

DONALD SPECTER – 083925  
STEVEN FAMA – 099641  
MARGOT MENDELSON – 268583  
PRISON LAW OFFICE  
1917 Fifth Street  
Berkeley, California 94710-1916  
Telephone: (510) 280-2621

CLAUDIA CENTER – 158255  
DISABILITY RIGHTS EDUCATION  
AND DEFENSE FUND, INC.  
Ed Roberts Campus  
3075 Adeline Street, Suite 210  
Berkeley, California 94703-2578  
Telephone: (510) 644-2555

MICHAEL W. BIEN – 096891  
JEFFREY L. BORNSTEIN – 099358  
ERNEST GALVAN – 196065  
LISA ELLS – 243657  
THOMAS NOLAN – 169692  
JENNY S. YELIN – 273601  
MICHAEL S. NUNEZ – 280535  
JESSICA WINTER – 294237  
MARC J. SHINN-KRANTZ – 312968  
CARA E. TRAPANI – 313411  
ALEXANDER GOURSE – 321631  
AMY XU – 330707  
ROSEN BIEN  
GALVAN & GRUNFELD LLP  
101 Mission Street, Sixth Floor  
San Francisco, California 94105-1738  
Telephone: (415) 433-6830

Attorneys for Plaintiffs

UNITED STATES DISTRICT COURT  
EASTERN DISTRICT OF CALIFORNIA

RALPH COLEMAN, et al.,  
Plaintiffs,  
v.  
GAVIN NEWSOM, et al.,  
Defendants.

Case No. 2:90-CV-00520-KJM-DB

**JULY 15, 2021 JOINT REPORT  
ADDRESSING CURRENT COVID-19  
RELATED DEPARTURES FROM  
PROGRAM GUIDE REQUIREMENTS**

Judge: Hon. Kimberly J. Mueller

1 On April 17, 2020, the Court ordered the parties to file a stipulation identifying  
 2 “temporary departures from certain Program Guide requirements” for the provision of  
 3 mental health care arising from Defendants’ efforts to respond to the COVID-19  
 4 pandemic. ECF No. 6622 at 2-3 (Apr. 17, 2020). On May 20, 2020, the parties submitted  
 5 a stipulation and proposed order as the Court directed. *See* ECF No. 6679 (May 20, 2020).  
 6 That stipulation set forth a process whereby the parties, on a monthly basis, would meet  
 7 and confer, under the supervision of the Special Master, and report to the Court on updated  
 8 changes to the stipulation and its attachment, Appendix A. *See id.* at 4-5. The parties filed  
 9 updates to Appendix A, along with stipulations, on June 15, 2020, *see* ECF No. 6718, and  
 10 July 15, 2020, *see* ECF No. 6761.

11 The Court disposed of the parties’ May 20 stipulation without adopting it in the  
 12 July 28, 2020 Order, ECF No. 6791 (“July 28 Order”). By minute order, the Court  
 13 required the parties to continue to provide monthly updates regarding changes to  
 14 Appendix A on the fifteenth of every month except for August 2020. *See* Minute Order,  
 15 ECF No. 6814 (Aug. 14, 2020). On August 21, 2020, the parties submitted their  
 16 August monthly update, along with “their positions on the path to full resumption of  
 17 Program Guide level mental health care assuming the COVID-19 pandemic has not abated  
 18 and will not abate for some time,” July 28 Order at 3, and their agreement that the monthly  
 19 update process should continue, *see* Jt. Report Addressing Current COVID-19-Related  
 20 Departures from Program Guide Requirements & Resumption of Program Guide Mental  
 21 Health Care, ECF No. 6831 (Aug. 21, 2020). On May 14, 2021 the Court ordered that this  
 22 monthly filing “include deactivation schedules for each departure, including anticipated  
 23 dates for lifting each departure as well as the actual date a departure is lifted.” Minutes,  
 24 ECF No. 7162 (May 14, 2021); *see also* Corrected Tr., ECF No. 7180 at 21:6-23:4 (May  
 25 19, 2021).

26 The parties hereby submit their own versions of Appendix A, which capture, as of  
 27 the date of this filing, the parties’ different assessments of the status of COVID-19-related  
 28 departures from requirements set forth in the Program Guide and/or policies listed in the

1 “Compendium of Custody Related Measures,” *see* ECF No. 6661 at 2, jointly filed by the  
2 parties on December 19, 2019, ECF No. 6431 (“Compendium policies”).

3 COVID-Related Policies

4 1. The parties are unable to come to agreement on the contents of Appendix A.  
5 Accordingly, the parties submit separate versions of Appendix A. Plaintiffs’ version of  
6 Appendix A identifies updates to two pandemic policies that, as part of Defendants’ efforts  
7 to manage the delivery of mental health care during COVID-19, depart from the Program  
8 Guide and/or Compendium policies. A true and correct copy of the June 18, 2021 version  
9 of the Movement Matrix is attached as part of Appendix A.

10 2. Due to Defendants’ policy changes since the last Program Guide Departures  
11 filing, the following policy has been deactivated, as reflected in the “deactivation” column  
12 in Plaintiffs’ Appendix A: July 7, 2020 CCHCS Memo – 90-Day Supply of Medications  
13 for Expedited Releases. Defendants have struck this policy from their version of Appendix  
14 A and Plaintiffs have retained it and noted its deactivation date.

15 3. Defendants filed an updated Roadmap with the Court on April 22, 2021,  
16 along with a revised version of the COVID-19 Mental Health Delivery of Care Guidance  
17 Tier Chart (“Tier Chart”). The Tier Chart was finalized on May 28, 2021. At a May 11,  
18 2021 workgroup meeting regarding the Roadmap and Tier Chart revisions, Plaintiffs  
19 renewed their request for reporting that describes the amount of mental health treatment,  
20 including individual and group treatment, currently being provided to class members in  
21 CDCR’s institutions. Defendants provided Plaintiffs and the Special Master access to their  
22 Treatment Offered interactive dashboard on May 26, 2021. The report illustrates in  
23 weekly increments the amount of structured treatment offered at each institution and in  
24 each level of care. Defendants also offered to answer any questions Plaintiffs have about  
25 the report or any particular institution. Plaintiffs sought instruction on use of the  
26 interactive dashboard and. Defendants provided an instruction session on June 17, 2021,  
27 which Plaintiffs and members of the Special Master team attended.

28 4. On February 8, 2021 Defendants issued a directive that modified existing

1 COVID Emergency Mental Health Treatment Guidance policies. Specifically, while  
2 certain COVID-19 safety protocols for PIP and MHCB transfers remain in place,  
3 individual transfers to and from PIP and MHCB units will no longer be subject to review  
4 for emergent circumstances. Instead, PIP and MHCB transfers have returned to being  
5 governed by Program Guide requirements and processes, and individual class members’  
6 vaccination status will not prevent them from transferring to inpatient levels of care. Due  
7 to the backlog of patients awaiting inpatient transfers, patients will be prioritized according  
8 to the following criteria: “emergency transfers in progress, requests for expedited transfers,  
9 patients waiting longest on the wait list, transfers to less restrictive housing, and other  
10 transfers to open up bed space in inpatient settings as necessary.” February 8 Directive at  
11 1; *see also* **Exhibit 3** (COVID-19 Dashboard showing total number of patients awaiting  
12 inpatient transfers as of July 15, 2021). Defendants represent that there are twenty-seven  
13 acute and sixteen ICF referrals exceeding timeframes, notwithstanding possible  
14 exceptions, as of July 12, 2021. As Defendants prioritize and work through the backlog,  
15 there will be residual delays in PIP transfers. The parties will continue to discuss this  
16 issue.

17 On March 26, 2021, Defendants, due to the progress made in eliminating the  
18 inpatient waitlist backlog, issued a directive to end the use of TMHUs by April 2, 2021  
19 (“March 26 Directive”). The parties will continue to meet and confer, under the  
20 supervision of the Special Master, to clarify any other implications of the February 8 and  
21 March 26 Directives and address any concerns with the Directives’ operation and  
22 implementation, as appropriate.

23 5. Defendants continue to update their pandemic policies to reflect current  
24 public health guidelines. As reflected in this and prior Joint Reports, Defendants  
25 deactivate policies that are no longer necessary in light of current public health guidance.  
26 Defendants have issued memoranda to the field to supersede older COVID policies. The  
27 March 26 Directive is one such memo. Defendants’ revised Roadmap and Tier Chart from  
28 April and May 2021 also supersede or replace older COVID policies.

1 Because Defendants continue to modify their pandemic policies and because  
 2 Plaintiffs dispute whether the current policies match the practices on the ground, Plaintiffs  
 3 will continue to seek clarification from Defendants regarding the status of several policies,  
 4 including the COVID-19 Mental Health Delivery of Care Guidance and Tier Chart; the  
 5 COVID-19 Emergency Mental Health Treatment Guidance and Temporary Transfer  
 6 Guidelines and Workflow; the Roadmap to Reopening; the Movement Matrix; and the  
 7 CDCR/DSH Transfer Guidelines. Plaintiffs submit that a clarifying memo to the field  
 8 should also address the status of the COVID-19 Surge Mitigation and Management Plan  
 9 attached as Exhibit 7 to the September 15, 2020 Program Guide Departures Update. The  
 10 clarifying memo should state whether the Plan remains in effect.

11 The parties will continue to meet and confer regarding these policies to clarify  
 12 terms and intent; work out implementation of the policies with regard to *Coleman* class  
 13 members; and address Defendants' reporting on the impacts of the memos.

#### 14 Deactivation of COVID-19 Policies

15 The court's May 14, 2021 Minute Order requires this Joint Report to include  
 16 deactivation schedules for the COVID-related policies, along with actual deactivation  
 17 dates. *See* Minutes, ECF No. 7162 (May 14, 2021); Corrected Tr., ECF No. 7180 at 21:6-  
 18 23:4 (May 19, 2021). The parties' positions are below.

#### 19 1. Defendants' Position

20 As noted above, Defendants continually review and revise their policies in line with  
 21 current COVID conditions and public health guidance. Defendants removed eight policies  
 22 from Appendix A in April and May 2021 and have removed another five policies that  
 23 departed from the Program Guide in this update as a result of their ongoing review. In  
 24 June, 2021 Defendants struck six policies from Defendants' version of Appendix A that do  
 25 not depart from the Program Guide but provide programming and services beyond what is  
 26 required by the Program Guide. These policies are not appropriate for inclusion in  
 27 Appendix A. While Defendants are considering rescinding some of these policies, no  
 28 deactivation plan is necessary because the policies do not deviate from the remedy in the

1 Program Guide or Compendium. Plaintiffs appear to agree that these policies are not  
2 deviations from the Program Guide and request they be made permanent. Defendants are  
3 considering this request, however, it is clear that these policies are no longer appropriate  
4 for inclusion in Appendix A and thus they do not appear in Defendants' version of  
5 Appendix A.

6 Five of these six policies remain active today. The sixth, a July 2020 CCHCS  
7 memo regarding 90-Day Supply of Medications for Expedited Releases was rescinded by  
8 CCHCS on June 15, 2021. The remaining five policies are:

- 9 • April 1, 2020 policy regarding COVID-19 Programming Opportunities for  
10 Inmates Participating in the MHSDS in Restricted Housing, which increases  
11 out of cell time for inmates impacted by COVID-19 restrictions.
- 12 • April 1, 2020 policy regarding COVID-19 Electronic Loaner Program for  
13 Restricted Housing Inmates, which increases inmate access to electronic  
14 appliances.
- 15 • April 8, 2020 policy regarding Restricted Housing, Reception Center, and  
16 PIP Phone Calls, which provides phone calls to inmates in these settings  
17 above and beyond current policy requirements.
- 18 • The remaining part of the April 10, 2020 policy regarding COVID-19  
19 Emergency Mental Health Treatment Guidance and COVID-19 Temporary  
20 Transfer and Workflows, which mandates additional treatment for patients  
21 waiting beyond transfer timeframes and referred to a crisis bed or PIP.
- 22 • December 2, 2020 policy regarding Guidance for Mental Health Milestone  
23 Completion Credits during COVID-19, which authorizes the issuance of  
24 milestone credits to patients who complete in-cell activity in lieu of  
25 structured therapy groups.

26 The remaining policies in Appendix A are those that are soon to be rescinded or  
27 policies that are essential policies likely to remain in place throughout the COVID-19  
28 pandemic.

1 First, the October 23, 2020 memo regarding COVID-19 Psychiatric Inpatient  
2 Program (PIP) Admission Bed Policy and Procedure will soon be rescinded because  
3 Defendants are phasing out all admission beds in single cell PIPs over the next several  
4 weeks. Since starting this process on May 25, 2021, Defendants have taken down all but  
5 forty PIP admission beds, down from a high of 137 beds. Defendants anticipated this  
6 process to be complete by July 15, 2021, however additional time is necessary to ensure  
7 enough admission beds remain for unvaccinated patients in need of dorm or multi-person  
8 housing in the intermediate care facility level of care. CDCR is routing a new directive to  
9 the PIPs which will rescind and replace the October 2020 policy with a policy that aligns  
10 the post-transfer quarantine processes with the current version of the Movement Matrix.

11 Second, the remaining five policies are based on current public health guidance and  
12 are essential to guide CDCR in operation of its programs, including health care operations,  
13 or are intrinsically related to those operational policies. These policies are regularly  
14 reviewed and updated by Defendants and take into account changing public health  
15 guidance for the prevention and mitigation of COVID-19. Defendants update these  
16 policies in response to public health guidance while working to minimize the disruption to  
17 programming under the circumstances. Such deviations are permissible because  
18 Defendants have inherent authority to take immediate steps informed by their experts to  
19 respond to a public health emergency and limit the spread of COVID within their  
20 institutions and facilities. The guidelines included in the policies below represent a  
21 responsible balancing of risks in treating and moving patients. Because these policies are  
22 directly tied to public health guidance, it is impossible to provide an anticipated end date  
23 for the departures caused by these policies.

24 Plaintiffs' proposed August 15 deactivation date is untethered from reality and  
25 public health guidance. These policies allow CDCR to safely operate through different  
26 levels of COVID outbreak within their institutions. These essential policies provide  
27 institutions guidance on what level of patient movement, institutional programming, and  
28 mental health care can be provided at each level of COVID outbreak and thus are essential



1 to mitigate the spread of COVID amongst staff and patients. Additionally, without clear  
 2 guidance on the operation of CDCR institutions and programs during the ongoing COVID  
 3 pandemic, CDCR institutions will not be able to safely reopen programming and services  
 4 once an outbreak subsides. Without clear guidance on safely resuming programming and  
 5 services, unnecessary exposure to COVID may result in further outbreaks and disruption in  
 6 services.

7 Plaintiffs' argument that California "reopened" on June 15 and thus all CDCR  
 8 pandemic policies should cease also lacks merit. California's "reopening" is not without  
 9 limits. The lifting of COVID precautions in the community is backed by public health  
 10 guidance. But guidance for the community does not necessarily translate to correctional  
 11 settings where the chance of COVID spread is far greater. Accordingly, CDCR continues  
 12 to follow public health guidance from the Centers for Disease Control (CDC) and the  
 13 California Department of Public Health. The CDC, for instance, continues to recommend  
 14 that prevention procedures should not be lifted when any transmission is occurring within  
 15 an institution. And it continues to recommend physical distancing and masks, even for  
 16 vaccinated staff and inmates because "the high risk of SARS-CoV-2 transmission in  
 17 correctional and detention facilities, and the possibility for vaccine breakthrough cases"  
 18 necessitate different recommendations for vaccinated individuals in correctional settings as  
 19 compared to the general population. ([https://www.cdc.gov/coronavirus/2019-  
 20 ncov/community/correction-detention/guidance-correctional-  
 21 detention.html#anchor\\_1623260857775](https://www.cdc.gov/coronavirus/2019-ncov/community/correction-detention/guidance-correctional-detention.html#anchor_1623260857775) accessed July 14, 2021.) CDCR continues to  
 22 abide by existing public health guidance for operation of its institutions and programs.  
 23 Until such time those guidance change, these policies must remain in full effect.

24 Plaintiffs improperly equate departures with harm, but without first drawing a  
 25 critical nexus between these concepts. Even if this Court determines that departures are  
 26 presumptively a constitutional violation, the Court cannot presume that class members are  
 27 harmed by these departures. Instead, the Court must evaluate, based on particularized  
 28 evidence, whether Defendants have alleviated or entirely abated harm through other



means. *See* Glover v. Johnson, 138 F.3d 229, 243 (6th Cir. 1998) (holding that defendants must be allowed to demonstrate that they have remedied underlying constitutional violations even without compliance with remedial orders). Presuming harm solely from Defendants’ departures from Program Guide requirements undermines this foundational principle and is inconsistent with the Prison Litigation Reform Act, which mandates that prospective relief, at a minimum, “extend no further than necessary to correct” the constitutional violation at issue. 18 U.S.C. § 3626(a)(1)(A); *see* Haddix v. Johnson, 28 F.3d 662, 670-71 (6th Cir. 2000). The policies are:

- April 22, 2021 version of the Roadmap to Reopening, which is an operational policy providing institutions with detailed guidance on programming and services to provide to inmates based on the COVID status at each institution.
- June 18, 2021 version of the Movement Matrix, which outlines the movement, quarantine, and testing procedures for various types of inter and intra institutional movement within CDCR’s system. At present, the impact of this policy on MHSDS patients is minimal on a systemic basis, as it deems all mental health movement as necessary. It restricts movement into yards on outbreak status or, for unvaccinated patients with elevated COVID risk, to five institutions and certain yards at two others. And it momentarily prevents patients on COVID exposure quarantine or isolation status from transferring until medically cleared, not unlike a medical condition exception for transfers to Psychiatric Inpatient Programs or Mental Health Crisis Beds.
- May 28, 2021 version of the COVID-19 Mental Health Delivery of Care Guidance and Tier Chart, which aligns directly with the Roadmap to Reopening. The Tier Chart is based on public health guidance and provides direction to institutions on what types and amount of mental health care must be provided to patients depending on whether the yard is on outbreak, post-outbreak, or new normal status.

- 1 • March 1, 2021 version of the Department of State Hospital’s (DSH) update
- 2 to its COVID-19 Temporary Guidelines for Transfer to DSH Inpatient Care,
- 3 which is regularly updated based on public health guidance and outlines the
- 4 process for CDCR to transfer patients to DSH.
- 5 • September 11, 2020 policy regarding COVID-19 Operations EOP Hub
- 6 Certification Process, which modifies the process for conducting hub
- 7 certifications to align with public health guidance and permits certification of
- 8 hubs that cannot meet Program Guide standards due to impacts on treatment
- 9 effectuated by the Tier Chart or Roadmap.

10 Defendants will continue to review and update these policies to ensure they are in  
 11 line with current public health guidance and with each revision work to minimize the  
 12 impact to programing and services.

## 13 2. Plaintiffs’ Position

14 The Court stated that the June 15, 2021 joint report should incorporate columns in  
 15 Appendix A with specific deactivation schedules for each of Defendants’ pandemic  
 16 policies, along with actual deactivation dates. Corrected Tr., ECF No. 7180 at 21:12 (May  
 17 19, 2021); *see also id.* at 21:6-23:4. These deactivation schedules are important because  
 18 “certain [pandemic] horizons seem to be coming clear as we gain more experience, for  
 19 example, with vaccination status” and the Program Guide departures reflected in these  
 20 joint reports were intended to be “temporary . . . not permanent.” *Id.* at 22:12-13, 15-17.

21 Defendants struck from their version of Appendix A policies they have deactivated,  
 22 both because certain policies have recently been decommissioned and because they  
 23 maintain that other policies exceed Program Guide and/or Compendium requirements.  
 24 First, Defendants fail to explain adequately why they struck from Appendix A a number of  
 25 policies they have deactivated since the May 15, 2021 Program Guide Departures filing,  
 26 contrary to the Court’s explicit instructions. Second, Plaintiffs do not agree with  
 27 Defendants’ characterization that “Plaintiffs appear to agree that [policies that exceed  
 28 Program Guide requirements] are not deviations from the Program Guide.” *See Defs’*

1 Position, *supra*. Nor have Defendants explained why they are newly distinguishing  
 2 between pandemic policies they believe exceed Program Guide and/or Compendium  
 3 requirements, contrary to the parties’ settled understanding and the Court’s order that all  
 4 “departures” from existing remedial requirements be incorporated into this filing. *See*  
 5 Order, ECF No. 6622 at 2 (Apr. 17, 2020) (requiring that the parties file a document  
 6 describing Defendants’ “sub-plans for management of the delivery of mental health care  
 7 and programming” during the pandemic, and that the document identify these “temporary  
 8 departures from certain Program Guide requirements . . . with specificity”); *see, e.g.*, Aug.  
 9 18, 2020 Jt. Report Addressing Current COVID-19-Related Departures from Program  
 10 Guide Req’ts & Resumption of Program Guide Mental Health Care, ECF No. 6831 at 3  
 11 (Aug. 21, 2020) (“Some of the[] policies [in Appendix A] require care that exceeds the  
 12 requirements set forth in the Program Guide.”). The Court’s statements at the May 14,  
 13 2021 status conference and the Minutes entered following the conference likewise make no  
 14 distinction between types of departures—those above or below remedial requirements. *See*  
 15 Corrected Tr., ECF No. 7180 at 21:6-23:4 (May 19, 2021); Minutes, ECF No. 7162 (May  
 16 14, 2021).

17 Most importantly, 16 months after the pandemic was declared, class members are  
 18 not receiving the mental health treatment they require and they are suffering the impacts of  
 19 the long-term deficits in their mental health care. Yet Defendants’ main mental health  
 20 policies envision an indefinite “new normal” that permits significant limitations to mental  
 21 health care offerings, notwithstanding that Defendants are close to achieving vaccine  
 22 saturation within their institutions and the State “reopened” on June 15, 2021. Plaintiffs  
 23 object to this unbounded approach.

24 Defendants’ efforts to vaccinate the incarcerated population have been largely very  
 25 successful. Defendants should be commended for their work on this front. But it is no  
 26 longer likely that there will be major changes in the proportion of incarcerated people in  
 27 CDCR and DSH who are vaccinated: Some holdouts will invariably agree to become  
 28 vaccinated with further education and support, and unvaccinated people will continue to

1 trickle into Defendants’ institutions through the reception centers. Given the relative stasis  
 2 in vaccination levels in Defendants’ institutions, and the overall reduction in community  
 3 levels of COVID-19 in California, if Defendants’ current mental health offerings are less  
 4 than what the Program Guide and Compendium Policies require, then Defendants must  
 5 institute new policies and practices that take into account the risk of COVID-19 *and* ensure  
 6 class members receive constitutionally adequate mental health care. For example,  
 7 Defendants should expand programming hours and increase staffing as necessary to meet  
 8 Program Guide and Compendium requirements. Permitting an indefinite “new normal”  
 9 will allow Defendants to mask limitations on staffing, space, and other resources that pre-  
 10 dated the pandemic and almost certainly will continue after the pandemic is officially  
 11 declared over.

12 Defendants respond, effectively, that public health guidance requires them to  
 13 provide inadequate mental health care to the *Coleman* class. But public health guidance  
 14 requires no such thing. Defendants can achieve social distancing in mental health  
 15 programming by expanding the times they offer such programming, increasing staffing  
 16 allocations, investing other additional resources, and developing creative solutions to  
 17 provide additional mental health care to offset limitations necessitated by unacceptable  
 18 COVID-19 risk. Plaintiffs have never stated that somehow requiring mental health care  
 19 provisions to be adequate means that Defendants must disregard public health guidance  
 20 regarding masking, social distancing, and other COVID-19 mitigation tools. And  
 21 following Defendants’ logic, because there will be COVID-19 outbreaks into perpetuity,  
 22 they must retain COVID-19 limitations on mental health programming forever. But  
 23 Defendants’ reference to the risk of future outbreaks ignores that Defendants not only have  
 24 16 months’ of experience with COVID-19 specifically, but also decades of experience  
 25 managing outbreaks of other diseases—including the flu, norovirus, and legionella—and  
 26 protocols to address disease outbreaks while still maintaining critical mental health  
 27 programming.

28 Finally, Defendants’ arguments regarding the PLRA and presuming harm where

1 Defendants fail to meet remedial requirements in this case ignore that the Program Guide  
 2 represents Defendants’ estimation of the level of mental health care required to achieve  
 3 constitutional compliance and prevent harm to class members. If Defendants want to  
 4 prove they have been and are providing constitutionally adequate mental health care to  
 5 class members during the pandemic, they may do so. They have not.

6 Consistent with foregoing, Plaintiffs propose the following deactivation dates for  
 7 Defendants’ pandemic policies, using Defendants three categories as a guide:

8 **Policies that will be rescinded soon.** In the June 15, 2021 Program Guide  
 9 Departures filing, Defendants and Plaintiffs agreed that July 15, 2021 was an appropriate  
 10 deadline for Defendants to deactivate their PIP Admission Beds policy. Defendants have  
 11 since indicated that this policy will be rescinded and replaced by a policy applicable to  
 12 non-single-cell admission beds for unvaccinated patients transferring to the PIPs.  
 13 Plaintiffs withhold further comment until that policy has been finalized and implemented.

14 **Policies that [purportedly] exceed Program Guide or Compendium**  
 15 **requirements.** Plaintiffs dispute the proposition that any of these practices “exceed” what  
 16 is necessary to ensure minimally adequate care under present circumstances. For example,  
 17 the increases in milestone credits are necessary to address the ongoing problem of class  
 18 member overcrowding remaining unacceptable even while the overall population drops.  
 19 These policies should remain in effect indefinitely. Nevertheless, as of the June 15, 2021  
 20 date of the last Program Guide Departures filing, Defendants deactivated the CCHCS  
 21 memo providing 90 days’ worth of medications for incarcerated people released on an  
 22 expedited basis.

23 **“Essential” policies.** Plaintiffs do not agree with Defendants’ characterization of  
 24 these policies, or the need for them to continue indefinitely as the “new normal.” To the  
 25 extent these policies permit departures below Program Guide and/or Compendium policy  
 26 requirements, Plaintiffs propose a deactivation date of August 15, 2021, one month from  
 27 the date of this filing and two months after the State reopened. As Defendants note, certain  
 28 of these policies already are intended to have minimal effect on class members (i.e., the

Movement Matrix). To the extent they continue to permit departures below minimum constitutional requirements for mental health care, Defendants must find ways to expand other offerings, or to invest more resources to remedy those departures.

#### COVID-Related Reporting

1. In the parties' May 20, 2020 stipulation, Defendants agreed to provide certain reports to the Special Master and Plaintiffs. *See* ECF No. 6679 at 3-5, ¶ 2. Since that time Defendants have also agreed to provide additional reporting related to the Roadmap to Reopening and on-site visits to mental health restricted housing units. Redacted copies of those reports are appended hereto:

- a. Shower and Yard in Segregation Compliance Report for June 2021, **Exhibit 1**;
- b. On Demand Patient's Pending Inpatient Transfer Registry accessed July 15, 2021, **Exhibit 2**;
- c. COVID-19 Mental Health Dashboard, accessed July 15, 2021, **Exhibit 3**;
- d. Roadmap Phase Reports for June 21, June 28, July 6, and July 12, 2021, **Exhibit 4**;
- e. On-site Audit Reports of Mental Health Restricted housing units at SATF and SVSP, **Exhibit 5**; and
- f. The July 15, 2021 output of the Treatment Offered interactive dashboard, **Exhibit 6**.

2. Defendants have discontinued the Tier Reports. Because Defendants' revision to the Tier Chart aligns it with the Roadmap to Reopening, Defendants instead now provide weekly Roadmap Phase Reports consistent with the revised Roadmap and Tier Chart.

3. The parties have had ongoing discussions regarding the Shower and Yard in Segregation Compliance Report ("Shower and Yard Report"), *id.* at 4, ¶ 2(d). *See* ECF No. 6761 at 3 (July 15, 2020). During a January 8, 2021 meet and confer, Plaintiffs

1 exhausted their questions regarding the Shower and Yard Report. Plaintiffs submit that the  
 2 Shower and Yard Report does not provide an accurate picture of actual program offerings  
 3 and that this issue must be addressed in on-site monitoring.

4       4.       On October 9, 2020, Defendants finalized updating the TMHU Registry, *see*  
 5 ECF No. 6679, ¶ 2(b), and replaced it with the Patient’s Pending Inpatient Transfer  
 6 Registry. The Registry includes data on all patients referred to acute or intermediate  
 7 inpatient care, but not housed in a crisis bed or psychiatric inpatient program. Plaintiffs  
 8 continue to have concerns that Defendants’ reporting mechanisms do not capture class  
 9 members referred to an MHCB but not housed in an MHCB. Because the report logic has  
 10 not been updated to reflect the decommissioning of the TMHUs, some patients are noted to  
 11 be housed in a TMHU after April 2, 2021, while in reality those patients were housed in  
 12 inpatient beds pending transfer to the appropriate level of care. This issue appears on the  
 13 COVID-19 Mental Health Dashboard as well. CDCR will decommission the Registry  
 14 once the inpatient backlog is resolved and is still considering future steps on the  
 15 Dashboard.

16       5.       The Roadmap to Reopening addresses programming and services, including  
 17 healthcare, provided at each institution consistent with an institution’s unique COVID-  
 18 related circumstances. Defendants have agreed to report on institutions’ movement  
 19 between Roadmap “phases” each week. As of May 10, 2021, the original format of the  
 20 Roadmap Phase Report was redesigned to reflect revisions to the Roadmap. These reports  
 21 show the progress of each facility by phase. The report reflects that Phase 1 is the most  
 22 restrictive and Phase 3 the least restrictive. The parties will continue to meet and confer  
 23 regarding the Roadmap Phase Report, including as to its content and format, as  
 24 appropriate.

25       6.       On May 20, 2020 the parties reported that they were still negotiating the data  
 26 Defendants can provide regarding the average number of hours of out-of-cell treatment,  
 27 including yard and recreation time, offered per week, as well as the status of available  
 28 entertainment devices and other in-cell activities for all class members in mental health



1 segregation units. In meet and confer discussions, Defendants reported that they do not  
2 have the capability to report on this information because none of this data is currently  
3 automated and they lack a single source of tracking information that could be used to  
4 provide a report on these issues. Defendants reported that, in lieu of a headquarters-level  
5 automated tracking report, their typical practice is to regularly audit many of these items  
6 via on-site audits by Mental Health Regional Administrators. While on-site audits were  
7 temporarily paused due to the COVID-19 pandemic, they resumed in mid-July 2020.  
8 Since that time, Defendants have inspected 37 institutions and collected data on the  
9 operation of mental health segregation units at those institutions.

10 During the January 8, 2021 meet and confer, the parties discussed the status of these  
11 segregation audits, the methodology for performing the audits, and the status of  
12 Defendants' reporting on them. Defendants agreed to provide all mental health  
13 segregation unit data and information collected during the audit process to Plaintiffs,  
14 including data and information collected since the resumption of onsite monitoring in  
15 July 2020. Defendants began providing audit data in January 2021.

16 During the January 8, 2021 meet and confer, Defendants explained that the on-site  
17 audits use a portion of the Continuous Quality Improvement Tool (CQIT). The parties  
18 agree that any questions about the process or methodology of these on-site custody audits  
19 should be raised through the existing CQIT update process.

20 Plaintiffs remain concerned about Defendants' inability to effectively track and  
21 report on these requirements at the headquarters level, and about Defendants' reliance on  
22 on-site audits as a general matter given Plaintiffs' concerns about the PSU and EOP ASU

23 \\\

24 \\\

25 \\\

26 \\\

27 \\\

28 \\\

[3762519.1]

1 hub certification process. The parties nonetheless agree to continue to meet and confer  
2 about these issues as necessary under the supervision of the Special Master.

