs are met.

### **Demographics of the Population**

The average daily jail population is 1,951 inmates (June 2022). Males comprised 88.3% of the population, females 11.7%. The jail houses pre-sentenced, sentenced, and State and Federal inmates. The larger proportion of those who are awaiting transfer to a state correctional facility has increased since the beginning of the COVID-19 pandemic. The average length of stay is 49 days.

The population, as of June 2022, included 659 inmates with gang affiliation (Asian 24, Hispanic 231, Whites 34, Bloods 233, Crips 68, other black gangs 69).

### **Housing**

Housing units in the Main Jail are located in both towers. Male and female inmates are housed in separate units. The housing units are classified as maximum security with single and double occupancy cells. In addition to cells, each unit has a dayroom where inmates are allowed to spend time out of their cells.

### **Programs**

Education: The Main Jail contracts with the Elk Grove Adult and Community Education (EGACE), a program that is operated by the Elk Grove Unified School District, to provide education to the inmate population. EGACE is accredited by the Western Association of Schools and Colleges (WASC). The correctional education program includes academic, vocational, and personal development programs. Other courses include vocational skills, high school equivalency preparation and testing, and parenting skills training. Vocational courses offer inmate an opportunity to gain certification in areas which can lead to employment opportunities after release and personal improvement skills.

Health Care: The County Department of Health Services, Primary Care Division is responsible for the provision of physical and behavioral health care to the inmate population. Care is provided by county and contracted staff. According to the staff, the population requires a high level of care due to higher rates of mental health conditions, substance use disorders, and chronic diseases.

A multi-disciplinary team provides the following physical health services: primary care, chronic disease management, specialty care, prescribed medications, ancillary services, and dental care. There is a dialysis unit which is currently closed due to unavailable staff.

Adult Correctional Health (ACH) contracts with the University of California, Davis, Department of Psychiatry and Behavioral Health Sciences for all on-site behavioral health services. Levels of care include intensive, moderate, and routine. There is also crisis intervention and evaluation with a higher level of care for inmates when clinical staff determine it is necessary. ACH also contracts with Wellspace Health to provide alcohol and drug treatment.

Reentry Services Program: The Main Jail provides vocational and rehabilitative programs to assist inmates in developing the necessary skills to succeed in the community upon release. Vocational programs are focused on giving inmates professional skills and training so they are able to find gainful employment when they are released.

Rehabilitative programs include the Criminogenic Needs and Risk Assessment along with Cognitive Behavior Therapy. These programs focus on the identification of high-risk areas and then provide corresponding education and behavioral treatment to assist inmates in practicing a sober lifestyle.

## **Administration**

The Main Jail falls under the jurisdiction of the Sacramento County Sheriff's Department and is overseen by the Main Jail Division Commander. The annual budget for the facility is approximately \$107,671,290. There are 461 authorized positions with 416 positions currently filled -- a 10% vacancy rate. The breakdown of authorized positions is as follows:

- Sworn positions – 275 (60%).
- Professional positions – 175 (38%).
- Long haul transportation positions – 11 (2%).

Sworn staff are required to complete 24 hours of approved training each year which includes Peace Officers Standards and Training (POST) mandated courses. Non-sworn staff complete mandated annual training on policy and computer related topics. Health care staff must complete mandated training required by their individual certifications.

## **Summary**

The passage of AB 109 which transferred responsibility for housing low level offenders from the state to the county had a significant impact on the Main Jail. Low level offenders who would have served their sentence at a state correctional facility are now housed in a county facility or supervised for a significantly longer period of time by County probation officers. The Main Jail

is required to house inmates who would normally have been sentenced to a state correctional facility, violated parole, or on “Flash Incarceration” for violation of post release community supervision. As a result of AB 109, the facility averaged an increase of 70 inmates per day in June 2021. Due to the longer stays, the Main Jail must now provide additional services as well as health care for chronic diseases.

