

# **LAW, JUSTICE & PUBLIC SAFETY**

## **Health Care Within Detention Facilities**

### **SUMMARY**

The Grand Jury investigated the physical and mental health care of adult inmates and juveniles in Santa Barbara County detention facilities. The inquiry identified numerous concerns involving the booking process, the detoxification process, when required, and the process for completing the Receiving Medical Screening Form. Also, there are concerns with current management policies involving the availability of trained medical staff, the placing into the general population of inmates who could be infected with communicable diseases, and the untimely release of some inmates without coordination with medical officials. Other issues involve the impound of personal property (including medications), the sick-call process, and the grievance process. The substitution of medications, differing from those possessed by inmates at booking, raised some questions. The commingling of mentally ill inmates with the general population, even after being sentenced to a mental institution by the court, is a challenging problem. The effectiveness of the ombudsman was evaluated.

### **INTRODUCTION**

This report was motivated by numerous complaints and interviews with experts on the detention system. The Law, Justice & Public Safety Committee (LJ&PS) interviewed jail administrators, line staff, contract administrators and inmates about health care. The scope of the investigation included a review of the policies and procedures for health care, covering the process from intake through incarceration and ultimately to release. The LJ&PS Committee reviewed the contract negotiated with Prison Health Services (PHS), the private contractor responsible for the physical health of inmates, and its relationship with Alcohol, Drug and Mental Health Services (ADMHS), the county agency responsible for the mental health of the prison population.

### **OBSERVATIONS AND ANALYSIS**

Administrators at detention facilities have a legal responsibility to provide medical care to those incarcerated. Prison Health Services (PHS) provides comprehensive health services to inmates and juveniles in all Santa Barbara County Probation and Sheriff's Department detention facilities. The three-year contract entered into covers the time frame of July 1, 2006 through June 30, 2009, and allows for two two-year extensions. The Santa Barbara County Alcohol, Drug and Mental Health Services (ADMHS) is responsible for the care and treatment of mentally ill inmates within juvenile and adult detention facilities.

#### **Staffing**

PHS is represented on site by one administrator. There is a physician on duty Monday through Friday. Nurses are on duty 24 hours a day. There are 20 Registered and Licensed

Vocational Nurses. This staff provides triage support to the Santa Maria Holding Facility by telephone. Health care policy is established by the PHS Administrator. The juvenile detention facilities have their own staff. A nurse is on duty 5 days a week.

Care for the mentally ill is overseen by the Director of ADMHS, a county employee. At the Main Jail, ADMHS provides a psychiatrist on duty 20 hours per week, one full-time technician, and two full-time registered nurses.

### **Intake – Exit Policy and Procedures**

The intake procedure is conducted by an Intake Screening Officer (ISO). The system provides for an intake interview but no exit interview is mandated. The ISO and/or the duty nurse screen the arrestee for physical and mental illness and perform an assessment for detoxification (detox). A pregnancy test is done only if the inmate states she is pregnant. If an obvious emergency situation is observed, the arrestee is immediately sent to the hospital for care. If the person requires detox, he/she may be sent to the hospital, but in some cases detox is on site. A standard Receiving Medical Screening Form (RMSF CO-1122; see Appendix 1) is usually completed by the ISO at the time of entry. The CO-1122 becomes a permanent part of the inmate's medical file and is held in the office of the Director of Nursing. As with all property, any and all medications and unidentifiable substances are removed from the arrestee.

No exit policy regarding mentally ill inmates was evident. A medical officer said, "In many cases with early and unpredictable releases, it is impossible to coordinate a release plan for many mentally ill clients. Consequently, they end up on the streets with very limited resources." Custody officers do not consult with medical staff regarding release.

### **GENERAL HEALTH PROCEDURES**

A complete medical evaluation is done within 14 days (96 hours for juveniles) after incarceration. We were told that a test for tuberculosis is conducted within 14 days. No blood screening work is done. Those with communicable diseases are isolated to a block of 8 to 10 inmates. Attending PHS medical staff prescribe medications as required and ADMHS prescribes the psychotropic medications. A non-computerized medical tracking system is maintained by a nurse. Approximately 180 inmates receive medications daily for physical illness, and about 120 inmates receive medication for mental illness. All medications are dispensed by a nurse. Services such as X-Ray and EKG are done on-site, provided by a private contractor from Ventura County.

Prevailing illness is not evaluated by contacting the inmate's medical provider; however, if an inmate requests services from his personal doctor, the request will be granted. Attending medical staff prescribes all medications, a procedure that could be dangerous for an inmate if needed medications are not revealed by the intake examination. Sick call is conducted daily. An inmate completes a request for sick call and generally is seen within 72 hours. Inmates see a nurse much more frequently than they see a physician. Custodial staff indicated that emergencies are dealt with immediately. If there is a dispute, there is a written grievance procedure available to the inmates. Inmates

reported that they are reluctant to use this procedure for fear of retaliation. Grievances can also be relayed to the ombudsman.