3  
4 DATED: July 15, 2021

ROSEN BIEN GALVAN & GRUNFELD LLP

5  
6 By: /s/ Jessica Winter

7 Jessica Winter

8 Attorneys for Plaintiffs

9  
10 DATED: July 15, 2021

ROB BONTA

Attorney General of California

11  
12 By: /s/ Elise Thorn

13 Elise Thorn

Deputy Attorney General

14 Attorneys for Defendants  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27  
28

# **DEFENDANTS' APPENDIX A**

## Appendix A

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
<p><b>*COVID-19 Mental Health Delivery of Care Guidance &amp; Tier Document (May 28, 2021, superseding Mar. 25, 2020)</b></p>	<p>Stipulation and Order Approving CDCR's Telepsychiatry Policy, ECF No. 6539 (Mar. 27, 2020)</p> <p>Program Guide 12-1-12</p>	<p>For programs on outbreak or modified status (Tiers 1 or 2):</p> <ul style="list-style-type: none"> <li>Permits telepsychiatry broadly, including in PIPs and MHCBS, without a finding of emergency</li> <li>Telepsychiatry not treated as a supplement, but rather a substitute, for in-person psychiatry at EOP and higher levels of care</li> <li>Permits use of tele health services to be provided by psychologists and social workers</li> </ul>	<p>The COVID-19 Mental Health Delivery of Care Guidance and Tier Chart will remain necessary until public health guidance for the management of Covid-19 changes. The policy provides direction on the provision of mental health care for each level of COVID outbreak, which is essential for the continued safe operation of CDCR institutions.</p> <p>Accordingly, it is not now possible to project an end date.</p>

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
		<ul style="list-style-type: none"> <li>• Approval for use of telepsychiatry is made by the hiring authority</li> <li>• Psychiatrists and telepsychiatrists may provide telepsychiatry services from their homes during regular work hours, rather than from telepsychiatry hubs</li> <li>• Each institution can decide which telepresenters can be used, including: MA or CNA, and any healthy staff unable to perform their assigned duties during the crisis (with training).</li> <li>• Patients may not have an option to refuse</li> </ul>	

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
		<p>telepsychiatry as a treatment modality</p> <ul style="list-style-type: none"> <li>On-site psychiatrists may not be available if a clinical emergency occurs during a telepsychiatry session</li> </ul>	
	<p>Program Guide at 12-3-2 to 4, 12-3-11, 12-4-1 to 2, 12-4-8 to 12, 12-4-18 to 21; 12-5-14, 12-5-33 to 34, 12-7-7, 12-7-10, 12-8-4, 12-8-10, 12-9-7 to 9, 12-10-14 (availability of treatment modalities)</p> <p>Program Guide 12-1-12 (confidentiality requirements)</p>	<p>Groups may not be offered for programs on outbreak status (Tier 1).</p> <p>Groups shall continue for programs on modified or new normal status (Tiers 2 and 3), but may be reduced in size or in alternative non-confidential locations (e.g. day room, class rooms) for social distancing. For programs on modified status (Tier 2), groups will be prioritized for EOP patients.</p> <p>For programs on outbreak or modified status, patients</p>	<p>The COVID-19 Mental Health Delivery of Care Guidance and Tier Chart will remain necessary until public health guidance for the management of Covid-19 changes. The policy provides direction on the provision of mental health care for each level of COVID outbreak, which is essential for the continued safe operation of CDCR institutions.</p> <p>Accordingly, it is not now possible to project an end date.</p>

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
		<p>may be limited to in-cell therapeutic activities if group offerings decrease.</p> <p>Patients in isolation and/or quarantine will not attend groups but shall be provided with in-cell activities and receive daily rounding.</p>	
	Program Guide at 12-5-7 to 8, 12-5-10, 12-5-31, 12-10-7 to 12	Should operational abilities become impacted due to COVID-19 and the program is placed on outbreak or modified status (Tiers 1 or 2), patients may not receive SRASHEs if screened for suicidal ideation, but may instead be screened using the Columbia screening tool.	<p>The COVID-19 Mental Health Delivery of Care Guidance and Tier Chart will remain necessary until public health guidance for the management of Covid-19 changes. The policy provides direction on the provision of mental health care for each level of COVID outbreak, which is essential for the continued safe operation of CDCR institutions.</p> <p>Accordingly, it is not now possible to project an end date.</p>
	Program Guide at 12-1-4, 12-3-3 to	Pre-release planning activities may be limited to	The COVID-19 Mental Health Delivery of Care Guidance and



Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
	<p>4, 12-4-10 to 11, 12-4-13</p> <p>Memo: Release Planning for Inmates Participating in the Institution's Mental Health Services Delivery System (Mar. 11, 2010), Program Guide, Appendix C, <i>see</i> ECF No. 5864-1 at 276-82.</p>	<p>varying degrees for programs on outbreak or modified status. (Tiers 1 or 2)</p> <p>All required activities to occur when social distancing can be followed.</p>	<p>Tier Chart will remain necessary until public health guidance for the management of Covid-19 changes. The policy provides direction on the provision of mental health care for each level of COVID outbreak, which is essential for the continued safe operation of CDCR institutions.</p> <p>Accordingly, it is not now possible to project an end date.</p>
	<p>Program Guide at 12-3-2 to 4, 12-3-11, 12-4-1 to 2, 12-4-8 to 12, 12-4-18 to 21, 12-5-14, 12-5-33 to 34, 12-7-7, 12-7-10, 12-8-4, 12-8-10, 12-9-7 to 9, 12-10-14 (availability</p>	<p>For programs on outbreak or modified status (Tiers 1 or 2), 1:1 contacts with psychiatrists and primary clinicians may not occur within timeframes as care may be triaged depending on available resources.</p>	<p>The COVID-19 Mental Health Delivery of Care Guidance and Tier Chart will remain necessary until public health guidance for the management of Covid-19 changes. The policy provides direction on the provision of mental health care for each level of COVID outbreak, which is essential for</p>

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
	<p>of treatment modalities)</p> <p>Program Guide at 12-3-14 to 15, 12-4-9, 12-4-14 to 15, 12-4-19, 20, 12-5-14, 12-5-33, 12-7-4, 12-7-6, 12-7-7, 12-7-10, 12-7-13, 12-8-4, 12-8-9 to 11, 12-9-6 to 8 (primary clinician contacts)</p>		<p>the continued safe operation of CDCR institutions.</p> <p>Accordingly, it is not now possible to project an end date.</p>
	<p>Program Guide 12-2-6 to 8, 12-3-11 to 12, 12-3-14, 12-4-9, 12-4-19, 12-5-14 to 16, 12-7-7 to 8, 12-7-10, 12-8-10, 12-9-4, 12-9-8 (medication prescription)</p>	<p>For programs on outbreak status (Tier 1), any physician, nurse practitioner, or physician assistant can serve as a prescriber of psychiatric medication.</p>	<p>The COVID-19 Mental Health Delivery of Care Guidance and Tier Chart will remain necessary until public health guidance for the management of Covid-19 changes. The policy provides direction on the provision of mental health care for each level of COVID outbreak, which is essential for the continued safe operation of CDCR institutions.</p>

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
			Accordingly, it is not now possible to project an end date.
	Program Guide at 12-3-2 to 4, 12-3-11, 12-4-1 to 2, 12-4-8 to 12, 12-4-18 to 21, 12-5-14, 12-5-33 to 34, 12-7-7, 12-7-10, 12-8-4, 12-8-10, 12-9-7 to 9, 12-10-14 (availability of treatment modalities)	For programs on outbreak or modified status, (Tiers 1 or 2), psychiatrist duties may be triaged to serve urgent or emergent needs.	<p>The COVID-19 Mental Health Delivery of Care Guidance and Tier Chart will remain necessary until public health guidance for the management of Covid-19 changes. The policy provides direction on the provision of mental health care for each level of COVID outbreak, which is essential for the continued safe operation of CDCR institutions.</p> <p>Accordingly, it is not now possible to project an end date.</p>
<b>Updated Draft COVID-19 Temporary Guidelines for Transfer to DSH Inpatient Care (March 1, 2021, superseding April 15, 2020, May 15, 2020, June 12, 2020, June 19, 2020, July 16, 2020, October 20, 2020, and</b>	Program Guide 12-1-16 (timelines for level of care transfers)  CDCR-DSH MOU and PIP Policy	<ul style="list-style-type: none"> <li>Provides direction on transfers between DSH and CDCR that may impact timeframes</li> <li>Provides additional individualized clinical</li> </ul>	The Updated Draft COVID-19 Temporary Guidelines for Transfer to DSH Inpatient Care will remain necessary until public health guidance for the management of Covid-19 changes. The policy provides direction on testing and

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
<p><b>January 4, 2021 versions), as modified by May 5, 2021 notification re direct admissions of <i>Coleman</i> patients to DSH facilities<sup>1</sup></b></p>	<p>12.11.2101(A) – Referrals and Admissions &amp; Exceptions Addendum</p> <p>Program Guide at 12-3-1 to 2, 12-3-12 to 14, 12-4-1, 12-4-13, 12-4-16, 12-4-20 to 21, 12-5-2, 12-5-15, 12-5-26 to 29, 12-5-32, Chapter 6, 12-7-2 to 8, 12-7-11, 12-7-12, 12-8-1, 12-8-5 to 7, 12-8-9, 12-8-11 to 12, 12-9-2 to 3, 12-9-4 to 5, 12-9-6, 12-9-12 to 14, 12-10-12 to 13, 12-10-19 to 21 (access</p>	<p>review and a COVID-19 screening process.</p> <ul style="list-style-type: none"> <li>• Delays certain individuals who otherwise qualify for transfer from CDCR to DSH from doing so, where the patient tests or screens positive for COVID-19.</li> <li>• CDCR must order a PCR COVID-19 test no more than five days before the projected admission date for any patient accepted to DSH.</li> <li>• For referrals to DSH from a CDCR facility</li> </ul>	<p>screening requirements necessary to safely transfer a patient between CDCR and DSH.</p> <p>Accordingly, it is not now possible to project an end date.</p>

<sup>1</sup> Plaintiffs maintain their objection to the guidelines, as stated in the October 23, 2020 evidentiary hearing and in Plaintiffs' post-trial brief, ECF No. 6948 (Nov. 13, 2020).

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
	to higher levels of care)	<p>experiencing a COVID-19 outbreak, patient transfers to DSH will occur where CDCR and DSH decide there is adequate public health data demonstrating an acceptably low risk of COVID-19 exposure. To make this decision, CDCR and DSH leadership will discuss relevant public health information on a patient by patient basis, including exposure risk, availability and use of PPE, testing and results, physical plant effects on exposure risks, and the extent of staff crossover between units with</p>	

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
		<p>active cases and those without cases to evaluate the possibility of transfer. Patients considered for transfer pursuant to this process will be quarantined for 14 days, and tested for COVID-19, followed by a further discussion between CDCR and DSH leadership regarding any interim exposure risks that occurred during the quarantine period.</p> <ul style="list-style-type: none"> <li>• Provides direction as to the transfer of class members with presumed immunity to COVID-19 due to prior infection.</li> </ul>	

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
		<ul style="list-style-type: none"> <li>Transfers to DSH will not be held based on a patient's vaccination status, unless the receiving DSH facility cannot complete the patient's vaccination series in accordance with public health guidance.</li> <li>Certain vaccinated patients, depending on clinical factors and the DSH facility to which they are transferring, will be admitted directly to a treatment unit, rather than to an admissions and observation unit and then to a treatment unit.</li> <li>DSH collaborates at least weekly with the</li> </ul>	



Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
		<p>Special Master's experts in small group meetings to discuss and refine the referral process, resolve conflicts and respond to COVID-19 related impacts on referrals and transfers due to the changing nature of the pandemic.</p> <ul style="list-style-type: none"> <li>• The Special Master continues to closely monitor all referrals, rejections and completed transfers to and from the DSH inpatient programs, and to evaluate compliance with the Court's April 24, 2020 Order. See ECF Nos. 6622 at 3; 6639.</li> </ul>	
<b>*Institutional Roadmap to Reopening (April 20, 2021,</b>	Program Guide at 12-3-2 to 4, 12-3-	Based on several factors, including the number of	The Institutional Roadmap to Reopening will remain

<b>Policy, Memorandum, or Guidelines</b>	<b>Program Guide or Related Policy Provision</b>	<b>Summary of Departure</b>	<b>Deactivation Plan or Date</b>
<b>superseding August 14, 2020 version)</b>	<p>11, 12-4-1 to 2, 12-4-8 to 12, 12-4-18 to 21, 12-5-15, 12-5-33 to 34, 12-7-7, 12-7-10, 12-8-10, 12-9-7 to 9, 12-10-14 (availability of treatment modalities)</p> <p>Program Guide 12-1-16 (timelines for level of care transfers)</p> <p>Program Guide at 12-3-1 to 2, 12-2-8 to 10, 12-3-12 to 14, 12-4-1, 12-4-13, 12-4-16, 12-4-20 to 21, 12-5-2, 12-5-15, 12-5-26 to 29, 12-5-32, Chapter 6, 12-7-2 to 8, 12-7-11, 12-7-12, 12-8-1, 12-</p>	<p>new COVID-19 cases, and the time passed since an active outbreak, each institution may be placed, at the discretion of its Warden and Chief Executive Officer, in one of three “phases.” The phases range from most to least restrictive on the institution’s general operation, healthcare services, and inmate programs. Depending on an institution’s phase, restrictions may be placed on:</p> <ul style="list-style-type: none"> <li>• Mental health treatment modalities and quantities that can be provided</li> <li>• Yard, dayroom, and other out of cell time</li> </ul>	<p>necessary until public health guidance for the management of Covid-19 changes. The policy provides guidance for institutions to reopen programs and services based on their respective COVID outbreak status. Without such guidance, safe operation of CDCR institutions during the ongoing COVID pandemic will not be possible</p> <p>Accordingly, it is not now possible to project an end date.</p>

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
	<p>8-5 to 7, 12-8-9, 12-8-11 to 12, 12-9-2 to 3, 12-9-4 to 5, 12-9-6, 12-9-12 to 14, 12-10-12 to 13, 12-10-19 to 21 (access to higher levels of care)</p> <p>Program Guide 12-1-12</p>	<ul style="list-style-type: none"> <li>Other programming opportunities, including vocational, educational, ISUDT, visiting, and jobs</li> </ul>	
<p><b>*Movement Matrix (June 18, 2021, superseding Apr. 27, 2021, April 9, 2021, Jan. 8, 2021, and June 14, 2021 versions),</b></p>	<p>Program Guide 12-1-16 (timelines for level of care transfers)</p> <p>Program Guide at 12-3-1 to 2, 12-3-8 to 10, 12-3-12 to 14, 12-4-1, 12-4-13, 12-4-16, 12-4-20 to 21, Chapter 6 12-7-2 to 8, 12-7-11, 12-7-12, 12-8-1, 12-</p>	<p>For each type of movement between and within institutions, sets the COVID-19 testing strategy, required type of quarantine housing, and process for moving an inmate who refuses a COVID-19 test. Defines movement of MHSDS patients to meet Program Guide requirements as a necessary transfer.</p>	<p>The Movement Matrix will remain necessary until public health guidance for the management of Covid-19 changes. The policy provides direction on testing, screening, and quarantine practices to safely move inmates between and within CDCR institutions during the COVID pandemic.</p> <p>Accordingly, it is not now possible to project an end date.</p>

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
	<p>8-5 to 7, 12-8-9, 12-8-11 to 12, 12-9-2 to 3, 12-9-4 to 5, 12-9-6, 12-9-12 to 14, (access to higher levels of care).</p> <p>CDCR-DSH MOU</p> <p>Memorandum: Transfer of Correctional Clinical Case Management System Inmate-Patients to Male Short Term Restricted Housing Units (Mar. 3, 2016)</p> <p>Memorandum: Creation of Correctional Clinical Case</p>	<p>In certain circumstances, the Movement Matrix precludes transfer, at least temporarily, in cases where a patient tests positive or has been exposed to COVID. Movement within and between institutions for mental health purposes occurs as normal except:</p> <ul style="list-style-type: none"> <li>• Non-PIP/MHCB transfers between institutions where the patient is isolated due to COVID or quarantined due to exposure</li> <li>• Non-PIP/MHCB transfers within institutions where the receiving yard is on outbreak status or if the patient screen symptomatic or tests positive for COVID</li> </ul>	

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
	<p>Management System Short Term and Long Term Restricted Housing (Jan. 15, 2015)</p> <p>Stipulation &amp; Order, ECF No. 6296 (Sept. 27, 2019) (approving and attaching policy for reducing transfer timeframes from desert institutions)</p>	<ul style="list-style-type: none"> <li>• Non-PIP/MHCB transfers from Reception Center to institution where patient is isolated due to COVID infection or quarantined due to exposure or tests positives or screens symptomatic in pre-transfer testing</li> <li>• Transfers from CDCR to DSH where patient tests positive for COVID-19</li> </ul> <p>Precludes unvaccinated incarcerated people with a COVID-19 risk score of 3 or higher from transferring to any dorm settings or SQ, FSP, ASP, CVSP, CRC, CMC-West, or CIM Facilities A and D.</p>	

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
<p><b>COVID-19 Operations EOP Hub Certification Process &amp; Addendum for Certifying Met with Explanation due to COVID-19 Restrictions (Sept. 11, 2020)</b></p>	<p>Program Guide Chapters 7, 8, 9</p> <p>Order, ECF No. 5131 (Apr. 10, 2014); Order, ECF No. 5196 (Aug. 11, 2014)</p> <p>Defs' Plans &amp; Policies Submitted in Resp. to Apr. 10, 2014 and May 13, 2014 Orders, ECF No. 5190 at 17-19 (Aug. 1, 2014)</p>	<ul style="list-style-type: none"> <li>Permits audits of PSU and EOP ASU units to be conducted remotely, by video equipment or telephone, due to COVID-19-related staffing limitations</li> <li>If no institution staff are available to conduct remote audits, then those audits will be conducted by a regional staff member</li> <li>COVID-19-related limitations or changes to standard audit procedure or mental health treatment provisions—including whether audits are conducted remotely or by regional staff, groups</li> </ul>	<p>The COVID-19 Operations EOP Hub Certification Process and Addendum will remain necessary until public health guidance for the management of Covid-19 changes. The policy allows CDCR staff to safely conduct Hub certifications during the COVID pandemic and to assess the performance of these units in light of the unique circumstances facing each institution.</p> <p>Accordingly, it is not now possible to project an end date</p>

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
		<p>or other treatment are not offered, and IDTTs or ICCs are held in absentia—shall be documented on the audit form</p> <ul style="list-style-type: none"> <li>• If an institution's failure to meet certification requirements is due purely to COVID-19-related restrictions, the institution may pass certification "with explanation," assuming certain criteria are met. Documentation of the rationale for any such "with explanation" certification is required.</li> </ul>	
<b>COVID-19 Psychiatric Inpatient Program Admission</b>	PIP Policy 12.11.2101(A) –	<ul style="list-style-type: none"> <li>• Creates a process by which patients newly admitted to a PIP will</li> </ul>	The COVID-19 Psychiatric Inpatient Program Admissions Bed Policy and Procedure



Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
<b>Bed Policy and Procedure (Oct. 23, 2020)</b>	<p>Referrals and Admissions</p> <p>PIP Policy 12.11.2111 – Housing Review/Least Restrictive Housing</p>	<p>be housed in a single-cell admission bed in the PIP before they are placed in their endorsed program. If local medical or public health staff deem it necessary, patients transferring within a PIP will also initially be placed in an admission bed.</p> <ul style="list-style-type: none"> <li>• Patients typically will remain in a PIP admission bed for 14 to 21 days following their admission to a PIP.</li> <li>• Creates Admission Units, or groupings of admission beds in PIPs.</li> <li>• Creates and implements</li> </ul>	<p>began deactivation in May 2021 and was expected to be replaced with a more narrow directive adhering to the Movement Matrix by July 15, 2021. The revision policy is still routing and should be final by August 15, 2021. In the meantime, CDCR has taken down additional PIP Admission beds in order to better align CDCR's needs with the current version of the Movement Matrix.</p>

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
		<p>COVID-19 safety protocols applicable to each patient in an admission bed, including quarantine, testing and screening.</p> <ul style="list-style-type: none"> <li>• If identified admission beds are full but vacant patient beds exist in the PIPs, intake of new patients will not stop. In this circumstance, PIP leadership will identify additional admission beds for quarantining new admissions to ensure patient admissions can continue.</li> <li>• Local PIP leadership will monitor admission unit bed numbers and identify overflow admission</li> </ul>	

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
		<p>beds in advance to ensure the admission units do not reach capacity.</p> <ul style="list-style-type: none"> <li>• While PIP patients are housed in an admission bed, their endorsed non-admission bed in the PIP will be reserved for them.</li> <li>• While patients are in admission units, they will receive all available PIP mental health services, focusing on patient orientation, intake evaluation, and initial treatment planning. The treatment plan developed by the admission unit clinical team will be coordinated with the</li> </ul>	

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
		<p>receiving treatment team to which the patient will transition. Patients in admission units will also be offered property, phone calls, yard, and all other privileges consistent with current policy for all PIP patients.</p>	

# **PLAINTIFFS’ APPENDIX A**

## Appendix A

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
<p><b>*COVID-19 Mental Health Delivery of Care Guidance &amp; Tier Document (May 28, 2021, superseding Mar. 25, 2020 version)</b></p>	<p>Stipulation and Order Approving CDCR's Telepsychiatry Policy, ECF No. 6539 (Mar. 27, 2020)</p> <p>Program Guide 12-1-12 &amp; Attachment A; CCHCS Memo – Clinical Contacts and Documentation (February 7, 2020) (confidentiality requirements)</p>	<p>For programs on outbreak or modified status (Tiers 1 or 2):</p> <ul style="list-style-type: none"> <li>• Permits telepsychiatry broadly, including in PIPs and MHCBS, without a finding of emergency</li> <li>• Telepsychiatry not treated as a supplement, but rather a substitute, for in-person psychiatry at EOP and higher levels of care</li> <li>• Permits use of tele health services to be provided by psychologists and social workers</li> <li>• Approval for use of telepsychiatry is made by the hiring authority</li> <li>• Psychiatrists and telepsychiatrists may provide telepsychiatry services from their homes during regular</li> </ul>	<p>This policy should be completely deactivated no later than August 15, 2021, 17 months after the pandemic was declared. Defendants have achieved vaccine saturation in the incarcerated population and the State as a whole reopened on June 15. To the extent this policy remains in effect, Defendants must invest additional resources and develop new policies to ensure they are providing constitutionally adequate mental health care to class members, notwithstanding ongoing COVID-19 risk.</p>

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
		<p>work hours, rather than from telepsychiatry hubs</p> <ul style="list-style-type: none"> <li>At Tiers 1 and 2, creates preference for primary clinician contacts, where occurring remotely, to occur by adding the tele-PC contact to an existing telepsychiatry session.</li> <li>Each institution can decide which telepresenters can be used, including: MA or CNA, and any healthy staff unable to perform their assigned duties during the crisis (with training).</li> <li>Patients may not have an option to refuse telepsychiatry as a treatment modality</li> <li>On-site psychiatrists may not be available if a clinical emergency occurs during a telepsychiatry session</li> </ul>	

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
	<p>Mental Health Services Delivery System Program Guide, 2020 Revision (“Program Guide”) at 12-1-16 (timelines for level of care transfers)</p> <p>Program Guide at 12-3-1 to 2, 12-3-12 to 14, 12-4-1, 12-4-6 to 8, 12-4-13, 12-4-16, 12-4-20 to 21, 12-5-1, 12-5-3 to 10, 12-5-15, 12-5-26 to 29, 12-5-32, Chapter 6, 12-7-2 to 8, 12-7-11, 12-7-12, 12-8-1, 12-8-5 to 7, 12-8-9, 12-8-11 to 12, 12-9-2 to 3, 12-9-4 to 5, 12-9-6, 12-9-12 to 14, 12-10-12 to 13, 12-10-19 to 21 (access to higher levels of care)</p>	<p>Decisions on admission and discharge subject to day-to-day analysis of staffing, individual patient needs, space availability, social distancing, restrictions on movement, quarantine and isolation status, and the degrees of risk when making these decisions.</p>	<p>This departure has been deactivated as of June 9, 2021, as transfers are governed by the Movement Matrix.</p>
	<p>Program Guide at 12-3-2 to 4, 12-3-11, 12-4-1 to 2, 12-4-8 to 12,</p>	<p>Groups may not be offered for programs on outbreak status (Tier 1).</p>	<p>This policy should be completely deactivated no later than August 15, 2021, 17 months after the</p>



Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
	<p>12-4-18 to 21; 12-5-14, 12-5-33 to 34, 12-7-7, 12-7-10, 12-8-4, 12-8-10, 12-9-7 to 9, 12-10-14 (availability of treatment modalities)</p> <p>Program Guide 12-1-12 &amp; Attachment A; CCHCS Memo – Clinical Contacts and Documentation (February 7, 2020) (confidentiality requirements)</p>	<p>Groups shall continue for programs on modified or new normal status (Tiers 2 and 3), but may be reduced in size or in alternative non-confidential locations (e.g. day room, class rooms) for social distancing. For programs on modified status (Tier 2), groups will be prioritized for EOP patients.</p> <p>For programs on outbreak or modified status, patients may be limited to in-cell therapeutic activities if group offerings decrease. Patients in isolation and/or quarantine will not attend groups but shall be provided with in-cell activities and receive daily rounding.</p>	<p>pandemic was declared. Defendants have achieved vaccine saturation in the incarcerated population and the State as a whole reopened on June 15. To the extent this policy remains in effect, Defendants must invest additional resources and develop new policies to ensure they are providing constitutionally adequate mental health care to class members, notwithstanding ongoing COVID-19 risk.</p>
	<p>Program Guide 12-1-12 &amp; Attachment A; CCHCS Memo – Clinical Contacts and Documentation (February 7, 2020) (confidentiality requirements)</p>	<p>Groups may not be confidential if placed in an alternative location (e.g. day room, classrooms) or due to social distancing purposes.</p>	<p>This policy should be completely deactivated no later than August 15, 2021, 17 months after the pandemic was declared. Defendants have achieved vaccine saturation in the incarcerated population and the State as a whole reopened on June 15. To the extent this policy remains in effect, Defendants must invest additional resources and develop</p>

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
			new policies to ensure they are providing constitutionally adequate mental health care to class members, notwithstanding ongoing COVID-19 risk.
	Program Guide 12-1-12 & Attachment A; CCHCS Memo – Clinical Contacts and Documentation (February 7, 2020) (confidentiality requirements)	<p>Contacts with IDTT may be cell front and non-confidential.</p> <p>At all tiers “the best solution [for achieving social distancing during IDTTs] is to turn team meetings into teleconference meetings, with staff calling in from their individual offices.”</p>	<p>This policy should be completely deactivated no later than August 15, 2021, 17 months after the pandemic was declared. Defendants have achieved vaccine saturation in the incarcerated population and the State as a whole reopened on June 15. To the extent this policy remains in effect, Defendants must invest additional resources and develop new policies to ensure they are providing constitutionally adequate mental health care to class members, notwithstanding ongoing COVID-19 risk.</p>
	Program Guide at 12-3-2 to 4, 12-3-11, 12-4-1 to 2, 12-4-8 to 12, 12-4-18 to 21; 12-5-14, 12-5-33 to 34, 12-7-7, 12-7-10, 12-8-4, 12-8-10, 12-9-7 to 9,	<p>Patients may be limited to in-cell activities only.</p> <p>For programs on outbreak status (Tier 1), patients awaiting transfer to MHC B will be treated as MHC B</p>	<p>This policy should be completely deactivated no later than August 15, 2021, 17 months after the pandemic was declared. Defendants have achieved vaccine saturation in the incarcerated population and the State as a</p>

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
	12-10-14 (availability of treatment modalities)	<p>patients for all clinical contacts as operations allow.</p> <p>For programs on modified status (Tier 2), patients housed in a MHCB awaiting transfer to a higher level of care and patients in alternative housing awaiting transfer to a MHCB will be provided enhanced out-of-cell time and therapeutic activities as well as daily rounds, as operations allow.</p>	<p>whole reopened on June 15. To the extent this policy remains in effect, Defendants must invest additional resources and develop new policies to ensure they are providing constitutionally adequate mental health care to class members, notwithstanding ongoing COVID-19 risk.</p>
	Program Guide at 12-5-7 to 8, 12-5-10, 12-5-31, 12-10-7 to 12	<p>Should operational abilities become impacted due to COVID-19 and the program is placed on outbreak or modified status (Tiers 1 or 2), patients may not receive SRASHEs if screened for suicidal ideation, but may instead be screened using the Columbia screening tool.</p>	<p>This policy should be completely deactivated no later than August 15, 2021, 17 months after the pandemic was declared. Defendants have achieved vaccine saturation in the incarcerated population and the State as a whole reopened on June 15. To the extent this policy remains in effect, Defendants must invest additional resources and develop new policies to ensure they are providing constitutionally adequate mental health care to class members, notwithstanding ongoing COVID-19 risk.</p>

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
	<p>Program Guide at 12-1-6, 12-1-16, 12-3-1 to 2, 12-5-4</p> <p>Order, ECF No. 5710 (Oct. 10, 2017)</p> <p>CCHCS Policy 12.05.301: Housing of Patients Pending Mental Health Crisis Bed Transfers</p>	<p>Depending on the institution's Tier level, patients may be placed in alternative housing for longer than 24 hours. Within 24 hours of placement or if patient remains longer than 24 hours, a full SRASHE must be completed.</p>	<p>This departure has been deactivated as of June 9, 2021.</p>
	<p>Program Guide at 12-3-2 to 4, 12-3-11, 12-4-1 to 2, 12-4-8 to 13, 12-4-18 to 21, 12-5-14, 12-5-33 to 34, 12-7-7, 12-7-10, 12-8-4, 12-8-10, 12-9-7 to 9, 12-10-14 (availability of treatment modalities)</p> <p>Program Guide Chapters 5, 6</p>	<p>As patients wait for inpatient referrals to process, they may not receive treatment commensurate with their level of care.</p>	<p>This departure has been deactivated as of June 9, 2021.</p>
	<p>Program Guide 12-1-16 (timelines for level of care transfers)</p>	<p>Symptomatic patients shall be isolated from other patients in the general population and will not</p>	<p>This departure has been deactivated as of June 9, 2021.</p>

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
	<p>Program Guide at 12-3-1 to 2, 12-3-12 to 14, 12-4-1, 12-4-13, 12-4-16, 12-4-20 to 21, 12-5-2, 12-5-3 to 10, 12-5-15, 12-5-26 to 29, 12-5-32, Chapter 6, 12-7-2 to 8, 12-7-11, 12, 12-8-1, 5 to 7, 9, 11 to 12, 12-9-2 to 3, 4 to 5, 6, 12 to 14, 12-10-12 to 13, 19 to 21 (access to higher levels of care)</p> <p>Program Guide at 12-3-2 to 4, 12-3-11, 12-4-1 to 2, 12-4-8 to 12, 12-4-18 to 21, 12-5-14, 12-5-33 to 34, 12-7-7, 10, 12-8-4, 10, 12-9-7 to 9, 12-10-14 (availability of treatment modalities)</p>	transfer absent showing of legal or medical necessity.	
	Program Guide at 12-1-4, 12-3-3 to 4, 12-4-10 to 11, 12-4-13	Pre-release planning activities may be limited to varying degrees for	This policy should be completely deactivated no later than August 15, 2021, 17 months after the pandemic was declared.

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
	Memo: Release Planning for Inmates Participating in the Institution's Mental Health Services Delivery System (Mar. 11, 2010), Program Guide, Appendix C, <i>see</i> ECF No. 5864-1 at 276-82.	<p>programs on outbreak or modified status. (Tiers 1 or 2)</p> <p>All required activities to occur when social distancing can be followed.</p>	Defendants have achieved vaccine saturation in the incarcerated population and the State as a whole reopened on June 15. To the extent this policy remains in effect, Defendants must invest additional resources and develop new policies to ensure they are providing constitutionally adequate mental health care to class members, notwithstanding ongoing COVID-19 risk.
	<p>Program Guide at 12-3-2 to 4, 12-3-11, 12-4-1 to 2, 12-4-8 to 12, 12-4-18 to 21, 12-5-14, 12-5-33 to 34, 12-7-7, 12-7-10, 12-8-4, 12-8-10, 12-9-7 to 9, 12-10-14 (availability of treatment modalities)</p> <p>Program Guide at 12-3-14 to 15, 12-4-9, 12-4-14 to 15, 12-4-19, 20, 12-5-14, 12-5-33, 12-7-4, 12-7-6, 12-7-7, 12-7-10, 12-</p>	<p>For programs on outbreak or modified status (Tiers 1 or 2), 1:1 contacts with psychiatrists and primary clinicians may not occur within timeframes as care may be triaged depending on available resources.</p> <p>At Tiers 1 and 2, creates preference for primary clinician contacts, where occurring remotely, to occur by adding the tele-PC contact to an existing telepsychiatry session.</p>	<p>This policy should be completely deactivated no later than August 15, 2021, 17 months after the pandemic was declared.</p> <p>Defendants have achieved vaccine saturation in the incarcerated population and the State as a whole reopened on June 15. To the extent this policy remains in effect, Defendants must invest additional resources and develop new policies to ensure they are providing constitutionally adequate mental health care to class members, notwithstanding ongoing COVID-19 risk.</p>

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
	7-13, 12-8-4, 12-8-9 to 11, 12-9-6 to 8 (primary clinician contacts)		
	<p>Program Guide at 12-3-2 to 4, 12-3-11, 12-4-1 to 2, 12-4-8 to 12, 12-4-18 to 21, 12-5-14, 12-5-33 to 34, 12-7-7, 12-7-10, 12-8-4, 12-8-10, 12-9-7 to 9, 12-10-14 (availability of treatment modalities)</p> <p>Program Guide at 12-3-14 to 15, 12-4-9, 12-4-14 to 15, 12-4-19, 20, 12-5-14, 12-5-33, 12-7-4, 12-7-6, 12-7-7, 12-7-10, 12-7-13, 12-8-4, 12-8-9 to 11, 12-9-6 to 8 (primary clinician contacts)</p>	1:1 contacts with psychologists or social workers may not occur within timeframes.	<p>This policy should be completely deactivated no later than August 15, 2021, 17 months after the pandemic was declared.</p> <p>Defendants have achieved vaccine saturation in the incarcerated population and the State as a whole reopened on June 15. To the extent this policy remains in effect, Defendants must invest additional resources and develop new policies to ensure they are providing constitutionally adequate mental health care to class members, notwithstanding ongoing COVID-19 risk.</p>
	Program Guide at 12-3-2 to 4, 12-3-11, 12-4-1 to 2, 12-10-15 to	1:1 suicide watch may not occur where clinically indicated.	This departure has been deactivated as of June 9, 2021.

<b>Policy, Memorandum, or Guidelines</b>	<b>Program Guide or Related Policy Provision</b>	<b>Summary of Departure</b>	<b>Deactivation Plan or Date</b>
	19 (availability of treatment modalities)		
	Program Guide 12-2-6 to 8, 12-3-11 to 12, 12-3-14, 12-4-9, 12-4-19, 12-5-14 to 16, 12-7-7 to 8, 12-7-10, 12-8-10, 12-9-4, 12-9-8 (medication prescription)	For programs on outbreak status (Tier 1), any physician, nurse practitioner, or physician assistant can serve as a prescriber of psychiatric medication.	This policy should be completely deactivated no later than August 15, 2021, 17 months after the pandemic was declared. Defendants have achieved vaccine saturation in the incarcerated population and the State as a whole reopened on June 15. To the extent this policy remains in effect, Defendants must invest additional resources and develop new policies to ensure they are providing constitutionally adequate mental health care to class members, notwithstanding ongoing COVID-19 risk.
	Program Guide at 12-3-2 to 4, 12-3-11, 12-4-1 to 2, 12-4-8 to 12, 12-4-18 to 21, 12-5-14, 12-5-33 to 34, 12-7-7, 12-7-10, 12-8-4, 12-8-10, 12-9-7 to 9, 12-10-14 (availability of treatment modalities)	For programs on outbreak or modified status, (Tiers 1 or 2), psychiatrist duties may be triaged to serve urgent or emergent needs only.	This policy should be completely deactivated no later than August 15, 2021, 17 months after the pandemic was declared. Defendants have achieved vaccine saturation in the incarcerated population and the State as a whole reopened on June 15. To the extent this policy remains in effect, Defendants must invest



<b>Policy, Memorandum, or Guidelines</b>	<b>Program Guide or Related Policy Provision</b>	<b>Summary of Departure</b>	<b>Deactivation Plan or Date</b>
			additional resources and develop new policies to ensure they are providing constitutionally adequate mental health care to class members, notwithstanding ongoing COVID-19 risk.
<b>COVID-19 Pandemic – Guidance Regarding Field Operations (Mar. 18, 2020, revised Mar. 20, 2020)</b>	<p>Program Guide at 12-3-2 to 4, 12-3-11, 12-4-1 to 2, 12-4-8 to 12, 12-4-18 to 21, 12-5-15, 12-5-33 to 34, 12-7-7, 10, 12-8-10, 12-9-7 to 9, 12-10-14 (availability of treatment modalities)</p> <p>February 14, 2017 memorandum titled Mental Health Crisis Bed Privileges Revision, Program Guide, Appendix C, <i>see</i> ECF No. 5864-1 at 349.</p>	Not congregating in groups of 10 or more individuals and suspending group programs where participants are likely to be in close contact.	This departure has been deactivated as of June 9, 2021.
<b>Restricted Housing, Reception Centers, PIP Phone Calls (Apr. 8, 2020)</b>	September 22, 2016 memorandum regarding Reception Center Privileges for	Extends phone call privileges for those in segregated housing, reception centers, and PIPs beyond what is permitted by privilege group.	This policy should continue indefinitely.

