

**MINUTES**  
**CITIZENS' LAW ENFORCEMENT REVIEW BOARD MEETING**  
*February 13, 2018*

**Attachment A**

- Roll Call**
- The meeting was held at the County Administration Center and came to order at 5:31 p.m. All Board members were present except Darrel Harrison.
- Minutes Approval**
- The January 2018 meeting minutes were approved by motion by G.I. Wilson and seconded by James Lasswell. Kim-Thoa Hoang requested reframing of the second to last major dot point at the bottom of page one. "The Department of Excellence Goals are..." was changed to "The Department Excellence Goals for CLERB are..."
- Presentation/Training**
- 2017 Mental Health Initiatives presented by Dr. Alfred Joshua
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- CLERB Feb 2018  
Presentation.pdf
- Executive Officer's Report**
- Overview of Activities
    - There is a Special Investigator vacancy, thus leaving only one Special Investigator (Lynn Setzler) and Paul Parker investigating current cases while working through the backlog.
      - As of February 9, 2018, over 70 applications had been received with approximately half meeting the minimum qualifications.
      - The job posting will close on February 14, 2018, at 11:59pm.
      - Interviews will be conducted on February 21, 2018.
      - Mr. Parker hopes to present a candidate to the CLERB at the March meeting.
      - Mr. Parker will be looking for the top two candidates, as the plan is to fill the full-time Special Investigator vacancy and also create a one-year temporary Special Investigator position. Once those two positions are filled and the candidates trained, Mr. Parker will be in a better position to properly assess CLERB's staffing and strengthen its investigative practices, resulting in more thorough and timely investigations.
    - Tamicha Husband has been CLERB's Administrative Secretary III for six months and could not be doing a better job. She is the backbone of CLERB's administrative processes and has implemented comprehensive minutes and other practices to increase CLERB's transparency and efficiency.
  - Investigative Workload Report for January 2018
    - There were 20 new cases (as compared to seven for January 2017).
      - Due to the staffing shortage, Ms. Setzler screened and triaged all of the new cases, as well as working her already large caseload.
    - At the end of January 2018 there were 106 active cases (seven in "lodged" status and 99 open and active).
      - There were 34 open death cases (CLERB has documents for 15 cases and is awaiting documents on the remaining 19).
      - There are three death cases on tonight's agenda.
    - There were no new death cases in January.
    - Ms. Setzler and Mr. Parker are working the open cases with an emphasis on balancing the priority between those cases approaching their one-year time limitation and active death cases for which all materials have been received.
  - Case Progress and Status Reports
    - Mr. Parker discussed the two reports: "CLERB Reports by Due Date" and "CLERB Reports Due by Case Number."
      - There are approximately nine cases scheduled to reach their one-year time limitation over the next three months. Over half of those cases will be on the March agenda.
  - 16-036/Moyer – SDSA Policy Recommendation Response
    - At its October 2017 meeting, CLERB recommended that the San Diego Sheriff's Department (SDSD) modify its Detention Services Bureau Policy and Procedures (P&P) I.43 "Inmate Count Procedure" to include an expanded, specific and objective definition of "well-being" in its "Soft Count" definition that would include objective criteria for the assessment of an inmate's condition.
    - Based on CLERB's recommendation, the P&P was modified and went into effect on December 28, 2017.

- The updated policy mandates that during all soft and hard counts, sworn staff will verify each inmate's well-being for any obvious signs of medical or physical distress, trauma, and criminal activity. In addition, sworn staff shall also ensure the environment is clear of any safety or security hazards.

- Board Chair's Report**
- As a reminder, Board Members were sent an email from the County about Form 700, Statement of Economic Interests. Board Members were reminded to complete it by April 2, 2018.
  - Radiolab's More Perfect on NPR had an interesting episode about Mr. Graham and the Reasonable Man. Graham v. Conner changed the face of policing in the US. The episode aired on November 30, 2017 and is available on the More Perfect website (<https://www.npr.org/podcasts/481105292/more-perfect>)
  - Board Members will be receiving a parking pass each month for the Board meeting. Board Members were reminded to display it on the dashboard during the Board meeting.
  - Mr. Parker and Ms. Hoang met with Kristen Laychus to review her review of the Rules and Regulations. Ms. Hoang will call a meeting of the subcommittee to go over those potential changes.

