County of Santa Cruz

BOARD OF SUPERVISORS

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JOHN LEOPOLD	ZACH FRIEND	RYAN COONERTY	GREG CAPUT	BRUCE MCPHERSON
FIRST DISTRICT	SECOND DISTRICT	THIRD DISTRICT	FOURTH DISTRICT	FIFTH DISTRICT

August 16, 2016

The Honorable Judge John Gallagher
Santa Cruz Courthouse
701 Ocean Street
Santa Cruz, CA 95060

RE: RESPONSE TO THE 2015-16 GRAND JURY REPORT
"ANOTHER DEATH IN OUR JAIL"

Dear Judge Gallagher:

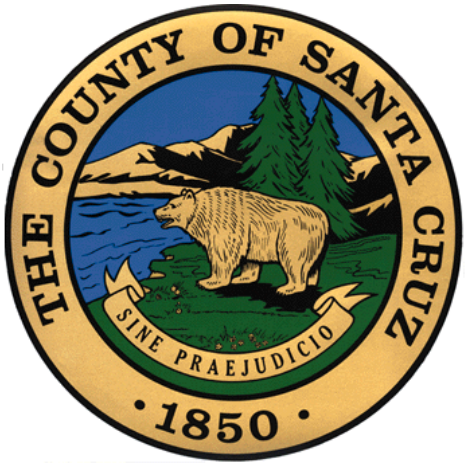
The purpose of this letter is to formally transmit the response of the Santa Cruz County Board of Supervisors and the Santa Cruz County Sheriff-Coroner to the 2015-2016 Grand Jury Report, titled "Another Death in Our Jail."

Sincerely,

BRUCE McPHERSON, Chair
Board of Supervisors

BM:fh
Attachment

cc: Clerk of the Board
Santa Cruz County Grand Jury



The 2015-2016 Santa Cruz County Civil Grand Jury

Requires that the

Santa Cruz County Sheriff-Coroner

Respond to the Findings and Recommendations

Specified in the Report Titled

Another Death in Our Jail

by August 8, 2016

When the response is complete, please

1. Email the completed Response Packet as a file attachment to grandjury@scgrandjury.org, and
2. Print and send a hard copy of the completed Response Packet to

   The Honorable Judge John Gallagher
   Santa Cruz Courthouse
   701 Ocean St.
   Santa Cruz, CA 95060

Instructions for Respondents

California law PC § 933.05 (included below) requires the respondent to a Grand Jury report to comment on each finding and recommendation within a report. Explanations for disagreements and timeframes for further implementation or analysis must be provided. Please follow the format below when preparing the responses.

Response Format

1. For the Findings included in this Response Packet, select one of the following responses and provide the required additional information:
    a. **AGREE** with the Finding, or
    b. **PARTIALLY DISAGREE** with the Finding and specify the portion of the Finding that is disputed and include an explanation of the reasons therefor, or
    c. **DISAGREE** with the Finding and provide an explanation of the reasons therefor.
2. For the Recommendations included in this Response Packet, select one of the following actions and provide the required additional information:
    a. **HAS BEEN IMPLEMENTED**, with a summary regarding the implemented action, or
    b. **HAS NOT YET BEEN IMPLEMENTED BUT WILL BE IMPLEMENTED IN THE FUTURE**, with a timeframe or expected date for implementation, or
    c. **REQUIRES FURTHER ANALYSIS**, with an explanation and the scope and parameters of an analysis or study, and a timeframe for that analysis or study; this timeframe shall not exceed six months from the date of publication of the grand jury report, or
    d. **WILL NOT BE IMPLEMENTED** because it is not warranted or is not reasonable, with an explanation therefor.

If you have questions about this response form, please contact the Grand Jury by calling 831-454-2099 or by sending an email to grandjury@scgrandjury.org.

Findings

F1. There is no publicly available comprehensive report identifying the cause of Krista DeLuca's death, the activities of the Sheriff-Coroner's Office, and the activities of the medical services provider related to her death.

_X_ AGREE

___ PARTIALLY DISAGREE – explain the disputed portion

___ DISAGREE – explain why

Response explanation (required for a response other than **Agree**):

A comprehensive report was completed, however much of the report is restricted by State and Federal law to protect the rights of the deceased and her family.

F2. There is no independent county oversight, by a qualified medical professional, of both the medical services provider (CFMG) and the contract.