<b>Policy, Memorandum, or Guidelines</b>	<b>Program Guide or Related Policy Provision</b>	<b>Summary of Departure</b>	<b>Deactivation Plan or Date</b>
	EOPs, <i>see</i> ECF No. 6431 at 4.		
<b>*COVID-19 Programming Opportunities for Inmates Participating in the MHSDS in Restricted Housing (Apr. 1, 2020)</b>	<p>Program Guide at 12-3-2 to 4, 12-3-11, 12-4-1 to 2, 12-4-8 to 12, 12-4-18 to 21, 12-5-14, 12-5-33 to 34, 12-7-7, 12-7-10, 12-8-4, 12-8-10, 12-9-7 to 9, 12-10-14 (availability of treatment modalities)</p> <p>Program Guide at 12-3-14 to 15, 12-4-9, 12-4-14 to 15, 12-4-19, 20, 12-5-14, 12-5-33, 12-7-4, 12-7-6, 12-7-7, 12-7-10, 12-7-13, 12-8-4, 12-8-9 to 11, 12-9-6 to 8 (primary clinician contacts)</p>	Implementation of third watch programming opportunities within restricted housing. If mental health groups and 1:1 clinical contacts cannot occur in the restricted housing units, wardens will ensure PM yard is offered to those in the MHSDS.	This policy should continue indefinitely.
<b>COVID-19 Electronic Appliance Loaner Program (Apr. 1, 2020)</b>	January 22, 2014 Memo – Multi-Powered Radio Loaner Program in Administrative	Increase patient access to loaner electronic appliances.	This policy should continue indefinitely.

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
	Segregation Units; and March 12, 2007 Memo – Televisions in Segregation Units, <i>see</i> ECF No. 6431 at 4.		
<b>*COVID-19 Emergency Mental Health Treatment Guidance and COVID-19 Temporary Transfer Guidelines and Workflow (Apr. 10, 2020) (As modified by February 8, 2021 direction to resume Pre-COVID-19 PIP and MHCB movement</b>	<p>Program Guide 12-1-12 &amp; Attachment A; CCHCS Memo – Clinical Contacts and Documentation (February 7, 2020) (confidentiality requirements)</p> <p>Program Guide 12-1-16 (timelines for level of care transfers)<sup>1</sup></p> <p>Program Guide at 12-3-1 to 2, 12-3-12 to</p>	<p>Enhanced Treatment-in-Place</p> <ul style="list-style-type: none"> <li>When a patient is referred to an inpatient level of care and is unable to transfer to an inpatient bed or is not already in an inpatient setting, treatment will be provided in the patient’s housing unit until transfer can occur (“treatment-in-place”)</li> <li>When possible, all treatment, including groups and clinical</li> </ul>	<p>This policy should be completely deactivated no later than August 15, 2021, 17 months after the pandemic was declared. Defendants have achieved vaccine saturation in the incarcerated population and the State as a whole reopened on June 15. To the extent this policy remains in effect, Defendants must invest additional resources and develop new policies to ensure they are providing constitutionally adequate mental health care to</p>

<sup>1</sup> While the February 8 Directive eliminated the emergent transfer review process for PIP and MHCB transfers, there continue to be delays in transfers while CDCR works through the backlog of waitlisted patients. The parties will continue to meet and confer, under the supervision of the Special Master, and will update Appendix A when these timelines are no longer impacted. In the meantime, Plaintiffs will not seek contempt sanctions for failures to transfer patients in a timely manner when the failure resulted from COVID-19, although Plaintiffs reserve the right to challenge the scope of Defendants’ claimed exceptions in this regard. *See, e.g.*, Pls’ Response to OSC re Inpatient Admissions Ev’ry Hrg., ECF No. 7119, at 6-9 (Apr. 9, 2021).

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
<p><b>processes and March 26, 2021 direction to end use of TMHUs April 2, 2021.)</b></p>	<p>14, 12-4-1, 12-4-13, 12-4-16, 12-4-20 to 21, 12-5-2, 12-5-15, 12-5-26 to 29, 12-5-32, Chapter 6, 12-7-2 to 8, 12-7-11, 12-7-12, 12-8-1, 12-8-5 to 7, 12-8-9, 12-8-11 to 12, 12-9-2 to 3, 12-9-4 to 5, 12-9-6, 12-9-12 to 14, 12-10-12 to 13, 12-10-19 to 21 (access to higher levels of care)</p> <p>Program Guide at 12-3-2 to 4, 12-3-11, 12-4-1 to 2, 12-4-8 to 12, 12-4-18 to 21, 12-5-14, 12-5-33 to 34, 12-7-7, 12-7-10, 12-8-4, 12-8-10, 12-9-7 to 9, 12-10-14 (availability of treatment modalities)</p> <p>Program Guide at 12-3-14 to 15, 12-4-9, 12-4-14 to 15, 12-4-19, 20, 12-5-14, 12-5-</p>	<p>contacts, shall be provided in confidential setting.</p> <ul style="list-style-type: none"> <li>• Primary clinical contacts may not occur on a daily basis</li> <li>• Group therapy may be reduced to 3-4 people and may be eliminated. If no groups can be run, then yard time in the evening should be considered.</li> <li>• If in-person huddles cannot be conducted safely, then huddles should but are not required to occur telephonically</li> </ul>	<p>class members, notwithstanding ongoing COVID-19 risk.</p>

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
	<p>33, 12-7-4, 12-7-6, 12-7-7, 12-7-10, 12-7-13, 12-8-4, 12-8-9 to 11, 12-9-6 to 8 (primary clinician contacts)</p> <p>Orders, ECF Nos. 6095, 6314 (Feb. 20, 2019, Oct. 8, 2019) (requirement implementation of Custody and Mental Health Partnership Plan, including inter-disciplinary huddles)</p>		
<b>COVID-19 Temporary Transfer Restriction Psychiatric Inpatient Programs FLEX Guidance (May 14, 2020)</b>	Program Guide Chapter 6	<ul style="list-style-type: none"> <li>The treatment team shall not be required to complete a new intake evaluation because the treatment team will be the same, as the patient continues to remain in the same licensed unit; however, an intake IDTT and updated treatment plan for the new level of care will be required.</li> </ul>	This departure has been deactivated as of June 9, 2021.

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
		<ul style="list-style-type: none"> <li>While patients receiving intermediate and acute inpatient care typically will have different treatment goals, there currently is not a significant difference in treatment modalities provided to patients at the intermediate and acute inpatient levels of care.</li> </ul>	
<b>*Tele-Mental Health Memorandum (May 22, 2020)</b>	Stipulation and Order Approving CDCR's Telepsychiatry Policy, ECF No. 6539 (Mar. 27, 2020)	<ul style="list-style-type: none"> <li>Permits the provision of tele-mental health services beyond those permitted by the parties' stipulated telepsychiatry policy, including by psychologists and social workers</li> </ul>	This particular policy is deactivated as of June 9, 2021. The provision for telehealth beyond that permitted by the court-ordered telepsychiatry policy is retained, however, in the COVID-19 Mental Health Delivery of Care Guidance and Tier Document. This policy should be completely deactivated no later than August 15, 2021, 17 months after the pandemic was declared. Defendants have achieved vaccine saturation in the incarcerated population and the State as a whole reopened on June 15. To the extent this policy remains in effect, Defendants must invest additional resources and

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
			develop new policies to ensure they are providing constitutionally adequate mental health care to class members, notwithstanding ongoing COVID-19 risk.
<b>COVID-19 Guidance for Daily Program Regarding Social Distancing for Cell or Alternative/Dorm Style Housing of Eight Persons (May 11, 2020) and COVID-19 Operational Guidelines Monitoring and Accountability (May 27, 2020)</b>	<p>Program Guide at 12-3-2 to 4, 12-3-11, 12-4-1 to 2, 12-4-8 to 12, 12-4-18 to 21, 12-5-15, 12-5-33 to 34, 12-7-7, 12-7-10, 12-8-10, 12-9-7 to 9, 12-10-14 (availability of treatment modalities)</p> <p>February 14, 2017 memorandum titled Mental Health Crisis Bed Privileges Revision, see Dkt. 5864-1 at 349.</p>	<ul style="list-style-type: none"> <li>• Goal of having patients maintain at least six feet apart from each other, and attendant impacts on programming:</li> <li>• Requires social distancing in the workplace</li> <li>• Reduced numbers to allow for increased social distancing may result in no dayroom activities</li> <li>• Educational programs shall be provided in such a manner as to allow for social distancing, once group activities resume. Until such time, education materials will be provided to housing unit/dorm/cells.</li> <li>• The May 27 memo operationalizes and creates an accountability procedure to</li> </ul>	<p>This departure has been deactivated as of June 9, 2021.</p>

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
		<p>assure that the modifications to programming directed by the May 11 Social Distancing Guidance are being implemented; enforces departures directed by the May 11 Guidance</p>	
<p><b>Updated Draft COVID-19 Temporary Guidelines for Transfer to DSH Inpatient Care (March 1, 2021, superseding April 15, 2020, May 15, 2020, June 12, 2020, June 19, 2020, July 16, 2020, October 20, 2020, and January 4, 2021 versions), as modified by May 5, 2021 notification re direct admissions of</b></p>	<p>Program Guide 12-1-16 (timelines for level of care transfers)</p> <p>CDCR-DSH MOU and PIP Policy 12.11.2101(A) – Referrals and Admissions &amp; Exceptions Addendum</p> <p>Program Guide at 12-3-1 to 2, 12-3-12 to 14, 12-4-1, 12-4-13, 12-4-16, 12-4-20 to 21, 12-5-2, 12-5-15, 12-5-26 to 29, 12-5-32, Chapter 6, 12-7-2 to 8, 12-7-11, 12-7-12, 12-8-1, 12-8-5 to 7, 12-8-9, 12-8-11 to</p>	<ul style="list-style-type: none"> <li>Provides direction on transfers between DSH and CDCR that may impact timeframes</li> <li>Provides additional individualized clinical review and a COVID-19 screening process.</li> <li>Delays certain individuals who otherwise qualify for transfer from CDCR to DSH from doing so, where the patient tests or screens positive for COVID-19.</li> <li>CDCR must order a PCR COVID-19 test no more than five days before the projected admission date for any patient accepted to DSH.</li> </ul>	<p>This policy should be completely deactivated no later than August 15, 2021, 17 months after the pandemic was declared. Defendants have achieved vaccine saturation in the incarcerated population and the State as a whole reopened on June 15. To the extent this policy remains in effect, Defendants must invest additional resources and develop new policies to ensure they are providing constitutionally adequate mental health care to class members, notwithstanding ongoing COVID-19 risk.</p>



Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
<b><i>Coleman</i> patients to DSH facilities<sup>2</sup></b>	12, 12-9-2 to 3, 12-9-4 to 5, 12-9-6, 12-9-12 to 14, 12-10-12 to 13, 12-10-19 to 21 (access to higher levels of care)	<ul style="list-style-type: none"> <li>For referrals to DSH from a CDCR facility experiencing a COVID-19 outbreak, patient transfers to DSH will occur where CDCR and DSH decide there is adequate public health data demonstrating an acceptably low risk of COVID-19 exposure. To make this decision, CDCR and DSH leadership will discuss relevant public health information on a patient by patient basis, including exposure risk, availability and use of PPE, testing and results, physical plant effects on exposure risks, and the extent of staff crossover between units with active cases and those without cases to evaluate the possibility of transfer. Patients considered for transfer pursuant to this process will be quarantined for 14 days, and tested for</li> </ul>	

<sup>2</sup> Plaintiffs maintain their objection to the guidelines, as stated in the October 23, 2020 evidentiary hearing and in Plaintiffs' post-trial brief, ECF No. 6948 (Nov. 13, 2020).

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
		<p>COVID-19, followed by a further discussion between CDCR and DSH leadership regarding any interim exposure risks that occurred during the quarantine period.</p> <ul style="list-style-type: none"> <li>Provides direction as to the transfer of class members with presumed immunity to COVID-19 due to prior infection.</li> <li>Transfers to DSH will not be held based on a patient's vaccination status, unless the receiving DSH facility cannot complete the patient's vaccination series in accordance with public health guidance.</li> <li>Certain vaccinated patients, depending on clinical factors and the DSH facility to which they are transferring, will be admitted directly to a treatment unit, rather than to an admissions and observation</li> </ul>	

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
		<p>unit and then to a treatment unit.</p> <ul style="list-style-type: none"> <li>DSH collaborates at least weekly with the Special Master's experts in small group meetings to discuss and refine the referral process, resolve conflicts and respond to COVID-19 related impacts on referrals and transfers due to the changing nature of the pandemic.</li> <li>The Special Master continues to closely monitor all referrals, rejections and completed transfers to and from the DSH inpatient programs, and to evaluate compliance with the Court's April 24, 2020 Order. See ECF Nos. 6622 at 3; 6639.</li> </ul>	
<b>Memo re 90-Day Supply of Medications for Expedited Releases (July 7, 2020)</b>	Program Guide 12-3-14 (prescribed medication supply for CCCMS patients who parole)	<ul style="list-style-type: none"> <li>Permits the provision of a 90-day supply of certain medications for individuals subject to expedited release due to COVID-19 population density reduction measures.</li> </ul>	This departure has been deactivated as of June 15, 2021, over Plaintiffs' objection.

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
	Memorandum: Release Planning for Inmates Participating in the Institution's Mental Health Services Delivery System (Mar. 11, 2010) at 4-5, 6	<ul style="list-style-type: none"> <li>Psychiatric providers are directed to write medication orders, as clinically appropriate and within legal confines, for a 90-day, rather than 30-day, duration for those subject to expedited release.</li> </ul>	
<b>Memo re Cell-Front Nursing Activities (June 26, 2020)</b>	<p>Program Guide 12-5-32, 12-10-4, 12-10-15 to 19 (describing suicide watch and observation procedures)</p> <p>Memorandum: Level of Observation and Property for Patients in Mental Health Crisis Beds (Mar. 15, 2016) at 2 (describing suicide watch as primarily observation)</p>	<ul style="list-style-type: none"> <li>Permits IDTTs to recommend that nursing staff provide cell-front activities to patients</li> <li>Requires these activities to be performed while designated nursing staff are performing 1:1 observations of patients; in the past, nursing staff had only one primary task during 1:1 observation—observing the patient</li> <li>Provides a library of cell-front nursing activities for patients</li> </ul>	This departure deactivated with the TMHUs on April 2, 2021.
<b>*Institutional Roadmap to Reopening (April 20, 2021,</b>	Program Guide at 12-3-2 to 4, 12-3-11, 12-4-1 to 2, 12-4-8 to 12, 12-4-18 to 21, 12-5-	Based on several factors, including the number of new COVID-19 cases, and the time passed since an active outbreak, each institution may	Plaintiffs submit that this policy should be completely deactivated no later than August 15, 2021, 17 months after the pandemic was

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
<p><b>superseding August 14, 2020 version)</b></p>	<p>15, 12-5-33 to 34, 12-7-7, 12-7-10, 12-8-10, 12-9-7 to 9, 12-10-14 (availability of treatment modalities)</p> <p>Program Guide 12-1-16 (timelines for level of care transfers)</p> <p>Program Guide at 12-3-1 to 2, 12-2-8 to 10, 12-3-12 to 14, 12-4-1, 12-4-13, 12-4-16, 12-4-20 to 21, 12-5-2, 12-5-15, 12-5-26 to 29, 12-5-32, Chapter 6, 12-7-2 to 8, 12-7-11, 12-7-12, 12-8-1, 12-8-5 to 7, 12-8-9, 12-8-11 to 12, 12-9-2 to 3, 12-9-4 to 5, 12-9-6, 12-9-12 to 14, 12-10-12 to 13, 12-10-19 to 21 (access to higher levels of care)</p> <p>Program Guide 12-1-12 &amp; Attachment A; CCHCS Memo – Clinical Contacts and</p>	<p>be placed, at the discretion of its Warden and Chief Executive Officer, in one of three “phases.” The phases range from most to least restrictive on the institution’s general operation, healthcare services, and inmate programs. Depending on an institution’s phase, restrictions may be placed on:</p> <ul style="list-style-type: none"> <li>• Mental health treatment modalities and quantities that can be provided</li> <li>• Yard, dayroom, and other out of cell time</li> <li>• Other programming opportunities, including vocational, educational, ISUDT, visiting, and jobs</li> </ul>	<p>declared. Defendants have achieved vaccine saturation in the incarcerated population and the State as a whole reopened on June 15. To the extent this policy remains in effect, Defendants must invest additional resources and develop new policies to ensure they are providing constitutionally adequate mental health care to class members, notwithstanding ongoing COVID-19 risk.</p>

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
	Documentation (February 7, 2020) (confidentiality requirements)		
<p><b>*Movement Matrix (June 18, 2021, superseding Apr. 17, Apr. 9, 2020 and Jan. 8, and June 14, 2021 versions)</b></p>	<p>Program Guide 12-1-16 (timelines for level of care transfers)</p> <p>Program Guide at 12-3-1 to 2, 12-3-8 to 10, 12-3-12 to 14, 12-4-1, 12-4-13, 12-4-16, 12-4-20 to 21, Chapter 6 12-7-2 to 8, 12-7-11, 12-7-12, 12-8-1, 12-8-5 to 7, 12-8-9, 12-8-11 to 12, 12-9-2 to 3, 12-9-4 to 5, 12-9-6, 12-9-12 to 14, (access to higher levels of care).</p> <p>CDCR-DSH MOU</p> <p>Memorandum: Transfer of Correctional Clinical Case Management System Inmate-Patients to Male</p>	<p>For each type of movement between and within institutions, sets the COVID-19 testing strategy, required type of quarantine housing, and process for moving an inmate who refuses a COVID-19 test. Defines movement of MHSDS patients to meet Program Guide requirements as a necessary transfer.</p> <p>In certain circumstances, the Movement Matrix precludes transfer, at least temporarily, in cases where a patient tests positive or has been exposed to COVID. Movement within and between institutions for mental health purposes occurs as normal except:</p> <ul style="list-style-type: none"> <li>• Non-PIP/MHCB transfers between institutions where the patient is isolated due to COVID or quarantined due to exposure</li> </ul>	<p>This policy should be completely deactivated as it pertains to <i>Coleman</i> class members no later than August 15, 2021, 17 months after the pandemic was declared. Defendants have achieved vaccine saturation in the incarcerated population and the State as a whole reopened on June 15. To the extent this policy continues to impact class members Defendants must invest additional resources and develop new policies to ensure they are providing constitutionally adequate mental health care to class members, notwithstanding ongoing COVID-19 risk.</p>

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
	<p>Short Term Restricted Housing Units (Mar. 3, 2016)</p> <p>Memorandum: Creation of Correctional Clinical Case Management System Short Term and Long Term Restricted Housing (Jan. 15, 2015)</p> <p>Stipulation &amp; Order, ECF No. 6296 (Sept. 27, 2019) (approving and attaching policy for reducing transfer timeframes from desert institutions)</p>	<ul style="list-style-type: none"> <li>• Non-PIP/MHCB transfers within institutions where the receiving yard is on outbreak status or if the patient screens symptomatic or tests positive for COVID</li> <li>• Non-PIP/MHCB transfers from Reception Center to institution where patient is isolated due to COVID infection or quarantined due to exposure or tests positives or screens symptomatic in pre-transfer testing</li> <li>• Transfers from CDCR to DSH where patient tests positive for COVID-19</li> </ul> <p>Precludes unvaccinated incarcerated people with a COVID-19 risk score of 3 or higher from transferring to any dorm settings or SQ, FSP, ASP, CVSP, CRC, CMC-West, or CIM Facilities A and D.</p> <p>Eliminates post-transfer precautionary quarantine requirements for fully vaccinated incarcerated people, and pre-transfer precautionary quarantine for fully</p>	

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
		vaccinated incarcerated people where post-transfer precautionary quarantine is not possible.	
<b>COVID-19 Operations EOP Hub Certification Process &amp; Addendum for Certifying Met with Explanation due to COVID-19 Restrictions (Sept. 11, 2020)</b>	<p>Program Guide Chapters 7, 8, 9</p> <p>Order, ECF No. 5131 (Apr. 10, 2014); Order, ECF No. 5196 (Aug. 11, 2014)</p> <p>Defs' Plans &amp; Policies Submitted in Resp. to Apr. 10, 2014 and May 13, 2014 Orders, ECF No. 5190 at 17-19 (Aug. 1, 2014)</p>	<ul style="list-style-type: none"> <li>Permits audits of PSU and EOP ASU units to be conducted remotely, by video equipment or telephone, due to COVID-19-related staffing limitations</li> <li>If no institution staff are available to conduct remote audits, then those audits will be conducted by a regional staff member</li> <li>COVID-19-related limitations or changes to standard audit procedure or mental health treatment provisions—including whether audits are conducted remotely or by regional staff, groups or other treatment are not offered, and IDTTs or ICCs are held in absentia—shall be documented on the audit form</li> </ul>	<p>This policy should be completely deactivated no later than August 15, 2021, 17 months after the pandemic was declared. Defendants have achieved vaccine saturation in the incarcerated population and the State as a whole reopened on June 15. To the extent this policy remains in effect, Defendants must invest additional resources and develop new policies to ensure they are providing constitutionally adequate mental health care to class members, notwithstanding ongoing COVID-19 risk.</p>



Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
		<ul style="list-style-type: none"> <li>If an institution's failure to meet certification requirements is due purely to COVID-19-related restrictions, the institution may pass certification "with explanation," assuming certain criteria are met. Documentation of the rationale for any such "with explanation" certification is required.</li> </ul>	
<b>COVID-19 Psychiatric Inpatient Program Admission Bed Policy and Procedure (Oct. 23, 2020)</b>	<p>PIP Policy 12.11.2101(A) – Referrals and Admissions</p> <p>PIP Policy 12.11.2111 – Housing Review/Least Restrictive Housing</p>	<ul style="list-style-type: none"> <li>Creates a process by which patients newly admitted to a PIP will be housed in a single-cell admission bed in the PIP before they are placed in their endorsed program. If local medical or public health staff deem it necessary, patients transferring within a PIP will also initially be placed in an admission bed.</li> <li>Patients typically will remain in a PIP admission bed for 14 to 21 days following their admission to a PIP.</li> </ul>	<p>The parties agreed for the June 15, 2021 Program Guide Departures filing that this policy should be completely deactivated by July 15, 2021. CDCR is finalizing a revised version of this policy and states that the revised version should be complete by August 15, 2021. Plaintiffs will withhold comment on the impact and deactivation schedule of the revised policy until the policy is finalized.</p>

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
		<ul style="list-style-type: none"> <li>Creates Admission Units, or groupings of admission beds in PIPs.</li> <li>Creates and implements COVID-19 safety protocols applicable to each patient in an admission bed, including quarantine, testing and screening.</li> <li>If identified admission beds are full but vacant patient beds exist in the PIPs, intake of new patients will not stop. In this circumstance, PIP leadership will identify additional admission beds for quarantining new admissions to ensure patient admissions can continue.</li> <li>Local PIP leadership will monitor admission unit bed numbers and identify overflow admission beds in advance to ensure the admission units do not reach capacity.</li> </ul>	

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
		<ul style="list-style-type: none"> <li>• While PIP patients are housed in an admission bed, their endorsed non-admission bed in the PIP will be reserved for them.</li> <li>• While patients are in admission units, they will receive all available PIP mental health services, focusing on patient orientation, intake evaluation, and initial treatment planning. The treatment plan developed by the admission unit clinical team will be coordinated with the receiving treatment team to which the patient will transition. Patients in admission units will also be offered property, phone calls, yard, and all other privileges consistent with current policy for all PIP patients.</li> </ul>	
<b>Guidance for Mental Health Milestone Completion Credits</b>	Program Guide at 12-3-2 to 4, 12-3-11, 12-4-1 to 2, 12-4-8 to 12, 12-4-18 to 21, 12-5-15, 12-5-33 to 34, 12-	<ul style="list-style-type: none"> <li>• Provides guidance to institutional mental health staff for allowing class members to continue to earn milestone completion credits</li> </ul>	Class members should receive additional milestone credits.

Policy, Memorandum, or Guidelines	Program Guide or Related Policy Provision	Summary of Departure	Deactivation Plan or Date
<b>During COVID-19 (December 2, 2020)</b>	<p>7-7, 12-7-10, 12-8-10, 12-9-7 to 9, 12-10-14 (availability of treatment modalities)</p> <p>Enhanced Outpatient Program Milestone Credit Group Therapy – Required Materials (Sept. 24, 2015)</p> <p>15 C.C.R. § 3043.3(f)(2), as incorporated into Compendium of Custody-Related Remedies, 2020 Program Guide Revision, Appendix E at 1</p>	<p>during the pandemic and while receiving modified mental health treatment activities</p> <ul style="list-style-type: none"> <li>Describes pandemic-related modifications to group mental health treatment typically offered to class members and a means of measuring milestone credits earned pursuant to these modified offerings</li> </ul>	



# CALIFORNIA CORRECTIONAL HEALTH CARE SERVICES



## MEMORANDUM

**Date:** June 22, 2021

**To:** Wardens  
Chief Executive Officers  
Chief Medical Executives  
Chief Nurse Executives  
Regional Health Care Executives  
Associate Directors

**From:**

DocuSigned by:

**Joseph Bick**

347167202A8A404...

Joseph Bick, M.D.

Director, Health Care Services  
California Correctional Health Care Services  
California Department of Corrections and Rehabilitation

DocuSigned by:

**Connie Gipson**

60F75B6E86804E7...

Connie Gipson

Director, Division of Adult Institutions  
California Department of Corrections and Rehabilitation

**Subject:** UPDATED: COVID-19 Screening and Testing Matrix for Patient Movement

The purpose of this memorandum is to announce the release of a new update to the "COVID-19 Screening and Testing Matrix for Patient Movement" with a revision date of June 18, 2021.

The most significant changes in this updated version are as follows:

- Clarification that neither pre nor post transfer quarantine is required for fully vaccinated patients who are moving from one location to another
- Clarification that pre and post transfer symptom screening and COVID testing applies to all new intakes, regardless of vaccination status
- Addition of overnight offsite sleep study in the "Out for clinical appointment, same day return" category with respect to screening and testing
- Clarification that for patients who have multiple off site appointments with same day return within a week (for example for chemotherapy or radiotherapy) twice weekly testing is sufficient

If you have any questions or require additional information related to this memorandum or attached matrix, please contact the Department Operations Center (DOC) via email at [DOCCOVID19@cdcr.ca.gov](mailto:DOCCOVID19@cdcr.ca.gov) for clarification.



## COVID-19 SCREENING AND TESTING MATRIX FOR PATIENT MOVEMENT



1. *To reduce the likelihood of COVID-19 spreading from one location to another, movement shall be limited to that which is necessary for clinical care, medical isolation or quarantine, reduction of overcrowding, and serious custody concerns.*  
Necessary movement includes but is not limited to:
  - a) *movement of MHSDS patients as required by the Program Guide,*
  - b) *transfers in and out of restricted housing units,*
  - c) *transfers for medical inpatient (CTC, OHU, SMB) placement or to facilitate access to specialty services,*
  - d) *transfers of people with disabilities impacting placement (including DPP and DDP individuals),*
  - e) *transfers to address personal safety concerns, and*
  - f) *transfers for placement in camps and community-based facilities.*
2. *Transfer-related COVID-19 screening consists of a verbal symptom questionnaire and temperature screening.*
3. *All COVID-19 testing shall be by Polymerase Chain Reaction (PCR) unless specifically stated otherwise.*
4. *When rapid point of care (POC) testing is utilized, one positive rapid POC will preclude movement. Isolate the patient in a solid door single cell and obtain a PCR test as soon as possible, preferably within 24 hours. A negative PCR test and no evidence for active COVID on clinical assessment will be required before movement is allowed.*
5. *Patients and transportation staff shall wear N95 masks during transfer. Masks shall cover the nose, mouth, and chin. Transportation vehicles shall be operated at no more than 75% occupancy and shall be disinfected after each trip.*
6. *Every effort shall be made to avoid layovers during transportation. If a layover is essential, patients shall layover in cell-based housing and only be housed with others coming from the same location at the same time.*
7. *Precautionary quarantine shall be utilized for all unvaccinated patients transferring from one institution to another location. Precautionary quarantine of unvaccinated patients shall take place post-transfer in the receiving institution, except in limited circumstances when patients are instead placed on pre-transfer precautionary quarantine. Pre-transfer precautionary quarantine is not required for fully vaccinated patients transferring to MCCF, ACP, CCTRP, MCRP, or a fire camp.*
8. *Precautionary post-transfer quarantine of unvaccinated patients shall take place in celled housing with a solid door. Facilities which by design have no cell-based housing (SQ, FSP, ASP, CVSP, CRC, CMC-West, or CIM FAC-A and D) shall conduct precautionary post-transfer quarantine of unvaccinated patients in cohorts of no more than 20 patients in a dorm solely dedicated to a cohort that arrived on the same day from the same location to the same unoccupied dorm at the receiving institution.*

9. *Vaccinated patients are those who are at least 14 days post receiving the last recommended dose of the COVID-19 vaccine series.*
10. *Unvaccinated patients are those who have:*
  - a) *received no COVID vaccine, or*
  - b) *received a partial vaccine series, or*
  - c) *completed a vaccine series but are <14 days post completing the series.*
11. *Symptomatic patients shall be isolated alone in celled housing with a solid door and tested for COVID-19.*
12. *Patients with a PCR-confirmed diagnosis of COVID-19 may be housed together as a cohort on isolation status.*
13. *Movement of unvaccinated COVID-resolved patients shall be subject to the same testing and quarantine requirements as unvaccinated COVID naïve patients.*
14. *Patients with COVID risk scores of three or more who have not completed the COVID vaccine shall only be housed in cells with solid front doors, shall not be moved to dorm settings and shall not transfer to SQ, FSP, ASP, CVSP, CRC, CMC-West, or CIM FAC-A and D.*
15. *Patients who have completed the COVID vaccination may be housed in dorm settings and may be housed at SQ, FSP, ASP, CVSP, CRC, CMC-West, or CIM FAC-A and D, regardless of COVID risk score.*

TYPE OF MOVEMENT	COVID SCREENING AND TESTING STRATEGY	WHAT TO DO IF PATIENT REFUSES COVID TEST
From jail to reception center	<p><b>Sending jail:</b></p> <ul style="list-style-type: none"> <li>Do not transfer patients who are isolated due to active infection or quarantined due to exposure.</li> <li>Perform COVID screening and viral testing by either PCR within 5 days of scheduled transfer or POC testing within 24 hours of departure.</li> <li>If viral testing is negative and COVID screen negative, transfer within 5 days of PCR test collection or 24 hours of the negative rapid POC test.</li> <li>Patients who are symptomatic and/or test positive during pre-transfer testing shall not be transferred, regardless of vaccination status.</li> <li>All patients and transportation staff shall wear an N95 mask during transfer.</li> </ul> <p><b>Receiving reception center:</b></p> <ul style="list-style-type: none"> <li>Quarantine all new arrivals for 14 days.</li> <li>Screen all new arrivals for COVID-19 upon arrival and then daily while in quarantine.</li> <li>Test all new arrivals for COVID-19 within 24 hours, and again prior to release from quarantine (day 12-14).</li> <li>May release patients from quarantine after 14 days if asymptomatic and all COVID-19 tests are negative.</li> <li>Patients who are symptomatic and/or test positive shall be isolated as per interim guidance.</li> </ul>	<p><b>Sending jail:</b></p> <p>Patients who refuse to test prior to transfer to reception center shall not be transported with other patients. Special arrangements shall be made between the sending jail and the receiving reception center to move these patients individually and place them directly in quarantine upon arrival.</p> <p><b>Receiving reception center:</b></p> <p>Patients who arrive from jail and then refuse to test during reception center quarantine shall remain in quarantine at the reception center for at least 21 days and receive daily symptom screening prior to being released.</p>
From jail directly to Specialized Medical Beds (SMB)	<ul style="list-style-type: none"> <li>Advance authorization is required by the Director, Health Care Services or designee.</li> <li>The Intake Control Unit and HCPOP shall coordinate these moves and shall inform the receiving CEO and CME in advance.</li> <li>All patients and transportation staff shall wear an N95 mask during transfer.</li> <li>Quarantine all new arrivals for 14 days.</li> <li>Screen all new arrivals for COVID-19 upon arrival and then daily while in quarantine.</li> <li>Test all new arrivals for COVID-19 within 24 hours, again on day 5 and again prior to release from quarantine (day 12-14).</li> <li>May release patients from quarantine after 14 days if asymptomatic and all COVID-19 tests are negative.</li> <li>Patients who are symptomatic and/or test positive shall be isolated as per interim guidance.</li> </ul>	<p>Patient to remain in quarantine at the receiving institution for at least 21 days and receive daily symptom screening.</p>



TYPE OF MOVEMENT	COVID SCREENING AND TESTING STRATEGY	WHAT TO DO IF PATIENT REFUSES COVID TEST
From reception center to institution	<ul style="list-style-type: none"> <li>Do not transfer patients who are isolated due to active infection or quarantined due to exposure.</li> <li>Pre-transfer precautionary quarantine not to be used unless transferring to MCCF, ACP, CCTRP, MCRP, or a fire camp.</li> <li>Perform COVID screening and test by PCR within 5 days of scheduled transfer.</li> <li>If PCR negative, screen for COVID and obtain rapid test within 24 hours of scheduled transfer.</li> <li>If PCR negative, screen negative, and rapid test negative, transfer within 5 days of PCR test collection and within 24 hours of rapid test collection.</li> <li>Patients who are symptomatic and/or test positive during pre-transfer testing shall not be transferred and shall be isolated as per interim guidance.</li> <li>All patients and transportation staff shall wear an N95 mask during transfer.</li> </ul>	Patient to be placed in quarantine for at least 21 days and receive daily symptom screening.
Institution intake from reception center	<ul style="list-style-type: none"> <li>Screen all patients for COVID-19 upon arrival.</li> <li>Quarantine unvaccinated patients for 14 days.</li> <li>Screen unvaccinated patients daily while in quarantine.</li> <li>Test all new arrivals for COVID-19 on day 5 and then again on day 12-14.</li> <li>May release patients from quarantine after 14 days if asymptomatic and COVID-19 tests are negative.</li> <li>Patients who are symptomatic and/or test positive shall be isolated as per interim guidance.</li> </ul>	Patient to remain in quarantine for at least 21 days.
General population movement from one institution to another, including to camp hubs; movement from ASU / STRH / LTRH / SHU to another facility	<p><b>Sending institution</b></p> <ul style="list-style-type: none"> <li>Do not transfer patients who are isolated due to active infection or quarantined due to exposure.</li> <li>Perform COVID screening and test by PCR within 5 days of scheduled transfer.</li> <li>If PCR negative, screen for COVID and obtain rapid test within 24 hours of scheduled transfer.</li> <li>If PCR negative, screen negative, and rapid test negative, transfer within 5 days of PCR test collection and within 24 hours of rapid test collection.</li> <li>Patients who are symptomatic and/or test positive during pre-transfer testing shall not be transferred and shall be isolated as per interim guidance.</li> <li>All patients and transportation staff shall wear an N95 mask during transfer.</li> </ul> <p><b>Receiving institution</b></p> <ul style="list-style-type: none"> <li>Screen all patients for COVID-19 upon arrival.</li> <li>Quarantine unvaccinated patients for 14 days.</li> <li>Screen unvaccinated patients daily while in quarantine.</li> <li>Test all new arrivals for COVID-19 on day 5 and then again on day 12-14.</li> <li>May release patients from quarantine after 14 days if asymptomatic and all COVID-19 tests are negative.</li> <li>Patients who are symptomatic and/or test positive shall be isolated as per interim guidance.</li> </ul>	Sending and receiving institutions: Patient to be placed in quarantine for at least 21 days.