## **RIO COSUMNES CORRECTIONAL CENTER**

The members of the Grand Jury toured the Rio Cosumnes Correctional Center (RCCC) on September 14, 2022. The Grand Jury’s tour encompassed the following areas:

- 500 and 600 Housing Pod
- Sandra Larson Facility (Women’s Housing)
- Treatment Reentry
- Christopher Boone Facility (Mental Health)
- Program areas, such as barista station, vocational education automotive, welding shop, signage shop, and culinary shop
- Medical Housing

### **Background and History**

The facility was once used as a flight training base during World War II, but was repurposed as a Sacramento County detention facility in 1960 with an original design capacity of 800 inmates. Over the years, there have been several expansions and, under a project called “Plan 2000,” it provided a master plan for expansion that raised the capacity to over 2300 inmates.

### **Demographics of the Population**

RCCC is a county-wide correctional facility which houses sentenced and pre-sentence men and women. It coordinates population management with the Main Jail since currently 60% of the population at RCCC are pre-sentence inmates. At times, RCCC houses arrestees, pre-sentence detainees, federal inmates, federal immigration detainees, and those in-transit to or from state prison facilities. RCCC is the primary facility for housing sentenced County inmates serving one year or less in County jail. Historically, inmates serve longer terms in a state correctional facility. With the passage of AB 109, County Jail Prison inmates with extended sentences averaging 5 years or more now serve their sentences in a county facility. According to RCCC staff, RCCC has a designed total capacity of 2,300 with an the average population of 1,400-1,600 inmates.

### **Housing**

RCCC is classified similar to the County Main Jail. RCCC has also established special housing for inmates determined by the court to have mental competency issues. These inmates reside in a building with six individual pods, categorized by their degrees of mental capacity. Some of these inmates may be referred to state facilities when space becomes available. Inmates are assigned Licensed Clinical Social Workers (LCSW) and psychiatrists with the goal to help change the mental capacity of inmates from incompetent to competent.

## **Programs and Services**

Education: RCCC provides several educational programs intended to decrease recidivism. In addition to academic classes, the following vocational courses are coordinated and operated by EGACE: welding, culinary arts, automotive, construction, and custodial training. Sheriff-run programs include barista, sign making, engraving, and bee keeping. On average, trade programs require two to four months for the inmate to attain a marketable skill level. Inmates are provided employment assistance including job-readiness, resumè writing, mock interviews, and connecting inmates to vocations of their interest. Inmates work with employment-ready specialists who have contacts with felony-friendly companies.

Health Care: Medical services are described in Title 15 of the California Administrative Code and require the County Sheriff's Office to provide basic and emergency health care services to incarcerated adults within the County jail system. As of 2001, Correctional Health Services (CHS), under the County Department of Health Services, administers all legally mandated health services within the County jail system. CHS provides a "primary care" level of medical services. Any psychiatric care, secondary, and tertiary care is made available through contracted providers and local hospitals. RCCC also provides other treatment programs, including accountable living transition, substance abuse counselling, trauma recovery, courage to change, employment readiness, relapse prevention, anger management, problem solving, and social skills.

Upon arrival, inmates are screened and complete a Level of Service/Case Management Inventory (LSCMI) to assess the need for case worker assistance. Additional assessments are utilized to address substance use and mental health needs of inmates. There are health professionals at RCCC to assist inmates, which include doctors, registered nurses, licensed vocational nurses, certified nurse assistants, pharmacists, pharmacy techs, dentists, and social workers.

## **Administration**

RCCC, like the Main Jail, falls under the jurisdiction of the Sacramento County Sheriff's Department and headed by a captain whose title is RCCC Commander. The annual budget during the 2021/2022 fiscal year was approximately \$72 million, which includes funding for 313 authorized positions, of which nine of are currently vacant.

Every new custody employee completes an extensive training program. The training includes how to work in each unique housing unit, inmate management skills, and officer safety techniques. RCCC is the provider of training for the last portion of the Sheriff's Officer Basic Supplemental Core Course. RCCC also hosts a portion of the Advanced Officer Training program, which peace officers are required to complete every two years. In order to participate in the Custody Emergency Response Team, RCCC custody staff must continuously train and prepare for emergency operations.

## **Summary**

As in the Main Jail, AB 109 has had a significant impact on the operations of RCCC. During the Grand Jury's tour, the living quarters and work spaces were crowded. RCCC sits on a 140-acre County-owned parcel with considerable area not used for inmate purposes, but could be used to



address overcrowding. Staff at RCCC stated the medical services are currently housed in a small temporary building which becomes congested quickly.