- New Business**
- CLERB Board Member Policy and Procedure Manual
    - Ms. Hoang, Jordan Gascon and Robert Spriggs make up the committee, along with Board Chair, Sandra Arkin. The first meeting will be held in the next three weeks.

- Unfinished Business**
- N/A

- Board Comments**
- Mr. Gascon – Would it be possible to set up a walkthrough of the County Jails for the Board Members? Mr. Parker stated that he would make the arrangements if any Board Member expressed interest. Ms. Arkin stated that the walkthrough should be placed on hold due to CLERB's shortage of staff and backlog.
  - Mr. Gascon – When will the Waterfront & Border controversies appear on the agenda? Mr. Parker stated that the Waterfront case is expected to be scheduled no later than April 2018, which is three months before the case times out.

- Public Comments**
- N/A

- Sheriff/Probation Liaison Query**
- Gary Brown – Is there a policy relating to people who have been arrested for first degree murder? Not that they have been convicted. I am wondering if you know that about them, do you try to segregate them from other inmates. Lieutenant Gilmore – There is a classification system to determine the appropriate housing. They are evaluated based upon their criminal history and the crime that they are being charged with and any allegations that might make them an immediate risk to other parties. There is a Deputy assigned to review a file on each individual booked into custody if they are going to be kept there for a significant amount of time. This is looked at for all individuals, not just for those who are coming in with murder charges.
  - Mr. Wilson – Is there criteria for individuals who have a history of violence; is there a violence risk assessment? Lieutenant Gilmore – Many factors including the charges, the history, assaults against staff or assaults on others in custody are immediately identified and separated from everyone.
  - Mr. Lasswell – Could we request a briefing on the classifications? Lieutenant Gilmore – The Sheriff's Department is currently working with Mr. Parker to develop a list of trainings for the Board Members and that is one of them.
  - Mr. Brown – Are all inmates showered within 48-hours or every 48-hours? How do you know if someone has gotten the shower? Lieutenant Gilmore – The requirement is to make the shower available. It is up to them if they want to take it.
  - Mr. Brown – So if the opportunity is provided, then the inmate may take a shower and you do keep track of that. Lieutenant Gilmore – Yes sir, we do; we have to.
  - Mr. Brown – When someone is arrested for smoking, is it a criminal offense? Lieutenant Gilmore – I have only arrested juveniles for smoking and tickets were given.
  - Mr. Brown - If it is posted "no smoking" and the person is smoking tobacco would they be arrested? Lieutenant Gilmore – those are usually municipal codes and those are usually a ticket.
  - Mr. Brown - Is a ticket always given for something that is a criminal offense? Lieutenant Gilmore - It is up to the Deputies to use their own discretion regarding issuance of tickets.

The Board entered closed session at 6:25 p.m.

The Board entered open session at 7:01 p.m.

**Sheriff/Probation  
Liaison Query**

- Mr. Brown – Do we have the same screening criteria today that was in place three to four years ago when someone comes into custody and should go into administrative segregation? Lieutenant Gilmore – I would imagine that it has advanced considerably. We have developed further levels of specialization.
- Mr. Wilson – Is the Violence Risk Assessment Protocol more sophisticated now compared to five years ago. Lieutenant Gilmore – Yes, there are a number of things that have changed. Mental health has become more of a responsibility of the Sheriff’s Departments across the country because of the shifting of the burden from the State to the Local.
- Mr. Brown – Asked the question about an individual being arrested for a serious crime like attempted murder. Lieutenant Gilmore stated - Violent murder cases are immediately identified and the individuals are separate from everyone. A lot of data is gathered upfront as opposed to many years ago, so that several measures may be taken into account. There are a lot of people charged with heinous crimes and we do not have the capacity to house each one individually. Individual housing also has a negative effect on those confined to a small space.