TYPE OF MOVEMENT	COVID SCREENING AND TESTING STRATEGY	WHAT TO DO IF PATIENT REFUSES COVID TEST
<p>Movement from one institution to another for OHU, CTC, SNF, or Hospice placement</p>	<p><b>Sending institution</b>  <u>Movement that clinicians have determined to be urgent or emergent:</u></p> <ul style="list-style-type: none"> <li>• Perform rapid testing for COVID-19 within 24 hours of transfer.</li> <li>• Transfer patient regardless of the results of the COVID-19 test.</li> <li>• Communicate results to receiving facility.</li> <li>• All patients and transportation staff shall wear an N95 mask during transfer.</li> <li>• Perform post-transfer precautionary quarantine and testing at receiving institution.</li> </ul> <p><u>Movement that clinicians have determined to not be urgent or emergent:</u></p> <ul style="list-style-type: none"> <li>• Perform COVID screening and test by PCR 5 days prior to scheduled transfer.</li> <li>• If PCR negative, screen for COVID and obtain rapid test within 24 hours of scheduled transfer.</li> <li>• If PCR negative, COVID screen negative, and rapid test negative, transfer within 5 days of PCR test collection and within 24 hours of rapid test collection.</li> <li>• Patients who are symptomatic and/or test positive during pre-transfer testing shall not be transferred and shall be isolated as per interim guidance.</li> </ul> <p><b>Receiving institution</b>  <u>New arrivals who tested positive at sending institution:</u></p> <ul style="list-style-type: none"> <li>• Isolate as per interim guidance.</li> </ul> <p><u>New arrivals who tested negative at sending institution:</u></p> <ul style="list-style-type: none"> <li>• Screen all patients for COVID-19 upon arrival.</li> <li>• Quarantine unvaccinated patients for 14 days.</li> <li>• Screen unvaccinated patients daily while in quarantine.</li> <li>• Test all new arrivals for COVID-19 on day 5 and then again on day 12-14.</li> <li>• May release patients from quarantine after 14 days if asymptomatic and all COVID-19 tests are negative.</li> <li>• Patients who are symptomatic and/or test positive shall not be transferred and shall be isolated as per interim guidance.</li> </ul>	<p>Sending and receiving institutions:  Patient to be placed in quarantine for at least 21 days.</p>

TYPE OF MOVEMENT	COVID SCREENING AND TESTING STRATEGY	WHAT TO DO IF PATIENT REFUSES COVID TEST
<p>Movement within same institution:</p> <ul style="list-style-type: none"> <li>• Release or move into STRH, LTRH, ASU, SHU</li> <li>• CTC, OHU, Hospice admission or discharge</li> <li>• Mental health level of care change</li> <li>• DPP moves</li> <li>• DDP moves</li> <li>• All other routine mvmt</li> </ul>	<ul style="list-style-type: none"> <li>• Patients shall not be moved to or from an outbreak area at the same institution unless it is for purposes of isolation or quarantine.</li> <li>• No quarantine or testing required for movement within the same institution unless an unvaccinated patient will be moving into a large dorm (20 or more residents). If so, perform COVID screening and COVID-19 testing of the patient within 5 days prior to this move. Only move the patient if the COVID screen and test are negative.</li> <li>• If movement is considered urgent or emergent, perform a rapid test and transfer within 24 hours if COVID screen and rapid test are negative.</li> <li>• Patients who are symptomatic and/or test positive shall not be transferred and shall be isolated as per interim guidance.</li> </ul>	<p>Patient to be placed in quarantine for at least 21 days, unless placement in quarantine is impossible (e.g., MSF), in which case the patient will not be moved.</p>
<p>Admission to MHC or PIP</p>	<p><b>Sending institution</b></p> <ul style="list-style-type: none"> <li>• Perform COVID screening and rapid testing for COVID-19 within 24 hours of transfer.</li> <li>• Transfer patient regardless of the results of the COVID-19 test.</li> <li>• Communicate results to receiving facility.</li> <li>• All patients and transportation staff shall wear an N95 mask during transfer.</li> </ul> <p><b>Receiving institution</b></p> <p><u>New arrivals who screened or tested positive at sending institution:</u></p> <ul style="list-style-type: none"> <li>• Isolate as per interim guidance.</li> </ul> <p><u>New arrivals who tested negative at sending institution:</u></p> <ul style="list-style-type: none"> <li>• Screen all patients for COVID-19 upon arrival.</li> <li>• Quarantine unvaccinated patients for 14 days.</li> <li>• Screen unvaccinated patients daily while in quarantine.</li> <li>• Test all new arrivals for COVID-19 on day 5 and then again on day 12-14.</li> <li>• May release patients from quarantine after 14 days if asymptomatic and all COVID-19 tests are negative.</li> <li>• Patients who are symptomatic and/or test positive shall be isolated as per interim guidance.</li> </ul>	<p>Receiving institution:</p> <p>Patient to be placed in quarantine for at least 21 days.</p>

TYPE OF MOVEMENT	COVID SCREENING AND TESTING STRATEGY	WHAT TO DO IF PATIENT REFUSES COVID TEST
Discharge from CTC, OHU, MHC B or PIP to another institution	<p><b>Sending institution</b>  Movement that clinicians have determined to be urgent, including discharges that are necessary to free up a bed for a pending admission:</p> <ul style="list-style-type: none"> <li>Do not transfer patients who are isolated due to active infection or quarantined due to exposure.</li> <li>Perform COVID screening and rapid viral testing for COVID-19 within 24 hours of transfer.</li> <li>If COVID screen and rapid test negative, transfer within 24 hours of rapid test collection.</li> <li>Patients who are symptomatic and/or test positive during pre-transfer testing shall not be transferred and shall be isolated as per interim guidance.</li> <li>All patients and transportation staff shall wear an N95 mask during transfer.</li> <li>Patients who are being moved as urgent discharges shall be transported individually.</li> </ul> <p><u>Movement that clinicians have determined to be routine:</u></p> <ul style="list-style-type: none"> <li>Do not transfer patients who are isolated due to active infection or quarantined due to exposure.</li> <li>COVID screening and test by PCR within 5 days of scheduled transfer.</li> <li>If PCR negative, screen for COVID and obtain rapid test within 24 hours of transfer.</li> <li>If PCR negative, screen negative, and rapid test negative, transfer within 5 days of PCR test collection and within 24 hours of rapid test collection.</li> <li>Patients who are symptomatic and/or test positive during pre-transfer testing shall not be transferred and shall be isolated as per interim guidance.</li> <li>All patients and transportation staff shall wear an N95 mask during transfer.</li> </ul> <p><b>Receiving institution</b></p> <ul style="list-style-type: none"> <li>Screen all patients for COVID-19 upon arrival.</li> <li>Quarantine unvaccinated patients for 14 days.</li> <li>Screen unvaccinated patients daily while in quarantine.</li> <li>Test all new arrivals for COVID-19 on day 5 and then again on day 12-14.</li> <li>May release patients from quarantine after 14 days if asymptomatic and all COVID-19 tests are negative.</li> <li>Patients who are symptomatic and/or test positive shall be isolated as per interim guidance.</li> </ul>	Receiving institutions: Patient to be placed in quarantine for at least 21 days.
Transfer to DSH from CDCR	<ul style="list-style-type: none"> <li>Perform COVID screening and test by PCR within 5 days of scheduled transfer.</li> <li>If patient is asymptomatic and tests negative, transfer as soon as possible but no more than 5 days after test was administered. If the patient tests positive, further conversation shall take place between the sending and receiving clinicians to determine if the patient will transfer immediately or complete isolation within the CDCR institution.</li> <li>All patients and transportation staff shall wear an N95 mask during transfer.</li> </ul>	Disposition to be determined in consultation with CME and CMH at sending institution and DSH.

TYPE OF MOVEMENT	COVID SCREENING AND TESTING STRATEGY	WHAT TO DO IF PATIENT REFUSES COVID TEST
OMDH paroles to DSH	<ul style="list-style-type: none"> <li>• Screen patient and test for COVID 19 within 5 days of parole date.</li> <li>• Communicate results to DSH prior to patient's parole.</li> <li>• Transport patient on the day of their parole to DSH.</li> <li>• All patients and transportation staff shall wear an N95 mask during transfer.</li> </ul>	Communicate information to DSH and transport the patient on their date of parole.
DSH discharge to CDCR	<p><b>Sending DSH institution</b></p> <ul style="list-style-type: none"> <li>• Do not transfer patients who are isolated due to active infection or quarantined due to exposure.</li> <li>• Screen and test for COVID-19 prior to transfer.</li> <li>• If patient is asymptomatic and tests negative, transfer as soon as possible but no more than 5 days after test was administered.</li> <li>• All patients and transportation staff shall wear an N95 mask during transfer.</li> </ul> <p><b>Receiving CDCR institution</b></p> <ul style="list-style-type: none"> <li>• Screen all patients for COVID-19 upon arrival.</li> <li>• Quarantine unvaccinated patients for 14 days.</li> <li>• Screen unvaccinated patients daily while in quarantine.</li> <li>• Test all new arrivals for COVID-19 on day 5 and then again on day 12-14.</li> <li>• May release patients from quarantine after 14 days if asymptomatic and all COVID-19 tests are negative</li> <li>• Patients who are symptomatic and/or test positive shall be isolated as per interim guidance.</li> </ul>	<p>DSH: Disposition to be determined in consultation with the CME and CMH at the receiving institution and DSH.</p> <p>Receiving CDCR institution: Patient to be placed in quarantine for at least 21 days.</p>
To MCCF, ACP, CCTR, MCRP, fire camp (unable to quarantine new arrivals)	<ul style="list-style-type: none"> <li>• Do not transfer patients who are isolated due to active infection or currently quarantined due to exposure.</li> <li>• Quarantine unvaccinated patients prior to transfer (pre-transfer precautionary quarantine).</li> <li>• Screen patients for COVID-19 initially and then daily for 14 days.</li> <li>• Test all new arrivals for COVID on day 12-14 of quarantine.</li> <li>• Patients to remain in quarantine while awaiting results.</li> <li>• If patient tests negative, transfer as soon as possible but no more than 5 days after test was administered.</li> <li>• All patients and transportation staff shall wear an N95 mask during transfer.</li> <li>• Patients who are symptomatic and/or test positive shall be isolated as per interim guidance.</li> </ul>	Do not transfer.

TYPE OF MOVEMENT	COVID SCREENING AND TESTING STRATEGY	WHAT TO DO IF PATIENT REFUSES COVID TEST
From MCCF, ACP, CCTRP, MCRP, CPMP, or fire camp to an institution (unable to quarantine prior to transport)	<p>All patients and transportation staff shall wear an N95 mask during transfer.</p> <p><b>Receiving CDCR institution</b></p> <ul style="list-style-type: none"> <li>• Screen all patients for COVID-19 upon arrival.</li> <li>• Quarantine unvaccinated patients for 14 days.</li> <li>• Screen unvaccinated patients daily while in quarantine.</li> <li>• Test all new arrivals for COVID-19 on day 5 and then again on day 12-14.</li> <li>• May release patients from quarantine after 14 days if asymptomatic and all COVID-19 tests are negative. May release unvaccinated patients from quarantine after 14 days if asymptomatic and COVID-19 test is negative.</li> <li>• Patients who are symptomatic and/or test positive shall be isolated as per interim guidance.</li> </ul> <p>Patients returning to an institution for urgent/emergent dental treatment:</p> <ul style="list-style-type: none"> <li>• Perform rapid COVID test immediately upon arrival prior to dental treatment. If the patient tests negative, dental care will be rendered as appropriate. If the patient tests positive, the patient shall be isolated and dental treatment will proceed pursuant to dental program policy for COVID-19 positive patients.</li> </ul>	<p><u>Receiving Institution:</u></p> <p>Patient to be placed in quarantine for at least 21 days.</p>
From one fire camp to another fire camp	<ul style="list-style-type: none"> <li>• Perform symptom screening.</li> <li>• If screens negative, may transfer to new camp without testing.</li> <li>• If screens positive, transport to closest prison for COVID testing and either isolation or quarantine depending upon the results.</li> <li>• Patient and staff shall wear an N95 mask during transportation.</li> </ul>	N/A
From fire camp to emergency room for <24 hours of treatment of minor injuries/conditions prior to release to fire camp.	<ul style="list-style-type: none"> <li>• Patient and staff shall wear an N95 mask during transportation and while in the emergency department.</li> </ul>	N/A
From fire camp to hospital for admission or more serious condition	<ul style="list-style-type: none"> <li>• When released, patient shall be transported back to a prison for appropriate housing/quarantine/testing.</li> <li>• All patients and transportation staff shall wear an N95 mask during transfer.</li> </ul>	N/A
Parole, medical parole, PRCS release	<ul style="list-style-type: none"> <li>• All patients shall be screened for COVID-19 symptoms and then tested for COVID within one week of release.</li> <li>• Results of testing shall be communicated to parole agent or probation officer and local public health officer in county of release.</li> <li>• If patient tests positive, manage as detailed in the COVID-19 interim guidance.</li> <li>• All patients and transportation staff shall wear an N95 mask during transfer.</li> </ul>	Patients cannot be held beyond their parole date regardless of whether they agree to test or if the test is positive.

TYPE OF MOVEMENT	COVID SCREENING AND TESTING STRATEGY	WHAT TO DO IF PATIENT REFUSES COVID TEST
Out to court, same day return	<p>Use videoconferencing to avoid out-to-court travel in all cases unless court refuses.</p> <ul style="list-style-type: none"> <li>• Notify court and county public health in advance regarding any patients who are currently isolated or quarantined due to exposure. Plan will be determined in consultation with the court.</li> <li>• For all other patients: POC test within 24 hours before every court appearance. If POC test is positive, isolate the patient and notify the court.</li> <li>• If patient remained in the custody of the transportation officer at all times, and if the patient wore a face covering at all times, quarantine upon return shall not be required.</li> <li>• Screen for COVID-19 symptoms upon return.</li> <li>• Perform rapid and PCR COVID tests on day 5 after return.</li> <li>• All patients and transportation staff shall wear an N95 mask during transfer.</li> </ul>	If patient refuses testing, notify the court. Plan will be determined in consultation with the court.
Out to court, at least one overnight stay in a jail or another prison.	<p><b>Sending institution</b></p> <ul style="list-style-type: none"> <li>• Notify court in advance regarding any patients who are currently isolated or quarantined due to exposure. Plan will be determined in consultation with the court.</li> <li>• For all other patients, screen for COVID symptoms and perform rapid test within 24 hours of departure.</li> <li>• If COVID screen and test are negative, patient can be transported.</li> <li>• Patients who are symptomatic and/or test positive shall be isolated as per interim guidance and the court shall be notified.</li> <li>• All patients and transportation staff shall wear an N95 mask during transfer.</li> </ul> <p><b>Receiving CDCR Institution</b></p> <ul style="list-style-type: none"> <li>• All patients and transportation staff shall wear an N95 mask during transfer.</li> <li>• Screen all patients for COVID-19 upon arrival.</li> <li>• Quarantine unvaccinated patients for 14 days.</li> <li>• Screen unvaccinated patients daily while in quarantine.</li> <li>• Test all new arrivals for COVID-19 on day 5 and then again on day 12-14.</li> <li>• May release patients from quarantine after 14 days if asymptomatic and all COVID-19 tests are negative.</li> <li>• Patients who are symptomatic and/or test positive shall be isolated as per interim guidance.</li> </ul>	<p>Sending institution: Refusals to test prior to OTC appointments should be communicated to the courts. Patient to be placed in pre-transfer quarantine for at least 21 days. Disposition to be determined by CME at sending institution in consultation with the court.</p> <p>Receiving institution: Patient to be placed in quarantine for at least 21 days.</p>
Out for clinical appointment, same day return; sleep studies	<ul style="list-style-type: none"> <li>• Use "e-consult" and telemedicine whenever possible to avoid unnecessary offsite transportation.</li> <li>• All patients and transportation staff shall wear an N95 mask during transfer.</li> <li>• Screen for COVID symptoms upon return.</li> <li>• Perform rapid and PCR COVID tests on day 5 after return.</li> <li>• If patients have multiple off site appointments with same day return within a week (for example for chemotherapy or radiotherapy) twice weekly testing is sufficient</li> </ul>	Patient to be placed in quarantine for at least 21 days.

TYPE OF MOVEMENT	COVID SCREENING AND TESTING STRATEGY	WHAT TO DO IF PATIENT REFUSES COVID TEST
Return from outside hospitalizations and emergency department visits	<ul style="list-style-type: none"> <li>• All patients and transportation staff shall wear an N95 mask during transfer.</li> <li>• Screen all patients for COVID-19 upon arrival.</li> <li>• Quarantine unvaccinated patients for 14 days.</li> <li>• Screen unvaccinated patients daily while in quarantine.</li> <li>• Test all new arrivals for COVID-19 on day 5 and then again on day 12-14.</li> <li>• May release patients from quarantine after 14 days if asymptomatic and all COVID-19 tests are negative</li> <li>• Patients who are symptomatic and/or test positive shall be isolated as per interim guidance.</li> </ul>	<p>Patient to be placed in quarantine for at least 21 days.</p> <p>Disposition to be determined by CME at the institution.</p>



### ISOLATION AND QUARANTINE GENERAL PRINCIPLES

At a number of institutions, including ASP, CRC, CVSP, FSP and SQ, the available facilities are insufficient to achieve some basic isolation and quarantine standards. In those institutions, post exposure quarantining in groups of larger than two patients may be necessary. All efforts should be made at these institutions to find quarantine alternatives that satisfy the purposes of a post-exposure quarantine as set forth below.

Decisions about post-exposure quarantine housing at CHCF and CMF are committed to the discretion of the medical leadership at those institutions in recognition of the materially different missions and operations at those two facilities. CHCF and CMF shall maintain their minimum quarantine set-aside beds.

At institutions experiencing an outbreak where the number of COVID positive patients exceeds 200 or the number of patients who should be quarantined exceeds the number of beds set aside at that institution for quarantine, decisions about post-exposure quarantine and housing shall be committed to the discretion of the warden and CEO or their designees at the institution in consultation with CDCR and CCHCS regional and headquarters staff.

Refusals of patients to undergo necessary COVID testing and/or movement to isolation or quarantine space shall be promptly elevated to the warden and CEO who shall discuss their plans of action with the regional health care executive and AD.

### **ISOLATION: GENERAL PRINCIPLES**

Patients who are in isolation shall:

- Remain in their isolation location unless approved by clinical staff to move elsewhere
- Be medicated and fed in their isolation location
- Shall receive clinical care in their isolation location
- Shall not share showers or toilets with those who are not infected
- Shall wear an N95 mask at all times when outside of their cell

### **ISOLATION OF INFECTED PATIENTS AND PRECAUTIONARY ISOLATION OF SYMPTOMATIC PATIENTS WHO ARE AWAITING TESTING**

1. Isolation of patients who are infected with COVID-19
  - a. All infected patients are to be isolated.
  - b. Asymptomatic patients who were diagnosed solely based upon a rapid point of care test (POC) shall be isolated apart from others until the POC test is confirmed by a PCR test.
  - c. Infected patients shall not be housed with patients who are not confirmed to have COVID-19.
  - d. Infected patients can be housed in congregate living sites with other COVID-19 infected patients.
  - e. Twice daily health care monitoring shall be conducted for patients diagnosed with COVID-19.
  - f. All staff interacting with COVID-19 infected patients shall wear an N95 mask, eye protection, and, when in direct contact, gloves and gowns.
2. Precautionary isolation of symptomatic patients who are being evaluated for COVID-19 infection
  - a. Symptomatic patients who have not yet been confirmed to have COVID-19 shall be isolated separately from confirmed COVID-19 patients and separately from those who are not symptomatic.
  - b. Twice daily health care monitoring shall be conducted for symptomatic patients who are awaiting diagnosis.
  - c. All staff interacting with symptomatic isolated patients shall wear an N95 mask, eye protection, and, when in direct contact, gloves and gowns.

## QUARANTINE OF PATIENTS WHO HAVE BEEN EXPOSED TO COVID-19 AND PRECAUTIONARY QUARANTINE PRE OR POST TRANSFER

1. Quarantine of Patients who have been Exposed to COVID-19:
  - a. These patients are at risk of being infected as a result of their exposure. Thus, they shall be separated from both the confirmed cases and from the symptomatic but not yet confirmed cases.
  - b. For individual cases, the preference is for quarantine in a single cell with a solid, closed door.
  - c. Exposed persons shall not be housed in dorms with those who are not known to be exposed.
  - d. If single cells are not available, persons with the same exposure can be quarantined together as a cohort.
  - e. If cohorting is essential, quarantine cohorts shall be as small as possible (2-4 persons).
  - f. Daily healthcare monitoring shall be conducted for patients who are under quarantine.
  - g. Serial testing and healthcare surveillance is used to identify those who are infected so that they can be moved to isolation.
  - h. Patients shall not be released from quarantine until they have completed 14 days of quarantine and tested negative for COVID-19 by PCR. If testing is refused, quarantine shall be extended to 21 days.
  - i. Any patient who develops symptoms shall be placed in isolation alone and tested for COVID-19.
2. Precautionary transfer quarantine
  - a. Precautionary quarantine shall be utilized for all unvaccinated patients transferring from one institution to another.
  - b. Precautionary quarantine shall take place post-transfer in the receiving institution, except in limited circumstances when patients are instead placed on pre-transfer precautionary quarantine. Pre-transfer precautionary quarantine shall only be utilized when transferring to MCCF, ACP, CCTRP, MCRP, or a fire camp.
  - c. Precautionary post-transfer quarantine shall take place in celled housing with a solid door. Facilities which by design have no cell based housing (SQ, FSP, ASP, CVSP, CRC, CMC-West, or CIM FAC-A and D) shall conduct precautionary post-transfer quarantine in cohorts of no more than 20 in a dorm solely dedicated to a cohort that arrived on the same day from the same location to the same unoccupied dorm at the receiving institution.
  - d. Cohorts of unvaccinated patients with different movement dates shall not be housed together during post transfer precautionary quarantine.
  - e. Cohorts of unvaccinated patients coming from different locations shall not be housed together during post transfer precautionary quarantine.
  - f. A negative PCR test on or after day 12 is required for release from quarantine on day 14. If testing is refused, quarantine shall be extended to 21 days.
  - g. Any patient who develops influenza like symptoms should be placed in isolation alone and tested for COVID-19.

# **EXHIBIT 1**

June 2021

**SHOWER AND YARD COMPLIANCE IN SEGREGATION**

<b>Institution</b>	<b>Facility</b>	<b>3 Showers Offered/Week</b>	<b>10 Hours Yard Offered/Week</b>
CAC	ASU	100%	100%
CAL	ASU	100%	100%
CCC	C	100%	100%
CCI	ASU	100%	100%
CCWF	A	100%	100%
CEN	Z	100%	100%
CHCF	E-1A	100%	100%
CIM	B	100%	100%
CIW	ASU	100%	100%
CMC	ASU	100%	100%
CMF	A	100%	100%
COR	ASU	100%	100%
DVI	K&L WING	100%	100%
FOL	ASU	100%	100%
HDSP	ASU	100%	100%
ISP	ASU	100%	100%
KVSP	ASU	100%	100%
LAC	ASU	100%	100%
MCSP	C	100%	100%
NKSP	ASU	100%	100%
PBSP	ASU	100%	100%
PVSP	STRH	100%	100%
RJD	B6 & B7	100%	100%
SAC	ASU	100%	100%
SATF	ASU	100%	100%
SCC	C	100%	100%
SOL	B	100%	100%
SQ	A	100%	100%
SVSP	ASU	100%	100%
VSP	ASU	100%	100%
WSP	D	100%	100%

Data Source-Monthly Certification Provided by Institutions

# **EXHIBIT 2**



[illegible]





[illegible]

[illegible]



[illegible]



ACUTE not housed in PIP or MHCB or TALLU	06/18/2021	Region I	CHCF					ML	CTC	ACUTE	5/5/2021 4:07:00 PM	70.33							0	0	0	14:02:00 Bedside NonCof 0.20 Hours	0	1				0			0	0	0	0	0	0.2	0.2	0	0.2	
ACUTE not housed in PIP or MHCB or TALLU	06/19/2021	Region I	CHCF					ML	CTC	ACUTE	5/5/2021 4:07:00 PM	70.33							0	0	0	14:15:00 CellFront NonCof 0.28 Hours	0	1				0			0.28	0	0	0	0	0	0.28	0.28	0	0.28
ACUTE not housed in PIP or MHCB or TALLU	06/20/2021	Region I	CHCF					ML	CTC	ACUTE	5/5/2021 4:07:00 PM	70.33							0	0	0	13:39:00 CellFront NonCof 0.28 Hours	0	1				0			0.28	0	0	0	0	0	0.28	0.28	0	0.28
ACUTE not housed in PIP or MHCB or TALLU	06/21/2021	Region I	CHCF					ML	CTC	ACUTE	5/5/2021 4:07:00 PM	70.33							0	0	0	13:30:00 Standard Conf for 0.50 Hours	1	0				0			0	0	0	0	0.5	0	0.5	0	0.5	
ICF not housed in PIP or MHCB or TALLU	06/15/2021	Region I	CHCF					ASU	ASUHub	ICF	6/4/2021 1:15:00 PM	40.45																0			0	2	0	2	2	0	2	0	2	
ICF not housed in PIP or MHCB or TALLU	06/16/2021	Region I	CHCF					ASU	ASUHub	ICF	6/4/2021 1:15:00 PM	40.45																0			0	1	0	1	1	0	1	0	1	
ICF not housed in PIP or MHCB or TALLU	06/17/2021	Region I	CHCF					ASU	ASUHub	ICF	6/4/2021 1:15:00 PM	40.45																0			0	3	0	3	3	0	3	0	3	
ICF not housed in PIP or MHCB or TALLU	06/18/2021	Region I	CHCF					ASU	ASUHub	ICF	6/4/2021 1:15:00 PM	40.45						11:00:00 CellFront NonConf for 0.17 Hours	0	1		0	0					0			0.17	2	0	2	2	0.17	2.17	0	2.17	
ICF not housed in PIP or MHCB or TALLU	06/19/2021	Region I	CHCF					ASU	ASUHub	ICF	6/4/2021 1:15:00 PM	40.45																0			0	0	0	0	0	0	0	0	0	
ICF not housed in PIP or MHCB or TALLU	06/20/2021	Region I	CHCF					ASU	ASUHub	ICF	6/4/2021 1:15:00 PM	40.45																0			0	0	0	0	0	0	0	0	0	
ICF not housed in PIP or MHCB or TALLU	06/21/2021	Region I	CHCF					ASU	ASUHub	ICF	6/4/2021 1:15:00 PM	40.45																0			0	2	0	2	2	0	2	0	2	
ICF not housed in PIP or MHCB or TALLU	06/22/2021	Region I	CHCF					ASU	ASUHub	ICF	6/4/2021 1:15:00 PM	40.45																0			0	2	0	2	2	0	2	0	2	
ICF not housed in PIP or MHCB or TALLU	06/23/2021	Region I	CHCF					ASU	ASUHub	ICF	6/4/2021 1:15:00 PM	40.45																0			0	0	2	2	0	0	0	2	2	
ICF not housed in PIP or MHCB or TALLU	06/24/2021	Region I	CHCF					ASU	ASUHub	ICF	6/4/2021 1:15:00 PM	40.45						07:47:00 Standard Conf for 0.52 Hours	1	0		0	0					0			0	2	0	2	2.52	0	2.52	0	2.52	
ICF not housed in PIP or MHCB or TALLU	06/25/2021	Region I	CHCF					ASU	ASUHub	ICF	6/4/2021 1:15:00 PM	40.45																0			0	2	0	2	2	0	2	0	2	
ICF not housed in PIP or MHCB or TALLU	06/26/2021	Region I	CHCF					ASU	ASUHub	ICF	6/4/2021 1:15:00 PM																													

[illegible]

[illegible]





















ICF not housed in PIP or MHCB or TAMIU	07/12/2021	Region I	CMF				ASU	ASUHub	ICF	6/17/2021 3:31:00 PM	27.35							0	0	09:00:00 CellFront NonCof 0.50 Hours	0	1			0			0.5	0	0	0	0	0.5	0.5	0	0.5	
ICF not housed in PIP or MHCB or TAMIU	07/13/2021	Region I	CMF				ASU	ASUHub	ICF	6/17/2021 3:31:00 PM	27.35							10:20:00 CellFront NonConf for 0.17 Hours	0	1		0	0			0			0.17	0	0	0	0	0.17	0.17	0	0.17
ICF not housed in PIP or MHCB or TAMIU	07/14/2021	Region I	CMF				ASU	ASUHub	ICF	6/17/2021 3:31:00 PM	27.35															0			0	0	0	0	0	0	0	0	
ICF not housed in PIP or MHCB or TAMIU	07/15/2021	Region I	CMF				ASU	ASUHub	ICF	6/17/2021 3:31:00 PM	27.35															0			0	0	0	0	0	0	0	0	
ICF not housed in PIP or MHCB or TAMIU	07/02/2021	Region I	CMF				ASU	ASUHub	EOPMod																	0			0	0	0	0	0	0	0	0	
ICF not housed in PIP or MHCB or TAMIU	07/03/2021	Region I	CMF				ASU	ASUHub	ICF	7/2/2021 8:46:00 AM	12.64															0			0	0	0	0	0	0	0	0	
ICF not housed in PIP or MHCB or TAMIU	07/04/2021	Region I	CMF				ASU	ASUHub	ICF	7/2/2021 8:46:00 AM	12.64															0			0	0	0	0	0	0	0	0	
ICF not housed in PIP or MHCB or TAMIU	07/05/2021	Region I	CMF				ASU	ASUHub	ICF	7/2/2021 8:46:00 AM	12.64															0			0	0	0	0	0	0	0	0	
ICF not housed in PIP or MHCB or TAMIU	07/06/2021	Region I	CMF				ASU	ASUHub	ICF	7/2/2021 8:46:00 AM	12.64															0			0	0	0	0	0	0	0	0	
ACUTE not housed in PIP or MHCB or TAMIU	07/07/2021	Region I	CMF				ML	CTC	MHCB	6/27/2021 12:29:00 PM	10.13															09:15:00 Bedside Conf for 0.25 Hours	0			0	0	0	0	0	0	0	0
ACUTE not housed in PIP or MHCB or TAMIU	07/08/2021	Region I	CMF				ML	CTC	ACUTE	7/7/2021 3:35:00 PM	7.35							15:00:00 Bedside Conf for 0.25 Hours	1	0		0	0			0			0	0	0	0	0.25	0	0.25	0	0.25
ACUTE not housed in PIP or MHCB or TAMIU	07/09/2021	Region I	CMF				ML	CTC	ACUTE	7/7/2021 3:35:00 PM	7.35								0	0	15:13:00 Bedside Conf for 0.10 Hours	1	0			0			0	0	0	0	0.35	0	0.35	0	0.35
ACUTE not housed in PIP or MHCB or TAMIU	07/10/2021	Region I	CMF				ML	CTC	ACUTE	7/7/2021 3:35:00 PM	7.35															0			0	0	0	0	0	0	0	0	
ACUTE not housed in PIP or MHCB or TAMIU	07/11/2021	Region I	CMF				ML	CTC	ACUTE	7/7/2021 3:35:00 PM	7.35															0			0	0	0	0	0	0	0	0	
ACUTE not housed in PIP or MHCB or TAMIU	07/12/2021	Region I	CMF				ML	CTC	ACUTE	7/7/2021 3:35:00 PM	7.35								0	0	13:50:00 Bedside Conf for 0.13 Hours	1	0			0			0	0	0	0	0.13	0	0.13	0	0.13
ACUTE not housed in PIP or MHCB or TAMIU	07/13/2021	Region I	CMF				ML	CTC	ACUTE	7/7/2021 3:35:00 PM	7.35															0			0	0	0	0	0	0	0	0	

