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1	The Board of Supervisors should accept the report of Scott Emblidge and utilize its as major impetus for change in the operations of the jail.			Cordell
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Independent Oversight

2	The Board of Supervisors should immediately create and fully fund the Office of the Inspector General of the Jails to provide professional independent civilian oversight of the jail operations that reports directly to the Board of Supervisors. Please see a further description of the OIG office in my Recommendation #1 in the Grievance/Complaint Process category.			Cordell
3	Create a committee of knowledgeable experts and community stake holders to study and recommend effective models of independent over sight of Custody Health and Custody Mental Health. Committee will report it's findings and recommendations to the Board of Supervisors , including time lines and responsible parties, and oversee it's implementation.	The past 5 years of data provided the BRC consistently list medical and mental health services as the number one grievance among detainees. Currently Custody Health and Custody Mental Health have no established requirements for responding to grievances or to respond within an established time line to detainees concerns and complaints.		Clifford
4	Create a committee of knowledgeable experts and community stake holders to study and recommend effective models of independent over sight of the DOC. Committee will report it's findings and recommendations to the Board of Supervisors , including time lines and responsible parties, and oversee it's implementation.	To increase public trust, community involvement and transparency, community based independent oversight should be established.		Clifford

5	<p>Outside of the formal grievances process, create a venue for current detainees to present concerns related to the jails, conditions of confinement, or problems associated with incarceration within our county. Provide an opportunity for these concerns to be heard by a body that can mediate and respond, such as the an Ombudsman program and/or ongoing anonymous surveys. Seek best practice information for this need and examples of providing input for improvement from detainees used in other areas. (link to Ada County survey below)</p>	<p>The reports received by the BRC indicate that our present grievance system is not working and that detainees feel they have no voice. Creating opportunities for them to participate in problem solving and have a vested interest in the outcome may help reduce feelings of isolation and reduce friction with staff.</p>	<p>http://www.jailmedicine.com/best-practices-inmate-satisfaction-surveys/</p>	<p>Clifford</p>
6	<p>Create an Independent Oversight Commission to review and oversee the Office of the Sheriff and the Department of Correction.</p>	<p>The lack of independent oversight of the jails is a significant problem. There is minimal accountability about the vision, function, operations, and effectiveness of the jail system by the Sheriff's Office, the Department of Correction, and the Board of Supervisors. These conditions underscore the need for independent oversight. If an Independent Oversight Commission is not sufficient, perhaps a more complete examination by the Department of Justice will be warranted.</p>	<p>The consultant, Aaron B. Zisser, J.D. (see report referenced above) made a recommendation about the utility and importance of an Independent Oversight Commission; the American Bar Association has guidelines for the establishment of an Independent Oversight Commissions: Los Angeles County and other counties have established Oversight Commissions.</p>	<p>Price</p>
7	<p>Create an ombudsman position to complement the work of the Jail Observation Program as an interim or on-going measure until a more comprehensive structure is developed (such as an Independent Oversight Commission or a separate Department of Correction).</p>	<p>Once the Blue Ribbon Commission completes its work, there is a need to maintain the momentum regarding jail review and reform. A structure should be in place to continue to collect information from inmates and their families, and the employees of the County jail and to address issues of concern.</p>	<p>A significant amount of data has been collected and various recommendations are in place. Members of the public and of the Boards and Commissions have made these observations.</p>	<p>Price</p>
8	<p>Beyond the grievance process, provide additional anonymous methods of surveying detainees regarding jail conditions and use that information to intervene where indicated. Consider adopting successful practices from other counties which were developed with best practices in mind (attached are examples from Ada county). Consider having this a function of an outside agency such as the JOP.</p>	<p>These attached surveys are not used to reach a target but rather as a "barometer" to head off possible escalating difficulties, which is a cost saving and effective intervention. If survey numbers stay generally the same week in and week out, that's an indication that things are alright. However, if the number continually falls , then further investigation and intervention is needed.</p>	<p>Attached pdfs to form</p>	<p>Clifford</p>

9	Proactively request that the Santa Clara County Jail system be placed under federal oversight until sweeping reforms are put in place.	Similar to LA County, the Santa Clara County Jails will likely benefit from Federal oversight due to very similar issues and conditions	http://documents.latimes.com/l-county-jails-settlement/	Callender
10	Appoint an interim inspector general to oversee implementation of BRC recommendations that are adopted by the Board of Supervisors. Allot sufficient funds to support the work of this interim oversight position until a permanent oversight body is established.			Brunner
11	Request that the United States Department of Justice be provided and evaluate the information compiled by the Blue Ribbon Consultants and others to recommend if the Santa Clara County Jails would benefit from Federal oversight.	Similar to LA County, the Santa Clara County Jails will likely benefit from Federal oversight due to very similar issues and conditions	http://documents.latimes.com/l-county-jails-settlement/	Callender
12	Create an Inmate Council which represents inmates in various buildings.	This would prove another option to raise and address issues through another venue beyond the grievance/complaint process.		Price
13	Allow inmates to form Committees and designate inmate leaders/representatives by Housing Units etc. The leader is voted in by peers and all leaders would come together for regular meetings by jail location to make REAL decisions and changes in all aspects of the jails. Guidance should be given by staff for logistics and direction until they are fully established. The reports from these bodies should go to the newly established Santa Clara County Jail Diversion and Behavioral Health Subcommittee (JDBHS).	Inmates should be provided the opportunity to actively be involved in the decisions of the Jail and offer a perspective that is unique and valuable from their lived experiences. This action would be a step forward in overall culture at the jail. It would boost inmate confidence in the process (overtime IF properly implemented)	"Corrections : A Humanistic Approach" by Hans Toch and the recommendations as presented by Mr. Aaron Zisser in his report	Holland

Custody and County Leadership

14

<p>The Board of Supervisors should take immediate steps to change the leadership of the operation of the jails.</p>	<p>The Blue Ribbon Commission has learned that the myriad problems in the operation of the jails are not recent, but have been ongoing for some time. The problems range from, but are not limited to, mismanagement of the Inmate Welfare Fund, a broken grievance/complaint process, a flawed classification system, a broken medical and mental health system for inmates, a problematic custody input report process, a fear of retaliation by both correctional officers and inmates, a stunning lack of transparency in the jail operations, and the murder of Michael Tyree. The Board of Supervisors should acknowledge that the operation of the jails under the current leadership has been a failure for the inmates, for the correctional officers, and for the taxpayers.</p>		<p>Cordell</p>
<p>The Board of Supervisors and County Counsel must protect civilian members who volunteer for its Commissions and Boards from retaliation and harassment from County employees.</p>	<p>Sheriff Smith has demanded that the Chair of the Blue Ribbon Commission turn over to her all emails from the Chair's personal computer related to the custodial operations of the jails. She did this in retaliation for the Chair's comments with which she disagreed. County Counsel, tasked with protecting the Commission, its client, has taken the position that the Chair's emails should be produced. This position is legally indefensible and flies in the face of encouraging public volunteerism in government. Thus, far the Board of Supervisors has been silent on this issue. This silence is chilling because any citizen who has information that would be useful to an investigatory governmental body would either be silenced or in jeopardy of being outed. What member of the public would volunteer to serve on a County commission or board when that volunteer's personal emails and texts must be disclosed to anyone who requests them via the CPRA, such as a disgruntled individual? And what member of the public would risk communicating with such a commission member if his/her emails and texts would similarly be disclosed?</p>		<p>Cordell</p>

