

Board of Supervisors

The Public Health Advisory Board (PHAB) was dismayed and concerned to hear of the recent COVID-19 outbreak among people incarcerated in the County Jails. We pursued further information regarding the current circumstance and devoted March's PHAB meeting to hearing from multiple stakeholders, including Jail Health leadership, Sheriff's Department leadership, and community groups and members with lived experience, incarcerated loved ones, or those with concerns about jail conditions.

Unfortunately, the descriptions of COVID-19 containment policies and practices offered by jail leadership were at times in direct conflict with the testimonies offered by impacted community members, including recorded first-hand statements from people currently incarcerated. Prominent discrepancies included access to adequate hygiene supplies, access to masks, timeliness of medical care, the ability to receive COVID-19 test results, and COVID-19 containment practices, population movements, and quarantine procedures.

It is the County's ethical and legal responsibility – and in its best interests – to ensure that COVID-19 containment policies are both in place and practiced to protect those they incarcerate and their communities from contagion and risk of death. As professionals in empiric disciplines and advocates for public health, these discrepancies in reported practice are concerning, and also impossible to reconcile with the information at hand.

Jail leadership offered descriptions of their infection-control policies, including personal protective equipment, testing, quarantine, and contact tracing strategies, which have been developed in collaboration with appropriate experts and appear robust. Dr. Damiano presented her plans to PHAB on several occasions in 2020, and we encouraged the path she and Jail staff seemed to be taking. Despite this, testimony heard calls into question whether the policies are consistently being put into practice. It is imperative that the policies must be adhered to and the incarcerated individuals must:

- 1) Have access to products for sanitation and personal hygiene;
- 2) Have access to appropriate, clean, and properly fitting masks;
- 3) Have access to COVID-19 testing and receive their results in a timely manner, achieving parity with other people in congregate living settings;
- 4) Have access to prompt medical care, specifically that health service requests (medical kits) are responded to in a comprehensive and timely manner;
- 5) Have the ability to comply with public health guidelines and Sacramento County COVID-19 containment policies, including physical distancing, universal masking, and frequent hand washing or access to hand sanitizer, and are not exposed to other incarcerated individuals who do not follow these guidelines.
- 6) Be assured that Custody Staff also follow public health guidelines and Sacramento County's COVID-19 containment policies, and are held responsible for their behaviors. Indeed, the latest outbreak may have been due to lack of such adherence on the part of Staff.

One concern we have is whether the jail's current high census is apparently overwhelming their capacity and resources available to implement best infection-control practices and provide timely and comprehensive medical care. While the dynamics of jail population flux is clearly multifactorial and complex, we need to be certain that every effort is being made to reduce jail population to levels where public health guidelines can consistently and comprehensively be followed. Below we outline possible means of ensuring the conditions stated above.

- 1) Develop mechanisms to improve transparency and provide community oversight of conditions inside the jail, such as a community oversight committee that regularly meets with jail leadership and health staff. This should involve input from all stakeholders, including impacted community members and people experiencing incarceration, and have means to report violations and seek remedies in a timely manner.
- 2) The Board of Supervisors should develop an action plan to implement the health policies delineated in the Mays Consent Decree. Specifically, the Board of Supervisors should focus on decreasing the jail population to the lowest level feasible, prioritizing for release those with mental illness, those with chronic disease, and the un-sentenced population. This plan should be developed in collaboration with the Sheriff's Department, the Public Defender, the District Attorney, and other stakeholders, including impacted community members and those with the lived experience of incarceration. Among others, these strategies might include:
 - a. Fully investing in alternatives to law-enforcement-based emergency response for mental health crises.
 - b. Maximizing utilization of the grant-funded Pre-Trial Support Program through the Office of the Public Defender.
 - c. Implementing pre-booking diversion programs, such as the Law Enforcement Assisted Diversion (LEAD) program regarding drug-related crimes.
 - d. Maximizing utilization of the grant-funded EMPOWER forensic behavioral health outpatient program, implemented by the Office of the Public Defender.
 - e. Eliminating cash bail.
 - f. Investing in short- and long-term housing solutions, such as permanent supportive housing. Individuals experiencing incarceration should not be released to homelessness.
 - g. Engaging in the new California Advancing and Innovating Medi-Cal (CalAIM) re-entry program for people with serious mental illness and substance use disorders.
 - h. Diverting people with serious mental illness out of the carceral system and into the mental health care system. Components of this include expanding the Sacramento County Mental Health Treatment Center to its former full capacity and increasing funding for the community organizations in the outpatient continuum of care.