[illegible]

ICF not housed in PIP or MHCB or TAWHU	07/05/2021	Region I	MCSP				ASU	ASUHub	ICF	6/30/2021 12:09:00 PM	14.5											0			0	0	0	0	0	0	0	0	0		
ICF not housed in PIP or MHCB or TAWHU	07/06/2021	Region I	MCSP				ASU	ASUHub	ICF	6/30/2021 12:09:00 PM	14.5							10:00:00 Standard Conf for 0.83 Hours	1	0		0	0		0		0	0	2	2	0.83	0	0.83	2	2.83
ICF not housed in PIP or MHCB or TAWHU	07/07/2021	Region I	MCSP				ASU	ASUHub	ICF	6/30/2021 12:09:00 PM	14.5								0	0	14:00:00 TherapeuticModule Conf for 0.42 Hours	1	0		0		0	0	2	2	0.42	0	0.42	2	2.42
ICF not housed in PIP or MHCB or TAWHU	07/08/2021	Region I	MCSP				ASU	ASUHub	ICF	6/30/2021 12:09:00 PM	14.5							10:56:00 Standard Conf for 0.57 Hours	1	0		0	0		0		0	0	4	4	0.57	0	0.57	4	4.57
ICF not housed in PIP or MHCB or TAWHU	07/09/2021	Region I	MCSP				ASU	ASUHub	ICF	6/30/2021 12:09:00 PM	14.5												0		0	0	2	2	0	0	0	2	2		
ICF not housed in PIP or MHCB or TAWHU	07/10/2021	Region I	MCSP				ASU	ASUHub	ICF	6/30/2021 12:09:00 PM	14.5												0		0	0	0	0	0	0	0	0	0		
ICF not housed in PIP or MHCB or TAWHU	07/11/2021	Region I	MCSP				ASU	ASUHub	ICF	6/30/2021 12:09:00 PM	14.5												0		0	0	0	0	0	0	0	0	0		
ICF not housed in PIP or MHCB or TAWHU	07/12/2021	Region I	MCSP				ASU	ASUHub	ICF	6/30/2021 12:09:00 PM	14.5												0		0	0	2	2	0	0	0	2	2		
ICF not housed in PIP or MHCB or TAWHU	07/13/2021	Region I	MCSP				ASU	ASUHub	ICF	6/30/2021 12:09:00 PM	14.5							09:28:00 Standard Conf for 0.53 Hours	1	0		0	0		0		0	0	2	2	0.53	0	0.53	2	2.53
ICF not housed in PIP or MHCB or TAWHU	07/14/2021	Region I	MCSP				ASU	ASUHub	ICF	6/30/2021 12:09:00 PM	14.5												0		0	0	0	0	0	0	0	0	0		
ICF not housed in PIP or MHCB or TAWHU	07/15/2021	Region I	MCSP				ASU	ASUHub	ICF	6/30/2021 12:09:00 PM	14.5												0		0	0	0	0	0	0	0	0	0		
ICF not housed in PIP or MHCB or TAWHU	06/15/2021	Region I	MCSP				ML	EOP	ICF	4/8/2021 11:43:00 AM	97.51							09:48:00 CellFront NonConf for 0.05 Hours	0	1		0	0		0		0.05	0	1	1	0	0.05	0.05	1	1.05
ICF not housed in PIP or MHCB or TAWHU	06/16/2021	Region I	MCSP				ML	EOP	ICF	4/8/2021 11:43:00 AM	97.51												0		0	0	2	2	0	0	0	2	2		
ICF not housed in PIP or MHCB or TAWHU	06/30/2021	Region I	MCSP				ASU	ASUHub	EOP									09:33:00 CellFront NonConf for 0.02 Hours	0	1		0	0	09:43:00 Standard Conf for 0.23 Hours	0		0.02	0	2	2	0	0.02	0.02	2	2.02
ICF not housed in PIP or MHCB or TAWHU	07/01/2021	Region I	MCSP				ASU	ASUHub	ICF	6/30/2021 9:52:00 AM	14.59							16:01:00 CellFront NonConf for 0.07 Hours	0	1		0	0		0		0.07	0	0	0	0	0.07	0.07	0	0.07
ICF not housed in PIP or MHCB or TAWHU	07/02/2021	Region I	MCSP				ASU	ASUHub	ICF	6/30/2021 9:52:00 AM	14.59							14:23:00 CellFront NonConf for 0.12 Hours	0	1		0	0		0		0.12	0	2	2	0	0.12	0.12	2	2.12
ICF not housed in PIP or MHCB or TAWHU	07/03/2021	Region I	MCSP				ASU	ASUHub	ICF	6/30/2021 9:52:00 AM	14.59												0		0	0	0	0	0	0	0	0	0	0	
ICF not housed in PIP or MHCB or TAWHU	07/04/2021	Region I	MCSP				ASU	ASUHub	ICF	6/30/2021 9:52:00 AM	14.59												0		0	0	0	0	0	0	0	0	0	0	

ICF not housed in PIP or MHCB or TMAU.I	07/05/2021	Region I	MCSP					ASU	ASUHub	ICF	6/30/2021 9:52:00 AM	14.59											0			0	0	0	0	0	0	0	0	0	0							
ICF not housed in PIP or MHCB or TMAU.I	07/06/2021	Region I	MCSP					ASU	ASUHub	ICF	6/30/2021 9:52:00 AM	14.59											11:22:00 Standard Conf for 0.65 Hours	1	0		0	0		0			0	0	0	4	4	0.65	0	0.65	4	4.65
ICF not housed in PIP or MHCB or TMAU.I	07/07/2021	Region I	MCSP					ASU	ASUHub	ICF	6/30/2021 9:52:00 AM	14.59													0			0	0	2	2	0	0	0	0	2	2					
ICF not housed in PIP or MHCB or TMAU.I	07/08/2021	Region I	MCSP					ASU	ASUHub	ICF	6/30/2021 9:52:00 AM	14.59													0			0		0	0	0	0	0	0.08	0.08	0	0.08				
ICF not housed in PIP or MHCB or TMAU.I	07/09/2021	Region I	MCSP					ASU	ASUHub	ICF	6/30/2021 9:52:00 AM	14.59													0			0	0	4	4	0	0	0	0	4	.4					
ICF not housed in PIP or MHCB or TMAU.I	07/10/2021	Region I	MCSP					ASU	ASUHub	ICF	6/30/2021 9:52:00 AM	14.59													0			0	0	0	0	0	0	0	0	0	0					
ICF not housed in PIP or MHCB or TMAU.I	07/11/2021	Region I	MCSP					ASU	ASUHub	ICF	6/30/2021 9:52:00 AM	14.59													0			0	0	0	0	0	0	0	0	0	0					
ICF not housed in PIP or MHCB or TMAU.I	07/12/2021	Region I	MCSP					ASU	ASUHub	ICF	6/30/2021 9:52:00 AM	14.59													0			0	2	0	2	2	0	2	0	2						
ICF not housed in PIP or MHCB or TMAU.I	07/13/2021	Region I	MCSP					ASU	ASUHub	ICF	6/30/2021 9:52:00 AM	14.59													0			0.08	0	4	4	0	0.08	0.08	4	4.08						
ICF not housed in PIP or MHCB or TMAU.I	07/14/2021	Region I	MCSP					ASU	ASUHub	ICF	6/30/2021 9:52:00 AM	14.59													0			0	2	0	2	2	0	2	0	2						
ICF not housed in PIP or MHCB or TMAU.I	07/15/2021	Region I	MCSP					ASU	ASUHub	ICF	6/30/2021 9:52:00 AM	14.59													0			0	0	0	0	0	0	0	0	0						
ICF not housed in PIP or MHCB or TMAU.I	06/15/2021	Region I	MCSP					ML	EOP	ICF	5/20/2021 10:24:00 AM	55.57													0			0	0	0	0	0	0	0	0	0						
ICF not housed in PIP or MHCB or TMAU.I	06/16/2021	Region I	MCSP					ML	EOP	ICF	5/20/2021 10:24:00 AM	55.57													10:30:00 Standard Conf for 0.50 Hours	1	0		0	0		0			0	0	0	0.5	0	0.5	0	0.5
ICF not housed in PIP or MHCB or TMAU.I	06/17/2021	Region I	MCSP					ML	EOP	ICF	5/20/2021 10:24:00 AM	55.57															09:35:00 Standard Conf for 0.10 Hours	0			0	0	0	0	0	0	0	0	0	0		
ICF not housed in PIP or MHCB or TMAU.I	06/18/2021	Region I	MCSP					ML	EOP	ICF	5/20/2021 10:24:00 AM	55.57															0			0	0	0	0	0	0	0	0					
ICF not housed in PIP or MHCB or TMAU.I	06/19/2021	Region I	MCSP					ML	EOP	ICF	5/20/2021 10:24:00 AM	55.57															0			0	0	0	0	0	0	0	0					
ICF not housed in PIP or MHCB or TMAU.I	06/20/2021</																																									

[illegible]

[illegible]

[illegible]

[illegible]



ICF not housed in PIP or MHCB or TAFULL	06/27/2021	Region I	SAC				PSU	PSU	ICF	6/24/2021 11:37:00 AM	20.52									0			0	0	0	0	0	0	0	0	0
ICF not housed in PIP or MHCB or TAFULL	06/28/2021	Region I	SAC				PSU	PSU	ICF	6/24/2021 11:37:00 AM	20.52									0			0	1.75	0	1.75	1.75	0	1.75	0	1.75
ICF not housed in PIP or MHCB or TAFULL	06/29/2021	Region I	SAC				PSU	PSU	ICF	6/24/2021 11:37:00 AM	20.52									0			0	2	0	2	0	2	2	0	2
ICF not housed in PIP or MHCB or TAFULL	06/30/2021	Region I	SAC				PSU	PSU	ICF	6/24/2021 11:37:00 AM	20.52									0			0	0	0	0	0	0	0	0	0
ICF not housed in PIP or MHCB or TAFULL	07/01/2021	Region I	SAC				PSU	PSU	ICF	6/24/2021 11:37:00 AM	20.52									0			0.13	0	0	0	0	0.13	0.13	0	0.13
ICF not housed in PIP or MHCB or TAFULL	07/02/2021	Region I	SAC				PSU	PSU	ICF	6/24/2021 11:37:00 AM	20.52									0			0	0	0	0	0	0	0	0	0
ICF not housed in PIP or MHCB or TAFULL	07/03/2021	Region I	SAC				PSU	PSU	ICF	6/24/2021 11:37:00 AM	20.52									0			0	0	0	0	0	0	0	0	0
ICF not housed in PIP or MHCB or TAFULL	07/04/2021	Region I	SAC				PSU	PSU	ICF	6/24/2021 11:37:00 AM	20.52									0			0	0	0	0	0	0	0	0	0
ICF not housed in PIP or MHCB or TAFULL	07/05/2021	Region I	SAC				PSU	PSU	ICF	6/24/2021 11:37:00 AM	20.52									0			0	0	0	0	0	0	0	0	0
ICF not housed in PIP or MHCB or TAFULL	07/06/2021	Region I	SAC				PSU	PSU	ICF	6/24/2021 11:37:00 AM	20.52									0			0	2	0	2	2	0	2	0	2
ICF not housed in PIP or MHCB or TAFULL	07/07/2021	Region I	SAC				PSU	PSU	ICF	6/24/2021 11:37:00 AM	20.52									0			0.03	0	2	2	0	0.03	0.03	2	2.03
ICF not housed in PIP or MHCB or TAFULL	07/08/2021	Region I	SAC				PSU	PSU	ICF	6/24/2021 11:37:00 AM	20.52									0			0	0	0	0	0	0	0	0	0
ICF not housed in PIP or MHCB or TAFULL	07/09/2021	Region I	SAC				PSU	PSU	ICF	6/24/2021 11:37:00 AM	20.52									0			0	0	2	2	0	0	0	2	2
ICF not housed in PIP or MHCB or TAFULL	07/10/2021	Region I	SAC				PSU	PSU	ICF	6/24/2021 11:37:00 AM	20.52									0			0	0	0	0	0	0	0	0	0
ICF not housed in PIP or MHCB or TAFULL	07/11/2021	Region I	SAC				PSU	PSU	ICF	6/24/2021 11:37:00 AM	20.52									0			0	0	0	0	0	0	0	0	0
ICF not housed in PIP or MHCB or TAFULL	07/12/2021	Region I	SAC				PSU	PSU	ICF	6/24/2021 11:37:00 AM	20.52									0			0	0	2	2	0	0	0	2	2
ICF not housed in PIP or MHCB or TAFULL	07/13/2021	Region I	SAC				PSU	PSU	ICF	6/24/2021 11:37:00 AM	20.52									0			0	0	2	2	0	0	0	2	2
ICF not housed in PIP or MHCB or TAFULL	07/14/2021	Region I	SAC				PSU	PSU	ICF	6/24/2021 11:37:00 AM	20.52									0			0	0	2	2	0	0	0	2	2





[illegible]



[illegible]

[illegible]





[illegible]

[illegible]

[illegible]

[illegible]



[illegible]

[illegible]

























[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

ICF not housed in PIP or MHCB or TAWALI	06/21/2021	Region II	SVSP				ML	EOP	ICF	6/5/2021 11:29:00 AM	20.48										0			0	0	0	0	0	0	0	0	0	0			
ICF not housed in PIP or MHCB or TAWALI	06/22/2021	Region II	SVSP				ML	EOP	ICF	6/5/2021 11:29:00 AM	20.48											0			0	0	0	0	0	0	0	0	0			
ICF not housed in PIP or MHCB or TAWALI	06/23/2021	Region II	SVSP				ML	EOP	ICF	6/5/2021 11:29:00 AM	20.48											0			0	0	0	0	0	0	0	0	0			
ICF not housed in PIP or MHCB or TAWALI	06/24/2021	Region II	SVSP				ML	EOP	ICF	6/5/2021 11:29:00 AM	20.48											0			0	0	0	0	0	0	0	0	0			
ICF not housed in PIP or MHCB or TAWALI	06/25/2021	Region II	SVSP				ML	EOP	ICF	6/5/2021 11:29:00 AM	20.48											0			0	0	0	0	0	0	0	0	0			
ICF not housed in PIP or MHCB or TAWALI	06/28/2021	Region II	SVSP				ML	EOP	EOP													0			0	0	0	0	0	0	0	0	0			
ICF not housed in PIP or MHCB or TAWALI	06/29/2021	Region II	SVSP				ML	EOP	ICF	6/28/2021 2:55:00 PM	16.38											0			0	0	0	0	0	0	0	0	0			
ICF not housed in PIP or MHCB or TAWALI	06/30/2021	Region II	SVSP				ML	EOP	ICF	6/28/2021 2:55:00 PM	16.38						0	0	11:34:00 Standard Conf for 0.20 Hours	1	0		0			0	0	0	0	0	0.2	0	0.2	0	0.2	
ICF not housed in PIP or MHCB or TAWALI	07/01/2021	Region II	SVSP				ML	EOP	ICF	6/28/2021 2:55:00 PM	16.38											0			0	0	0	0	0	0	0	0	0	0		
ICF not housed in PIP or MHCB or TAWALI	07/02/2021	Region II	SVSP				ML	EOP	ICF	6/28/2021 2:55:00 PM	16.38											0			0	1	0	1	0	1	1	0	1	1		
ICF not housed in PIP or MHCB or TAWALI	07/03/2021	Region II	SVSP				ML	EOP	ICF	6/28/2021 2:55:00 PM	16.38											0			0	0	0	0	0	0	0	0	0	0		
ICF not housed in PIP or MHCB or TAWALI	07/04/2021	Region II	SVSP				ML	EOP	ICF	6/28/2021 2:55:00 PM	16.38											0			0	0	0	0	0	0	0	0	0	0		
ICF not housed in PIP or MHCB or TAWALI	07/05/2021	Region II	SVSP				ML	EOP	ICF	6/28/2021 2:55:00 PM	16.38											0			0	0	0	0	0	0	0	0	0	0		
ICF not housed in PIP or MHCB or TAWALI	07/06/2021	Region II	SVSP				ML	EOP	ICF	6/28/2021 2:55:00 PM	16.38						08:45:00 Standard Conf for 1.57 Hours	1	0		0	0		0			0	0	0	0	0	1.57	0	1.57	0	1.57
ICF not housed in PIP or MHCB or TAWALI	07/07/2021	Region II	SVSP				ML	EOP	ICF	6/28/2021 2:55:00 PM	16.38											0			0	0	0	0	0	0	0	0	0	0	0	
ICF not housed in PIP or MHCB or TAWALI	07/08/2021	Region II	SVSP				ML	EOP	ICF	6/28/2021 2:55:00 PM	16.38								10:44:00 Standard Conf for 0.48 Hours			0			0	0	0	0	0	0	0	0	0	0	0	
ICF not housed in PIP or MHCB or TAWALI	07/09/2021	Region II	SVSP				ML	EOP	ICF	6/28/2021 2:55:00 PM	16.38											0			0	0	0	0	0	0	0	0	0	0	0	
ICF not housed in PIP or MHCB or TAWALI	07/10/2021	Region II	SVSP				ML	EOP	ICF	6/28/2021 2:55:00 PM	16.38																									





[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]

[illegible]



[illegible]



[illegible]

[illegible]

[illegible]



ICF not housed in PIP or MHCB or TMAU.I	06/18/2021	Region III	COR					ML	CTC	ICF	11/23/2020 3:46:00 PM	233.34									09:45:00 Bedside Conf for 1.08 Hours	1	0			0	0			0			0	0	0	0	1.08	0	1.08	0	1.08			
	06/19/2021	Region III	COR					ML	CTC	ICF	11/23/2020 3:46:00 PM	233.34									08:41:00 Bedside NonConf for 0.07 Hours	0	1			0	0			0			0	0	0	0	0	0.07	0.07	0	0.07			
	06/20/2021	Region III	COR					ML	CTC	ICF	11/23/2020 3:46:00 PM	233.34																	0			0	0	0	0	0	0	0	0	0				
	06/21/2021	Region III	COR					ML	CTC	ICF	11/23/2020 3:46:00 PM	233.34																	0			0	0	0	0	0	0	0	0	0				
	06/22/2021	Region III	COR					ML	CTC	ICF	11/23/2020 3:46:00 PM	233.34									09:15:00 Bedside NonConf for 0.25 Hours	0	1			0	0			0			0	0	0	0	0	0.25	0.25	0	0.25			
	06/23/2021	Region III	COR					ML	CTC	ICF	11/23/2020 3:46:00 PM	233.34									10:15:00 Bedside NonConf for 0.50 Hours	0	1			0	0	10:15:00 Bedside NonCof 0.50 Hours		0			0	0	0	0	0	1	1	0	1			
	06/24/2021	Region III	COR					ML	CTC	ICF	11/23/2020 3:46:00 PM	233.34																	0			0	0	0	0	0	0	0	0	0				
	06/25/2021	Region III	COR					ML	CTC	ICF	11/23/2020 3:46:00 PM	233.34																	0			0	0	0	0	0	0	0	0	0				
	06/26/2021	Region III	COR					ML	CTC	ICF	11/23/2020 3:46:00 PM	233.34																	0			0	0	0	0	0	0	0	0	0				
	06/27/2021	Region III	COR					ML	CTC	ICF	11/23/2020 3:46:00 PM	233.34																	0			0	0	0	0	0	0	0	0	0				
	06/28/2021	Region III	COR					ML	CTC	ICF	11/23/2020 3:46:00 PM	233.34																	0			0	0	0	0	0	0	0	0	0				
	06/29/2021	Region III	COR					ML	CTC	ICF	11/23/2020 3:46:00 PM	233.34										10:45:00 Bedside NonConf for 0.25 Hours	0	1	08:30:00 Bedside Conf for 0.50 Hours	1	0			0			0			0	0	0	0	0.5	0.25	0.75	0	0.75
	06/30/2021	Region III	COR					ML	CTC	ICF	11/23/2020 3:46:00 PM	233.34									09:15:00 Bedside NonConf for 0.25 Hours	0	1			0	0			0			0	0	0	0	0	0.25	0.25	0	0.25			
	07/01/2021	Region III	COR					ML	CTC	ICF	11/23/2020 3:46:00 PM	233.34									09:15:00 Bedside NonConf for 0.25 Hours	0	1			0	0			0			0	0	0	0	0	0.25	0.25	0	0.25			
	07/02/2021	Region III	COR					ML	CTC	ICF	11/23/2020 3:46:00 PM	233.34																	0			0	0	0	0	0	0	0	0	0				
	ICF not housed in PIP or MHCB or TMAU.I	06/15/2021	Region III	COR					ASU	ASUHub	ICF	6/4/2021 10:26:00 AM	40.57									10:15:00 CellFront Conf for 0.67 Hours	1	0			0	0		0.25	1			0.92	4	0	4	4.67	0.25	4.92	0	4.92		
06/16/2021		Region III	COR					ASU	ASUHub	ICF	6/4/2021 10:26:00 AM	40.57									14:50:00 CellFront NonConf for 0.25 Hours	0	1			0	0	11:31:00 Standard Conf for 0.28 Hours	0.17	1			0.42	2	0	2	2.17	0.25	2.42	0	2.42			
06/17/2021		Region III	COR					ASU	ASUHub	ICF	6/4/2021 10:26:00 AM	40.57																0			0	2	0	2	2	0	2	0	2					

[illegible]





[illegible]

[illegible]







[illegible]

ICF not housed in PIP or MHCB or TMAH.I	07/04/2021	Region III	COR				ML	SNY	ICF	6/9/2021 2:17:00 PM	35.41										0			0	0	0	0	0	0	0	0	0	0	0					
ICF not housed in PIP or MHCB or TMAH.I	07/05/2021	Region III	COR				ML	SNY	ICF	6/9/2021 2:17:00 PM	35.41											0			0	0	0	0	0	0	0	0	0	0					
ICF not housed in PIP or MHCB or TMAH.I	07/06/2021	Region III	COR				ML	SNY	ICF	6/9/2021 2:17:00 PM	35.41											0			0	0	0	0	0	0	0	0	0	0					
ICF not housed in PIP or MHCB or TMAH.I	07/07/2021	Region III	COR				ML	SNY	ICF	6/9/2021 2:17:00 PM	35.41											0			0	0	0	0	0	0	0	0	0	0					
ICF not housed in PIP or MHCB or TMAH.I	07/08/2021	Region III	COR				ML	SNY	ICF	6/9/2021 2:17:00 PM	35.41											12:48:00 CellFront NonConf for 0.07 Hours	0	1		0	0		0		0.07	0	0	0	0	0.07	0.07	0	0.07
ICF not housed in PIP or MHCB or TMAH.I	07/09/2021	Region III	COR				ML	SNY	ICF	6/9/2021 2:17:00 PM	35.41											10:11:00 CellFront NonConf for 0.07 Hours	0	1	12:30:00 CellFront NonCof 0.38 Hours	0	1		0		0.45	0	0	0	0	0.45	0.45	0	0.45
ICF not housed in PIP or MHCB or TMAH.I	07/10/2021	Region III	COR				ML	SNY	ICF	6/9/2021 2:17:00 PM	35.41														0			0	0	0	0	0	0	0	0	0			
ICF not housed in PIP or MHCB or TMAH.I	07/11/2021	Region III	COR				ML	SNY	ICF	6/9/2021 2:17:00 PM	35.41														0			0	0	0	0	0	0	0	0	0			
ICF not housed in PIP or MHCB or TMAH.I	07/12/2021	Region III	COR				ML	SNY	ICF	6/9/2021 2:17:00 PM	35.41														0			0	0	0	0	0	0	0	0	0			
ICF not housed in PIP or MHCB or TMAH.I	07/13/2021	Region III	COR				ML	SNY	ICF	6/9/2021 2:17:00 PM	35.41											11:00:00 CellFront NonConf for 0.12 Hours	0	1		0	0		0		0.12	0	0	0	0	0.12	0.12	0	0.12
ICF not housed in PIP or MHCB or TMAH.I	07/14/2021	Region III	COR				ML	SNY	ICF	6/9/2021 2:17:00 PM	35.41														0			0	0	0	0	0	0	0	0	0			
ICF not housed in PIP or MHCB or TMAH.I	07/15/2021	Region III	COR				ML	SNY	ICF	6/9/2021 2:17:00 PM	35.41														0			0	0	0	0	0	0	0	0	0			
ICF not housed in PIP or MHCB or TMAH.I	06/15/2021	Region III	COR				ML	EOP	ICF	5/4/2021 8:57:00 AM	71.63											13:40:00 CellFront NonConf for 0.05 Hours	0	1		0	0		0		0.1	0	2	2	0	0.1	0.1	2	2.1
ICF not housed in PIP or MHCB or TMAH.I	06/16/2021	Region III	COR				ML	EOP	ICF	5/4/2021 8:57:00 AM	71.63														0			0	3	0	3	0	3	3	0	3			
ICF not housed in PIP or MHCB or TMAH.I	06/17/2021	Region III	COR				ML	EOP	ICF	5/4/2021 8:57:00 AM	71.63														0			0	3	0	3	3	0	3	0	3			
ICF not housed in PIP or MHCB or TMAH.I	06/18/2021	Region III	COR				ML	EOP	ICF	5/4/2021 8:57:00 AM	71.63											10:10:00 NonConf for 0.08 Hours	0	1		0	0		0		0	2	0	2	2	0.08	2.08	0	2.08
ICF not housed in PIP or MHCB or TMAH.I	06/19/2021	Region III	COR				ML	EOP																															



[illegible]



ICF not housed in PIP or MHCB or TMHU	06/28/2021	Region III	KVSP				ASU	SRH	ICF	6/17/2021 12:31:00 PM	27.48							0	0	09:30:00 Standard Conf for 3.50 Hours	1	0				0			0	0	1.5	1.5	3.5	0	3.5	1.5	5		
	06/29/2021	Region III	KVSP				ASU	SRH	ICF	6/17/2021 12:31:00 PM	27.48								09:54:00 Therapeut icModule Conf for 0.73 Hours	1	0				0			0			0	0	0	0	1.47	0	1.47	0	1.47
	ICF not housed in PIP or MHCB or TMHU	06/30/2021	Region III	KVSP				ASU	SRH	ICF	6/17/2021 12:31:00 PM	27.48													0			0			0	0	0	0	0	0	0		
	ICF not housed in PIP or MHCB or TMHU	07/01/2021	Region III	KVSP				ASU	SRH	ICF	6/17/2021 12:31:00 PM	27.48													0			0			0	0	0	0	0	0	0		
	ICF not housed in PIP or MHCB or TMHU	07/02/2021	Region III	KVSP				ASU	SRH	ICF	6/17/2021 12:31:00 PM	27.48								11:57:00 Therapeut icModule Conf for 1.00 Hours	1	0			0	0		0			0	0	0	0	1	0	1	0	1
	ICF not housed in PIP or MHCB or TMHU	07/03/2021	Region III	KVSP				ASU	SRH	ICF	6/17/2021 12:31:00 PM	27.48													0			0			0	0	0	0	0	0	0		
	ICF not housed in PIP or MHCB or TMHU	07/04/2021	Region III	KVSP				ASU	SRH	ICF	6/17/2021 12:31:00 PM	27.48													0			0			0	0	0	0	0	0	0		
	ICF not housed in PIP or MHCB or TMHU	07/05/2021	Region III	KVSP				ASU	SRH	ICF	6/17/2021 12:31:00 PM	27.48													0			0			0	0	0	0	0	0	0		
	ICF not housed in PIP or MHCB or TMHU	07/06/2021	Region III	KVSP				ASU	SRH	ICF	6/17/2021 12:31:00 PM	27.48								08:02:00 CellFront NonConf for 0.07 Hours	0	1			0	0		0			0.07	0	0	0	0	0.07	0.07	0	0.07
	ICF not housed in PIP or MHCB or TMHU	07/07/2021	Region III	KVSP				ASU	SRH	ICF	6/17/2021 12:31:00 PM	27.48													0			0			0	0	0	0	0	0	0	0	
	ICF not housed in PIP or MHCB or TMHU	07/08/2021	Region III	KVSP				ASU	SRH	ICF	6/17/2021 12:31:00 PM	27.48													0			0			0	0	1.5	1.5	0	0	0	1.5	1.5
	ICF not housed in PIP or MHCB or TMHU	07/09/2021	Region III	KVSP				ASU	SRH	ICF	6/17/2021 12:31:00 PM	27.48								09:00:00 CellFront NonConf for 0.13 Hours	0	1			0	0		0			0.13	0	0	0	0	0.13	0.13	0	0.13
	ICF not housed in PIP or MHCB or TMHU	07/10/2021	Region III	KVSP				ASU	SRH	ICF	6/17/2021 12:31:00 PM	27.48													0			0			0	0	0	0	0	0	0	0	
	ICF not housed in PIP or MHCB or TMHU	07/11/2021	Region III	KVSP				ASU	SRH	ICF	6/17/2021 12:31:00 PM	27.48													0			0			0	0	0	0	0	0	0	0	
	ICF not housed in PIP or MHCB or TMHU	07/12/2021	Region III	KVSP				ASU	SRH	ICF	6/17/2021 12:31:00 PM	27.48													0			0			0	0	1.5	1.5	0	0	0	1.5	1.5
ICF not housed in PIP or MHCB or TMHU	07/13/2021	Region III	KVSP				ASU	SRH	ICF	6/17/2021 12:31:00 PM	27.48								09:48:00 Therapeut icModule Conf for 0.87 Hours	1	0			0	0		0			0			0	0	0.87	0	0.87	0	0.