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<p>The Board of Supervisors should refrain from appointing employees of County departments to serve on Commissions or Boards that are investigating those employees' County departments.</p>	<p>A conflict of interest exists whenever a County Commission or Board's member is a member of the County entity being investigated by that Commission or Board. There is both the perception of a conflict of interest and an actual conflict of interest. This is especially true of individuals who are in charge of the entity under investigation. How, for example, can the Sheriff objectively consider criticism and allegations of mistreatment of inmates or abuse of correctional officers, which, if true, occurred on her watch? She cannot, as evidenced by her retaliatory actions against the Chair, who voiced an opinion that the Sheriff did not like. The conflict of interest is clear. Henceforth, the Board of Supervisors must avoid conflicts of interest in their appointments to County Commissions and Boards.</p>		<p>Cordell</p>
<p>Upon finalization of recommendations to the Board from the BRC, form an interim committee to ensure the recommended changes to culture and practice are being implemented. Ideally this committee would consist of people with experience or knowledgeable in best practices for ushering in such changes, in addition to several current members of the BRC who represent the community, advocacy groups, mental health experts and the incarcerated. The committee should report to the Board of Directors until such a time as significant progress is being made on the established goals.</p>	<p>Having a committee familiar with the origin and intent of the recommendations will help monitor and ensure their implementation. It also continues to provide what has proven to be a much needed public forum for the community, detainees, families and staff to have their concerns heard and thier needs supported.</p>		<p>Clifford</p>

17

18

<p>Clearly establish who is ultimately responsible and accountable for all aspects of jail operations, including the treatment of inmates and employees in the County jail. Examine other departmental structures, including re-establishment of a separate, free-standing Department of Correction.</p>	<p>There are many different groups/entities, including consultant teams, volunteers, providers, and appointed Commissions, involved in the examination of Custody Operations. The work is important and valuable. It is challenging to imagine, however, how these efforts will be coordinated in order to be the most impactful. One difficulty has been the lack of access to some consultants' findings that are being managed by County staff.</p>	<p>Observations by community and community-based service providers, the members of Boards and Commissions, the Jail Observer Program, Blue Ribbon Commission members and inmates and families of inmates. "Envisioning the next generation of behavioral health and criminal justice interventions." International Journal of Law and Psychiatry, Vo. 37, Issue 5, Sept to October 2014, pages 427-438: New Directions for Behavioral Health and Criminal Justice Interventions.</p>	<p>Price</p>
<p>Conduct a study to ascertain the values and practices of the Sheriff's Office to understand and address the current work environment and how it impacts practices and behaviors of both employees and inmates.</p>	<p>There have been many comments made at public meetings and through interviews of staff and inmates about the challenging, stressful, and difficult work environment that incorporates elements of fear and retribution.</p>	<p>Information from the public, employees, inmates, and community-based providers; Deputy Sheriffs 'Association of Santa Clara County (Feb. 20, 2016)</p>	<p>Price</p>

19

Custody Policies

20	Contract with an outside agency to rewrite the entire Inmate Rule Book so that it contains accurate information, larger font, is reader-friendly, and available in languages other than English. Do not finance this rewrite with Inmate Welfare Funds.	The Inmate Rule book contains inaccurate information, is not reader-friendly, has small (almost unreadable) print, and is not available to inmates who are proficient in other languages		Cordell
21	Need computerized Tracking System and Dashboards to produce statistical data as to mentally ill offenders.	The effectiveness of changes made to this system cannot be evaluated as to their effectiveness without ongoing data collection that is accessible.		Manley
22	The Department should immediately place its Operations Manual for both the enforcement and custodial operations online so that it is available to the public.	The public has a right to know the basic policies and procedures that guide the Sheriff's Department. It is especially important that inmates and their families and loved ones understand how the jails operate and the rules that guide them. The San Jose Police Department's Duty Manual has been online for several years so that all of its policies and procedures are available to the public. That Manual can be downloaded and viewed at the following link: http://www.sjpd.org/Records/DutyManual.asp		Cordell
23	Using memorandum or directives should be a short term solution. Department needs to get more funding and staff to make it a priority to update policies and procedures.	Policies and procedures play a very important role in defining an organization's guiding principles, providing detailed task instructions and forming the basic structure of business operations.		Le
24	Updated policies and procedures should accompany with training to ensure staff understand the changes and expectations.	An effective policy should be updated annually to comply with mandates, regulations and a valuable tool to protect organization's liabilities.		Le
25	Commissary Prices - Prices for all commissary items should be reduced by 10 percent to 20 percent.	It is unfair for inmates to pay exorbitant prices for commissary items or prices that are higher than those charged for comparable items by grocery stores on the outside. For example, a can of tuna at the commissary costs \$4. A 6-ounce can of Starkist albacore tuna costs 5.79 at a supermarket, about 80 percent less. A can of 5-ounce Chicken of the Sea albacore tuna costs \$.99 at a supermarket, about 75 percent less.		Le
26	Prices of goods sold to inmates should be monitored and updated.	Many items appeared to be overpriced.		Amador

27	Inmate rule book should be revised with respect to structure, language, simplification, and should be aimed at a common reading level around 4th or 5th grade.			Statman
28	Ensure the "Inmate Orientation and Rulebook" grievance procedure forms and other important documents are available in English, Spanish, Vietnamese, and other languages. Also ensure the videos shown at inmate intake are available in multiple languages.	If the inmates are expected to follow the rules then they need to be able to read them. Having forms in other languages will make it easier to file grievances.		Weatherspoon
29	Revise and simplify the "Inmate Orientation and Rulebook."	Simplifying the rulebook will help illiterate inmates understand the most important rules and procedures they need to be aware of and are expected to follow. Currently the book is too complicated and has too much information.		Weatherspoon
30	Rule Book: Should be written in threshold languages. Chinese(Mandarin), Spanish, Vietnamese, Tagalog., etc., and there should be someone who can orient new inmates by explaining the main issues of the rule book. The Rule Book should be part of an in person orientation (to the facility) of new inmates.			Mukoyama
31	Rewrite and reorganize the inmate rulebook. 2) Have the availability of a larger print (accommodation) and 3) be available in other forms of delivery such as audio and/or video	All inmates should have equal rights to access and understand the rules by which they are expected to obey. Not all individuals learn the same or are able to learn the same (a blind person cannot read standard print). Employing varied Delivery methods would improve overall inmate understanding of the rules. Individuals in the jail have mental, intellectual, and physical disabilities needs that require tailored services to meet those needs.		Holland
32	Storage: Larger or more bins to store belongings such as books, legal papers, hygiene products, etc.			Mukoyama
33	Indigent fund: Indigent fund should have a budget figure. Currently there is a 0 budget proposed			Mukoyama
34	Fees charged to deposit funds should be reassessed to see if they can be reduced or removed.	These absorbent fees create a financial hardship on families.		Amador