___ **AGREE**

___ **PARTIALLY DISAGREE** – explain the disputed portion

__X__ **DISAGREE** – explain why

Response explanation (required for a response other than **Agree**):

Sheriff's medical oversight includes audits by the Health Services Department (HSD), quarterly quality assurance meetings with the medical provider, HSD, the Sheriff's Office and an independent physician, biennial inspections by the Board of State and Community Corrections, daily multi-disciplinary collaborative review meetings between partners and other professional reviews, as well as the annual Grand Jury investigation.

F3. The 2012–2016 contract does not allow the Sheriff's Office to retain additional independent medical providers but the Watch Commander can override the medical service provider's decision and escalate to a higher level of medical care in life-threatening emergency circumstances.

__X__ **AGREE**

___ **PARTIALLY DISAGREE** – explain the disputed portion

___ **DISAGREE** – explain why

Response explanation (required for a response other than **Agree**):

F4. The 2012–2016 contract requirement that the jail medical services provider pay up to $15,000 per inmate admitted to a hospital may be a deterrent to admitting inmates in need of hospital medical care.

___ **AGREE**

___ **PARTIALLY DISAGREE** – explain the disputed portion

__X__ **DISAGREE** – explain why

Response explanation (required for a response other than **Agree**):

The Sheriff's Office does not believe the $15,000 payment clause deterred hospital admissions. The Sheriff's Office did however recognize the potential appearance of conflict through our internal review process and we plan to remove the clause from the 2016 contract proposal.

F5. The Health Services Agency completed the required 2015 annual Title 15 inspection of the Main Jail but did not identify if the facility was in compliance with the Detoxification Treatment requirements (Title 15, Section 1213).

_X_ AGREE

___ PARTIALLY DISAGREE – explain the disputed portion

___ DISAGREE – explain why

Response explanation (required for a response other than **Agree**):

This issue was identified by our internal review process and corrected in March of 2016. We are now in compliance with the requirement.

F6. There is no documentation that the Santa Cruz County facilities have been evaluated for compliance with the CMA-IMQ medical accreditation standards for detention facilities.

_X_ AGREE

___ PARTIALLY DISAGREE – explain the disputed portion

___ DISAGREE – explain why

Response explanation (required for a response other than **Agree**):

The new 2016 contract requires the medical provider to be CMA-IMQ accredited.

F7. The *Chemically Dependent Inmate Policy* lacks objective measurement tools for assisting the medical staff with their clinical decision making and determination of when a patient requires a higher level of medical care.

___ **AGREE**

___ **PARTIALLY DISAGREE** – explain the disputed portion

_X_ **DISAGREE** – explain why

Response explanation (required for a response other than **Agree**):

In March of 2016, the medical provider adopted new policy and procedures for handling acute detoxification of chemically dependent inmates, which include objective measurement tools to assist clinical decision-making.

F8. The *Chemically Dependent Inmate Policy* does not include procedures and symptoms necessitating immediate transfer to a hospital or other medical facility.

___ **AGREE**

___ **PARTIALLY DISAGREE** – explain the disputed portion

_X_ **DISAGREE** – explain why

Response explanation (required for a response other than **Agree**):

The medical provider updated their policy and procedures in March of 2016 with objective tools that specify symptoms necessitating immediate transfer to a hospital.

F9. The *Chemically Dependent Inmate Policy* and the Sheriff's *Medical and Mental Health Care Procedure Manual* lack guidance for when an inmate should be transferred to a hospital for a higher level of care or when an inmate should be placed on IV hydration.

___ **AGREE**

___ **PARTIALLY DISAGREE** – explain the disputed portion

__X__ **DISAGREE** – explain why

Response explanation (required for a response other than **Agree**):

The medical provider's March 2016 updated policy includes guidance for when an inmate should be transferred to a hospital for a higher level of care or when an inmate should be placed on IV hydration.

F10. The *Detoxification of Chemically Dependent Inmates,* Federal Bureau of Prisons Clinical Practice Guidelines, February 2014, contains useful information related to recommended standards for the medical management of withdrawal from addictive substances.

_X_ AGREE

___ PARTIALLY DISAGREE – explain the disputed portion

___ DISAGREE – explain why

Response explanation (required for a response other than **Agree**):

F11. The Sheriff's Office at times refers to placing at-risk inmates in the infirmary, when in fact they are placed in the Observation Unit. The Observation Unit is not an infirmary. The Grand Jury finds this misnomer to be misleading to the public and endangering of the public trust.

