



Tuolumne County Public Health Department

*Tuolumne County Health Department
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Superior Court of California
County of Tuolumne
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August 17, 2011

TO: Honorable Eric DuTemple, Presiding Judge of the Superior Court

FROM: S. Todd Stolp M.D., Tuolumne County Health Officer 

SUBJECT: Response to the Tuolumne County Grand Jury Report, 2010-2011
Relating to Tuolumne County Jail Health/Medical Services, Nutrition,
Education and Recreation

This letter is submitted in written response to the 2010-2011 Grand Jury Final Report as it relates to health services at the Tuolumne County Jail. Three sections of the report contained recommendations addressed to the Tuolumne County Health Department. These responses were prepared in consultation with the Tuolumne County Sheriff when responses were requested from both the Health Department and the Sheriff's Office. Under the heading of Tuolumne County Jail, the relevant sections for the Tuolumne County Health Department include Health/Medical Services, Nutrition, and Education and Recreation. Each of the Grand Jury Findings and Recommendations will be addressed under the appropriate section.

Section: Health/Medical Services

Findings:

F1. The Tuolumne County Health Department public services and programs are being diminished or eliminated due to lack of funding. The County's health department funds are being absorbed by the increasing costs of inmate health services.

Response: Agree

F2. The Tuolumne County Jail's recidivism rate is 75% within two years of release. This cost the county \$43,763 per year, per offender. The jail currently does not have a socialization or transitional program to assist mentally ill offenders. The jail's physical limitations are considered to be one of the problems with implementing any socialization programs.

Response: Disagree in part. The Recidivism rate and costs of recidivism cannot be confirmed by the Health Department since those numbers are collected by the Sheriff's Office. However, portions of a "socialization" program are in place under

the services provided by the Inmate Program Specialist. Also, "transitional" care to outpatient Mental Health services for "mentally ill offenders" is partially provided by the Behavioral Health counselors who see inmates during incarceration. However, the Health Department agrees that these services are currently insufficient and that the "physical limitations" of the current facility pose major problems to full implementation of these services.

F3. The lapse in nursing coverage between 3 a.m. and 6 a.m. is a concern of the Jury. However, due to the low rate of inmates sent to Sonora Regional Medical Center during those hours and the report conducted by California Forensic Medical Group (CFMG), the Jury does not find it viably economical at this time to increase nursing coverage.

Response: Agree

F4. There are clear and precise guidelines and protocols for infection control, employee exposure, safety and communicable disease screening.

Response: Agree

Recommendations:

R1. No recommendation other than to proceed with the RFP for 2011-2012 for change of medical group and reduce overall inmate medical costs.

Response: In December 2010, a Request for Proposal (RFP) was published which sought a qualified agency to provide comprehensive health care to adult inmates at the Tuolumne County Jail. The RFP was widely advertised throughout California and sent to 10 correctional health care companies nationwide. A single proposal was submitted by California Forensic Medical Group (CFMG) prior to the submission deadline of February 14, 2011. The CFMG proposal was thoroughly reviewed by a panel of Human Services Agency (HSA) staff. Following negotiations with the single submitting candidate, a contract for jail health services was agreed upon and, on June 7, 2011, authorized by the Board of Supervisors. Contract costs were reduced below the costs of the previous contract by diminishing nursing coverage from 20 hours per day to 16 hours per day, still among the higher amounts of nursing coverage in the state per 100 inmates, and by eliminating the requirement for Institute for Medical Quality (IMQ) accreditation.

R2. Create transitional and socialization programs such as Adult Transitional Team (ATT) for mentally ill offenders. Modify the TV systems to allow for broadcasting of DVD programs to overcome the physical challenges of the jail.

Response: We concur with the recommendation to create transitional and socialization programs for mentally ill offenders, and it has been partially implemented. In 2009, a socialization program was implemented but ultimately failed due to physical constraints of the jail facility. In 2010, the Jail Health Services Quality Improvement (QI) Committee redesigned the socialization program for jail inmates, seeking to surmount the facility's physical limitations. At this time, the program is being instituted in the location of the exercise yard where video equipment can be utilized. Unfortunately, this location is only intermittently

available. There have been no revenues available for the development of a formal Adult Transitional Team, but Morris Gaede, the Inmate Program Specialist interviewed in the Grand Jury report, provides some transitional services. Also, transitional care to outpatient Mental Health services for mentally ill offenders is partially provided by the Behavioral Health counselors who see inmates during incarceration. By expanding communications between the Behavioral Health staff and the Inmate Program Specialist, transitional planning can be further developed. This component of the Grand Jury Recommendation is a goal of the Jail Health Services QI Committee for 2011.