[illegible]

[illegible]



[illegible]

[illegible]







ICF not housed in PIP or MHCB or TMAU.I	06/23/2021	Region III	LAC					ML	EOP	ICF	6/17/2021 12:27:00 PM	6.88								0	0	18:30:00 CellFront NonCof 0.25 Hours	0	1				0			0.25	0	2	2	0	0.25	0.25	2	2.25	
	06/25/2021	Region III	LAC					ASU	ASUHub	ICF	6/24/2021 1:02:00 PM	20.46															0			0		0	0	0	0	0	0	0		
	06/26/2021	Region III	LAC					ASU	ASUHub	ICF	6/24/2021 1:02:00 PM	20.46															0			0		0	0	0	0	0	0	0		
	06/27/2021	Region III	LAC					ASU	ASUHub	ICF	6/24/2021 1:02:00 PM	20.46															0			0		0	0	0	0	0	0	0		
	06/28/2021	Region III	LAC					ASU	ASUHub	ICF	6/24/2021 1:02:00 PM	20.46															0			0		2.5	0	2.5	2.5	0	2.5	0	2.5	
	06/29/2021	Region III	LAC					ASU	ASUHub	ICF	6/24/2021 1:02:00 PM	20.46								09:45:00 Standard Conf for 0.45 Hours	1	0	11:23:00 Standard Conf for 0.35 Hours	1	0				0		0	2	0	2	2.8	0	2.8	0	2.8	
	06/30/2021	Region III	LAC					ASU	ASUHub	ICF	6/24/2021 1:02:00 PM	20.46															0			0		2.5	0	2.5	2.5	0	2.5	0	2.5	
	07/01/2021	Region III	LAC					ASU	ASUHub	ICF	6/24/2021 1:02:00 PM	20.46															0			0		4	0	4	2	2	4	0	4	
	07/02/2021	Region III	LAC					ASU	ASUHub	ICF	6/24/2021 1:02:00 PM	20.46															0			0		2	0	2	2	0	2	0	2	
	07/03/2021	Region III	LAC					ASU	ASUHub	ICF	6/24/2021 1:02:00 PM	20.46															0			0		0	0	0	0	0	0	0	0	
	07/04/2021	Region III	LAC					ASU	ASUHub	ICF	6/24/2021 1:02:00 PM	20.46															0			0		0	0	0	0	0	0	0	0	
	07/05/2021	Region III	LAC					ASU	ASUHub	ICF	6/24/2021 1:02:00 PM	20.46															0			0		2.5	0	2.5	2.5	0	2.5	0	2.5	
	07/06/2021	Region III	LAC					ASU	ASUHub	ICF	6/24/2021 1:02:00 PM	20.46															0			0		1.83	0	1.83	0.83	1	1.83	0	1.83	
	07/07/2021	Region III	LAC					ASU	ASUHub	ICF	6/24/2021 1:02:00 PM	20.46								11:35:00 Standard Conf for 0.22 Hours	1	0		0	0			0			0		2.25	0	2.25	2.47	0	2.47	0	2.47
	07/08/2021	Region III	LAC					ASU	ASUHub	ICF	6/24/2021 1:02:00 PM	20.46															0			0		3.7	0	3.7	1.95	1.75	3.7	0	3.7	
	07/09/2021	Region III	LAC					ASU	ASUHub	ICF	6/24/2021 1:02:00 PM	20.46															0			0		2.33	0	2.33	2.33	0	2.33	0	2.33	
07/10/2021	Region III	LAC					ASU	ASUHub	ICF	6/24/2021 1:02:00 PM	20.46															0			0		0	0	0	0	0	0	0	0	0	
07/11/2021	Region III	LAC					ASU	ASUHub	ICF	6/24/2021 1:02:00 PM	20.46															0			0		0	0	0	0	0	0	0	0	0	



ICF not housed in PIP or MHCB or TAMIU	06/23/2021	Region III	LAC					ML	EOP	EOP										09:06:00 Standard Conf for 0.17 Hours	0			0	0	0	0	0	0	0	0	0	0	0	0			
ICF not housed in PIP or MHCB or TAMIU	06/24/2021	Region III	LAC					ML	EOP	ICF	6/23/2021 9:23:00 AM	21.61									0			0	2	0	2	2	0	2	0	2	0					
ICF not housed in PIP or MHCB or TAMIU	06/25/2021	Region III	LAC					ML	EOP	ICF	6/23/2021 9:23:00 AM	21.61									0			0	1	0	1	1	0	1	0	1	0					
ICF not housed in PIP or MHCB or TAMIU	06/26/2021	Region III	LAC					ML	EOP	ICF	6/23/2021 9:23:00 AM	21.61									0			0	0	0	0	0	0	0	0	0	0					
ICF not housed in PIP or MHCB or TAMIU	06/27/2021	Region III	LAC					ML	EOP	ICF	6/23/2021 9:23:00 AM	21.61									0			0	0	0	0	0	0	0	0	0	0					
ICF not housed in PIP or MHCB or TAMIU	06/28/2021	Region III	LAC					ML	EOP	ICF	6/23/2021 9:23:00 AM	21.61									0			0	0	0	0	0	0	0	0	0	0					
ICF not housed in PIP or MHCB or TAMIU	06/29/2021	Region III	LAC					ML	EOP	ICF	6/23/2021 9:23:00 AM	21.61									13:30:00 Standard Conf for 0.25 Hours	1	0		0	0		0	0	0	0	0.25	0	0.25	0	0.25		
ICF not housed in PIP or MHCB or TAMIU	06/30/2021	Region III	LAC					ML	EOP	ICF	6/23/2021 9:23:00 AM	21.61									0			0	1	0	1	0	1	1	0	1	0					
ICF not housed in PIP or MHCB or TAMIU	07/01/2021	Region III	LAC					ML	EOP	ICF	6/23/2021 9:23:00 AM	21.61									0			0	2	0	2	2	0	2	0	2	0					
ICF not housed in PIP or MHCB or TAMIU	07/02/2021	Region III	LAC					ML	EOP	ICF	6/23/2021 9:23:00 AM	21.61									0			0	1	0	1	1	0	1	0	1	0					
ICF not housed in PIP or MHCB or TAMIU	07/03/2021	Region III	LAC					ML	EOP	ICF	6/23/2021 9:23:00 AM	21.61									0			0	0	0	0	0	0	0	0	0	0					
ICF not housed in PIP or MHCB or TAMIU	07/04/2021	Region III	LAC					ML	EOP	ICF	6/23/2021 9:23:00 AM	21.61									0			0	0	0	0	0	0	0	0	0	0					
ICF not housed in PIP or MHCB or TAMIU	07/05/2021	Region III	LAC					ML	EOP	ICF	6/23/2021 9:23:00 AM	21.61									0			0	0	0	0	0	0	0	0	0	0					
ICF not housed in PIP or MHCB or TAMIU	07/06/2021	Region III	LAC					ML	EOP	ICF	6/23/2021 9:23:00 AM	21.61									15:50:00 CellFront NonConf for 0.10 Hours	0	1		0	0		0		0.1	1	2	3	0	1.1	1.1	2	3.1
ICF not housed in PIP or MHCB or TAMIU	07/07/2021	Region III	LAC					ML	EOP	ICF	6/23/2021 9:23:00 AM	21.61												08:35:00 Standard Conf for 0.02 Hours	0			0	2	0	2	0	2	2	0	2		
ICF not housed in PIP or MHCB or TAMIU	07/08/2021	Region III	LAC					ML	EOP	ICF	6/23/2021 9:23:00 AM	21.61									0			0	1	0	1	1	0	1	0	1	0					
ICF not housed in PIP or MHCB or TAMIU	07/09/2021	Region III	LAC					ML	EOP	ICF	6/23/2021 9:23:00 AM	21.61									0			0	0	0	0	0	0	0	0	0	0					
ICF not housed in PIP or MHCB or TAMIU	07/10/2021	Region III	LAC					ML	EOP	ICF	6/23/2021 9:23:00 AM	21																										

[illegible]



[illegible]























ICF not housed in PIP or MHCB or TMHU	07/01/2021	Region III	SATF				ASU	SRH	ICF	5/20/2021 12:33:00 PM	55.48											0			0	0	0	0	0	0	0	0	0				
ICF not housed in PIP or MHCB or TMHU	07/02/2021	Region III	SATF				ASU	SRH	ICF	5/20/2021 12:33:00 PM	55.48											0			0	0	0	0	0	0	0	0	0				
ICF not housed in PIP or MHCB or TMHU	07/03/2021	Region III	SATF				ASU	SRH	ICF	5/20/2021 12:33:00 PM	55.48											0			0	0	0	0	0	0	0	0	0				
ICF not housed in PIP or MHCB or TMHU	07/04/2021	Region III	SATF				ASU	SRH	ICF	5/20/2021 12:33:00 PM	55.48											0			0	0	0	0	0	0	0	0	0				
ICF not housed in PIP or MHCB or TMHU	07/05/2021	Region III	SATF				ASU	SRH	ICF	5/20/2021 12:33:00 PM	55.48											0			0	0	0	0	0	0	0	0	0				
ICF not housed in PIP or MHCB or TMHU	07/06/2021	Region III	SATF				ASU	SRH	ICF	5/20/2021 12:33:00 PM	55.48											0			0	0	0	0	0	0	0	0	0				
ICF not housed in PIP or MHCB or TMHU	07/07/2021	Region III	SATF				ASU	SRH	ICF	5/20/2021 12:33:00 PM	55.48											0			0	0	0	0	0	0	0	0	0				
ICF not housed in PIP or MHCB or TMHU	06/18/2021	Region IV	CIW				ML	CTC	ICF	6/17/2021 10:13:00 AM	27.58						10:41:00 Standard Conf for 0.58 Hours	1	0		0	0		0			0	1	0	1	1.58	0	1.58	0	1.58		
ICF not housed in PIP or MHCB or TMHU	06/19/2021	Region IV	CIW				ML	CTC	ICF	6/17/2021 10:13:00 AM	27.58							0	0		09:30:00 Standard Conf for 0.48 Hours	1	0		0			0	1.5	0	1.5	0.48	1.5	1.98	0	1.98	
ICF not housed in PIP or MHCB or TMHU	06/20/2021	Region IV	CIW				ML	CTC	ICF	6/17/2021 10:13:00 AM	27.58						08:55:00 Standard Conf for 0.92 Hours	2	0		0	0		0			0	0	0	0	1.17	0	1.17	0	1.17		
ICF not housed in PIP or MHCB or TMHU	06/21/2021	Region IV	CIW				ML	CTC	ICF	6/17/2021 10:13:00 AM	27.58						10:50:00 Standard Conf for 0.55 Hours	1	0		13:00:00 Conf for 1.00 Hours	1	0		0			0	0	1	1	1.55	0	1.55	1	2.55	
ICF not housed in PIP or MHCB or TMHU	06/22/2021	Region IV	CIW				ML	CTC	ICF	6/17/2021 10:13:00 AM	27.58						09:36:00 Standard Conf for 0.40 Hours	1	0		10:00:00 Conf for 1.00 Hours	1	0		0			0	0	1	1	1.4	0	1.4	1	2.4	
ICF not housed in PIP or MHCB or TMHU	06/23/2021	Region IV	CIW				ML	CTC	ICF	6/17/2021 10:13:00 AM	27.58						11:21:00 Standard Conf for 0.40 Hours	1	0		0	0		0			0	1	0	1	1.4	0	1.4	0	1.4		
ICF not housed in PIP or MHCB or TMHU	06/24/2021	Region IV	CIW				ML	CTC	ICF	6/17/2021 10:13:00 AM	27.58							0	0		09:55:00 Therapeutic Module Conf for 0.33 Hours	1	0		0			0	0	0	0	0.33	0	0.33	0	0.33	
ICF not housed in PIP or MHCB or TMHU	07/13/2021	Region IV	CIW				PSU	PSU	EOPMod									0	0		11:45:00 CellFront NonConf 0.05 Hours	0	1		10:30:00 Standard Conf for 0.25 Hours			0	0.05	0	0	0	0	0.05	0.05	0	0.05
ICF not housed in PIP or MHCB or TMHU	07/14/2021	Region IV	CIW				PSU	PSU	ICF	7/13/2021 1:14:00 PM	1.45																0			0	0	0	0	0	0		
ICF not housed in PIP or MHCB or TMHU	07/15/2021	Region IV	CIW				PSU	PSU	ICF	7/13/2021 1:14:00 PM	1.45																0			0	0	0	0	0	0		
ICF not housed in PIP or MHCB or TMHU	06/18/2021	Region IV	RJD				ML	EOP	ICF	9/25/2019 3:21:00 PM	631.7											0			0			0	1	0	1	0	1	1	0	1	

ICF not housed in PIP or MHCB or TABULI	07/03/2021	Region IV	RJD				ML	EOP	ICF	12/12/2019 2:01:00 PM	571.81								08:37:00 Standard Conf for 0.23 Hours	1	0		0	0		0			0	0	0	0	0.23	0	0.23	0	0.23	
ICF not housed in PIP or MHCB or TABULI	07/04/2021	Region IV	RJD				ML	EOP	ICF	12/12/2019 2:01:00 PM	571.81															0			0	0	0	0	0	0	0	0		
ICF not housed in PIP or MHCB or TABULI	07/05/2021	Region IV	RJD				ML	EOP	ICF	12/12/2019 2:01:00 PM	571.81															0			0	0	0	0	0	0	0	0		
ICF not housed in PIP or MHCB or TABULI	07/06/2021	Region IV	RJD				ML	EOP	ICF	12/12/2019 2:01:00 PM	571.81															0			0	0	0	0	0	0	0	0		
ICF not housed in PIP or MHCB or TABULI	06/15/2021	Region IV	RJD				ML	EOP	ICF	5/21/2021 1:56:00 PM	36.18									13:00:00 NonConf for 0.73 Hours	0	1		0	0		0			0	0	0	0	0	0.73	0.73	0	0.73
ICF not housed in PIP or MHCB or TABULI	06/16/2021	Region IV	RJD				ML	EOP	ICF	5/21/2021 1:56:00 PM	36.18										0	0	12:30:00 Standard Conf for 0.33 Hours	1	0		0			0	0	0	0	0.33	0	0.33	0	0.33
ICF not housed in PIP or MHCB or TABULI	06/17/2021	Region IV	RJD				ML	EOP	ICF	5/21/2021 1:56:00 PM	36.18									12:10:00 CellFront NonConf for 0.17 Hours	0	1		0	0		0			0.17	2	0	2	2	0.17	2.17	0	2.17
ICF not housed in PIP or MHCB or TABULI	06/18/2021	Region IV	RJD				ML	EOP	ICF	5/21/2021 1:56:00 PM	36.18										0	0	12:30:00 CellFront NonCof 0.17 Hours	0	1		0			0.17	0	0	0	0	0.17	0.17	0	0.17
ICF not housed in PIP or MHCB or TABULI	06/19/2021	Region IV	RJD				ML	EOP	ICF	5/21/2021 1:56:00 PM	36.18									09:45:00 CellFront NonConf for 0.08 Hours	0	1		0	0		0			0.08	0	0	0	0	0.08	0.08	0	0.08
ICF not housed in PIP or MHCB or TABULI	06/20/2021	Region IV	RJD				ML	EOP	ICF	5/21/2021 1:56:00 PM	36.18									09:35:00 CellFront NonConf for 0.17 Hours	0	1		0	0		0			0.17	0	0	0	0	0.17	0.17	0	0.17
ICF not housed in PIP or MHCB or TABULI	06/21/2021	Region IV	RJD				ML	EOP	ICF	5/21/2021 1:56:00 PM	36.18										0	0	09:30:00 Standard Conf for 0.12 Hours	2	0	09:26:00 Standard Conf for 0.17 Hours	0			0	0	0	0	0.23	0	0.23	0	0.23
ICF not housed in PIP or MHCB or TABULI	06/22/2021	Region IV	RJD				ML	EOP	ICF	5/21/2021 1:56:00 PM	36.18									13:50:00 Standard Conf for 0.25 Hours	1	0		0	0		0			0	0	0	0	0.25	0	0.25	0	0.25
ICF not housed in PIP or MHCB or TABULI	06/23/2021	Region IV	RJD				ML	EOP	ICF	5/21/2021 1:56:00 PM	36.18										0	0	10:30:00 Standard Conf for 0.25 Hours	1	0		0			0	0	0	0	0.25	0	0.25	0	0.25
ICF not housed in PIP or MHCB or TABULI	06/24/2021	Region IV	RJD				ML	EOP	ICF	5/21/2021 1:56:00 PM	36.18									11:00:00 CellFront NonConf for 0.17 Hours	0	1		0	0		0			0.17	0	0	0	0	0.17	0.17	0	0.17
ICF not housed in PIP or MHCB or TABULI	06/25/2021	Region IV	RJD				ML	EOP	ICF	5/21/2021 1:56:00 PM	36.18										0	0	12:30:00 Standard Conf for 0.25 Hours	1	0		0			0	0	0	0	0.25	0	0.25	0	0.25
ICF not housed in PIP or MHCB or TABULI	06/26/2021	Region IV	RJD				ML	EOP	ICF	5/21/2021 1:56:00 PM	36.18															0			0	0	0	0	0	0	0	0		
ICF not housed in PIP or MHCB or TABULI	06/27/2021	Region IV	RJD				ASU	ASUHub	MHCB	6/26/2021 6:16:00 PM	0.63									09:05:00 CellFront NonConf for 0.25 Hours	0	1		0	0		0			0.25	0	0	0	0	0.25	0.25	0	0.25
ICF not housed in PIP or MHCB or TABULI	06/28/2021	Region IV	RJD				ML	EOP	ICF	6/27/2021 9:30:00 AM	17.61										0	0	12:42:00 Standard Conf for 0.13 Hours	1	0		0			0	1	0	1	0.13	1	1.13	0	1.13

[illegible]

ICF not housed in PIP or MHCB or TABULE ICF not housed in
---

# **EXHIBIT 3**



# COVID-19 MH Operational Impact Dashboard - Safety

Note: data are not reported in conjunction with census

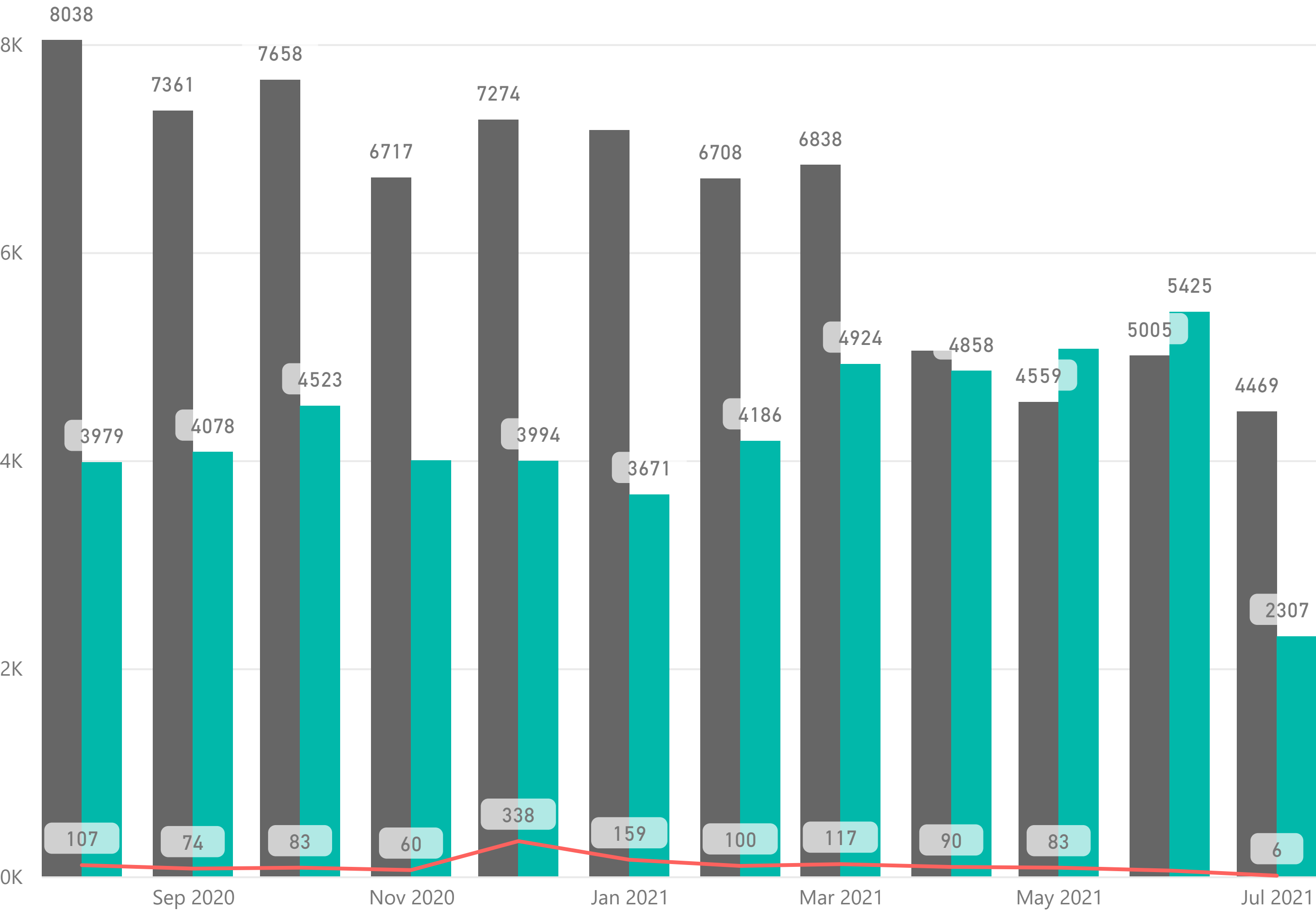
Region

All



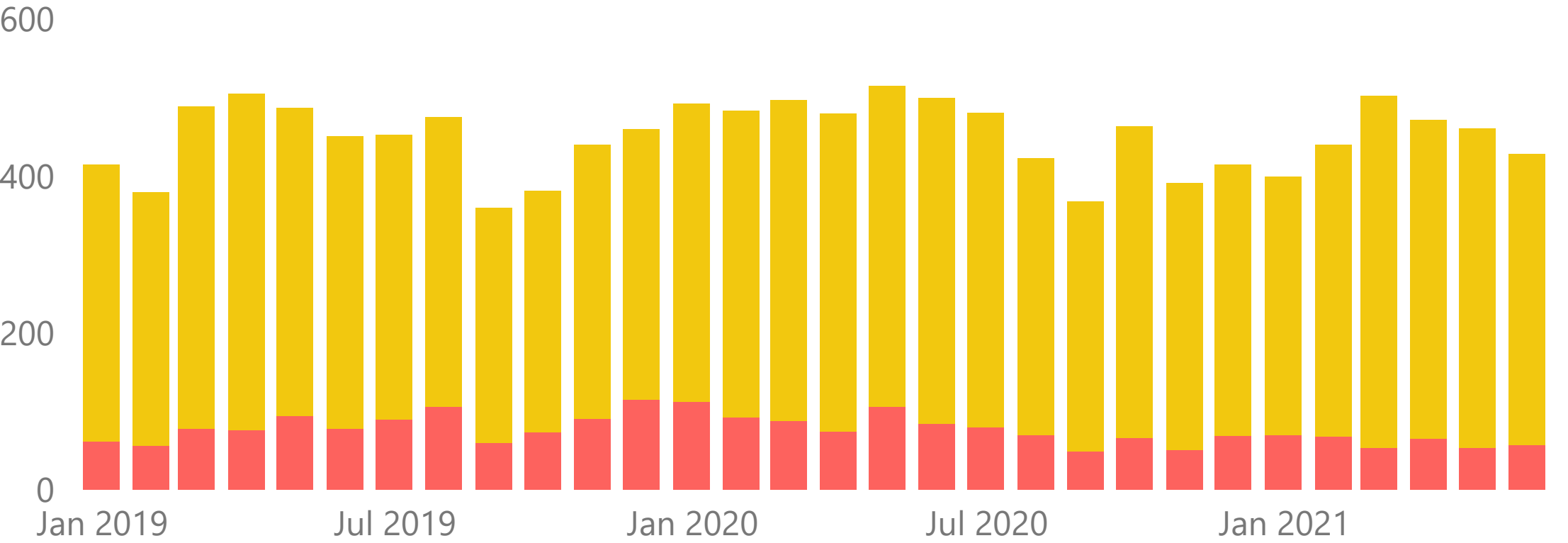
## SRASHE & CSSRS Screener

12 month prior Current CSSRS Total

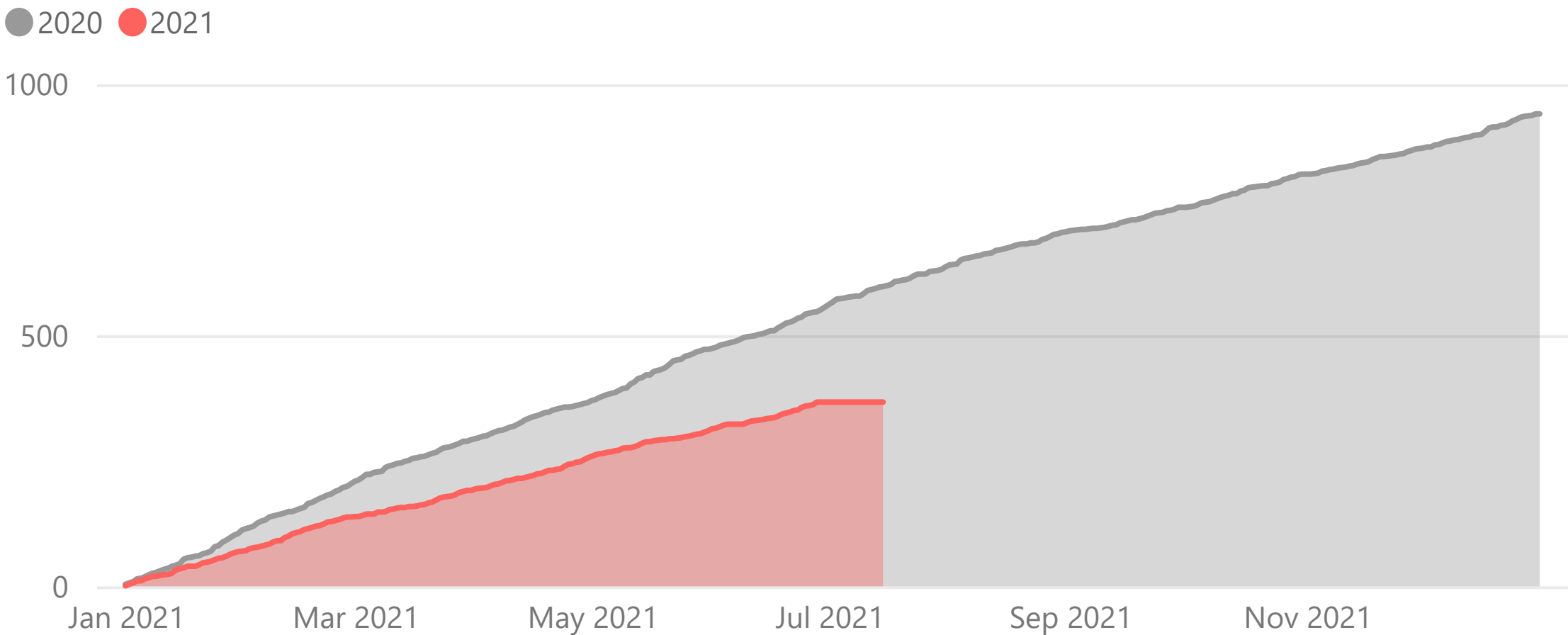


## Self-Injurious Behavior

SIB w/ Intent SIB w/o Intent



## YTD SIB with Intent



FSP	ASP	CAL	CCC	CCI	CCWF	CEN	CHCF	CIM	CIW	CMC	CMF	COR	CRC	CTF	CVSP	DVI	CAC	HDSP	ISP	KVSP	LAC	MCSP	NKSP	PBSP	PVSP	RJD	SAC	SATF	SCC	SOL	SQ	SVSP	VSP	WSP
-----	-----	-----	-----	-----	------	-----	------	-----	-----	-----	-----	-----	-----	-----	------	-----	-----	------	-----	------	-----	------	------	------	------	-----	-----	------	-----	-----	----	------	-----	-----



Glossary

07/15/21 6:30:00 AM

Last Date / Time Refresh (PST)

# COVID-19 MH Operational Impact Dashboard - MHCB

Note: data are not reported in conjunction with census

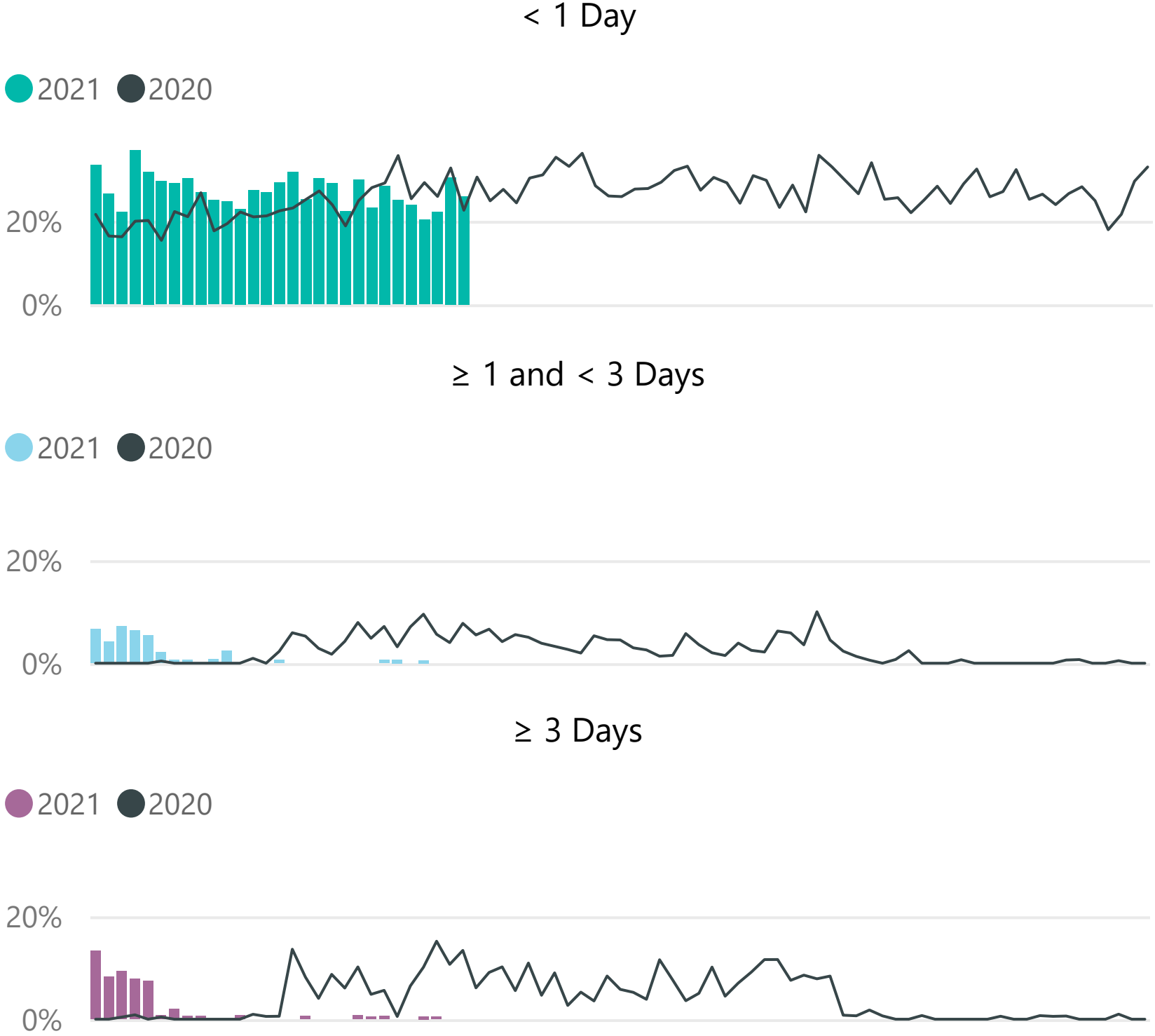
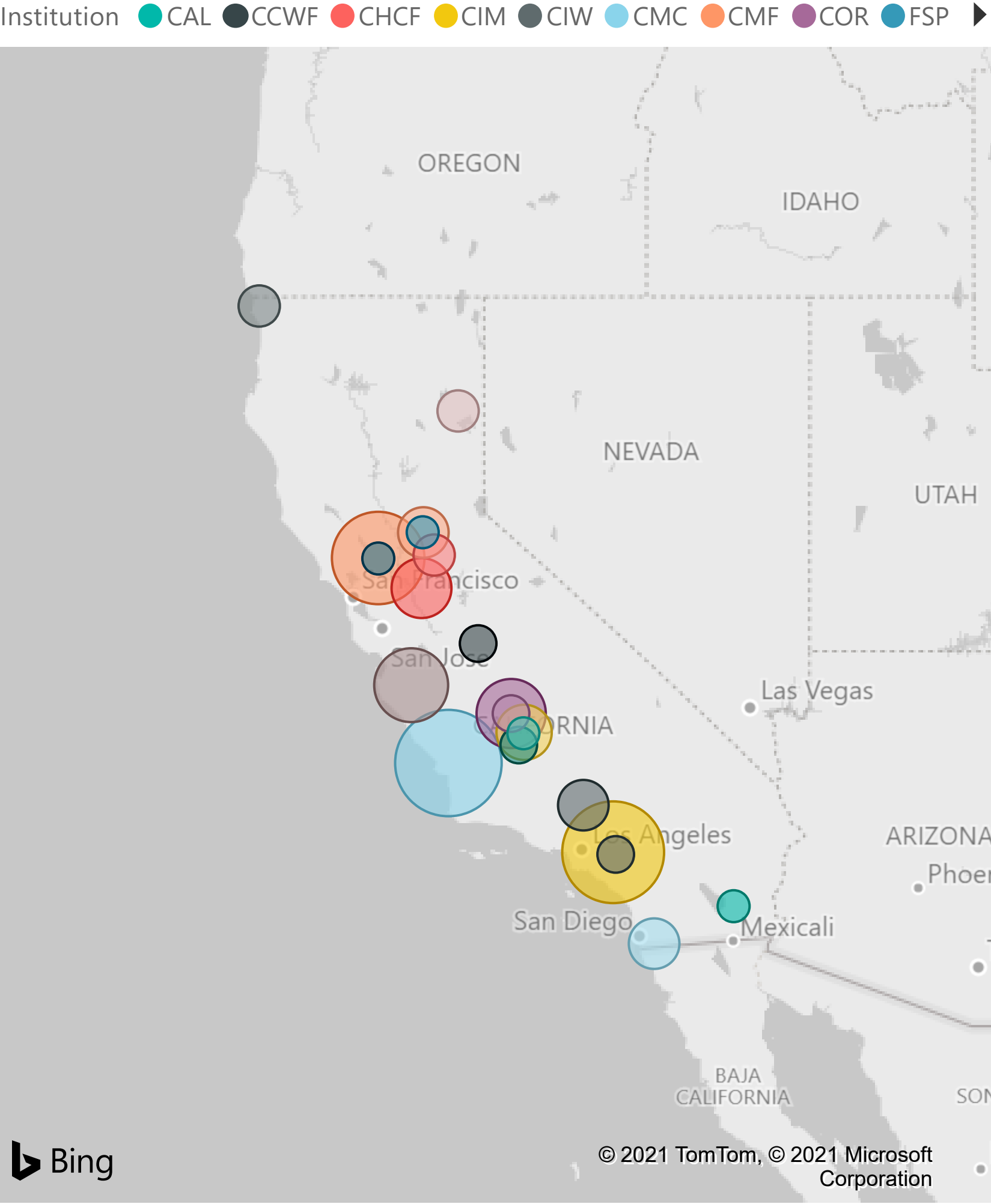
Region

All

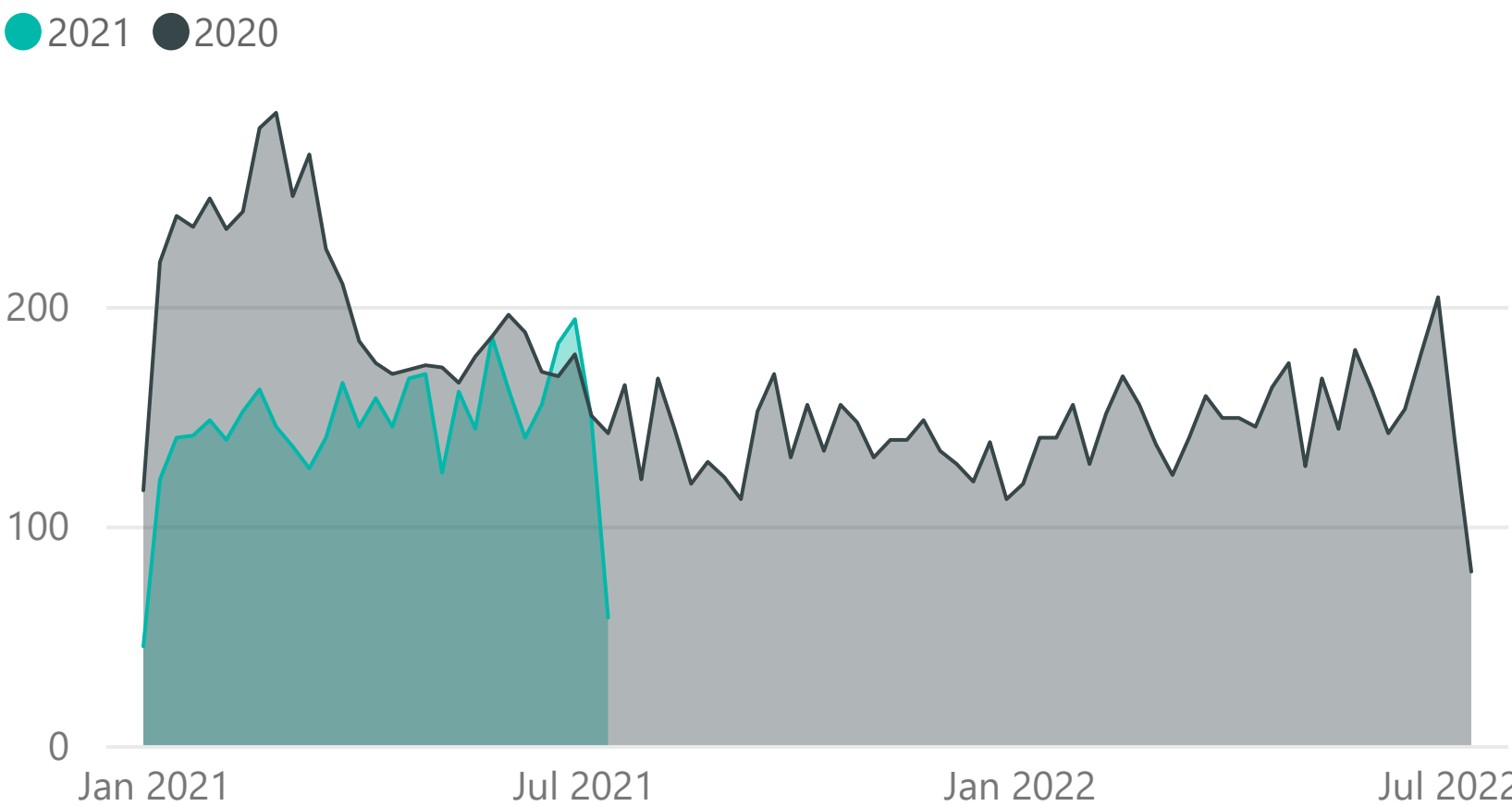
## MHCB Location

## Percent Rescinded

## Bed Type



## Referrals



## MHCB in THMU & EDC



FSP ASP CAL CCC CCI CCWF CEN CHCF CIM CIW CMC CMF COR CRC CTF CVSP DVI CAC HDSP ISP KVSP LAC MCSP NKSP PBSP PVSP RJD SAC SATF SCC SOL SQ SVSP VSP WSP