Mental Health Issues

35	Assure that the present changes in custody mental health at the jail are not limited to the main jail. There should be no delay in providing mental health evaluations and if prescribed, medications, becomes at Elmwood as well as the main jail.	I have noted and my concerns have been confirmed by Custody Mental Health that although wait times for mental health evaluations and medications have been reduced in the main jail, mentally ill inmates at Elmwood still experience waits that can be for weeks. The result is denial of equal access to treatment for mentally ill inmates housed at the Elmwood Facility.		Manley
36	Develop an assessment process at booking of mentally ill offenders by utilizing a mental health needs and risk assessment for all inmates to assure that the mentally ill, and in particular the indigent, are evaluated and placed in treatment immediately. Further that discharge planning, including possible diversion, start at booking. Each mentally ill offender should have a discharge plan that is modified as more information is gathered.	In my experience, there is no commitment to discharge planning for mentally ill inmates by the Jail that actually assesses them and links them with community services. All mentally ill inmates deserve an equal opportunity to participate in community treatment and services, and not simply be released to the streets. This is a very vulnerable population and that fact needs to be recognized.		Manley
37	Improve timeliness, seamlessness, and continuity of “outpatient” behavioral health and medical care by, among other things, more timely response to requests for treatment, particularly emergencies; improved access to medications and other necessary care upon booking; and better follow-up care after inmates are treated at Valley Medical Center.	The Emblidge & Smith Reports documented substantial complaints about access to and quality of medical and behavioral health care. The Law Foundation of Silicon Valley also receives numerous complaints from inmates in this area, including complaints about access to medication, delays in access to treatment, and lack of coordination between Custody Health and Valley Medical Center when inmates are referred to VMC for consultation and treatment.		Brunner
38	Upon release from jail, the sheriff’s department should facilitate access to an appropriate supply of medication as ordered in the discharge plan, a prescription, and a list of pharmacies accepting the issued prescription that are easily accessible to the person, rather than faxing all prescriptions to the Enborg Pharmacy which is far from the jail. Also, the mentally ill indigent offender should be transported to pick up those medications.	Again night releases and lack of coordination to make sure that medications are in the hands of the person who needs them, specifically the seriously mentally ill and the indigent is an ineffective system that does not assure access to community treatment.		Manley

39	Mental health staff should be available at jail-booking and at all times thereafter. Most specifically, mental health staff should be a part of any response team relating to behavior of the mentally ill person while in custody.	An evidence based practice that assures more reasoned and professional responses to mentally ill offenders who are struggling and may be decompensating. Mental Health professionals are in the best position to evaluate appropriate responses and guide custodial staff.		Manley
40	Improve coordination of community-based and in-custody behavioral health services for people coming into, and being released from, the jail.	Based on the Law Foundation of Silicon Valley's experience in advocating for inmates with behavioral health disabilities, many of these individuals frequently cycle in and out of the jail, and receive behavioral health services from both the jail behavioral health system and the county behavioral health system. Improved coordination would likely serve to improve behavioral health outcomes for these individuals.		Brunner
41	The jails should have sufficient resources and staff to ensure access to mental health treatment services, discharge planning, etc.	In my experience over many years, our jail has never had sufficient mental health staffing to meet the needs of the growing mental health population in our jail. The staff is extremely dedicated, but has no chance at success because for years the staffing level has been curtailed. The result is the denial of equal access to treatment for the mentally ill who are indigent.		Manley
42	Offenders with mental illness should be released during daytime business hours rather than late at night or in the early morning hours to ensure that offenders can be safely and realistically be reintegrated into the community	Presently absent a Court Order defendants are released late at night which gives no opportunity for the indigent and homeless mentally ill (of whom there are unfortunately many) to enter any housing or services.		Manley
43	Offenders with mental illness who do not have federal and state benefits, or have lost them due to the length of their incarceration, should receive assistance from jail staff or in-reach care managers in preparing and submitting the necessary forms and documentation to obtain benefits immediately upon reentry into the community	Presently the burden is entirely on the offender who cannot easily navigate a complicated systems of obtaining proof of time in custody, etc. Failure to connect defendants with benefits increases costs to the County and the inability of the person released to survive on the streets. This results in a denial of equal access to treatment.		Manley
44	Peer support services, through an in-reach process, should be offered to offenders in jail with mental illness while incarcerated and upon release to help ensure successful community reentry.	Another evidence based practice that assures that the mentally ill defendant will be connected with services on release.		Manley

45	Create in reach for all County and Community providers working with mentally ill offenders to assure that when the inmate is discharged, he or she will not end up in the streets. Make it possible for interviews and assessments to take place in the jail in a confidential setting.			Manley
46	Ensure co-equal leadership and decision-making between the Sheriff's Office and Custody Health around the needs of inmates with behavioral health disabilities. This should include increased collaboration around housing, classification, safety, and behavioral health treatment access for inmates with behavioral health needs; co-review of use of force incidents involving inmates with behavioral health disabilities; joint responsibility for correctional officer training on behavioral health needs; and joint problem solving with respect to individual inmate behavioral health needs.	Given the high percentage of inmates with behavioral health needs in the jail, behavioral health leadership at the jail must be an equal partner with the Sheriff in addressing the wide array of areas in which these disabilities can impact inmates during incarceration.		Brunner
47	Restructure the operation of the current acute "inpatient" psychiatric unit of the jail (Unit 8A) to ensure that it operates as a therapeutic environment that supports inmate recovery and wellness. This would include ending restrictive housing on 8A and ensuring sufficient program and out-of-cell time per day for each inmate; increasing the number of therapeutic and recreational individual and group program offerings on the unit; and ensuring compliance with state standards for operation of a licensed Correctional Treatment Center.	Unit 8A serves inmates with the most critical behavioral health needs in the jail, but inmates housed there receive little more than periodic psychiatric assessment and medication and are locked down in their cells most, if not all of, the day. They receive little, if any, structured group or individual therapy or programming.		Brunner
48	Remove the mentally ill who are not charged with a violent/sexual felony out of the jail. Divert them from custody at police contact to programs that are easy for police to drop off and for consumers to get services.		Take a look at project in Seattle called LEAD	Weatherspoon