There is an active reentry program. Every inmate must complete a Risk Survey which identifies behavioral characteristics, education needs, and family dynamics. If the inmates qualify, they are assigned a case worker to work on a program that builds on strengths, addresses trauma, and prepares the inmate for reentry back into the community.

## **YOUTH DETENTION FACILITY**

The members of the Grand Jury toured the Youth Detention Facility on September 15, 2022. Our tour encompassed the following areas:

- Housing
- Recreational facilities
- Educational classrooms
- Medical facilities
- Library

### **Background and History**

The Youth Detention Facility (YDF) is a new facility constructed near Juvenile Court on Kiefer Boulevard at Bradshaw Road. The facility includes an outdoor recreation area and indoor gymnasium, a pool for swimming instruction and life guard training, vocational programs, a library, a Multi-Sensory De-escalation Room (MSDR), housing, and juvenile court access.

The tour began with a 30-minute presentation by Probation Department administration and staff. The team reviewed the facility demographics and their grievance complaint process. A discussion session with a question and answer period concentrated on health care and mental health services.

The staff presented their implementation plan for SB 823, Juvenile Justice Realignment, which mandates that juvenile detention facilities house wards from the California Youth Authority facilities. The challenge for the County juvenile facilities is to safely secure these older and more hardened wards, who pose an increased security risk. The staff has developed the Valley Oak Youth Academy (VOYA) to house and support these California Youth Authority transfers.

### **Demographics of Population**

Total capacity is 416 wards and an average daily population of 127. The average age of the residents is 18 and the average length of stay is 30 days which has increased due to state transfers. The age range is 12–25 years. Minorities are a majority of the population.

### **Housing**

The YDF facility includes 17 housing units. There are three housing units dedicated to VOYA. Those juveniles adjudicated to serve incarceration may be detained up to age 25. Housing unit assignment is determined by classification based on multiple factors which include: physical size, nature of crime, education, mental health assessment.

The units are arranged by girls general population, boys general population, maximum security (transfers from realignment), vocational, and emergency housing.

Visitation is 8 a.m. to 8 p.m. daily. COVID-19 vaccinated visitors can meet face to face. If visitors are not vaccinated, they are not permitted to have a contact visit. A room appropriate for visitation by children of the wards is provided.

### **Programs and Services**

Medical Care: A 24-hour medical clinic is available to provide basic acute health services. The health care and mental health services provided to wards is comprehensive. These services include dental, optometric, medical (primary specialty and emergency care), psychiatric, and podiatric care. A pharmacist is on site twice a week. Case managers are also available. All wards admitted to the facility are seen within 24 hours by a mental health staff member.

A fully functioning electronic health record is used to provide confidential medical information to clinicians and staff to help in the coordination of care.

Mental health services are provided by licensed clinical staff from 8 a.m. to 7 p.m. on weekdays, and 8 a.m. to 4 p.m. on weekends. Extended coverage is provided by per diem staff when available. Forty to fifty percent (40 to 50%) of residents have mental health issues. A psychiatrist is on call and provides on-site services each week. Trauma-informed care with screening and group sessions is also provided.

A unique program is the Multi-Sensory De-escalation Room (MSDR). This is an alternative to isolation and external control for unacceptable behavior. The program uses evidence-based principles and applies them to behavioral regulation. The result has been a positive change in emphasis from punishment to support. The room is used for intake, managing events, and proactive requests from staff and residents.

Library: The library is staffed by a full-time librarian with computer skills. Poetry anthologies are published annually by wards. Writing workshops are also provided. Wards may check out 5 books for use in their housing units.

Career Development: Vocational programs are available for culinary arts, construction, and carpentry. Skill development is focused on measurement, safety, and use of tools. The program participants have won competitive awards for their work and have made contributions to the facility (e.g.: shed and green house constructed on site).

Other Programs: These include intensive skill building, mentor academy, and pool programs with swimming lessons and life guard training. Physical exercise facilities include a gym with robust sporting equipment and courts including ping pong, basketball, and volleyball. The gym is also used for church services on Sundays. There are more than 40 programs staffed by over 100 volunteers.