Glossary

07/15/21 6:30:00 AM

Last Date / Time Refresh (PST)

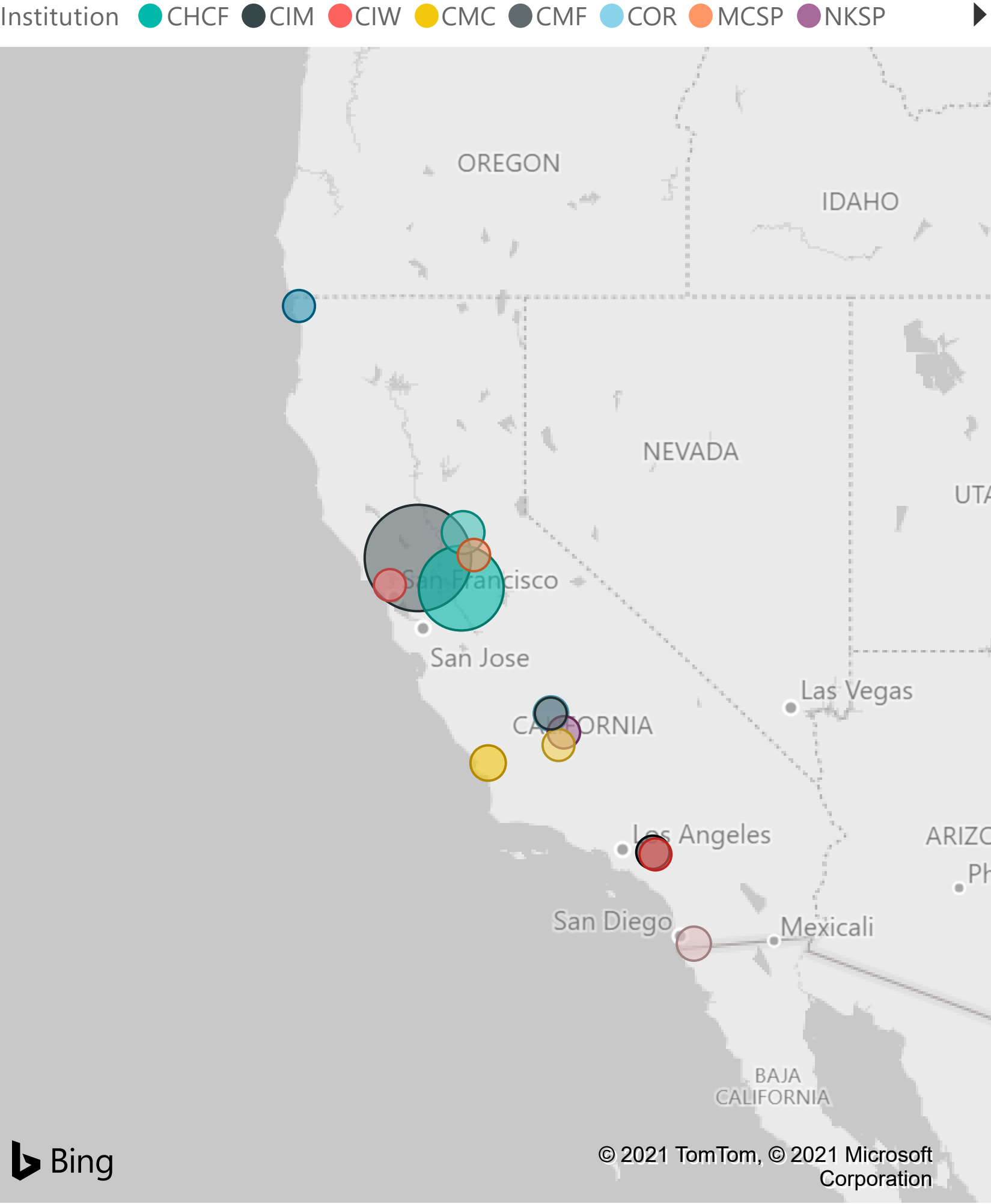
# COVID-19 MH Operational Impact Dashboard - Acute

Note: data are not reported in conjunction with census

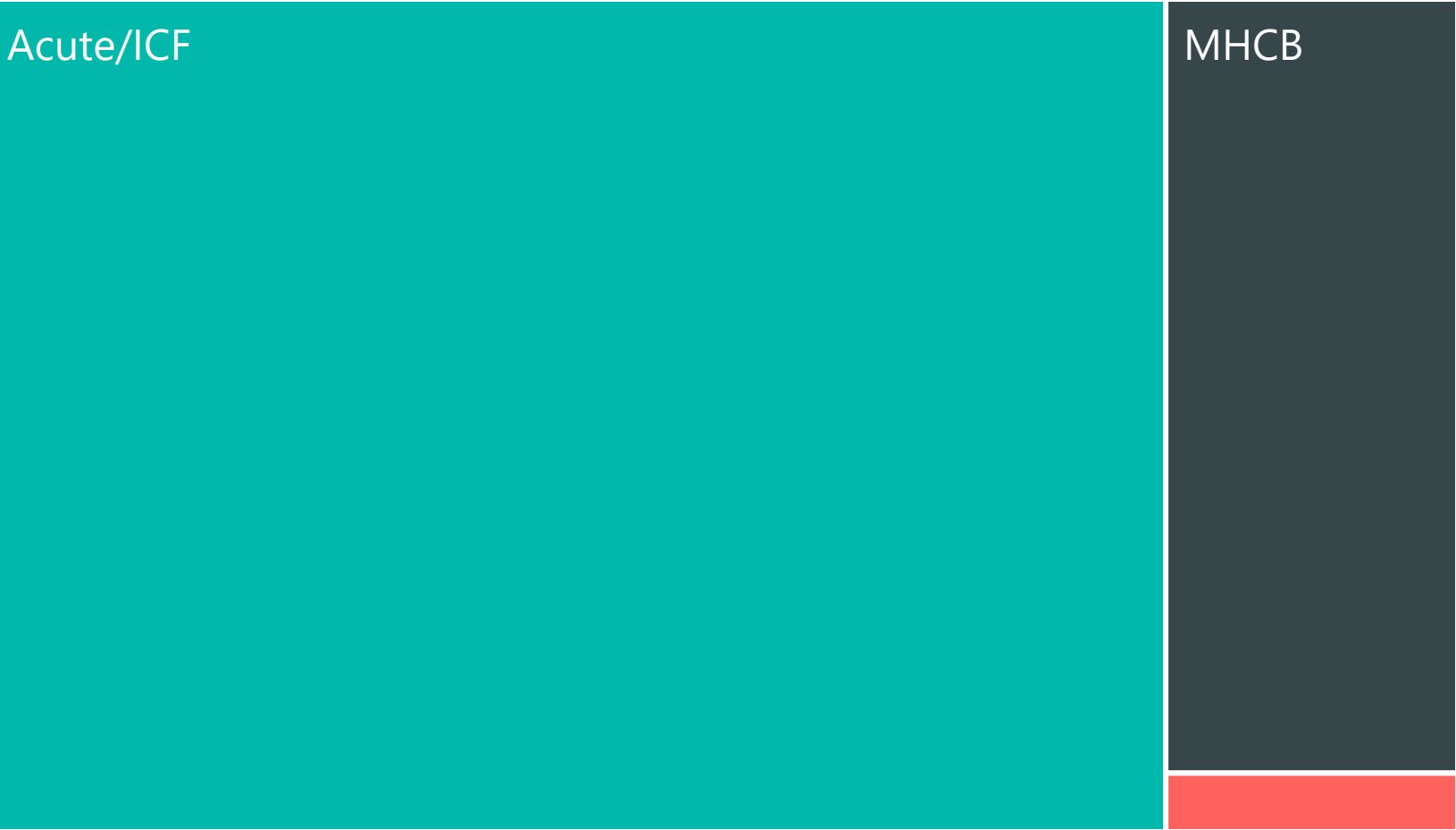
Region

All

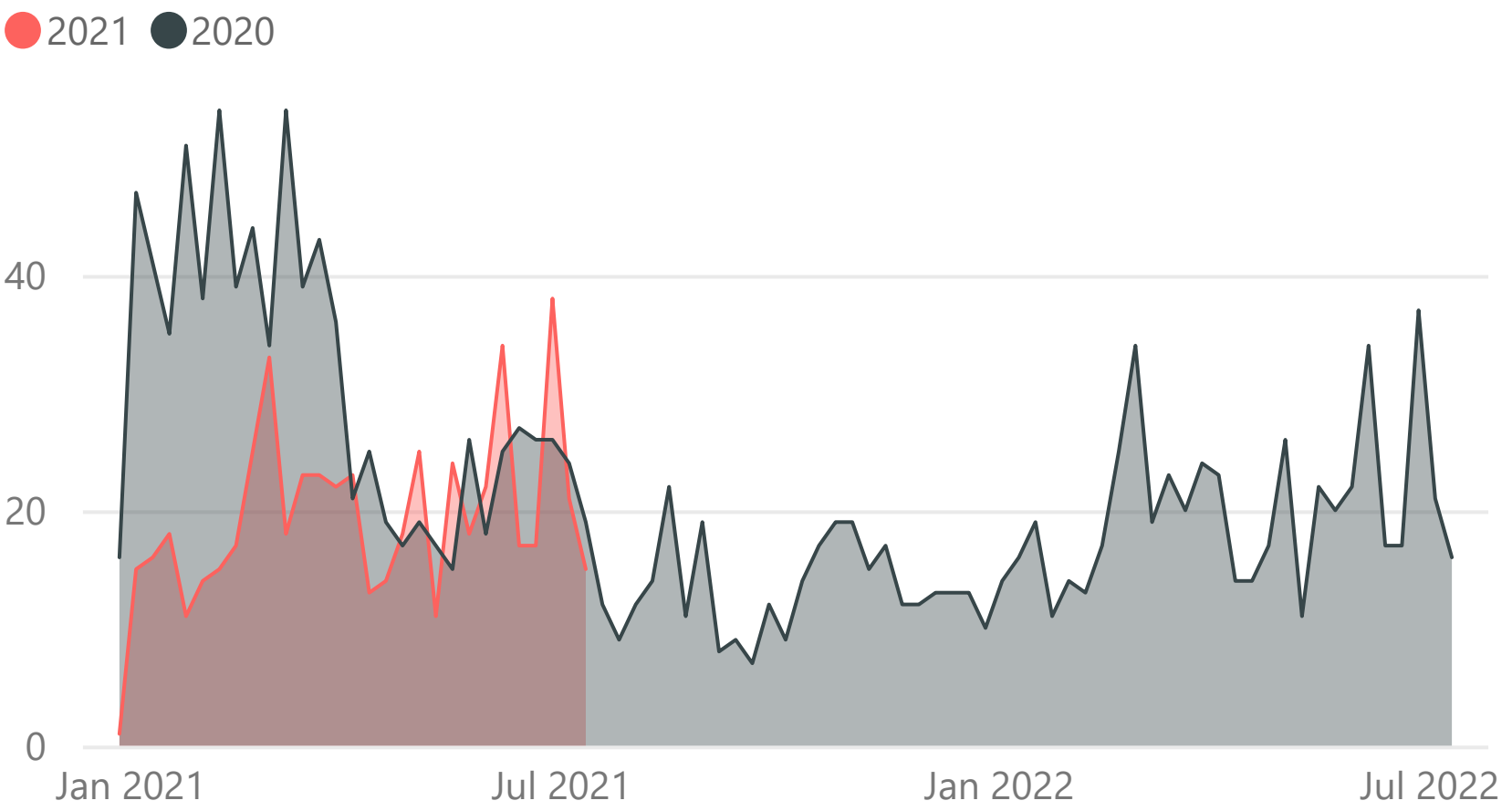
## Acute Location



## Bed Type



## Referrals



## Acute in THMU & EDC



FSP ASP CAL CCC CCI CCWF CEN CHCF CIM CIW CMC CMF COR CRC CTF CVSP DVI CAC HDSP ISP KVSP LAC MCSP NKSP PBSP PVSP RJD SAC SATF SCC SOL SQ SVSP VSP WSP



Glossary

07/15/21 6:30:00 AM

Last Date / Time Refresh (PST)

# COVID-19 MH Operational Impact Dashboard - ICF

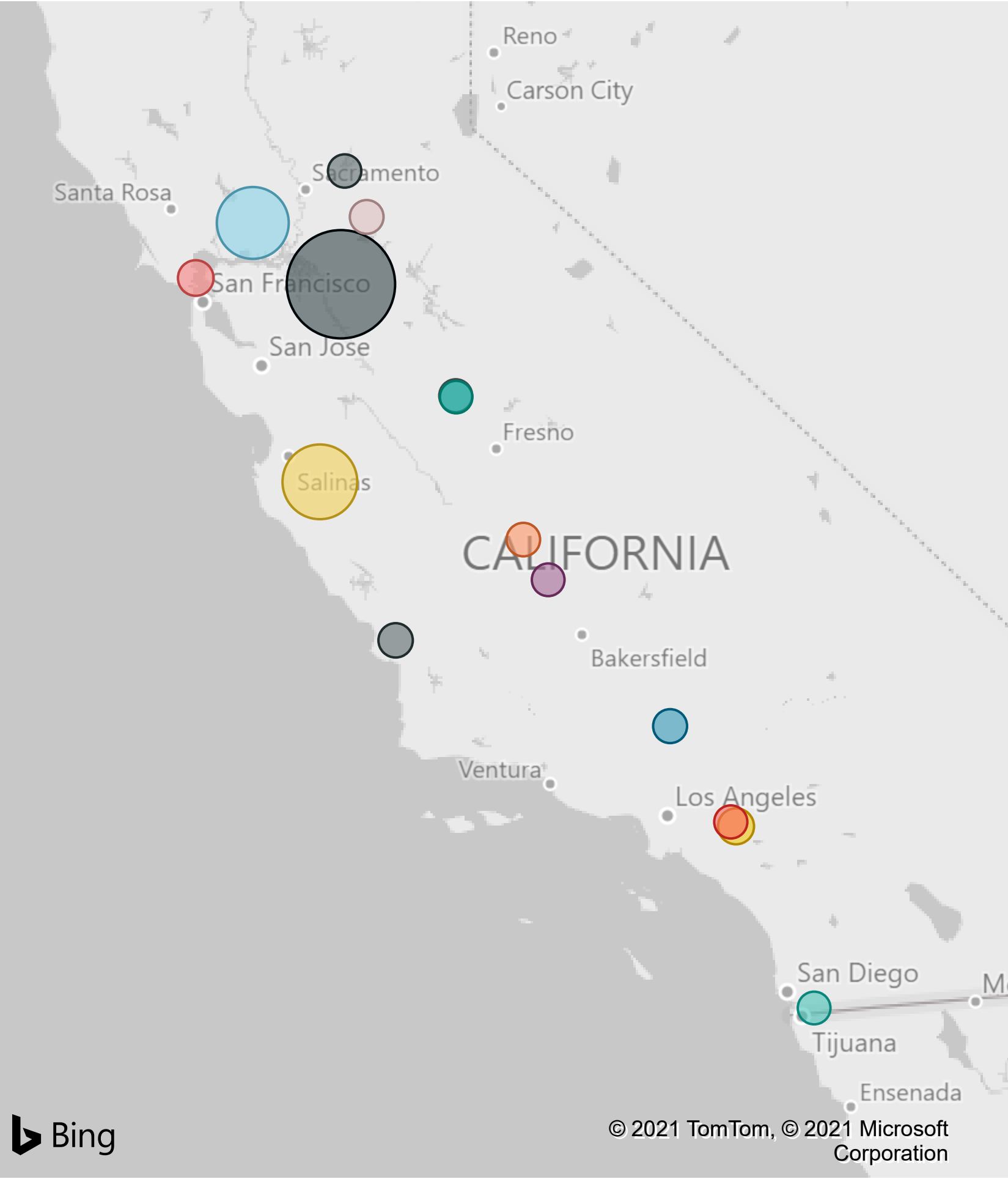
Note: data are not reported in conjunction with census

Region

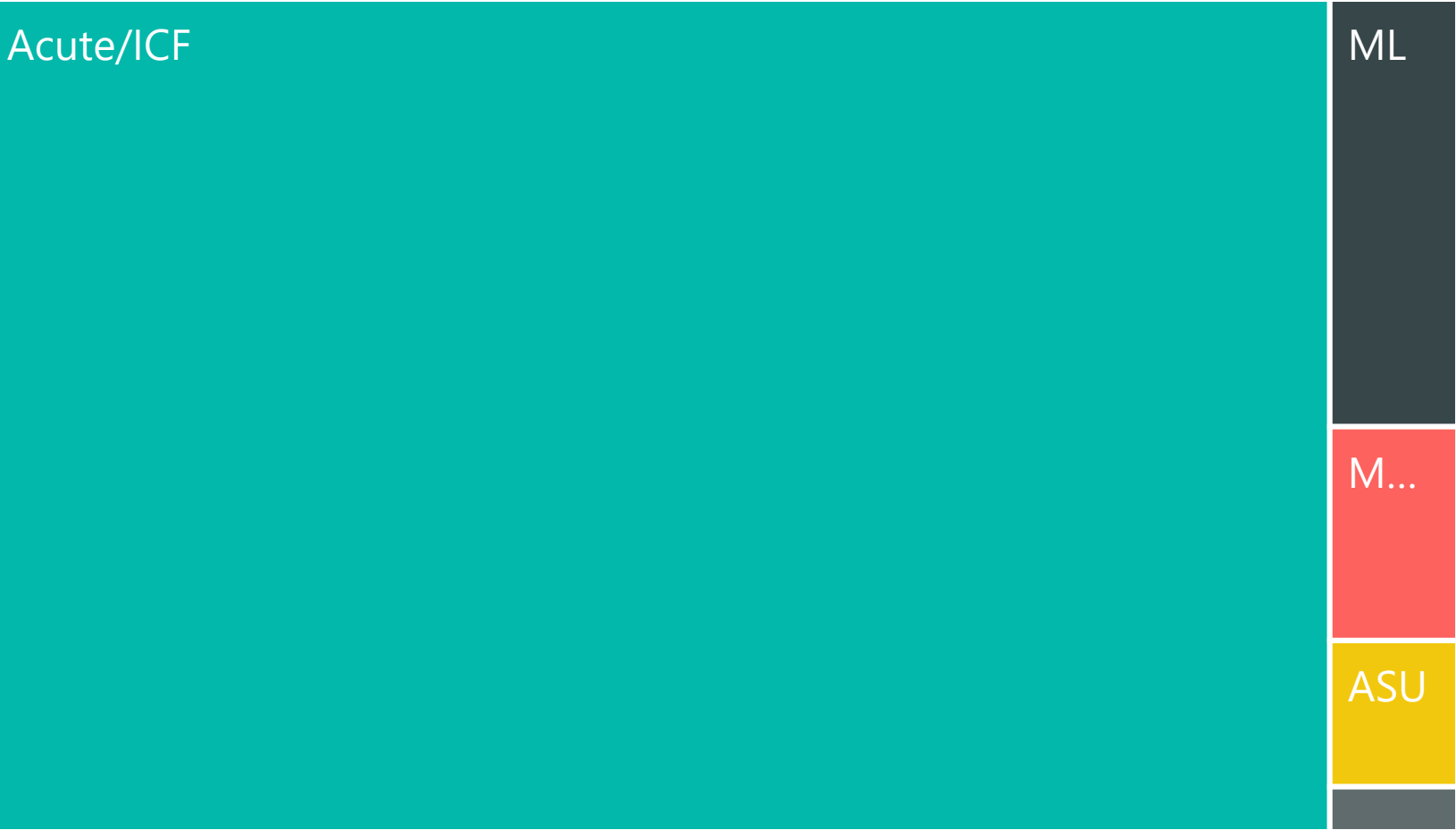
All

## ICF Location

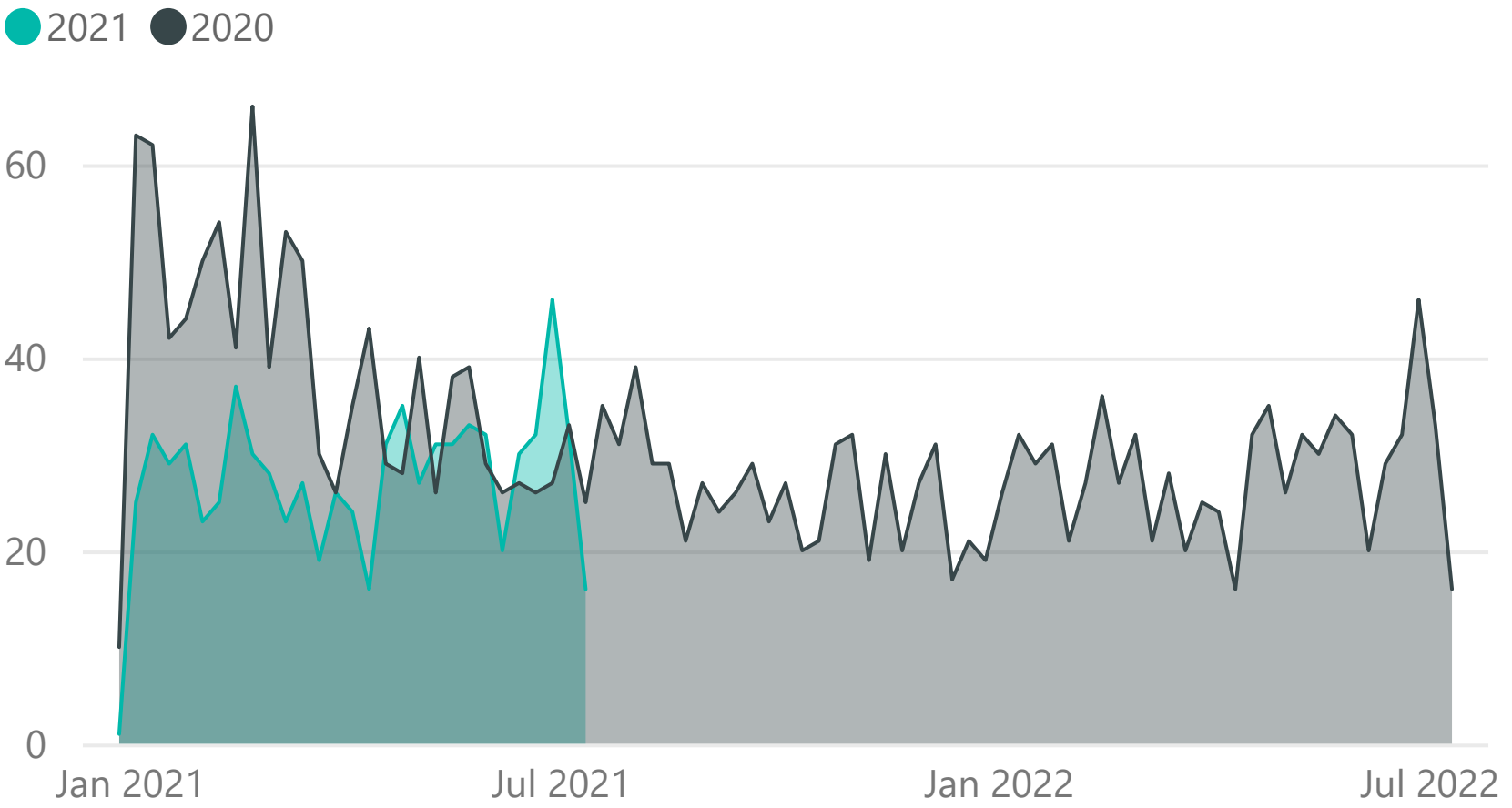
Institution CCWF CHCF CIM CIW CMC CMF COR KVSP



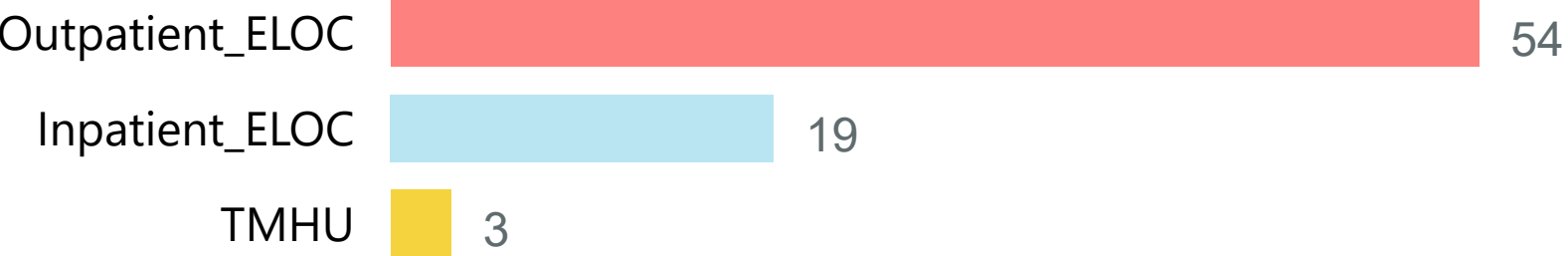
## Bed Type



## Referrals



## ICF in THMU & EDC



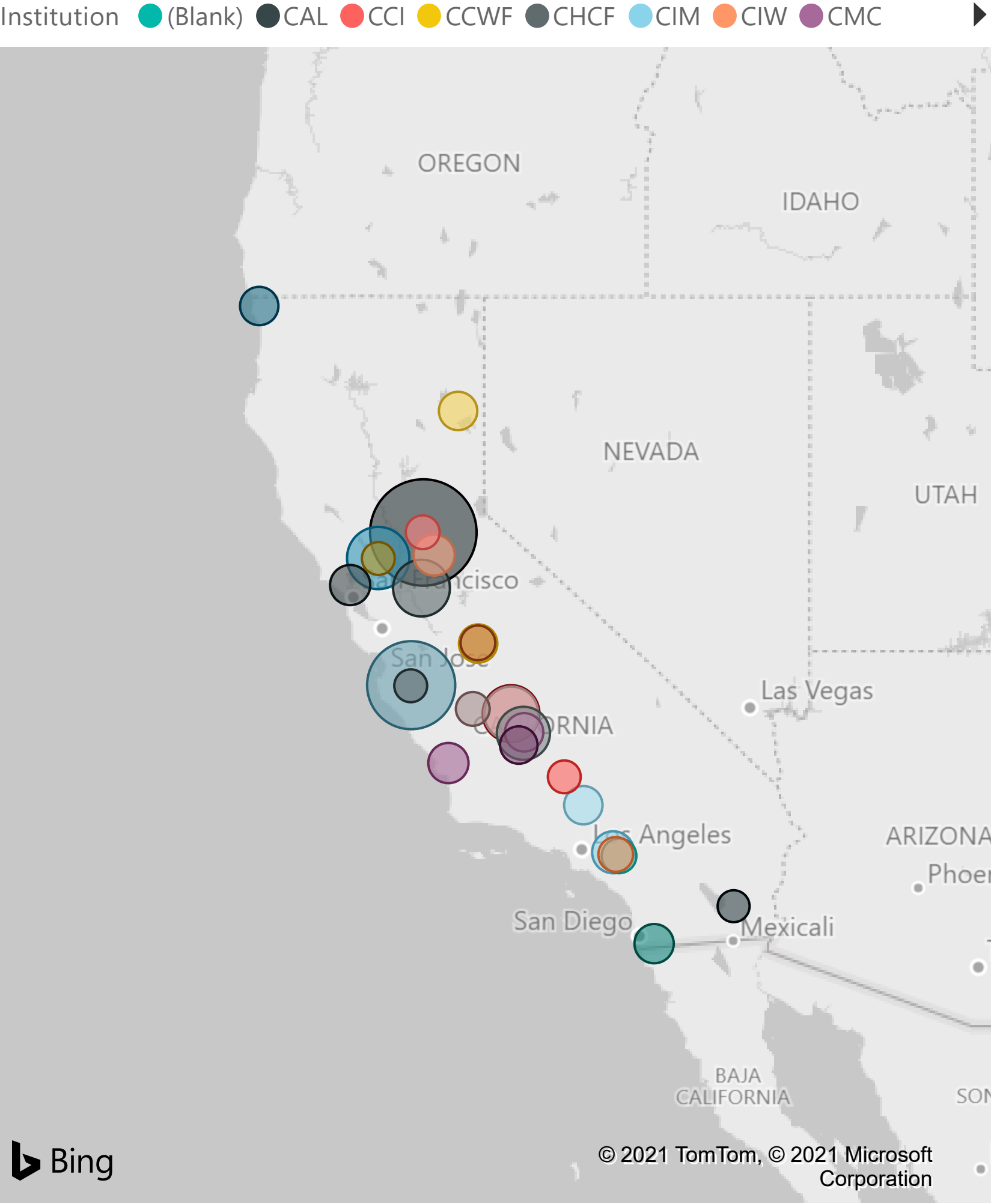
FSP	ASP	CAL	CCC	CCI	CCWF	CEN	CHCF	CIM	CIW	CMC	CMF	COR	CRC	CTF	CVSP	DVI	CAC	HDSP	ISP	KVSP	LAC	MCSP	NKSP	PBSP	PVSP	RJD	SAC	SATF	SCC	SOL	SQ	SVSP	VSP	WSP
-----	-----	-----	-----	-----	------	-----	------	-----	-----	-----	-----	-----	-----	-----	------	-----	-----	------	-----	------	-----	------	------	------	------	-----	-----	------	-----	-----	----	------	-----	-----