___ **AGREE**

___ **PARTIALLY DISAGREE** – explain the disputed portion

__X__ **DISAGREE** – explain why

Response explanation (required for a response other than **Agree**):

The Sheriff's Office, through our internal review process, recognized the term *infirmary* was an inaccurate description of the Observation unit and deleted the term from official forms and correspondence prior to the Grand Jury Report. The Sheriff's Office does not believe the internal use of the term *Infirmary* was misleading to the public nor endangered the public trust.

Recommendations

R1. The Sheriff-Coroner should complete a comprehensive report of every jail death including, but not limited to: the cause of death; the activities of the Sheriff's Office and medical services provider related to the death; and recommendations, if any, for improvement. This report should be made available to the Board of Supervisors and the public. (F1)

___ **HAS BEEN IMPLEMENTED** – summarize what has been done

___ **HAS NOT BEEN IMPLEMENTED BUT WILL BE IMPLEMENTED IN THE FUTURE** – summarize what will be done and the timeframe

___ **REQUIRES FURTHER ANALYSIS** – explain scope and timeframe (not to exceed six months)

_X_ **WILL NOT BE IMPLEMENTED** – explain why

Response explanation, summary, and timeframe:

The Sheriff's Office already completes a comprehensive report and review of every jail death. Some aspects of the report will remain confidential to comply with local, State, and Federal privacy laws.

R2. The Sheriff-Coroner should retain independent oversight of the jail medical service provider and their contract by medically qualified professionals. (F2)

__X__ **HAS BEEN IMPLEMENTED** – summarize what has been done

___ **HAS NOT BEEN IMPLEMENTED BUT WILL BE IMPLEMENTED IN THE FUTURE** – summarize what will be done and the timeframe

___ **REQUIRES FURTHER ANALYSIS** – explain scope and timeframe (not to exceed six months)

___ **WILL NOT BE IMPLEMENTED** – explain why

Response explanation, summary, and timeframe:

We believe there are appropriate checks and balances in place to ensure compliance with standards, including audits by the Health Services Department (HSD), quarterly quality assurance meetings with the medical provider, HSD, the Sheriff's Office and an independent physician, biennial inspections by the Board of State and Community Corrections, daily multi-disciplinary collaborative review meetings between partners and other professional reviews, as well as the annual Grand Jury investigation.

R3. Prior to approving a new medical services contract, the Sheriff-Coroner and Board of Supervisors should thoroughly review the existing contract and evaluate the performance of the 2012–2016 medical services provider with the assistance of qualified medical personnel. (F1–10)

_X_ **HAS BEEN IMPLEMENTED** – summarize what has been done

___ **HAS NOT BEEN IMPLEMENTED BUT WILL BE IMPLEMENTED IN THE FUTURE** – summarize what will be done and the timeframe

___ **REQUIRES FURTHER ANALYSIS** – explain scope and timeframe (not to exceed six months)

___ **WILL NOT BE IMPLEMENTED** – explain why

Response explanation, summary, and timeframe:

Since 2012, the Sheriff's Office and our partners have continuously and rigorously reviewed the performance of our medical service contractor and contract obligations though a variety of processes including daily collaborative inmate patient plans, compliance audits, quality assurance meetings, inspections, and professional reviews.

R4. The Sheriff-Coroner should revise the medical services contract to allow an independently retained medical provider to escalate medical care under life-threatening emergency circumstances. (F3)

___ **HAS BEEN IMPLEMENTED** – summarize what has been done

___ **HAS NOT BEEN IMPLEMENTED BUT WILL BE IMPLEMENTED IN THE FUTURE** – summarize what will be done and the timeframe

___ **REQUIRES FURTHER ANALYSIS** – explain scope and timeframe (not to exceed six months)

_X_ **WILL NOT BE IMPLEMENTED** – explain why

Response explanation, summary, and timeframe:

The Sheriff's medical service provider is fully licensed and appropriately regulated medical service provider. The Sheriff's Office believes employment of an additional medical provider to oversee our contracted provider is neither practical nor appropriate.