The Board entered closed session at 7:10 p.m.

**Closed Session**

- a) **DISCUSSION & CONSIDERATION OF COMPLAINTS & REPORTS**  
Discussion & Consideration of Complaints & Reports: Pursuant to Government code Section 54957 to hear complaints or charges brought against Sheriff or Probation employees by a citizen (unless the employee requests a public session). Notice to government Code Section 54957 for deliberations regarding consideration of subject officer discipline recommendation (if applicable).

<b>CASE NO.</b>	<b>LAST NAME</b>	<b>CASE NAME</b>	<b>LAST NAME</b>
14-027	Dawson	16-076	Weick
16-109	Harris	16-110	Snell
17-008	Montano	17-011	Joyner
17-012	Namvar	17-028	Andera
17-030*	Gerhart	17-040	Thoma
17-081	Millerbragg	17-099	Easley
17-114	Smith	17-131	McNulty
17-144	Samuels	18-001	Webb
18-006	Vega		

\*17-030 - continued

The meeting was adjourned at 7:21 p.m.

*Minutes prepared by Tamicha Husband, Administrative Secretary*



**PAUL R. PARKER III**  
Executive Officer



**KIM-THOA HOANG**  
Secretary to the Board

# CLERB: Medical and Mental Health Services in Jail



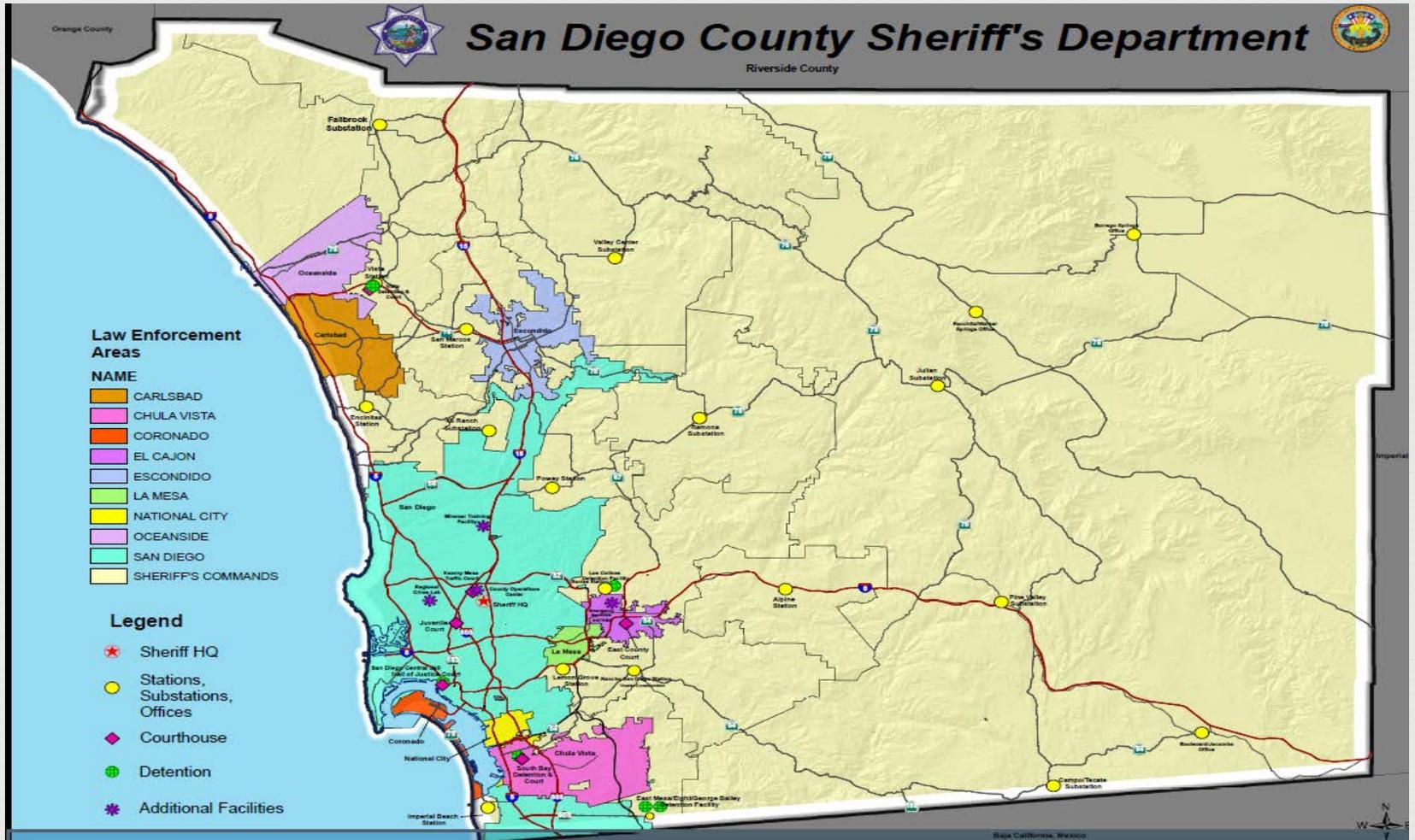
Alfred Joshua MD, MBA, CCHP-P, FAAEM  
Chief Medical Officer, San Diego County  
Sheriff's Department  
February 13, 2018

