

Sacramento County Public Health Advisory Board

Meeting Minutes

November 4, 2020, 12:00 PM - 1:30 PM

Meeting Location

Zoom Meeting (Open to the Public)

Moderator: Farla Kaufman

Scribe: Theresa Vinson

Board Attendees: Jennifer Anderson, Jofil Borja, Sandy Damiano, Steve Heath, Olivia Kasirye, Farla Kaufman, Barbara Law, Steven Orkand, Sonal Patel, Emanuel Petrisor, Jeff Rabinovitz, Tina Slee, Phil Summers, Annie Tat, Jack Zwald

Guests: Lynn Berkley-Baskin, Liz Blum, Christina Bourne, MK Orsulak, Tifanei Ressler-Moyer, Bruce Wagstaff

Board Members Excused: Jofil Borja, Barbara Law

Board Members Absent: Paula Green

Guest Speakers: Liz Blum, Tifanei Ressler-Moyer, Christina Bourne, Bruce Wagstaff

Meeting Opened: 12:03 PM

Welcome and Introductions: Dr. Kaufman welcomed all Board members and guests. There were online introductions.

Review of Minutes: The October minutes were approved with one abstention.

Vacancies and Appointments: Three vacancies are expected in December. Openings will be posted soon.

Announcements: Appointments to the HIV Health Services Planning Council were approved.

Division of Public Health Update

Sacramento County recently received an update on our Tier status. Over the last 1 ½ weeks there has been a gradual increase in cases in Sacramento as well as other counties in California. Part of that seems to be driven by outbreaks in long-term care facilities, and some are due to private gatherings. There is concern about the upcoming Thanksgiving holiday as people are growing tired of the isolation. A report from the State regarding positivity rates was received today, and Sacramento is in the orange tier. As far as case rates, this week Sacramento hit the criteria for the purple tier. If this is repeated twice (in a row), Sacramento will be moved back to the purple tier overall. Public Health is in the process of submitting what the State calls 'Adjudication' where PH must explain our reasons for asking the state to "freeze" our status in the current tier. Reasons for this are partly based on information received from long term care facilities where there is some discrepancy in lab results, so a closer review is being conducted. It is understood how much the local businesses have been hurting, and if Sacramento goes back to the purple tier, and insists businesses must conduct their business outside again, it is going to be very difficult for all counties. Public Health does not have much enforcement so there is a need to depend on businesses complying, and most do, but there are those who are disregarding the Health Order (HO). These are the most difficult situations.

Vaccine

Updates about the Covid-19 vaccine are still coming forward. The last report indicates the expectation is that the earliest a vaccine might be available would be December, in limited supply, for healthcare workers only. There is a plan to pre-position some vaccine while they await Federal Drug Administration (FDA) approval. So the State is selecting five sites where some vaccine will be pre-positioned based on population, with the ability to vaccinate not only their own healthcare workers, but healthcare workers from surrounding jurisdictions. Sacramento County is in consideration, and trying to prepare for that with many unknowns, as well as having enough to 'hit the ground running'.

Flu vaccines are being distributed this Saturday at Sleep Train Arena, in collaboration with the Sacramento Kings. About 20k doses are expected to be available, and there has been a very good response from the community.

Division of Primary Health and Correctional Health Update

Adult Correctional Health

Goals

- Improve health/behavioral health services and access for adults who are incarcerated.

Current Areas of Focus

- COVID-19 Management (daily)
- Recruitment, hiring and onboarding employees
- Development or modification of policies and practices
- Discharge Planning / Continuity of Care
- Work with criminal justice partners on data, necessary improvements to buildings, and strategies to decrease the jail population

Today's update

- All information is included in the handout provided to the Public Health Advisory Board today via email and online https://dhs.saccounty.net/PUB/Documents/Public-Health-Advisory-Board/PHAB-Meeting-Documents/2020/Handouts/November/Adult%20Correctional%20Health%20Update_PHAB_11%2004%2020%20%28004%29.pdf

COVID-19

COVID-19 management requires extensive daily efforts and use of staff resources.

- COVID-19 Staff Guidance is regularly updated to ensure it is consistent with local/federal guidance and practice changes. The guidance covers staff practices and designated housing areas help to assess, identify, isolate and/or provide services in order to maintain safe operations. Designated COVID-19 Housing Population includes - Intake Quarantine, Close Contact Quarantine (known/suspected exposure), COVID Suspect Isolation (symptoms but not confirmed by testing), and COVID Case Isolation (confirmed).
- Newly created a position – Infection Prevention Coordinator
- Data is updated weekly and posted: <https://www.sacsheriff.com/Pages/Organization/Corrections/COVID19.aspx>

□ See *Adult Correctional Health Report Fiscal Year 2019/20* for more information.