49	The County to provide funding and housing outside the Jail for the mentally ill instead of incarcerating them.	The mentally ill need help and services that cannot be provided in the SCC Jail. The correctional officers are not doctors or nurses, and are not trained to provide the necessary care and treatment. In fact, the officers sometimes unconsciously provoke or escalate situations because they do not recognize symptoms.		Weatherspoon
50	The Department needs to reopen an "Assessment and Observation" unit. This is an important unit to house inmates in the first 24 hours after arrest. During the first 24 hours, the module officer will monitor inmates' behavior and can render medical or mental health services promptly.	Inmates who are too intoxicated or going through withdrawals should be monitored closely, and not be placed in the general population in the first 24 hours. Inmates who are arrested for the first time should be housed in the A/O Unit for their safety. Most of the suicide attempts happen within the first 24 hours.		Le
51	Mentally ill inmates should be evaluated promptly. They should not have to wait at Elmwood Processing for hours to be transferred to the Main Jail for evaluation after 11:00 p.m.	At the present time, there is no mental health staff assigned to work at the Women's Facility or Elmwood Facility after 11:00 p.m. Department should look at providing 24 hour mental health services at the Elmwood Complex. When inmates need mental health services after 11:00 p.m., they are required to be transferred to the Main Jail.		Le
52	The Women's Facility needs to establish a mental health unit to provide adequate care for the female mentally ill inmates. Female mentally ill inmates should not be transferred to module 8A.	Female mentally ill inmates housed in Module 8A may expose themselves to other male inmates when they are only allowed to wear a Ferguson gown. Sometimes female inmates manipulate the mental health system so they can be transferred to Module 8A to take a break from the women's facility. This cause shortage of acute psych bed in Module 8A.		
53	Mental Health Treatment: There should be group therapy focused on substance abuse, Post Traumatic Stress Disorder and anger/stress management and pre-discharge planning/counseling for release to the community.			Mukoyama

Custody Health

54	Apply the same rigorous analysis and establishment of performance measures for Custody Health Services that is comparable to audits and evaluations of other departments and programs.	The responsibilities for the operation and coordination of custody health and behavioral health services are in transition. The urgency of addressing core issues, such as, but not limited to, the accessibility to clinical services, management of medication, inmates' behavioral health assessments, and evaluation of effectiveness of clinical services/treatment are needed. It is unclear if this is underway.	Interviews with inmates and family members, Consultant team findings (Aaron Zisser, J.D. and Scot Emblidge & Jodie Smith (Moscone Emblidge & Otis LLP). Several consultant studies have been completed of various departments in County government.	Price
55	Provide regular preventative care for detainees who are housed for a year or longer in the facilities, such as dental cleanings and x-rays, physicals, immunizations and other standard care that would be received outside. To reduce the loss of teeth and the cost of trips to the emergency room, institute more preventative care for detainees and improve response to requests for care. Consult medical professionals for typical standards of recommended care.	Pulling teeth is not a preventative dental plan. Trips to emergency rooms and "man downs" are expensive and although not entirely preventable, increasing medical and dental interventions in a timely manner coupled with preventative can reduce the cost and frequency of such incidents.		Clifford
56	A formal jail liaison should be designated by Behavioral Health and programs and local to improve communication and coordination between the jail and agencies involved in the discharge planning and pre and postadjudication services for offenders with mental illness.	Another evidence based practice that assures that the mentally ill defendant will be connected with services on release.		Manley
57	Need a records and information system that ties custody health to County Mental Health and Community Mental health to allow for linkages and connections when mentally ill offenders are released. The system must allow input from all health programs involved in providing care to the individual.	Presently there are incompatible systems, and access to all information is not permitted nor available.		Manley
58	Physical Health Treatment: Treatment should be a timely with a compulsory minimum wait time to be seen after a request has been made. Also, Optometry should be included in physical health treatment to examine inmates perhaps during "orientation" for possible eyeglasses.			Mukoyama
59	Full time, benefitted/coded Substance Abuse positions added to the staffing throughout the entire jail system	With the jail population being so high with dual diagnosed individuals...Substance Abuse Professionals as dedicated staff, as part of the jail staffing team, makes sense.		Holland

Programming

60

<p>Continue to set higher standards and effective options for improving the Jail Diversion Program by incorporating innovative programs and “best practices.”</p>	<p>Many individuals with significant mental health conditions are currently incarcerated and there needs to be a more systematic, compassionate, and improved diversion programs which support the success of former inmates.</p>	<p>Programs existed in the past that demonstrates best practices such as the Mental Health Jail Diversion Program; Council on Mentally Ill Offenders (COMIO), California Department of Corrections and Rehabilitation, 14th Annual Report, November 2015 (Identified three priority areas for 2015: Divert persons with mental health needs from the criminal justice system; improve first responder training for encounters with persons with mental illness; and prevent youth with mental heal needs from becoming involved in the juvenile justice system.</p>	<p>Price</p>
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61

<p>Expand government grant funding to enhance workforce development and employment readiness and options for inmates through the re-entry center.</p>	<p>Prior to and upon release, inmates need enhances services to find employment which is an important aspect of well-being and economic success.</p>	<p>Workforce Innovation and Opportunity Act (WIOA)- administered by the City of Sunnyvale- effective July 1, 2016; Work 2 Future- administered by the City of San Jose; Job Corps- residential program for those under 25 years of age who have been released from jail; Reintegration of Ex-Offenders (RexO): Fed Department of Labor: serves adult and juvenile offenders; Department of Justice: Linking Employment Activities Pre-Release (LEAP) and Law Enforcement Services Career Pathways Programs; both via DOJ: http://ojp.gov/fbnp/reentry.htm</p>	<p>Price</p>
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62	New groups and programs need to be developed for the mentally ill. Examples are living with mental illness, coping skills and strategies, family dynamics, exercise groups.	Presently nearly all mentally ill inmates are not allowed these opportunities because of their classification, and the lack of creative programming to meet their needs which results in an unequal system within the jail.		Manley
63	Increase staffing to enable expansion of programs, visitation and non-structured time while providing for the safety of detainees and staff. Investigate staffing levels and provide funds for adequate staffing.	We currently have a shortage of correctional staff and have many people working overtime to cover the needs of the facilities, even without several pods being released for more than a few hours of non-structured time. This causes burn out and fatigue of staff and escalates tension and mental health issues for detainees, particularly in those areas where they remain in their cells most of the day.		Clifford
64	Review and revise jail programming policies and practices to ensure intentional planning and development of program opportunities; quality management review of program offerings; and equitable distribution of programming opportunities for inmates across jail facilities, housing units, and classifications.	The Commission's review of the Inmate Welfare Fund raised questions regarding quality review and equitable distribution of program offerings. This review should extend to all programs offered in the jail, and be part of an overall re-envisioning of the provision of programming at the Jail.		Brunner
65	Establish a plan to increase jail program offerings, with an emphasis on increasing opportunities geared toward successful re-entry and behavioral health recovery, and opportunities for inmates with higher level classifications. In addition, focus on bringing civilian and community-based services into the jail.	A theme raised throughout the Inmate Welfare Fund study session, and raised by advocates outside of the Commission, is inadequacy of programs currently offered by the jail, in spite of a wealth of community resources that could be leveraged for enhancing these services.		Brunner
66	Perform full scale assessment and plan for of needs of long-term inmates that ensures breadth and infrastructure for services, including programming, medical care, and behavioral health care that is geared toward long term incarceration.	The Emblidge & Smith Reports reflected serious inmate concerns that conditions at the jail are not conducive to long term incarceration and that conditions in the jail are worse than in prison.		Brunner