Boys and Girls Clubs host weekly meetings. These provide opportunities for social and interpersonal communication skills.

A store for clothes, materials (paper, pens), and back packs is available for those wards being discharged or for in-person meetings outside of the facility.

Education: YDF offers junior and high school classes operated by the Sacramento County Office of Education and is accredited by WASC. Wards may attend on-line college classes and earn an AA degree. There is career technical education, including hands-on training in various trades. Partnerships have been developed with El Centro Junior and Senior High Schools, Juvenile Correctional Health, and Lake Tahoe Community College.

Other Programs: Support meetings for Alcohol Anonymous, Narcotics Anonymous, and religious groups occur during the recreation and/or leisure periods.

### **Administration**

YDF is operated by the Sacramento Probation Department. Officers are specially trained in managing youth offenders.

Staffing is currently a recruitment challenge due to the requirement to work face-to-face, the desired requirement for a college degree, and the high staffing ratios of staff to wards.

A grievance process is in place to allow wards anonymous feedback to administration. Wards can complete a form that is reviewed daily and triaged to the appropriate staff for resolution. At times, this process may result in a change or update to a policy.

### **Summary**

YDF provides a safe and secure environment for the wards. The facility provides educational and vocational activities, and promotes the health and wellbeing of the wards. It encourages law-abiding behavior, teaches individual accountability for one's choices, and models positive social behavior for residents.

### **FOLSOM STATE PRISON**

The members of the Grand Jury toured Folsom State Prison (FSP) on October 7, 2022. The tour encompassed the following areas:

- Administration
- Building 2, 3, and 5
- Dining hall (Main)
- PIA License Plate
- Main exercise yard

### **Background and History**

FSP is California's second oldest prison. The Legislature authorized the construction of a maximum-security prison in 1858. San Quentin inmates did not transfer here until 1880 due to construction delays. Inmate labor built the first Folsom Dam, the American River canal, and the hydroelectric power generator plant. FSP is classified as a minimum to medium security prison.

## **Demographics of Population**

At the time of the Grand Jury's tour, the overall population was approximately 2,300 inmates.

## **Housing**

There are five buildings that house inmates. Building 1 houses about 800 inmates. The other four buildings house a little fewer than 400 inmates each. Every housing unit toured was clean and well-maintained.

Each of the five buildings has five tiers of 30 to 40 cells each. The cells are small (approximately 8 feet by 10 feet), and each can house two inmates with a two-bed bunk, a sink, toilet, and small desk. Each cell is decorated with personal items including some TVs. The cells on each tier are opened by a common bar across the top that simultaneously opens all the cells on that tier. The inmates are allowed visitors up to three times per week with outside and inside supervised visitation. There is a building for conjugal visits. Inmates are allowed a few hours per day out of their cells and can take advantage of education and training programs, or prison work activities. The rest of the time, the inmates are in their housing tiers or cells.

## **Programs and Services**

Folsom is considered a large Programming Facility with reentry programs to help inmates obtain skills and transition to a productive life when they are released. It is up to each inmate to take advantage of the education and extensive training programs offered by the prison. About one-third of the inmates have 25 years-to-life sentences. Recently, some of them have obtained early release, and the subsequent recidivism rate for those individuals is quite low -- about 3%. Specific recidivism rates for the main population were not provided when asked, but is much higher. There is a two-year reentry (transition) program that assists with budgeting, resume' building, and other everyday skills. The education program allows inmates to complete the secondary education requirement and achieve a GED. College courses are also available. Sacramento State offers a Communications degree

Prison Industries Authority (PIA) has extensive programs at Folsom. PIA is a separate entity whose budget is separate from FSP, and coordinated with the prison. There are about 300 inmates currently enrolled in the various programs. The PIA mission is rehabilitation, focusing on respect and professionalism.

The license plate manufacturing facility was quite impressive. They have 13 large presses that stamp out every license plate made in California and have the capacity to produce 40,000 to 45,000 plates per day.

The PIA also has a braille transcription program (with 13 positions), a Camp 12 program with 20 positions that teaches career carpentry, plumbing, roofing, and furniture building (although most of that is done in Avenal Prison). A sign shop houses a laser printer that can produce complicated and creative signs. There is also a metal fabrication facility.