PRESENTATION

Tifanei Ressler-Moyer, Attorney and Member of Decarcerate Sacramento

Liz Blum, Decarcerate Sacramento

Christina Bourne, MD and Member of Decarcerate Sacramento

Bruce Wagstaff, Deputy County Executive, Sacramento County

Correctional Health

Decarcerate Sacramento (DS) is a coalition of both activists and organizers, but primarily Sacramento residents who got together a little over a year ago recognizing we had an interest in reducing the harms of the jail and incarceration system in Sacramento. Some of the ways that's manifested was challenging the County when they were planning to expand the system without engaging residents or the community.

Sacramento County has an over incarceration problem, at a rate of 15.5% higher than other same size counties in the United States, and 47% higher rate than other counties of similar size. Sacramento in particular needs to reconcile why it is performing so poorly compared to these other counties.

Referencing the Sacramento County Consultant Report on Jail Alternatives prepared by the County commissioned consultants, The Carey Group, they propose a lot of recommendations that DS agree with, and will highlight. The report recommends Sacramento consider enhancing its current planning effort by developing a Criminal Justice Masterplan. Masterplans are commonly used in correctional system planning, and specifically they feel this is necessary as Sacramento County goes forward in planning for the new Correctional Health and Mental Health Facility. The Carey Group interviewed all system employees in Sacramento County for potential solutions, and scope of reliance on jail. Unfortunately, they did not interview anyone who experienced the system first hand, and in the report (Table 4), it indicates most Sacramento County justice system staff believe providing more affordable housing, more mental health services and addiction services, would provide most effective outcomes. Data transparency is another issue they highlighted in this report so making data accessible, particularly from Probation and the Sheriff's Department would be critical going forward, so that information can be shared. The consent decree requires a lot of data be posted quarterly.

Comprehensive Jail System Management Plan:

- Focused on Jail Population Reduction

- Coordinate with all* stakeholders
 - Defined and measured outcomes and impacts
 - Alternatives to Incarceration Plan (outside of law enforcement)
- *Community Stakeholder Contributions are needed throughout the building of these plans

There are about 500 requirements of the consent decree around policies and procedures. Most are decisions being made by deputies and jail staff on a daily basis including mental health, bed planning, designated mental health unit and HIPPA requirements. Intake should ensure confidentiality for patients, and professionals, but will require creativity, and patience and population reduction. The ADA remedial plan is the most significant physical improvement which requires, accessibility, housing areas, toilets, showers, accessible paths-- ADA compliance, accessibility to visiting areas, etc. Based on the ADA consultant recommendations that inform the consent decree, it appears the most significant cost of this requirement would be to combine rooms, large enough for wheelchair turning, widening doorways, ADA accessible showers. Understanding some walls are structural, Decarcerate Sacramento is thinking creatively as to how to improve and address that.

Mays v. Sacramento Consent Decree Requirements

Does the County need a new building to meet consent decree?

Key areas that require significant construction:

- Mental Health Beds
- Patient Privacy
- Health Care Intake
- ADA compliance

Included in a Comprehensive Jail System Management Plan:

- Measurable & Coordinated plan to meet Mays v. Sacramento Consent Dec

Alternative Solutions and Considerations:

- 711 G St: Mental Health Diversion Project
 - Diverting individuals with mental illness will decrease the number of Mental Health Beds needed
- RCCC: ADA and Intake
 - Only minor construction needed for ADA accessibility
 - More space to construct an appropriate intake unit
- Decreasing Jail Populations

- 60% of Sac county jails are pre-trial: community-based/led pre-trial reform is needed
- Increasing Community-based, trauma-informed care

Cost Estimation for Mays Consent Decree Compliance:

Shifting Focus to Decreasing Jail Populations

- How would sustainable decreases in jail population impact the physical needs of the Main Jail?
 - County should perform a cost-benefit analyses of renovating current jail at decreased population scenarios
- Disability Rights California (Plaintiff’s Council in the Mays lawsuit): “Population reduction should be part of the solution. The large population of people in jail has made many of the problems inside the jail worse. Safely reducing the number of people in jail will make improvements easier, and less expensive, to achieve. It will reduce the amount of money and resources that are required, allowing the County to spend more of its budget on important community-based services. In the Settlement Agreement, the County agreed that a ‘reduction in jail population is a cost effective means’ to comply with constitutional and other legal requirements at issue in the case.”*

Jail Population Reduction Strategies

Currently in progress:

- County-wide 911 Call Diversion
- Mental Health Diversion led by Probation Dept.

Needed:

- Investments in community-based care
- Mental Health Services
- Substance Use & Addiction
- Supportive Housing and Reentry Services
- Pretrial services program:
- Partners with community-based organizations
- Built with meaningful community engagement
- Transparent

Sacramento County Jail system is large, but acknowledging the loopholes that exist in the system is critical. Some solutions the County is currently developing are without community input and Decarcerate Sacramento has very real issues with this. DS does not believe that some of the efforts the County are making are actually reducing harm, which includes the pre-trial risk assessment tool that is currently being implemented, and positioned as a solution. Also, the County is working on jail population projections, but from our perspective, it doesn’t seem to be being implemented in a

coordinated effort to sustainably reduce the jail populations now, and over time. It appears the experts that are being engaged also don't have that lens to project over a period of time.