R5. The Sheriff-Coroner and Board of Supervisors should delete the contract requirement that the medical provider pay up to $15,000 per inmate for each inmate emergency or catastrophic transfer to hospital care. (F4)

___ **HAS BEEN IMPLEMENTED** – summarize what has been done

__X__ **HAS NOT BEEN IMPLEMENTED BUT WILL BE IMPLEMENTED IN THE FUTURE** – summarize what will be done and the timeframe

___ **REQUIRES FURTHER ANALYSIS** – explain scope and timeframe (not to exceed six months)

___ **WILL NOT BE IMPLEMENTED** – explain why

Response explanation, summary, and timeframe:

The Sheriff's Office deleted this clause from a new medical contract effective September 2016.

R6. The Health Services Agency should complete the annual 2016 Title 15 inspection and identify if the facility is in compliance with the Detoxification Treatment requirements (Title 15, Section 1213), as required by state law. (F5)

___ **HAS BEEN IMPLEMENTED** – summarize what has been done

_X_ **HAS NOT BEEN IMPLEMENTED BUT WILL BE IMPLEMENTED IN THE FUTURE** – summarize what will be done and the timeframe

___ **REQUIRES FURTHER ANALYSIS** – explain scope and timeframe (not to exceed six months)

___ **WILL NOT BE IMPLEMENTED** – explain why

Response explanation, summary, and timeframe:

We expect HSA will complete their required annual inspection by the end of the year.

R7. The Sheriff-Coroner and Board of Supervisors should require in the contract that the medical services provider for detention facilities obtain and maintain accreditation from the California Medical Association-Institute for Medical Quality for adult detention facilities. (F6)

___ **HAS BEEN IMPLEMENTED** – summarize what has been done

__X__ **HAS NOT BEEN IMPLEMENTED BUT WILL BE IMPLEMENTED IN THE FUTURE** – summarize what will be done and the timeframe

___ **REQUIRES FURTHER ANALYSIS** – explain scope and timeframe (not to exceed six months)

___ **WILL NOT BE IMPLEMENTED** – explain why

Response explanation, summary, and timeframe:

CMA-IMQ Accreditation is required in the new medical contract effective September 2016.

R8. The Sheriff-Coroner should require that the *Chemically Dependent Inmate Policy* include the use of objective measurements of opiate detoxification stages, such as the Clinical Opiate Withdrawal Scale (COWS), to assist the medical staff in making more objective decisions regarding treatment. (F7)

__X__ **HAS BEEN IMPLEMENTED** – summarize what has been done

___ **HAS NOT BEEN IMPLEMENTED BUT WILL BE IMPLEMENTED IN THE FUTURE** – summarize what will be done and the timeframe

___ **REQUIRES FURTHER ANALYSIS** – explain scope and timeframe (not to exceed six months)

___ **WILL NOT BE IMPLEMENTED** – explain why

Response explanation, summary, and timeframe:

The medical provider updated their policy and procedures in March of 2016 requiring the use of COWS and other objective measurements of opiate detoxification stages to assist the medical staff decision making.

R9. The Sheriff-Coroner should work with the medical services provider to revise the *Chemically Dependent Inmate Policy* to comply with California Code of Regulations, Title 15, Section 1213, regarding procedures and symptoms necessitating immediate transfer to a hospital or other medical facility. (F8)

_X_ **HAS BEEN IMPLEMENTED** – summarize what has been done

___ **HAS NOT BEEN IMPLEMENTED BUT WILL BE IMPLEMENTED IN THE FUTURE** – summarize what will be done and the timeframe

___ **REQUIRES FURTHER ANALYSIS** – explain scope and timeframe (not to exceed six months)

___ **WILL NOT BE IMPLEMENTED** – explain why

Response explanation, summary, and timeframe:

The medical provider updated their policy and procedures in March of 2016 to comply with California Code of Regulations, Title 15, Section 1213, regarding procedures and symptoms necessitating immediate transfer to a hospital or other medical facility.

R10. Clear guidelines need to be established in the Sheriff's *Medical and Mental Health Care Procedure Manual* for when an inmate should be given a higher level care such as IV hydration or transfer to a hospital. (F9)

__X__ **HAS BEEN IMPLEMENTED** – summarize what has been done

___ **HAS NOT BEEN IMPLEMENTED BUT WILL BE IMPLEMENTED IN THE FUTURE** – summarize what will be done and the timeframe

___ **REQUIRES FURTHER ANALYSIS** – explain scope and timeframe (not to exceed six months)

___ **WILL NOT BE IMPLEMENTED** – explain why

Response explanation, summary, and timeframe:

The Sheriff's *Medical and Mental Health policy* appropriately states that the medical provider is responsible for establishing, implementing and annually reviewing/revising policies for all clinical aspects of the health care program and for monitoring the appropriateness, timeliness and responsiveness of care and treatment. The medical provider's March 2016 updated policy includes guidance for when an inmate should be transferred to a hospital for a higher level of care or when an inmate should be placed on IV hydration.