### **Mental Health Procedures**

The Mental Health Assessment Team (MHAT) provides 24-hour crisis intervention and evaluation. A licensed psychiatrist is on duty 20 hours per week. One full-time technician and a half-time psychiatric nurse are available. Inmates are referred to ADMHS by a custodial officer, nurse or psychiatrist. The mental health staff evaluates between 800 and 850 referrals monthly and treats approximately 60 patients. Inmates in the system have surrendered their medications at intake and are required to use only those prescribed by the mental health staff.

Mentally ill inmates are housed in the general population of the jail. Prior to trial and subsequent to sentencing, inmates with mental illness have no separate space of their own. An inmate often must be held for some months in the Main Jail until there is space at a mental institution, even if designated for placement by the court. Officials confirmed that when an inmate is sentenced to Patton State Mental Institution, they usually wait two months for transfer.

Medications for the mentally ill are reviewed monthly along with other related issues. The budget of \$1,700,000 per year for mental health is funded by \$42,000 per year from the county and the remainder is reimbursed from the state and federal governments.

### **Ombudsman**

A volunteer ombudsman from the American Civil Liberties Union (ACLU) is available in the detention facility for the inmates. He is afforded unrestricted access to the facility and visits the inmates. The detention staff treats him with courtesy and considers him a professional. While he does listen to the complaints of the inmates, there appears to be a lack of follow-through that might result in a positive change. He has completed 227 visits since November 2004. Complaints from the inmates are often relative to medical care and medications. Many of the inmates he visits are homeless and/or mentally ill. Many allegations come to the ombudsman, but they are rarely documented. The ombudsman has no authority to resolve issues.

## **FINDINGS**

### **Finding 1**

Staff is not consistent in executing procedures for detoxification and completion of the Receiving Medical Screening Form CO-1122.

### **Finding 2**

It is difficult to establish the physical and mental state of the person being booked because a trained health care professional staff person may not always be available at intake.

**Finding 3**

Inmates are released at any time of day or night without consultation with the Prison Health Service and Alcohol, Drug and Mental Health Services staff.

**Finding 4**

Inmates placed into the general population of the jail might be infected with communicable diseases.

**Finding 5**

The Intake Screening Officer and/or medical staff person impounds all personal property including medications during the booking process.

**Finding 6**

Inmates have a basic understanding of the procedures for sick call and filing written grievances. However, some say they are reluctant to file written grievances for fear of retribution.

**Finding 7**

Mentally ill inmates are housed in the general population and many receive medications to treat their conditions. Medications are issued from the jail formulary and may differ from medication received prior to incarceration.

**Finding 8**

Inmates who are determined mentally incompetent by the courts are not segregated from the general population in the Main Jail before transfer.

**Finding 9**

A volunteer ombudsman visits the Main Jail.

**RECOMMENDATIONS**

**Recommendation 1**

Policies should be posted at the booking site clearly defining the procedures for detoxification and completion of the Receiving Medical Screening Form (CO-1122).

**Recommendation 2**

A trained health care staff person should always be present at each booking.

**Recommendation 3**

Staff should consult with Prison Health Services and Alcohol, Drug and Mental Health Services when appropriate before releasing an inmate.

**Recommendation 4**

Any person suspected of having a communicable disease at booking should be kept in isolation and tested promptly.

**Recommendation 5**

Inmates determined to be mentally incompetent by the courts should be removed from the general jail population.

**Recommendation 6**

The county should authorize and fund a court-appointed ombudsman, beholden neither to detention authorities nor detention advocacy groups, to evaluate and report complaints.

**REQUEST FOR RESPONSE**

In accordance with Section 933(c) of the California Penal Code, each agency and government body affected by or named in this report is requested to respond in writing to the findings and recommendations in a timely manner. The following are the affected agencies for this report, with the mandated response period for each:

**Santa Barbara County Board Of Supervisors – 60 days**

Findings 1, 2, 3, 4, 5, 6, 7, 8, 9  
Recommendations 1, 2, 3, 4, 5, 6

**Santa Barbara County Sheriff’s Department – 60 days**

Findings 1, 2, 3, 4, 5, 6, 7, 8, 9  
Recommendations 1, 2, 3, 4, 5, 6

**County Administrator – 90 days**


Findings 1, 2, 3, 4, 5, 6, 7, 8, 9  
Recommendations 1, 2, 3, 4, 5, 6

**Director, Alcohol, Drug and Mental Health Services (ADMHS)  
Administrator – 90 days**

Findings 1, 2, 3, 4, 5, 6, 7, 8, 9  
Recommendations 1, 2, 3, 4, 5, 6

**Prison Health Services Administrator – Information Only**

APPENDIX 1

		<b>RECEIVING MEDICAL SCREENING</b>	
<b>Last Name:</b> _____		<b>First:</b> _____	
<b>DOB:</b> _____		<b>Middle:</b> _____	
<b>Date/Time:</b> _____		<b>SEX: M / F</b>	
<b>ALLERGIES: YES / NO</b> If yes, what: _____		<b>Bkg #:</b> _____	
<b>Health Ins: YES / NO</b> (circle one) <b>Private / Other</b>		<input type="checkbox"/> SB <input type="checkbox"/> SM <input type="checkbox"/> COURT	
<b>Worker's Comp: YES / NO</b>		<b>Interviewed by:</b> (print name and body #) _____	
<b>OFFICER'S VISUAL OBSERVATIONS</b>			<b>YES NO</b>
1. Was the inmate brought via the hospital? <i>If yes, what hospital?</i> _____			Y N
2. Did the inmate enter the jail under his/her own power? <i>If no, how?</i> _____			Y N
3. Is the inmate unconscious or showing signs of illness, injury, bleeding, pain, or other symptoms suggesting the need for immediate emergency medical referral? <i>If yes, what?</i> _____			Y N
4. Is the inmate's mobility restricted in any way? <i>If yes, how?</i> _____			Y N
5. Are there any visible signs of fever, jaundice, skin lesions, rash or infections, cuts, bruises, minor injuries, needle marks or body vermin? <i>If yes, what?</i> _____			Y N
6. Does the inmate appear to be under the influence of, or withdrawing from, drugs or alcohol? <i>If yes, what?</i> _____			Y N
7. Does the inmate have a prosthesis (crutches, eyeglasses, wheelchair, dentures, artificial limb, hearing aid, etc.)? <i>If yes, what?</i> _____			Y N
8. Does the inmate exhibit any signs that suggest the risk of suicide, assault or abnormal behavior? <i>If yes, what?</i> _____			Y N
9. Did the inmate go directly to the Safety Cell? (contact Medical)			Y N
<b>INMATE QUESTIONNAIRE</b> (Explain all "YES" answers and notify medical)			<b>YES NO</b>
10. Are you taking any medications prescribed by a physician or psychiatrist now? <i>If yes, name medication and last time taken.</i> _____			Y N
11. Did you come into custody with any prescribed medications? <i>If yes, what?</i> _____			Y N
12. Have you been treated for (circle as appropriate) asthma, diabetes, alcohol seizures, delirium tremens (DT's), epilepsy, heart condition, high blood pressure, mental health problems, ulcers, or any other medical condition? <i>If yes,</i> _____			Y N
13. Do you now have a contagious or communicable disease or been exposed to anyone with one? (i.e., Aids, Hepatitis, Tuberculosis, or sexually transmitted disease) <i>If yes,</i> _____			Y N
14. Do you suffer from shortness of breath, cough for 3 or more weeks, bloody sputum, night sweats or fatigue? <i>If yes,</i> _____			Y N
15. Have you noticed a decrease or increase in weight recently? <i>If yes, how many pounds?</i> _____			Y N
16. Have you been hospitalized by a physician or psychiatrist in the past year? <i>When?</i> _____ <i>Where?</i> _____			Y N
17. Have you fainted or had a head injury within the past 72 hours? <i>If yes,</i> _____			Y N
18. Have you ever considered or attempted suicide? <i>If yes, when?</i> _____			Y N
19. Are you suicidal now?			Y N
20. Do you use drugs? What kind? _____ How often? _____ Last time? _____ How much? _____			Y N
21. Do you use alcohol? What kind? _____ How often? _____ Last time? _____ How much? _____			Y N
<b>FEMALES</b>			
22. When was your last period? _____			Y N
23. Are you taking birth control pills?			Y N
24. Are you (circle one) pregnant, recently delivered or miscarried, or experiencing abdominal pain or discharge? <i>If yes, what, and notify Medical</i>			Y N
<i>I have answered all questions. I have been told and shown how to obtain medical services and advised on how to obtain medication upon release. I hereby give my consent for professional services to be provided to me through Prison Health Services, Inc.</i>			
<b>Inmate Signature:</b> _____			
<b>Medical/Mental Health Signature:</b> _____			
<b>Notified Medical /Mental Health Name and #:</b> _____			<b>Time:</b> _____
<b>REMARKS:</b>			