# Overview



- ❧ Overview of Jail Services
- ❧ Correctional Mental Health
- ❧ Challenges
- ❧ Current and Future Strategies

# Locations



# San Diego County Sheriff's Medical Services Division

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- ❧ Provides comprehensive medical care for 84,000+ annual bookings (66K will stay longer than 72 hours)
- ❧ 5,800+ Inmate/Patient(I/P) daily at seven facilities (SDCJ, LCDF, VDF, FAC8, EMDF, SBDF, GBDF)
- ❧ Budget(2016-2017): \$75 Million
- ❧ 307 employees (171 RNs, 54 LVNs, Pharmacists, Pharm Techs, Mental Health Clinicians, Medical Records, Admin staff)
- ❧ 100+ contracted medical providers (Physicians, Psychiatrists, Dentists, Nurse Practitioners, Psychologists, Technicians, etc.)

# Medical Services



- ❧ On-Site Medical sick call clinics
- ❧ On-Site Psychiatry sick call clinics
- ❧ On-Site Dental sick call clinics
- ❧ Optometry
- ❧ Outpatient Specialty Referrals
- ❧ Inpatient hospitalizations (40 bed Hospital Guard Unit)
- ❧ Pharmacy
- ❧ Managed Care (UM)
- ❧ Dialysis
- ❧ Radiology/Laboratory services

# Environment



- ❧ AB 109 population I/P's require additional medical services since they be sicker, older, and with us longer (longest AB 109 sentence=2025)
- ❧ More Preventative and Chronic disease management
- ❧ Large mental health and substance abuse population with poor access prior to incarceration
- ❧ Proposition 47

# Corrections



∞ Deterrence

∞ Retribution

∞ Rehabilitation- Greater focus.

Successful integration into society.

Reduced Recidivism

# Medical Intake



- ❧ Screening questions and vitals administered by Registered Nurse to every inmate who is booked into one of three booking facilities (SDCJ, VDF, LCDRF)
- ❧ Chest xray on all inmates who have not had a chest xray within 6 months in the jail (r/o TB)
- ❧ SDPD Pilot: Medical and Inmate Processing done at SDPD Headquarters
- ❧ New Intake Screening Questionnaire and engagement of arresting officers
- ❧ Nurse Practitioner Program at Intake Facilities

# Managed Care



- ❧ 2000+ Inpatient Bed days
- ❧ 4000+ Specialty Referrals
- ❧ Compassionate Releases and Hospice Coordination
- ❧ Case Management
- ❧ Chronic Care Pathways
- ❧ Infection Control

# New Pharmacy Process



- ❧ Diamond Pharmacy
- ❧ Prepackaged medication (“bubble pack”) and inventory and administration software implemented across all San Diego Jails for improved quality control.