67

<p>Expand and offer evidenced based programming opportunities to all detainees interested in participating, regardless of classification or housing assignment. Program options to consider can include but not be limited to life skills, parenting, meditation, recovery, basic literacy skills, GED, college programs, enrichment opportunities, religious study, job preparation, ESL instruction , AA/NA, mental health and wellness and self improvement. Detainees housed in areas where group instruction is difficult should be offered options via remote teaching on TV's or tablets. Establish a timeline for implementation.</p>	<p>Currently most programs are offered at Elmwood, while many areas of MJN and MJS and areas of the women's facilities which house higher classification levels have little to no structured, evidenced based programming available. Programs have data surrounding the number of participants but little data appears to be available regarding their effectiveness or usefulness to the participants, or how they are selected for inclusion. Time out of cell to shower, make calls, and exercise are not structured, meaningful program options.</p>		<p>Clifford</p>
<p>Increase outreach to the community with volunteer opportunities to provide enrichment programs within all areas of the facilities. Provide expansion through existing systems such as the Chaplains office and other community based or advocacy agencies. Streamline the process for vetting, training and providing clearance for volunteers and advocacy groups to offer programs and services.</p>	<p>Encouraging community volunteers to provide programs and services seems like a natural approach to increasing positive opportunities for detainees and families and building community involvement in outcomes for detainees. However, efforts to encourage and coordinate programs needs to be in place, as does a streamlined approach to vetting, training and providing clearance for volunteers. Seeking the support and coordination of such efforts via existing systems such as the Chaplains office can help expedite the process.</p>		<p>Clifford</p>

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<p>Create inmate suicide awareness and prevention program and a post-vention program for surviving inmates. Designate specific staff to address these issues</p>	<p>There here were 12 suicides at the jail from 2000 to 2009, plus exactly 200 failed suicide attempts during that span according to a, County Report regarding suicides in jail http://www.mercurynews.com/ci_19007527. Based on questions from the community and Behavioral Health Board regarding suicide attempts, suicide deaths, and suicide clusters, the responses were incomplete and inadequate. Improvements are necessary to address these issues.</p>	<p>A Three Year Review of Federal Inmate Suicides (2011–2014) – Canada http://www.oci-bec.gc.ca/cnt/rpt/oth-aut/oth-aut20140910-eng.aspx; Management of suicidal and self-harming behaviors in prisons: Systematic literature review of evidence-based activities. Archives of Suicide Research, 18(3), 227-240: (summary here http://www.sprc.org/news-events/the-weekly-spark/weekly-spark-friday-november-20-2015; The Injury Control Research Center for Suicide Prevention (ICRC-S) webinar on suicide prevention in criminal justice settings http://suicideprevention-icrc-s.org/exploring-impact-suicide-prevention-research-criminal-justice-system-1</p>	<p>Price/Mukoyama</p>
<p>The DOC should give advanced notice of the offender's release date and time from jail to the offender's community treatment coordinator as specified in the discharge plan as well as to members of his or her family, as appropriate, and others in his or her support system.</p>	<p>Reduces the likelihood of rearrest. Links the person to community treatment.</p>		<p>Manley</p>
<p>When an inmate is ordered released by the Court to a treatment program, eliminate the present use of a process that involves putting the inmate in the street and calling a taxi. Rather, have the person delivered by the Sheriff's Department to the program and accompanied in a welcoming way into the program. This was the prior system years ago and was far more effective and personal than the present taxi system that results in immediate walk aways from treatment far more frequently.</p>	<p>An evidence based practice that actually exists as to our jail if the person is on Parole. The Parole agent picks the offender up and takes him or her to the treatment program.</p>		<p>Manley</p>

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72	Utilize tablets or other available technology for educational materials for programs, so that all inmates who are eligible and who would like to participate, may participate in these programs.			Erin O'Neill
73	Ensure that inmates who want to participate in programs and are eligible, have the opportunity to participate in programs.	The IWF audit stated that in 2013-2014, 23.1% of the inmate population was participating in programming. Since neither the Sheriff nor the DOC tracks whether these levels of participation represent all inmates who both want to participate and are eligible to participate, it is impossible to know if everybody who can participate, is able to participate.		Erin O'Neill
74	Review information on the Department of Labor website and utilize some of the resources being offered there in relationship to Apprenticeship. The County could leverage resources of DOL and our local Employment Partners to build into the Jails a quality training/employment path that assists individuals returning to the Community	The options currently in the Jail System provides little hope for a brighter future.	Department of Labor, Apprenticeship Programs	Holland