From a Public Health aspect, incarcerations affects public health. There is a World Health Organization (WHO) report that says 'prisons are bad for mental health' due to overcrowding, violence, lack of privacy, lack of meaningful activities, etc. People die in jail, and the majority who die are generally not convicted of a crime, and who are actually being held for pre-trial; they can't make bail because they can't afford bail. In Sacramento County alone, DS estimates about eleven people have died in jail, this doesn't count folks that are transported to hospitals for medical care. A recent S&R article states that as of August 31, 2020, eighteen people have attempted suicide in Sacramento County Jail. This is nearly meeting what is the peak of previous nineteen attempts in 2013.

Incarceration affects families in the community. The majority of mothers incarcerated are primary care givers, there are 2.7 million children who have an incarcerated parent, which is one of our adverse experiences. Specifically, in Sacramento County Jail, Unit 2P, which is inpatient and equivalent to a psychiatric ICU, some of the more ill people, profoundly psychotic and manic reside. The majority of interviews were done yelling through a thick door, or the meal slot or a crack in the door frame. This is not at all conducive to being trauma centered or trauma sensitive. The care was more than questionable for example, cameras on patients 24 hours per day, no views of outdoors, no windows, a slim sliver of light might be seen from a skylight, and inmates/patients are only allowed out of cell 1 hour per day. People are being punished for having a mental health condition by completely disorienting them. Most traumatic was the overall treatment of those in 2P by the guards. The guards made fun of inmates/patients, neglected their needs, refused them food, snacks, water, because they said they were "crazy". All this happening in an environment that was supposed to be a professional one.

Inherent in the consent decree is that there are a lot of different services that must be rendered for either healthcare or mental healthcare. Many of these spaces don't exist currently, which is another reason to have services designed that can be more conducive for patient care, for health reasons, medical or for mental health. Dr. Borne discussed the psychiatric unit space, which is one of the most deficient spaces at the jail. It is not conducive for mental health treatment in an acute setting. It does need to be designed better. There needs to be individual/private interview rooms for patients, doctors and social workers that currently do not exist.

There are some things under way to try to reduce population, recognizing that as part the consent decree there is a lot to be done to improve the care inmates are receiving in jail. It is important to live up to what has been agreed to in the consent decree. Recognizing that the main jail, considering its age and construction, much of what needs to be done

cannot be accomplished utilizing that space. The new facility is part of the consent decree. A call with DS and Sacramento County was held earlier this week, but the construction won't start until 2023. In the design phase, input is being sought from a number of places. The 711 G street resource center is to establish a one stop place for mental health, pretrial efforts, etc. An important effort was launched to develop alternative ways to respond to 911 calls related to mental health, homelessness, general quality of life, etc. Extensive community input is being sought on this and an update to the Board of Supervisors was provided yesterday. Last week, a forum was held and there was one today to gather input. An advisory committee that the community can believe in and trust is currently being organized. All these things are underway. Reduction in jail population is a major concern, and there is a commitment to live up to the consent decree so services are provided, and delivered in the way they should be.

DS does not believe the things they are asking for are at odds with the consent decree, which is why DS have studied the consent decree so extensively to ensure DS is articulating things in a way that makes that clear. DS believes people inside should have what is constitutionally required around mental healthcare and medical healthcare provisions. They believe the constitution is not a moral standard or an aspiration for how care is provided. DS believes it is aspirational to provide care in the community, and that it should be the priority. Reducing the jail population is the priority for DS as well as recognizing that the reason the County has landed on construction is because of the failures of the healthcare inside the system, but that construction is not required in order to provide better services. DS is asking for a more creative, more involved approach with the community in order to come to a solution. They appreciate the acknowledgement that mutual interests need to merge, and believe mutual interests are merged significantly, but DS is asking for priorities to shift in a way that acknowledges there will be long term harm with this much money going into building this facility without looking at other ways the jail population can be reduced. DS does not want their goal to be mischaracterized.

Steps that have been taken outlined earlier such as there is now someone providing medicated assisted treatment for those with opioid abuse disorder, and the fact that folks are being discharged with 30 days of medication, and that folks are being linked to community care are all a very basic standard of care, and is not going above and beyond. At a bare minimum, those are the things that should be provided by healthcare professionals at the basic level, no matter what, and is not something that should be highlighted as something "we are doing or special accomplishments." These things are basic and an improvement, they are not special.

Jails have not had an oversight body like other industries so the consent decree offered an opportunity to improve staffing levels, and to get services more in alignment with community standard. There is no dispute that there still needs to be a lot more.

A letter to the Board of Supervisors (BOS) to support the work of DS would be tremendously helpful.

A Special meeting was proposed for next week to discuss, review a DRAFT letter, and vote on whether or not to send the letter to the BOS in support of DS. A vote was taken and moved; a special meeting will be held next week to address this.

Public Comment

None.

Adjournment