# Mental Health



- ❧ Largest provider of mental health services in the county
- ❧ 28%-35% of our I/P's are on psychotropic medications (Over 2000+ I/P a month on psychotropic medications)
- ❧ Accidental overdose (San Diego County general population had highest rate since 1990's)
- ❧ Designing a system that allows us to meet I/P mental health needs while addressing effective methods to reduce suicide rate and ensure continuity of care post release

# Jail Mental Health Services Model

## Jail Intake

- Intake Screening for Mental Health by Registered Nurse
- Identification and referral to mental health provider
- Gatekeeper assessment for high risk (suicidal inmate)

## Acute

1. Crisis Stabilization unit (Danger to self, others, gravely disabled)  
\*\*LPS facility
2. Inmate Safety Program (For Inmates at Suicide risk)

## Subacute

- 1. Psychiatric Step down unit (high risk mental health inmates treatment and programming)
- 2. Jail based Restoration to Competency Program (1370)

## Stable

- Mainline housing which will have
1. Psych Sick call clinics
  2. Tele psychiatry
  3. Psych medication management
  4. Multi-disciplinary groups
  5. MHC Clinics and Ad-Seg Rounds

## Discharge Planning

- Social workers
- Case Managers
- Community groups for transition back into community (Project-In-Reach)

# Mental Health Initiatives

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- ❧ Recruitment of passionate and dedicated Mental Health Clinicians who has taken ownership of our Inmate Safety Program led by Peter Fischetti (Increased from 4 Mental Health Clinicians to 13 Mental Health Clinicians)
- ❧ 8 hour Training course for deputies and medical staff on Mental Health by Detentions Training Unit
- ❧ Liberty Healthcare taking over Mental Health provider contract on February 2017 and recruitment of psychologists and dedicated psychiatrists to the facilities.
- ❧ February 2017: Inmate Safety Program Follow up system by Mental Health clinicians and psychologists (led to a significant reduction in suicide attempts since inmates are followed with mental health care after being released from the Inmate Safety Program)

# Mental Health Initiatives

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- ❧ Fall 2017: Incorporation of recommendation of Grand Jury of having a County employee Chief Mental Health Officer who is now Peter Fischetti
- ❧ November 2017: We have piloted the Columbia Suicide Severity Scale which was recommended by Behavioral Health Advisory Board on our revised single stage Intake Questionnaire at SDPD Headquarters and plan for full rollout in all detention booking facilities in 2018.
- ❧ Fiscal Impact: Increased Budget for Mental Health with expenditures this year around \$14 Million (was around \$7M three years ago)

# Mental Health Services



- ❧ 62 Inpatient psychiatric beds (LPS designated facilities)
- ❧ Safety Cells/Sobering Cells
- ❧ Psychiatric sick call clinics
- ❧ Mental Health Clinician Clinics
- ❧ Psychiatric Pharmacy Management
- ❧ Psychiatric Discharge Medications upon release

# Psychiatric Stabilization Unit (PSU)

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- ❧ PSU designed for patients who meet the welfare and institutions code (LPS designated facilities)
- ❧ 5150- Danger to self/others/ gravely disabled (72 hours)
- ❧ 5250- (14 day hold)
- ❧ 5270- (30 day hold)
- ❧ Temporary Conservatorship
- ❧ Permanent Conservatorship

# Penal Commits



- ❧ Inmates awaiting State psychiatric treatment
- ❧ PC 1368 (Question of Competency)
- ❧ PC 1370 (Restoration to Competency)
- ❧ PC 1026 (Not Guilty by Reason of Insanity)
- ❧ PC 2970 (Mentally Disordered Offenders)