Classification

75	<p>That this Commission recommend to the Board of Supervisors that the first priority in change should be to create more treatment capacity and alternatives for mentally ill and substance abusing defendants in custody who are held in custody solely because there is no appropriate treatment presently available for them in the community, and that the County place its primary focus on finding alternatives to incarceration of mentally ill offenders, including diversion and appropriate pretrial release, and develop prevention strategies to reduce recidivism and return to custody of mentally ill offenders.</p>	<p>To the present day, mentally ill offenders remain in custody solely because there are no treatment alternatives for them, the lack of sufficient diversion programs, and the inability of indigent mentally ill offenders to post even small amounts of bail. Long waiting lists remain to the present day. Equal access to treatment should be provided to all offenders.</p>		Manley
76	<p>Create a new Classification System that provides equal access to Mentally Ill offenders.</p>	<p>In my experience, far too many mentally ill offenders are held in isolation and with classifications that deny them many opportunities, including access to treatment and access to custody treatment and education programs.</p>		Manley
77	<p>Development of an evidence-based, best practices approach for classification that eliminates subjectivity and the misuse of classification decisions as punishment or retaliation.</p>	<p>Classification underlies the entire experience of an inmate, including housing assignment and access to programming, and should be free of subjective, punitive, or retaliatory practices such as the use of "Custody Input Reports."</p>		Brunner
78	<ol style="list-style-type: none"> 1. Replace current classification system with a statistically valid, reliable, evidenced based instrument. 2. Establish a time line for implementation for training of staff and reclassification of detainees, and report progress to Board of Supervisors regularly upon implementation. 3. Allow detainees access to their files to determine accuracy of contents and challenge any discrepancies. 	<p>MGT study in Dec of 2014 found the classification system to be subjective, cumbersome to administer and lacking in statistical reliability or validity. Grievances regarding classification, which determines housing and programs, was among the top 4 areas grieved over the past 5 years. Detainees are not allowed to review their files for inaccuracies or challenge the contents which may be preventing their ability to down class to less restrictive settings. The Board commissioned a study of the current system which should be available for review and possible implementation of recommendations in April.</p>	MGT study 2014	Clifford

79	Completely and thoroughly examine the Classification System for inmates and make immediate improvements to ensure appropriate access to services and housing. Create a process for appealing housing classifications.	There have been several examples of how the Classification System is insufficient and variable. Issues such as communicating with inmates regarding changes of classification, the down grading of inmates to less restrictive environments (posing additional risks to others) as a means of addressing capacity issues in the Main Jail, for example. A valid Classification system defines housing options and access to programs and services and is very important.	Consultant presentation (February 20, 2016: Aaron B. Zisser, J.D.).	Price
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Training for Correctional Staff

80	Create a systematic review of post CIT training behaviors of all employees to ensure the benefits of the training are clearly demonstrated in all interactions with the inmates. Identify a specific date by which all training and a follow-up plan for all employees is achieved.	Behavior and attitude changes do not simply happen following completion of courses such as Crisis Intervention Training. Recent incidents suggest that a more systematic approach is needed to ensure these skills are categorized as critical skills to meet job performance expectations.		Price
81	Review training curriculum, hiring and promotional practices for correction staff with experts knowledgeable in the field. Training for issues of mental health, behavioral needs and mediation techniques should be specific to the work situation inside facilities, which differs from the circumstances faced by patrolling officers.	Reviewing current practice for training, hiring and promotion may yield suggestions for improvement or change going forward.		Clifford
82	Specialized training needs to be developed for all staff working with the Mentally Ill. This training must be different from that given to first responders because staff in the jail work with the mentally ill on an ongoing basis rather than responding to an individual incident.	A best practice and completely lacking in our jail.		Manley

83	<p>Develop and implement specialized behavioral health and crisis training for correctional officers and other jail staff (including behavioral health staff) that is based upon consultation with outside experts regarding best practices, is tailored to the custodial setting and includes the following topics</p> <p>A. Eliminating stigma around behavioral health disabilities; B. Appropriate response to inmates experiencing behavioral health symptoms or crisis; C. Understanding the rights of inmates with behavioral health disabilities, including the right to reasonable accommodations; D. De-escalation techniques and trauma-informed care; and E. Connecting inmates with appropriate jail services and resources.</p>	<p>The recent deaths of inmates with behavioral health disabilities and complaints regarding vulnerability of inmates with behavioral health disabilities documented in the Emblidge & Smith Reports demand the need for focused and specialized behavioral health training for correctional officers. This training should be offered in-house to officers with the participation of leadership from the Sheriff's Office. This will allow training to be infused with policies and procedures specific to the Jail and will encourage officer buy-in and accountability.</p>		Brunner
84	<p>Staff should be allowed to attend 24 hours update training away from their work area in order to achieve effectiveness of the training. Staff should not sit at the floor station (work area) while performing their duties and taking classes on the computer.</p>	<p>Training is essential prevention tools that should not be overlooked.</p>		Le
85	<p>Department needs to bring back the Interpersonal Communication Skills class.</p>	<p>This class is a valuable tool that teaches staff techniques of effective communication with inmates who are mentally ill or irate.</p>		Le
86	<p>All custody staff should be trained in CIT or at minimum a similar type of training that is Evidenced based</p>			Holland
87	<p>All CIT trained individuals should be mandated to take a CIT refresher course every 3 or 5 years.</p>	<p>Systems and practices are always changing and it's important to stay current in this type of training. Being competent in Crisis Intervention is truly the difference between life and death.</p>		Holland

88	<p>The entire CIT Course used to train officers needs to be evaluated by an outside entity to assess whether or not there is material in the the course that may be deemed racist, culturally inappropriate, stigmatizing, and/ or discriminatory. This needs to include every aspect of the course like outside Presenters, material pulled from the internet and used in the training, etc</p>	<p>The CIT material is intended to aid in the process of improving Crisis Intervention outcomes by improving the skill set of the end user. If there is material being used in the training that is not aligned with the overall mission, it needs to be removed.</p>	<p>As an employee of NAMI I participate in an aspect of the CIT training. I have witnessed the use of material and language within the course that I found to be extremely discriminatory and offensive as a person living with Mental Health and addiction challenges. I felt it to perpetuate stigma which is in direct conflict of the CIT goals. I was accompanied by other colleagues that felt the same.</p>	Holland
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Jail Observer Program (JOP)

89	<p>Increase staffing and resources for the Jail Observer Program, and provide seamless communication regarding standards and practices between the JOP and the DOC for the benefit of the detained, families and staff when investigating concerns. Provide JOP information to detainees, families and staff in a clear and easily accessible manner.</p>	<p>The JOP is staffed by one person and half time time support staff, which is insufficient for the volume of calls and needs received by the JOP. Easy access to information regarding standards and practices within the DOC is necessary to respond to concerns. Numbers to reach the JOP should be clearly visible and available within the lobbies of all facilities. Currently information regarding the JOP number is stenciled in the hallway leading to the elevators in MJN, not in an area easily seen or recorded by those who may wish to call.</p>		Clifford
90	<p>Significantly expand the successful but understaffed JOP program, with specific Jail Observers assigned to each facility, housing section.</p>			Lee