## **CALIFORNIA STATE PRISON, SACRAMENTO**

The members of the Grand Jury toured the California State Prison, Sacramento (CSPS) on October 7, 2022. The Grand Jury's tour encompassed the following areas: administration, medical and mental health, housing units, main kitchen, and education.

### **Background and History**

CSPS was built in 1986 as a high security Level 4 prison. In 1992, a separate administration from Folsom State Prison was established due to the high security mission of the facility. The construction is low profile concrete structures with electrification of all fencing surrounding housing units. Level 4 offenders are those that have been convicted of violent crimes and/or have serious mental health issues that result in a risk of violent behavior. The current annual funding for the prison is \$205 million.

Due to its geographic proximity to Folsom State Prison, several services are shared such as a fire department and dietary services.

### **Demographics of Population**

There are 2,200 inmates housed at CSPS. One third of the inmates are serving life sentences. Approximately 1,200 inmates have mental health issues. Eighty percent have substance abuse issues. Life sentence inmates have seen higher rates of parole. This has resulted in a more optimistic attitude among inmates with rehabilitation success and a feeling of hope for an end to incarceration for some.

Due to dwindling population, the minimum-security block was closed recently. This resulted in the transfer of 75-80 inmates from CSPS to FSP where they continue to do landscaping, grounds work and, other jobs. A few inmates were transferred to Mule Creek State Prison.

### **Housing**

There are 3 operational housing blocks.

Block A has eight housing units. It is comprised of general population inmates. Block B houses both mental health and non-mental health inmates. Block C houses level 4 inmates, the majority of whom have serious mental health issues.

There is yard in each housing block. Inmates were observed playing softball, basketball, and walking or jogging on a track.

Each block has 8 housing units. Each housing unit is arranged in a 180-degree configuration. There are three cell blocks for each 180-degree configuration. Each cell block has two tiers with 34 inmates. There is a central guard station that can view all cell blocks in each 180-degree configuration. Each cell houses two inmates and has a small non-opening slit window allowing some natural light.

There is a complex classification system for each inmate which takes into consideration many factors including, but not limited to, the nature or crime, prior behavior in incarceration, interest in training and rehabilitation, participation in programs like AA and NA, and attitude. The criteria produces a score that places the inmate in one of four levels, level 4 being the highest security inmate. The rating also determines housing, cells, and eligibility for programs. Program participation is limited at times by program capacity.

There is an Administrative Segregation Unit (ASU) with individual cells that house those who commit felonies in prison or are victims of crimes in prison (i.e. a stabbing in the yard). Both victim and perpetrator are housed there for safety until an investigation determines where they should reside going forward or if the District Attorney decides to press charges. The cells have all the amenities afforded to other inmates within their cells unless a specific reason determines otherwise.

An additional housing unit is a long-term psychiatric security unit in Block C, the Psychiatric Security Unit (PSU).

### **Programs and Services**

The Grand Jury toured a general population housing block that houses approximately 700 inmates, who are assigned to various programs described in detail below. Incidents that occur in the programs are self-policed – incidents result in loss of points, privilege, and access to further training. Low sentence offenders have much to lose if behavioral problems arise. This forces issues that arise within program settings to be settled “out in the yard.”

**Mental Health Program:** There are several levels of mental health support:

- Correctional Case Management – seen every 90 days by psychologist.
- Enhanced Out Patient – General Population – seen weekly by psychologist, monthly by psychiatrist for medication management.
- Crisis Bed Unit – Daily psychologist or psychiatrist court-ordered medication. Suicidal/homicidal/unstable psychosis. The goal is to stabilize within 10 days. If the inmate can’t be stabilized, he is transferred to a state mental hospital.
- CSPS has programs to assist drug problems. The treatment program is usually three months.

Eighty percent (80%) of inmates upon entry have a substance abuse problem. Detoxification programs, including availability of buprenorphine, are provided.