# Psychiatric Stepdown Unit

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- ❧ Creation of a 40 bed psychiatric step down unit for those patients who don't meet the Welfare and Institutions code criteria for involuntary treatment
- ❧ State Mental Health Hospital Returnees
- ❧ Significant Psychiatric History (at risk for becoming administrative segregation inmates)
- ❧ Penal Commits
- ❧ Therapeutic Programming and dedicated psychiatric staff

# Inmate Safety Program



- ❧ 1. Decrease number of suicide deaths
- ❧ 2. Decrease number of suicide attempts
- ❧ 3. Decrease safety cell placement
  
- ❧ Gatekeeper Model
- ❧ Removal of Methods for lethality (hanging and jumping) and dedicated housing units
- ❧ Two Assessments by Mental Health Providers

# Jail Based Competency Program (1370's)

## Who?

- Liberty Healthcare's clinical staff consists of the following: Program Director, Medical Director, Psychiatrists, Psychologists, Nursing, and Master's level clinicians.

## What?

- A 30 person program that consists of medication management, groups, one on one contacts and focuses on psycho-legal education and symptom stabilization. IPs are seen weekly by a psychiatrist and are offered up to four groups a day, five days a week. Treatment team discusses each IP weekly.

## When?

- First admit to the JBCT program was March 23, 2017. Program hours are from 7:30am-4:00pm Monday-Friday. County holidays are observed.

## Where?

- JBCT is located on the 6<sup>th</sup> floor of San Diego Central Jail.

## Why?

- To help alleviate long wait times for 1370 inmates by identifying and treating "rapid responders" and to expedite due process and symptom stabilization.

# Substance Abuse



- 75% of those incarcerated have a history or charges that involve alcohol or substance abuse and 66% will return to incarceration within three years related to drugs and/or alcohol.
- Hoarding and selling medications is a big business in jail. The Sheriff's department is directly responsible for the safety of I/P's and this behavior threatens the safety of all the I/P's.

# Substance Abuse



☞ Emphasis on:

- 1) New Opiate and Alcohol withdrawal protocols and clinically validated assessment tools (COWS)-upcoming implementation
- 2) Narcan administration by deputies and medical staff (for suspected heroin/opiate overdose)

# Overdose



- ❧ San Diego County Sheriff Deputies one of the first law enforcement agencies to have trained deputies carry Nalaxone (Narcan) to administer to reverse the effects of heroin overdose
- ❧ Collaboration with San Diego County Emergency Medical Services
- ❧ All Sheriff's Law Enforcement stations have nalaxone and training to deputies along with detention deputies

# Telemedicine



- ❧ The Jails are set up to host outpatient specialty clinics with TCMC via telemedicine in a collaborative partnership
- ❧ Expanded capacity to see inmates
- ❧ The future of medicine

# Health Information Exchange

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- ❧ San Diego Health Connect(2015): The Sheriff's department participates in the San Diego Health Connect which would allow us to have immediate access to medical records, including those from Sharp, Scripps, various community hospitals and family health centers, HHSA public health and behavioral health, etc.
- ❧ Currently no mental health records in HIE.
- ❧ The Sheriff's Medical Services Division is currently procuring a new electronic medical records system.

# PERT Collaboration



- ❧ Collaborative effort with PERT to create a form to alert jail on inmate/patient's psychiatric history and risk of self harm
- ❧ Improved communication between the field incident and jail and medical staff

# Discharge Planning



- ❧ 10 day psychotropic medications upon release (can be picked up at CVS Pharmacy)
- ❧ Outpatient Medications (simplified, least amount of side effects, affordable) Formulary
- ❧ Enrollment into Medi-Cal (Affordable Care Act) and linkage into community clinics
- ❧ Sharing medical records with inmate consent

# The Future



❧ National Accreditation

❧ Electronic Health Records  
Implementation