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<p>Convert the Jail Observer Program (JOP) to an organizational ombudsman's office, structured according to the best practice standards of the International Ombudsman Association (IOA) and modeled after the Juvenile Welfare Office of the Ombuds which operates on the basis of an Interagency Agreement between the Office of the County Executive and the Social Services Agency.</p>	<p>An organizational ombudsman provides complainants with an objective source for effective complaint communication, forward strategizing of options for redress, and identification of applicable Departmental procedures and protocols. Independence and confidentiality, as ombuds practice standards, engender increased faith and trust amongst complainants and constituents that concerns will be triaged and addressed without fear of reprisal, and in accordance with published Departmental operating principles. From the perspective of the Department, informality and neutrality as ombuds practice standards ensure resolution at the lowest, most effective level possible, just as the Department is provided information on trends and needs in advance of catastrophic failure, affording the Department of Corrections (DOC) proactive opportunities to address areas of critical need.</p>		<p>Cordell/JOP</p>
<p>Update the Department of Corrections handbook to include reference to, and support of the jail ombuds program.</p>	<p>The relative success of an organizational ombudsman is directly proportional to the degree of support, access, trust, and candid interaction that exists between the Department of Corrections, the inmates, their families, and the ombudsman. In the context of the County of Santa Clara's Juvenile Welfare Office of the Ombuds, upwards of 65% of the complainants to the office during any period are referred by the social worker and/or the Department of Family and Children's Services itself. Replicating this relationship of support between the JOP and DOC staff and administration helps to maintain high levels of transparency and accountability that are necessary to building inmate and officer trust, community support, and satisfaction with respect to Departmental operations.</p>		<p>Cordell/JOP</p>

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<p>Establish a Memorandum of Understanding (MOU) between the Office of Human Relations (County Executive's Office) and both Custodial and Behavioral Health Care Services.</p>	<p>Within the past two years, complainant grievances received by the Jail Observer Program implicating the operations, sufficiency, and access to care afforded by Custodial and Behavioral Health have constituted almost 35% of all complaints on average, with high water marks at 50% of complaints implicating these operations during given quarters. This exponential increase in concerns related to health care issues brings with it the need to memorialize the role that the jail ombudsman can play vis-à-vis those agencies. Just as the ombuds' services rendered by the operations of the Jail Observer Program have benefited the Department of Corrections, the inmates, and those interested in adult custody issues, so too would Custodial and Behavioral Health benefit from the memorialization and recognition of an ombuds function. An MOU, along with the personnel and knowledge-based capacity to triage this special area of ombuds' operations, is necessary in order to negotiate and articulate understandings about issues such as patient HIPAA protections, access to and collaboration with medical staff that is indispensable to the redress of complainant concerns, and routine communication about medical and mental health policies, procedures, and organizational practices so that inmates (and others) have an additional source of information to turn to about how to most effectively access entitled services.</p>		Cordell/JOP
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<p>Establish clear parameters for the operation of the jail ombudsman with respect to grievance intake and management.</p>	<p>An ombudsman is typically one of several mechanisms that work in concert within a given system that are designed to address and respond to queries, complaints, and concerns. Examples of additional mechanisms may include internal complaint departments, equal opportunity divisions, union shop stewards, inspectors general, commissions, and the like. Each component of such a system must have clear parameters of its scope and operations, and ideally, each component should be unique and identifiable in terms of the services it is designed to provide. Only thusly can a Department be said to have established a comprehensive response to questions, concerns, and complaints. As recommendations continue to be produced about the creation of various offices, programs, and methods for ensuring that Department of Corrections operations are proceeding pursuant to its highest standards and practice principles, delineation should be made explicit as to the role and function of each component, so as to avoid duplication, and to maximize efficiency.</p>		<p>Cordell/JOP</p>
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Conditions in Jail & Staffing

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<p>Improve sanitation and health for detainees and staff by: 1. Provide more frequent complete changes of clothing, extra towels and linens. 2. Provide easy access to cleaning supplies. 3. Provide easy access to hygiene items such as soap, deodorant, shampoo, and feminine hygiene needs.</p>	<p>Detainees currently sleep, exercise and spend their day in the same items of clothing for up to a week, (with the new exception of added underwear) and are given one towel for bathing and cleaning their area. Detainees report inconsistent access to cleaning supplies and limited amounts. Not all detainees can afford to buy hygiene products and the amount supplied in indigent kits is reportedly lacking soem necessary items and supplies insufficient amounts to keep clean.</p>		<p>Clifford</p>
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96	Inmate Barber Equipment and Hair-Cutting Services: My recommendation is each module should have their own barber kit and hair-cutting services should be available when inmates are out for dayroom time or at least once per week, not once per month.	At the Main Jail, each floor has only one (1) barber kit to share among three units (modules A, B and C). Inmates are allowed to use hair-cutting services once a month. On the average, each module has 68 to 74 inmates. It can go as high as 96 inmates in a module. Since hair-cutting is only once a month, Main Jail male inmates may have to wait several months before they can use hair-cutting services.		Le
97	Razors: I recommend the Department to purchase enough electric razors for inmates who are housed in a special management dorm.	Razor – Inmates are allowed to use razors as prescheduled time to shave. However, mentally ill inmates are not allowed to use a razor. All inmates should be afforded the opportunity to shave.		Le
98	Department should conduct a study on staff and inmate ratio of supervision in order to provide safety and secure for both staff and inmates.	When an officer supervises over 65 inmates in a module, inmates will not receive adequate services.		Le
99	Department should conduct a study on staff and supervisor ratio.	Proper supervision and training can prevent problems.		Le
100	It is important for officers to work in a safe environment by having adequate staffing. Department should implement minimum staffing requirements. Supervisors should conduct projections and ensure proper staffing is assigned to each unit.	It is unsafe for inmates when staff work short. When staff are working short, inmate services are hindered and staff are unable to take their breaks to relieve stress.		Le
101	Assign Rover Officer to each floor At the present time, each unit at the Main Jail is assigned an officer. However, there is no rover or relieve officer assigned to the floor. Consequently, the module officer must lockdown the unit for breaks or escort inmates out of the module for transfer or rehousing. Module officers are expected to perform additional duties such as delivering legal mail to different areas, participate in on-duty training, and relieve officer at the floor station post or lockdown unit.	This impacts services to the inmates.		Le
102	Provide a quiet staff break room. Corrections work is one of the most stressful in law enforcement. Staff need a place to go to escape the hustle and bustle of the workplace. The ambiance of the break room can impact morale and motivation. Department should provide a clean, quiet break room for officers to unwind and rejuvenate to help them reduce stress in order to be an effective officer, especially if they are working in a high stressful area such as acute psych area (8A), Intake Booking, Medical Infirmary, etc.	Day shift officers are assigned to work from 6:00 a.m. to 6:00 p.m.; night shift is from 6:00 p.m. to 6:00 a.m. At the present time, the only break room officers can use is the cafeteria which opens from 10:00 am to 2:00 p.m. on dayshift and 10:00 p.m. to 2:00 a.m. on nightshift. Most of the times the cafeteria is loud and filled with too many people (civilians and badge staff are eating lunch and talking over each other).		Le