We also concur with the recommendation to modify the TV systems to allow for broadcasting of DVD programs to overcome the physical challenges of the jail. However, this modification would be contingent on Sheriff's Office funding and not implemented by the Public Health Department.

R3. No Recommendation

R4. No Recommendation

Section: Nutrition

Findings:

F6. The food is overseen by a nutritionist and follows guidelines but is lacking in fresh fruits and vegetables. Due to cost and budget many food items are processed and commissary items chosen by many inmates are not highly nutritious. Furthermore, personal eating habits may affect the intake of adequate nutrition.

Response: Disagree in part. The portions of fruits and vegetables provided to inmates daily actually exceed the Title 15 guidelines, with inmates being offered fresh fruit for breakfast each day, in addition to a salad at lunch or dinner at least four days a week, the salad nearly always being fresh. This exceeds the Title 15 requirement for fresh fruits or vegetables once each day. The USDA recommends 2.5 servings of fruit or vegetables a day, and the jail menu is consistent with these guidelines. This assumes, of course, that the portions are consumed by the inmate. Budget constraints are indeed a barrier to making increased amounts of fresh fruits and vegetables available to inmates.

Recommendations:

R6. The inmates should be advised to discuss with their Primary Care Physician a vitamin supplement regiment and the benefits of a healthy diet.

Response: The recommendation has been implemented. Nutritional counseling is conveyed to inmates as an intrinsic component of their health care, with an emphasis not on vitamin supplementation for the general population, but rather for appropriate selection of food items to constitute a balanced diet. When chronic health conditions create additional nutritional requirements, supplemental vitamins may be recommended as a component of the patient's medical regimen.

Section: Education and Recreation

Findings:

F7. The limited classroom space environment makes it difficult to provide NA and AA support for what is the vast majority of inmates. Also, it is difficult to find and maintain a consistent supply of instructors.

Response: Agree

F8. The availability of the self-help approach and materials for a GED as well as Columbia College's provision for continuing study makes opportunities possible that the inmates might not otherwise have.

Response: Agree

F9. Reading is one of the primary ways inmates cope with 'doing time.' The inmates in the County jail encompass all levels of reading ability and all levels of interest. For many, this is the first time they have ever taken the time to read.

Response: Agree

F10. The recreational space is small and not adequate for any variety of sports. To maintain good physical and mental health, exercise is an important factor.

Response: Agree

Recommendations:

R7. Members of the community who meet the criteria mandated by NA and AA for instructors are encouraged to volunteer for the jail program, since having more instructors to draw from assures the continuity of the existing program.

Response: The recommendation has been implemented. The Sheriff's Office continues to actively screen volunteers for mediating meetings of Narcotics Anonymous (NA) once weekly and Alcoholics Anonymous (AA) once weekly. There are currently four male and four female mediators for NA, and four male and thirteen female mediators for AA. Considering the current limitations of the jail facility, sufficient mediators are available for operating the NA and AA programs under the guidance of the Inmate Program Specialist. Ongoing efforts to maximize access to recovery services for inmates are underway.

R8. No Recommendation

R9. Create a community book donation program, so that members of the community can donate books directly to the jail. Community members should be encouraged to donate used paperback books to the donation center at Sierra Bible Church.

Response: The Inmate Services Specialist has recently received a fresh donation of books from the community. Unfortunately, it was found that inmates were passing written communications to one another via access to books in the library program.

Therefore, the protocols for access to books are under review. Another consideration for educational and recovery services is to feed approved DVD programs to specific housing units to provide opportunities for educational credit and more robust recovery services.

R10. The Construction of a new jail facility is greatly needed. This would allow for adequate movement and open space. Detention facilities with higher risk inmates have more open space and equipment which allows for the promotion and sustainability of proper health.

Response: The recommendation has not yet been implemented, but planning for a new jail facility has been included in the development of the new Law and Justice Center. At the present time there is no funding for the jail component of the project.