Medical Care: This building houses the medical treatment center. It was recently completed and joins the two lower security housing blocks. The facility is fully equipped and staffed with preventive and chronic care, urgent care, optometry, pharmacy, lab, radiology, physical therapy, and mobile CT/MRI /ultrasound. Primary care physicians are on site and employed by the State. Specialty care physicians provide care on contract as required.

Wet bays (with toilet) provide the capability to retrieve anything flushed through special plumbing and traps. Interview bays are separated by a window between the visitor and the inmate.

### **Vocational Programs**

Kitchen: The industrial kitchen complies with health standards mandated by County health inspectors and is staffed by 80-200 inmates per shift for each meal. The breakfast shift starts at 6 a.m. The kitchen provides food for both prisons on site (CSP Sacramento and Old Folsom). The inmates who work in the kitchen earn a small wage for their work.

There is extensive production equipment to produce meals in high volume. A weekly menu is created and followed. The main menu is considered bland because it has to pacify a large number of inmates. Special diets like Kosher, diabetic, and allergy diets are accommodated. An inmate who requests a special diet must be approved by religious or medical staff for these exceptions.

Building Maintenance: This program teaches construction and minor repair skills. For all programs, tools are available but are traced on a wall and no one may leave the site until all tools are replaced and accounted for.

Plumbing Certification: This is a two-year program. It facilitates immediate employment upon release. Participants must have less than two years remaining on his sentence to participate. Ninety percent (90%) of the inmates have jobs upon release on parole.

Electrician Certification: This program is similar to Plumbing Certification. Inmates build a wooden structure from ground up with complete electrical wiring. They learn how to electrify it with wires, switches, and lighting. The constructed building had a working fan, lighting, and switches.

Education: Credentialed teachers and certified teacher's assistants (TAs) provide instruction. Inmates are strongly encouraged to obtain at least a GED. Classroom courses range from GED to AA or Bachelor's degrees which are possible in cooperation with local schools and colleges. About 150 inmates participate in post high school education courses. There are programs to develop computer skills with limited access to the internet. Inmates convicted of computer crimes are not eligible. There is some access to tablets in cells. Bandwidth is a limiting factor.

Laundry: The industrial laundry is hot and noisy. CSPS provides this service for all prisons in the geographic area, as well as for Mule Creek Prison, Solano State Prison, and the California Highway Patrol Academy. Inmates who work here must be from the general population. Forty inmates and three staff work in the laundry.

Canteen: The canteen has several items that inmates may purchase. They receive a \$10/month in prison allocation. Additional money may be earned by working in the services. Money can also be sent by families. Purchases are limited to \$100/month.

## **Parole Process**

The parole process entails a "warm handoff." An appointment for outpatient visits is made on parole. Eighty percent (80%) keep the appointment. Current medications are provided at parole, a 30-day supply of medications with two refills. Inmates are paroled to county of residence at time of conviction. Homeless transition data is unclear. Parolees are given \$200 upon release.

## **Safety**

An electric fence surrounds all housing units and the outer border of the prison. It is lethal if breached and supersedes need for staffing guard towers. Anyone who desires to exit the prison is required to pass through eight gates with credential checks to exit from the inside of a housing block to the exterior of the prison -- "inconvenient by design."

## **Summary**

The prison is characterized by low profile construction with newer security technology in stark contrast to the neighboring state prison, FSP. The grounds and facilities were clean and well maintained.

The focus is on programs and preparation for life on the outside. A high percentage of the population have been diagnosed with serious mental health conditions and/or classified as maximum security which requires specialized programs. CSPA provides rehabilitative opportunities through educational programming, vocational training, self-help programs and mental health treatment. Incentives are designed to increase relative calm within the inmate population.

The Grand Jury was able to tour newly constructed medical and mental health treatment areas designed to support a higher level of care.



**2022-2023**

**Sacramento County Grand Jury**





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*Top row: Don Tucker, Shane Jiang, Trent Pasterski, Thomas Atkins  
2<sup>nd</sup> Row: Jose De Herrera, Bill Minor, Scott McDonald, Roscoe Williams, Robert David  
3<sup>rd</sup> Row: Norval Wellsfry, Francina M. Stevenson, Lisa Odom, Jane Claar  
Front Row: Carolyn Hamilton, Theresa Yip, Jennifer Barrett  
Gerald Johns, not present*