R11. The Sheriff-Coroner should review *Detoxification of Chemically Dependent Inmates,* Federal Bureau of Prisons Clinical Practice Guidelines, February 2014, and revise applicable Sheriff's policies and procedures to meet or exceed federal guidelines. (F10)

___ **HAS BEEN IMPLEMENTED** – summarize what has been done

___ **HAS NOT BEEN IMPLEMENTED BUT WILL BE IMPLEMENTED IN THE FUTURE** – summarize what will be done and the timeframe

___ **REQUIRES FURTHER ANALYSIS** – explain scope and timeframe (not to exceed six months)

__X__ **WILL NOT BE IMPLEMENTED** – explain why

Response explanation, summary, and timeframe:

The Sheriff's Office reviewed the listed guidelines and provided a copy to our contracted medical provider. The Sheriff Office policy appropriately states that the medical provider is responsible for providing legally required care and for establishing, implementing and annually reviewing/revising policies for all clinical aspects of the health care program and for monitoring the appropriateness, timeliness and responsiveness of care and treatment.

R12. The Sheriff-Coroner should stop referring to the Observation Unit as an infirmary unless major steps are taken to improve the medical services provided in this unit. Continuing to refer to this group of observation cells as an infirmary is misleading to the public and does a disservice to the public trust. (F11)

_X_ **HAS BEEN IMPLEMENTED** – summarize what has been done

___ **HAS NOT BEEN IMPLEMENTED BUT WILL BE IMPLEMENTED IN THE FUTURE** – summarize what will be done and the timeframe

___ **REQUIRES FURTHER ANALYSIS** – explain scope and timeframe (not to exceed six months)

___ **WILL NOT BE IMPLEMENTED** – explain why

Response explanation, summary, and timeframe:

The Sheriff's Office has deleted the term *infirmary* from official forms and correspondence and has educated staff not to use the term *infirmary* when referring to the Observation Unit.

Penal Code § 933.05

1. For Purposes of subdivision (b) of § 933, as to each Grand Jury finding, the responding person or entity shall indicate one of the following:
    a. the respondent agrees with the finding,
    b. the respondent disagrees wholly or partially with the finding, in which case the response shall specify the portion of the finding that is disputed and shall include an explanation of the reasons therefor.
2. For purpose of subdivision (b) of § 933, as to each Grand Jury recommendation, the responding person shall report one of the following actions:
    a. the recommendation has been implemented, with a summary regarding the implemented action,
    b. the recommendation has not yet been implemented but will be implemented in the future, with a timeframe for implementation,
    c. the recommendation requires further analysis, with an explanation and the scope and parameters of an analysis or study, and a timeframe for the matter to be prepared for discussion by the officer or director of the agency or department being investigated or reviewed, including the governing body of the public agency when applicable. This timeframe shall not exceed six months from the date of the publication of the Grand Jury report, or
    d. the recommendation will not be implemented because it is not warranted or is not reasonable, with an explanation therefor.
3. However, if a finding or recommendation of the Grand Jury addresses budgetary or personnel matters of a County department headed by an elected officer, both the department head and the Board of Supervisors shall respond if requested by the Grand Jury, but the response of the Board of Supervisors shall address only those budgetary or personnel matters over which it has some decision-making authority. The response of the elected department head shall address all aspects of the findings or recommendations affecting his or her department.
4. A Grand Jury may request a subject person or entity to come before the Grand Jury for the purpose of reading and discussing the findings of the Grand Jury report that relates to that person or entity in order to verify the accuracy of the findings prior to their release.
5. During an investigation, the Grand Jury shall meet with the subject of that investigation regarding that investigation unless the court, either on its own determination or upon request of the foreperson of the Grand Jury, determines that such a meeting would be detrimental.
6. A Grand Jury shall provide to the affected agency a copy of the portion of the Grand Jury report relating to that person or entity two working days prior to its public release and after the approval of the presiding judge. **No officer, agency, department, or governing body of a public agency shall disclose any contents of the report prior to the public release of the final report.**