Cameras

103	The Sheriff's Department or other entity that may be in charge of jail operations, in collaboration with community stakeholders, should develop a best-practices protocol for the operation of body-worn cameras for correctional officers, which protocol should be made available to the public via the Department's website. The protocol must include procedures for storage of the footage and for access to the footage by non-Department members.			Cordell
104	The Sheriff's Department or other entity that may be in charge of jail operations, in collaboration with community stakeholders, should develop a best-practices protocol for the operation of the cameras installed in the jails, which protocol should be made available to the public via the Department's website. The protocol must include procedures for storage of the footage and for access to the footage by non-Department members.			Cordell
105	Place cameras in all elevators	This is to address the issues surrounding assertions about foul play occurring in the elevators		Callender

Telephone and Mail Access

106	Address delays in receiving and forwarding mail to the Courts by assuring, including grievance by prompt receipt and delivery.	My experience has been delayed receipt of mail to a Judge over many years.		Manley
107	Assure that Court orders that require the inmate to make a phone call for treatment assessments are immediately complied with and do not require a written request or grievance by the inmate. Provide this access for all inmates regardless of classification during regular work hours.	My experience is that this has not been the case for some inmates, or repeatedly delayed, over many years.		Manley
108	Install more inmate phones in housing areas.	At the present time, there are only 3 phones available in a module. On the average, each module has 68 to 74 inmates. Inmate population can go as high as 96 per module. It relieves tension and prevents problems when inmates can talk to their families.		Le

Families & Visitation

109	<p>Outside of the formal grievances process, create a venue for families, friends of detainees, and advocacy groups to present concerns related to the jails, conditions of confinement, or problems associated with incarceration within our county. Provide an opportunity for these concerns to be heard by a body that can mediate and respond, such as the Board of Supervisors, or Human Relations Commission. Seek examples of mediation and community building groups from other counties. (links to Orange County listed below)</p>		<p>http://www.ochumanrelations.org/programs/police-community/ http://www.ochumanrelations.org</p>	Clifford
110	<p>Increase the amount of visitation available for families and friends to visit with detainees while they are in custody. Include some evening visitation opportunities at at those facilities where they currently don't have them. Expand the hours the visitation desk is open for the public to make appointments and register to visit.</p>	<p>Visitation is currently limited to twice weekly, with 30 minute visits at Elmwood, hour visits at MJN and MJS and in some facilities, such as MJN, there are no evening appointments. Increased visitation strengthens family and community cohesiveness, supporting successful re-entry upon release. The visitation desk is open from 7-11 a.m. and 1-3 p.m, and many working families cannot make visits or access the desk during the established hours.</p>		Clifford
111	<p>Visitor Lobby - Visitors who are preregistered and sign up on-line should check in 15 to 30 minutes prior to their scheduled visit (current requirement is 45 minutes to one hour). Visit cancellations should be immediately updated for the public via the Internet and the visiting phone line voicemail.</p>	<p>We should make it easier, not harder, for families and friends to visit inmates. Requirements should be reasonable, not onerous, and clearly communicated.</p>		Amy Le
112	<p>Visitor Lobby: Visitors should be allowed to visit their inmate even though they arrive after the 60-minute rule that they must be present at least 60 minutes before the appointment. Many families travel great distances. Perhaps within the 60 to 30 minute limit should be allowed.</p>			Mukoyama
113	<p>Re-evaluate the visiting rules and requirements with the goal of "assisting" families and loved ones to visit the incarcerated.</p>	<p>The visiting rules are not clear and consistent (vary by site) and vary from the written instructions to what is posted on the website. Enforcement of rules by officers varies as well. This equals confusion which equates to missed visiting opportunities.</p>	<p>Links to other resources, articles, citations, evidence-based practice, etc.)</p>	Holland

Female Inmates

114	Develop a written report about the status of all of the recommendations of the Santa Clara County Commission on the Status of Women: Report by Jail Monitors: Female Inmates in Santa Clara County and the Need for a Gender Responsive Protocol (2015). Create an action plan addressing the recommendations of the report.	Planning and programming for female inmates in correctional facilities requires different approaches to various aspects of incarceration: booking, classification, programming and transition planning back to the community.	Note specific reference to Report conducted in 2015 (see above). Comments made by female inmates interviewed by consulting teams to the Blue Ribbon Commission.	Price
115	Ensure that men and women receive an equal opportunity to participate in direct-service programs funded by the IWF, including educational and vocational opportunities.	Men and women's sustainability programs and vocational programming are not equally accessible, and do not lead to similar economic security once released.		Erin O'Neill
116	Ensure that pregnant inmates are provided enough food as needed between regularly scheduled meals, whether or not she has money to pay for commissary items.	There are currently large gaps between meals. Pregnant inmates may pay for food items from the commissary, but women who do not have any money, have to wait for their next scheduled meal to eat. This is not healthy for the mother or the child. (I wasn't sure if this belonged in the IWF category or the non-scope subject.)		Erin O'Neill
117	Feminine products should be made available to women as needed, including showers.			Amador
118	The County should review its current model of providing commissary to inmates with a view toward providing a variety of products at prices that are reasonable and fair to family and friends who pay into the commissary system, and ensuring that any profit made is funneled back into the IWF, rather than to a third-party vendor. This review should re-examine the outsourcing of the commissary system to third party for-profit vendors and identify a variety of models of "in house," jail-administered commissary systems that can be administered efficiently while providing reasonable prices to inmates and families.	The jail commissary is one source of funding for the Inmate Welfare Fund, but the third-party vendor that provides the commissary appears to benefit most from this system at great cost to inmates and families that pay unreasonable prices for at least some of the items available. The jail should revisit its commissary system to determine if there are better ways to provide reasonably-priced products and to channel any profits back into the jail to the Inmate Welfare Fund, rather than to a third-party.		Brunner

Young Adult Inmates

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<p>Create a separate system for 18 - 24 year olds that includes a focus on rehabilitation, wrap-around services, segregation from the adult inmate population and a young adult court.</p>	<p>Young adults, are developmentally similar to adolescents and what happens to them during this time of their lives can put them on a positive trajectory.</p>		<p>Amador</p>
<p>Create developmentally responsive policies and practices to address the unique needs of transitional age youth and young adult inmates (18 to 27 years old) through correctional officer and other jail staff training, tailored programming offerings, and appropriate classification/housing decisions to lead to longer-term rehabilitation for those incarcerated in the jail system.</p>	<p>Nationally, researchers have discovered that the pre-frontal cortex of the human brain is not even fully formed until well into an individual's twenties. This part of the brain controls impulsivity, understanding of cause and effect and consequences. As a result, this age group is at a critical state where interventions, exposure and connection with other adults (either positive or negative) have a lasting impact on brain development and resulting behavior. All of this scientific information indicates that the 18-27 stage in life is a crucial period in which positive interventions can aid young adults in getting back on track.</p>		<p>Brunner</p>

120