COVID-19 MH Operational Impact Dashboard - ELOC & EOP

Note: data are not reported in conjunction with census

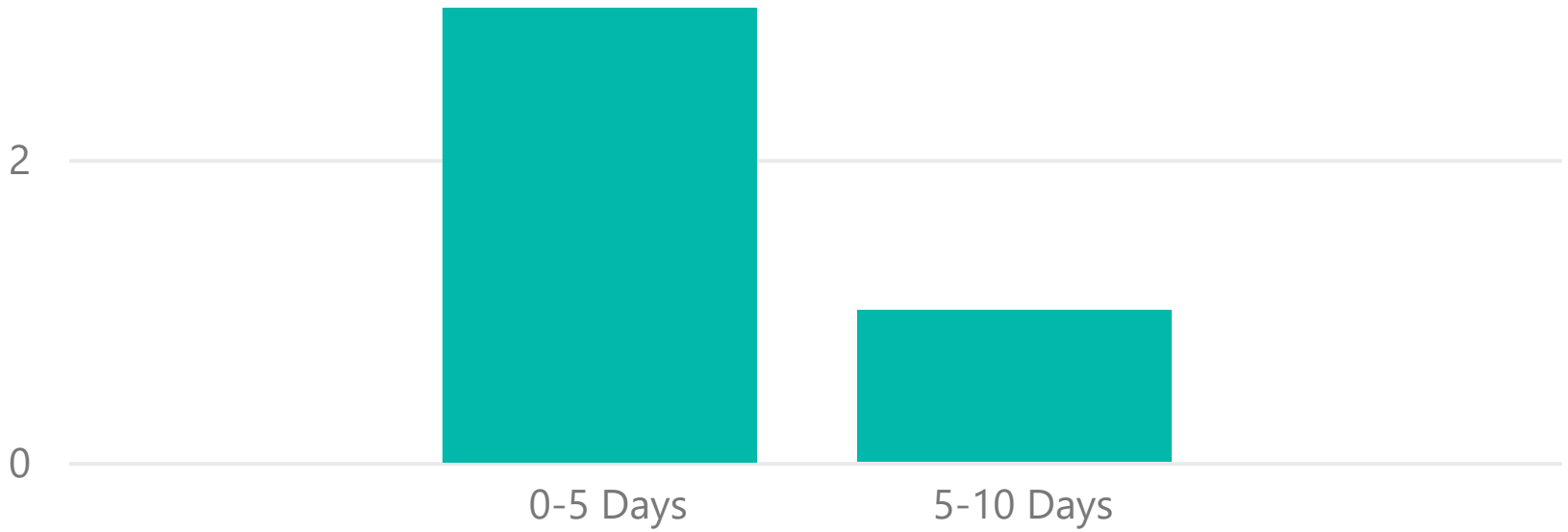
ELOC Location



EOP Patients Not in EOP Bed

262

MHCB Patients LOS in Outpatient



Inpatient Referrals in EOC



Inpatient in EOP Housing



Patients Awaiting EOP Bed

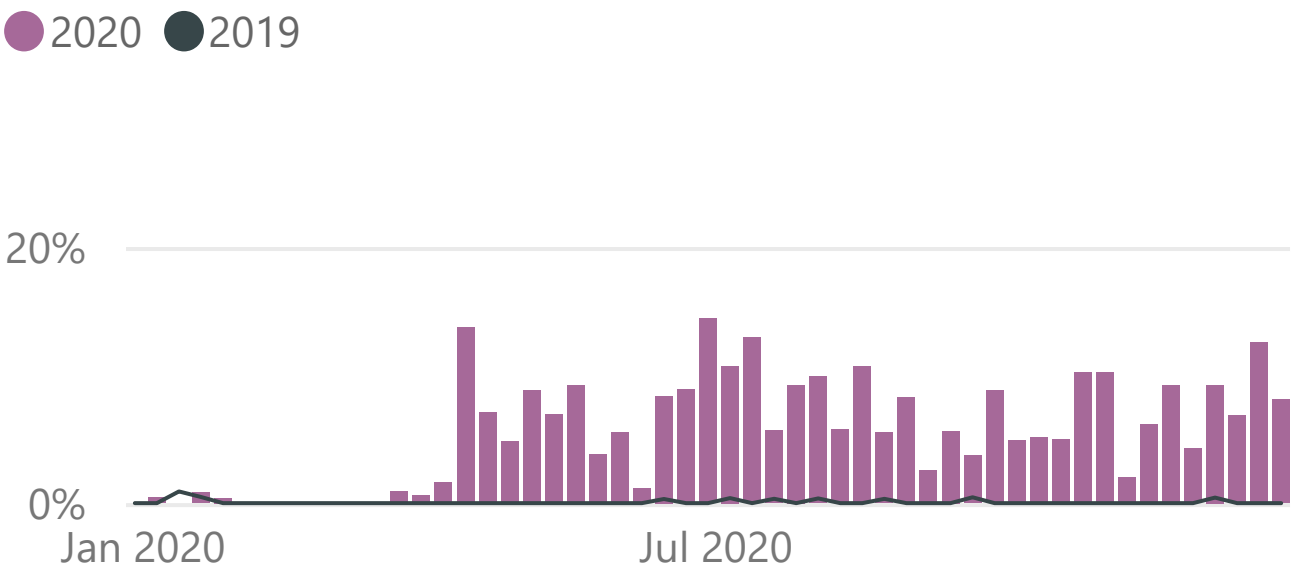
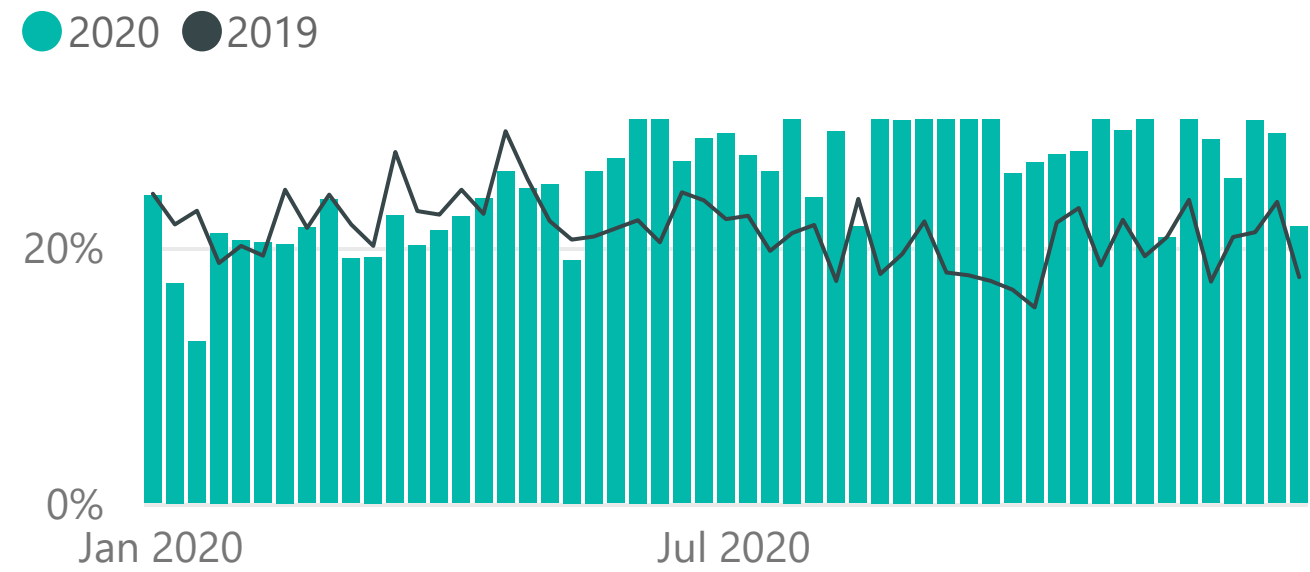




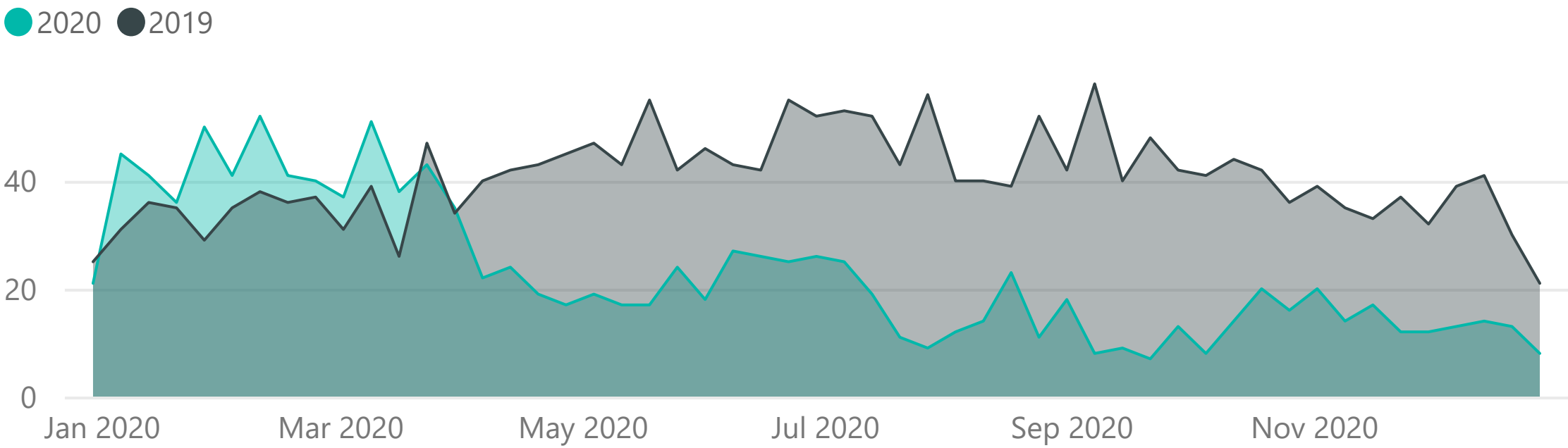
MHCB Percent Rescinded

< 1 Day

≥ 3 Days

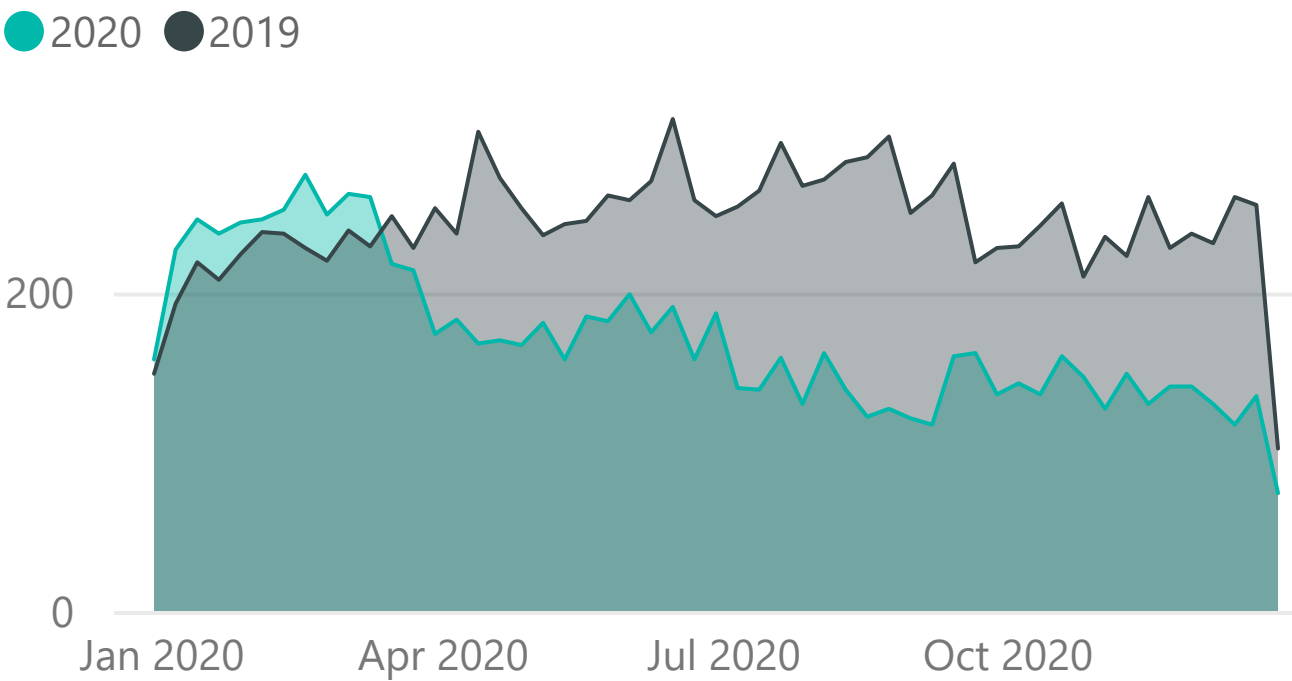
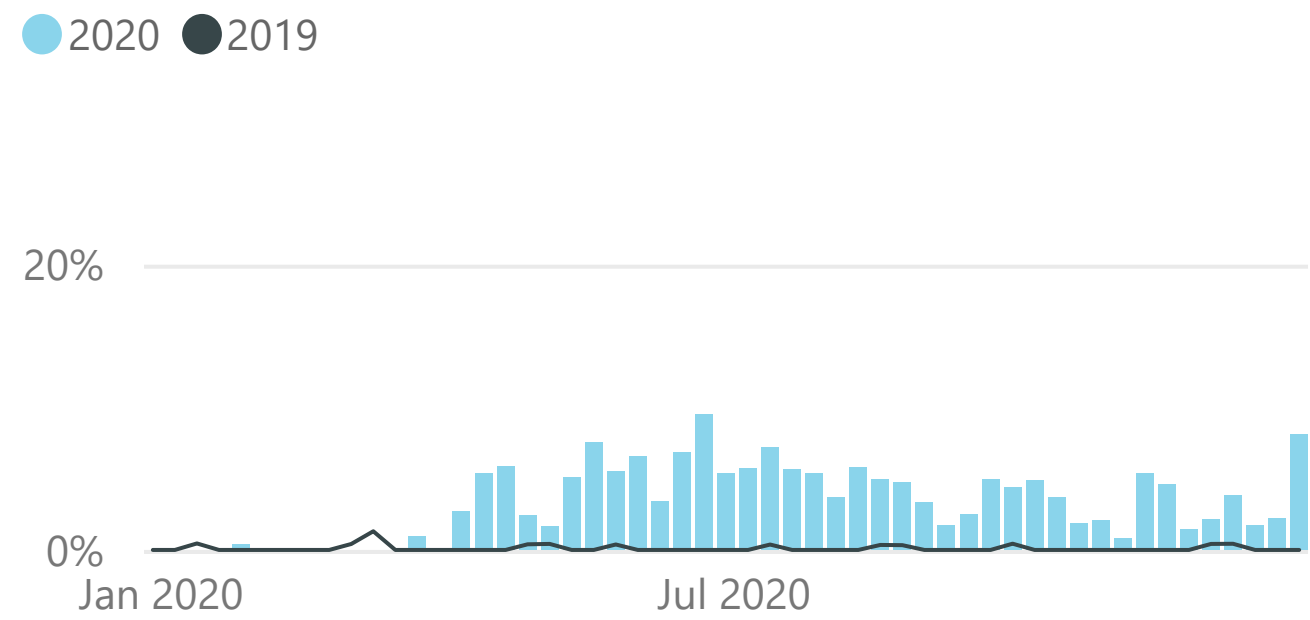


ACUTE Referrals

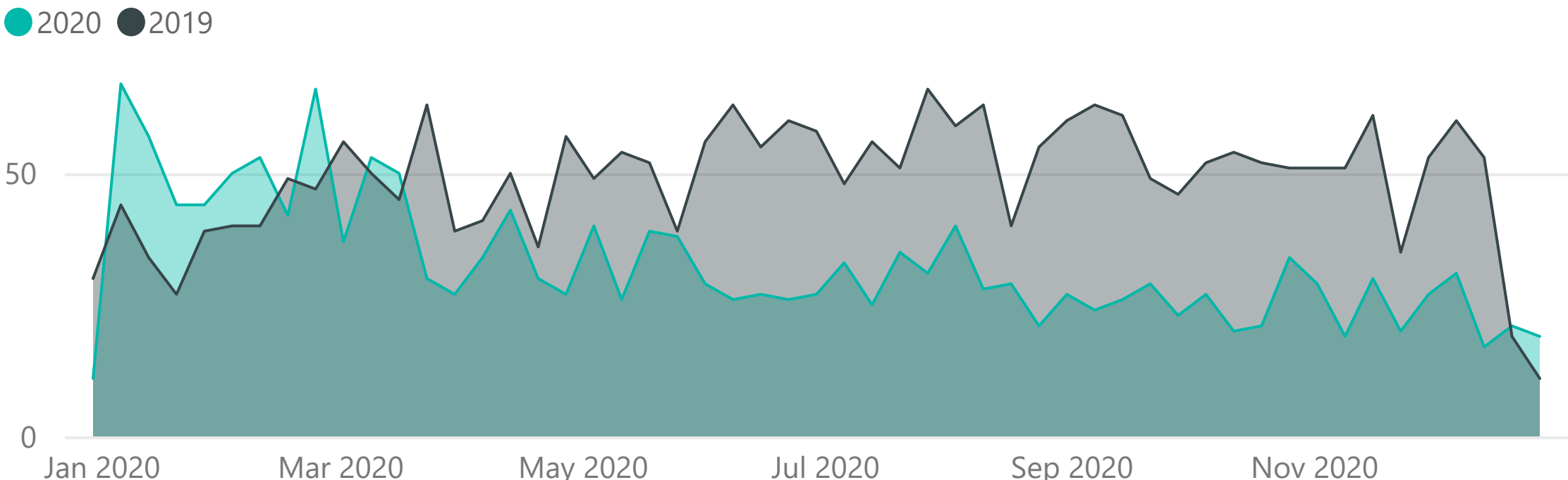


MHCB Referrals

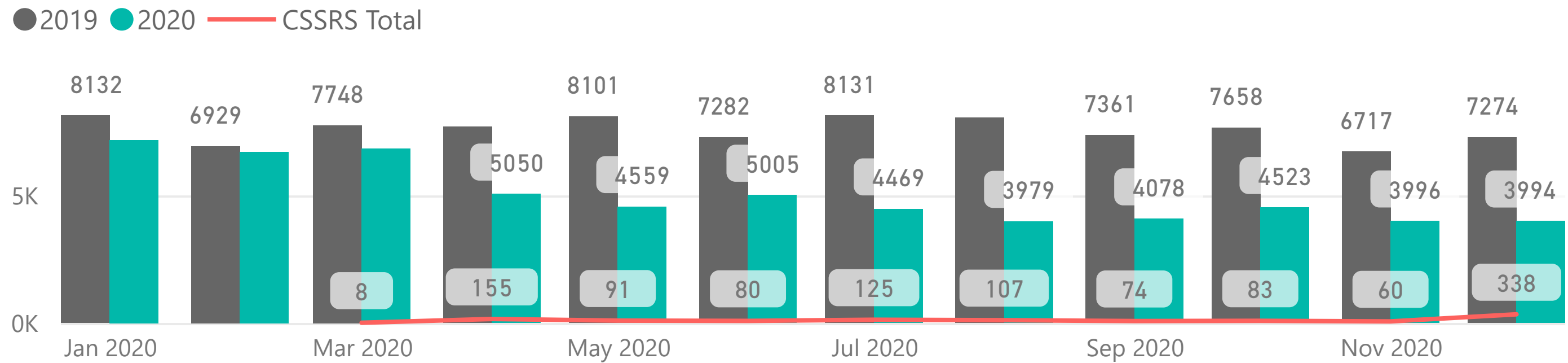
≥ 1 and < 3 Days



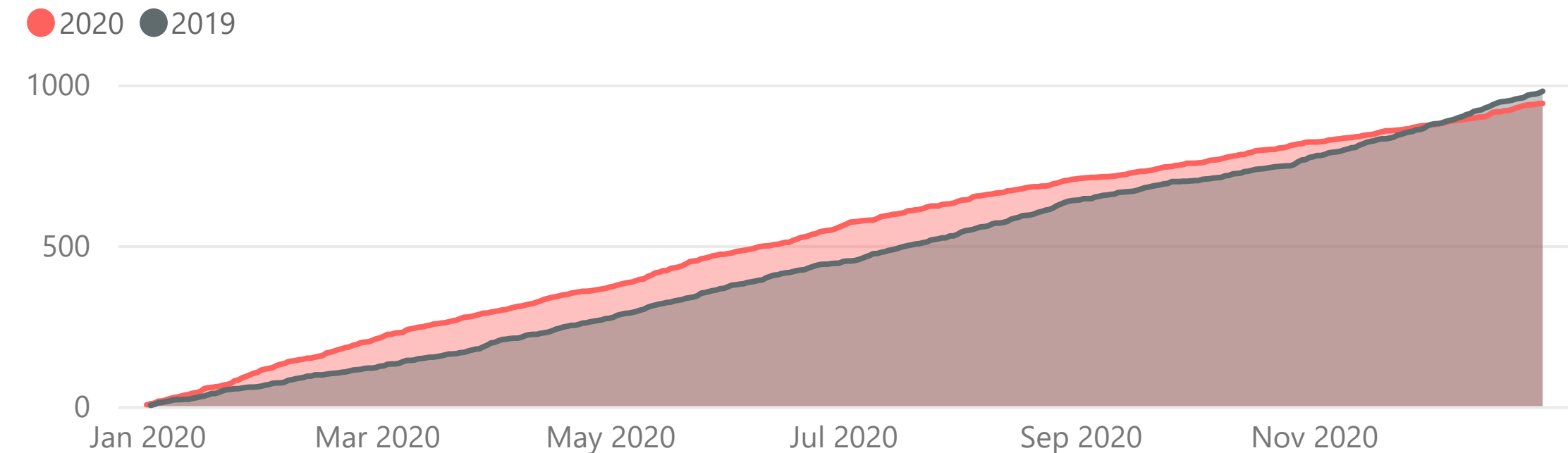
ICF Referrals



SRASHE & CSSRS Screener



YTD SIB with Intent



# **EXHIBIT 4**

# **Roadmap Phase Report**

## **June 21, 2021**



INSTITUTION ROADMAP TO REOPENING

Case 2:90-cv-00520-KJM-DE Document 723 Filed 07/15/21 Page 11 of 25



Region

All

Institution

All

SUMMARY

Phase (By Facility)



3

Outbreak (Phase 1)

26

Modified (Phase 2)

207

New Normal (Phase 3)

Patients and Staff



38

New Patient Cases Last 14 Days

33

New Staff Cases in Last 14 Days

57

Patients Currently Isolated

71%

Patients Fully Vaccinated (%)

49%

Staff Fully Vaccinated (%)

POPULATION BY FACILITY

FACILITY PHASE			FACILITY PATIENTS				
Facility	Phase	Last Phase Update Time	New Patient Cases In Last 14 Days	New Patient Cases In Last 42 Days	Patients Currently Isolated	Patients Fully Vaccinated (%)	Susceptible and Not Vaccinated Tested In Last 7 Days (%)
MCSP-Facility C	Phase 1	6/14 9:38AM	11	23	12	88%	79%
CHCF-Facility B	Phase 1	6/21 6:17AM	1	6	1	64%	60%
SOL-Facility A	Phase 1	6/21 7:45AM	2	82	3	50%	99%
CIM-Facility A	Phase 2	5/05 3:21PM	1	1	0	89%	43%
CIM-Facility C	Phase 2	5/05 3:21PM	0	0	1	87%	42%
VSP-Facility A	Phase 2	5/21 8:38AM	0	0	0	80%	14%
VSP-Facility B	Phase 2	5/21 8:38AM	0	0	0	84%	8%
VSP-Facility C	Phase 2	5/21 8:38AM	0	0	0	87%	6%
VSP-Facility D	Phase 2	5/21 8:38AM	0	0	0	89%	6%
VSP-Central Service	Phase 2	5/21 8:39AM	0	0	0	100%	N/A
MCSP-Facility A	Phase 2	6/14 9:38AM	0	1	4	78%	59%
MCSP-Facility B	Phase 2	6/14 9:38AM	0	0	0	81%	59%
MCSP-MSF	Phase 2	6/14 9:38AM	0	0	0	75%	100%
MCSP-Central Service	Phase 2	6/14 9:38AM	0	0	0	75%	50%

Case 2:90-cv-00520-KJM-DB Document 7237 Filed 07/15/21 Page 212 of 254

# ROADMAP TO REOPENING - DEFINITIONS



▲Data Element	Definition
Facility	The institution and facility currently housing patients per SOMS. Facilities not currently housing patients are excluded from this report.
Phase	The most recent facility's phase documented in the Corrections Services Institution Phase Reporting site.
Last Phase Update Time	The date and time the facility's phase was last updated in the Corrections Services sharepoint.
New Patient Cases In Last 14/42 Days	The unique number of patients who have had their first positive result for COVID-19 within the electronic health record system or directly reported to the CCHCS Public Health case surveillance system on the partial day the report was run and the previous 14 calendar days. Patients WILL continue to be counted in this New Cases In Last 14 or 42 Days count after transfer, release, or death if that event occurred within the previous 14 or 42 calendar days. Testing information for CDCR patients not occurring at one of the 35 adult institutions (e.g., patients having received tests when in jails, at community hospitals, in Department of State Hospital beds, at Community Correctional Facilities, under community supervision, when out to court, or after release) are not included in this count unless directly reported to the CCHCS Public Health case surveillance system. The facility is assigned based on the facility at which the patient resided or was endorsed on the day their first positive test for COVID-19 was collected or if directly reported, the reporting institution in the CCHCS Public Health case surveillance system. Positive test results that are determined to be false positive results in the CCHCS Public Health case surveillance system are not included as positive results.
Patients Currently Isolated	The current number of patients within the facility who have an active order for COVID-19 Isolation Surveillance Rounding.
Patients Fully Vaccinated (%)	The number of incarcerated people endorsed to that facility who have received both the first and second dose of either Pfizer-BNT or Moderna COVID-19 vaccine or one dose of the Johnson & Johnson/Janssen COVID-19 vaccine divided by the total incarcerated person population endorsed to that facility. Patients who have received their final dose within the last 14 days ARE included in this count. Patients who are out to court or not physically at a facility are not included in this percentage.
Susceptible and Not Vaccinated Tested In Last 7 Days (%)	Of the unique count of patients at each facility, who are either not newly infected with COVID-19 in the last 90 days (susceptible) and not at least 14 days after the final dose of a completed COVID-19 vaccination series or shot (not vaccinated) who have either documented results for a COVID-19 test or a lab result in the collected or in transit status on the partial day the report was run and the previous 7 calendar days. Testing information for CDCR patients not occurring at one of the 35 adult institutions (e.g., patients having received tests when in jails, at community hospitals, in Department of State Hospital beds, at Community Correctional Facilities, under community supervision, when out to court, or after release) are not included in this count unless directly reported to the CCHCS Public Health case surveillance system. N/A will display if there are no susceptible and not vaccinated patients currently housed in that facility.
New Staff Cases In Last 14 Days	The unique number of staff who have had their first positive result for COVID-19 within the BIS database or documented in the Employee Health Program Contact Investigation sharepoint on the partial day the report was run and the previous 14 or 42 calendar days. Staff testing information not recorded within BIS or the Employee Health Program sharepoint is not included in this count. Note that this count is for the entire institution, and not facility specific, as staff frequently move between facilities.
Staff Fully Vaccinated (%)	The number of staff at their current location who have received both the first and second dose of either Pfizer-BNT or Moderna COVID-19 vaccine or one dose of the Johnson & Johnson/Janssen COVID-19 vaccine divided by the count of all staff at the institution. Staff who have received their final dose within the last 14 days ARE included in this count. Reported vaccination rates for staff may under-represent actual vaccination rates, as CDCR/CCHCS personnel may receive COVID vaccinations from community healthcare providers and are not required to report vaccination status, at this time.

Data Refresh Frequency: The facility phase information that is reported in the Corrections Services Institution Phase Reporting site will update by 7 am and 12 pm daily. The other data points will update



Case 2:19-cv-00520-KJM-DB Document 7237 Filed 07/15/21 Page 212 of 254

# ROADMAP TO REOPENING - VERSION HISTORY



Version History

Date	Change
5/4/2021	Report Released
5/13/2021	Institution staff case and vaccine information added to summary data points on bottom left of report. The susceptible patients tested column was changed to susceptible and not fully vaccinated patients tested to reflect May testing guidance.

No filters applied

Facility	Phase	Last Phase Update Time	New Patient Cases		Patients Currently Isolated	Patients Fully Vaccinated (%)	Susceptible and Not Vaccinated Tested In Last 7 Days (%)
			In Last 14 Days	Last 42 Days			
MCSP-Facility C	Phase 1	6/14 9:38AM	11	23	12	88%	79%
CHCF-Facility B	Phase 1	6/21 6:17AM	1	6	1	64%	60%
SOL-Facility A	Phase 1	6/21 7:45AM	2	82	3	50%	99%
CIM-Facility A	Phase 2	5/05 3:21PM	1	1	0	89%	43%
CIM-Facility C	Phase 2	5/05 3:21PM	0	0	1	87%	42%
VSP-Facility A	Phase 2	5/21 8:38AM	0	0	0	80%	14%
VSP-Facility B	Phase 2	5/21 8:38AM	0	0	0	84%	8%
VSP-Facility C	Phase 2	5/21 8:38AM	0	0	0	87%	6%
VSP-Facility D	Phase 2	5/21 8:38AM	0	0	0	89%	6%
VSP-Central Service	Phase 2	5/21 8:39AM	0	0	0	100% N/A	
MCSP-Facility A	Phase 2	6/14 9:38AM	0	1	4	78%	59%
MCSP-Facility B	Phase 2	6/14 9:38AM	0	0	0	81%	59%
MCSP-MSF	Phase 2	6/14 9:38AM	0	0	0	75%	100%
MCSP-Central Service	Phase 2	6/14 9:38AM	0	0	0	75%	50%
MCSP-Facility D	Phase 2	6/14 9:38AM	0	0	0	93%	60%
MCSP-Facility E	Phase 2	6/14 9:38AM	0	0	0	94%	100%
NKSP-Facility B	Phase 2	6/18 8:23AM	6	6	0	43%	50%
NKSP-Facility C	Phase 2	6/18 8:23AM	0	0	0	53%	36%
NKSP-Facility D	Phase 2	6/18 8:23AM	0	2	8	54%	46%
NKSP-Central Service	Phase 2	6/18 8:23AM	0	0	0	71%	38%
WSP-Facility B	Phase 2	6/18 3:51PM	0	0	0	50%	51%
WSP-Facility C	Phase 2	6/18 3:51PM	0	0	0	58%	27%
WSP-Facility D	Phase 2	6/18 3:51PM	0	0	0	37%	44%
WSP-Facility H	Phase 2	6/18 3:51PM	0	3	0	55%	20%
WSP-Central Service	Phase 2	6/18 3:51PM	0	0	0	77%	50%
SOL-Facility B	Phase 2	6/21 7:45AM	2	11	2	46%	68%
SOL-Facility C	Phase 2	6/21 7:45AM	0	0	0	71%	56%
SOL-Facility D	Phase 2	6/21 7:45AM	0	0	0	74%	12%
SOL-Central Service	Phase 2	6/21 7:45AM	0	0	0	83%	100%
CCWF-Facility A	Phase 3	5/03 2:30PM	0	0	0	55%	44%
CCWF-Facility B	Phase 3	5/03 2:30PM	0	0	0	78%	32%
CCWF-Facility C	Phase 3	5/03 2:30PM	0	0	0	74%	28%
CCWF-Facility D	Phase 3	5/03 2:30PM	0	0	0	65%	30%
CCWF-Central Service	Phase 3	5/03 2:30PM	0	0	0	74%	38%
CIM-Facility B	Phase 3	5/05 3:21PM	0	0	0	63%	56%
CIM-Facility D	Phase 3	5/05 3:21PM	0	1	1	77%	41%
PVSP-Facility A	Phase 3	5/14 7:45AM	0	0	0	67%	28%
PVSP-Facility B	Phase 3	5/14 7:45AM	0	0	0	50%	20%
PVSP-Facility C	Phase 3	5/14 7:45AM	0	0	0	55%	27%
PVSP-Facility D	Phase 3	5/14 7:45AM	0	0	0	60%	43%
PVSP-MSF	Phase 3	5/14 7:45AM	0	0	0	51%	15%
PVSP-Central Service	Phase 3	5/14 7:45AM	0	0	0	67%	100%
PVSP-STRH	Phase 3	5/14 7:45AM	0	0	0	59%	21%
LAC-Facility A	Phase 3	6/07 7:23AM	0	0	0	73%	32%
LAC-Facility B	Phase 3	6/07 7:23AM	0	0	0	53%	18%
LAC-Facility C	Phase 3	6/07 7:23AM	0	0	0	78%	24%
LAC-Facility D	Phase 3	6/07 7:23AM	0	0	0	68%	16%
LAC-MSF	Phase 3	6/07 7:23AM	0	0	0	73%	63%
LAC-Central Service	Phase 3	6/07 7:23AM	0	0	0	82%	100%
LAC-STRH	Phase 3	6/07 7:23AM	0	0	0	57%	31%
CEN-Facility A	Phase 3	6/07 3:49PM	0	0	0	75%	22%
CEN-Facility B	Phase 3	6/07 3:49PM	0	0	0	77%	36%
CEN-Facility C	Phase 3	6/07 3:49PM	0	0	0	72%	22%
CEN-Facility D	Phase 3	6/07 3:49PM	0	0	0	89%	44%
CEN-MSF	Phase 3	6/07 3:49PM	0	0	0	78%	94%
CEN-Central Service	Phase 3	6/07 3:49PM	0	0	0	100% N/A	
CEN-AD SEG	Phase 3	6/07 3:49PM	0	0	0	66%	31%
RJD-Facility A	Phase 3	6/15 7:39AM	0	0	0	78%	18%
RJD-Facility B	Phase 3	6/15 7:39AM	0	0	0	71%	40%
RJD-Facility C	Phase 3	6/15 7:39AM	1	1	1	78%	24%
RJD-Facility D	Phase 3	6/15 7:39AM	0	0	2	77%	43%
RJD-Central Service	Phase 3	6/15 7:39AM	0	0	0	82%	40%
RJD-MSF	Phase 3	6/15 7:39AM	0	0	0	58%	60%
RJD-Facility E	Phase 3	6/15 7:39AM	0	0	0	86%	37%
ASP-Facility A	Phase 3	6/16 8:59AM	0	0	0	79%	57%
ASP-Facility B	Phase 3	6/16 8:59AM	0	0	0	90%	9%
ASP-Facility C	Phase 3	6/16 8:59AM	0	0	0	89%	6%
ASP-Facility D	Phase 3	6/16 8:59AM	0	0	0	83%	14%
ASP-Facility E	Phase 3	6/16 8:59AM	0	0	0	83%	24%

ASP-Facility F	Phase 3	6/16 8:59AM	0	0	0	82%	21%
ASP-Central Service	Phase 3	6/16 8:59AM	0	0	0	76%	80%
CVSP-Facility A	Phase 3	6/16 1:02PM	0	0	0	82%	78%
CVSP-Facility B	Phase 3	6/16 1:02PM	0	0	0	79%	66%
CVSP-Facility C	Phase 3	6/16 1:02PM	0	0	0	86%	52%
CVSP-Facility D	Phase 3	6/16 1:02PM	0	0	0	92%	60%
CVSP-MSF	Phase 3	6/16 1:02PM	0	0	0	66%	93%
CVSP-Central Service	Phase 3	6/16 1:02PM	0	0	0	100% N/A	
SAC-Facility A	Phase 3	6/16 3:58PM	0	0	0	65%	25%
SAC-Facility B	Phase 3	6/16 3:58PM	0	0	0	64%	21%
SAC-Facility C	Phase 3	6/16 3:59PM	0	0	1	64%	43%
SAC-MSF	Phase 3	6/16 3:59PM	0	0	0	51%	26%
SAC-Central Service	Phase 3	6/16 3:59PM	0	0	0	71%	14%
SAC-STRH	Phase 3	6/16 3:59PM	0	0	0	49%	8%
PBSP-Facility A	Phase 3	6/17 8:57AM	0	1	0	72%	94%
PBSP-Facility B	Phase 3	6/17 8:57AM	0	0	0	64%	84%
PBSP-Facility C	Phase 3	6/17 8:57AM	0	0	0	48%	28%
PBSP-Facility D	Phase 3	6/17 8:57AM	0	0	0	77%	83%
PBSP-MSF	Phase 3	6/17 8:57AM	0	0	0	46%	92%
PBSP-Central Service	Phase 3	6/17 8:57AM	0	0	0	67%	50%
PBSP-STRH	Phase 3	6/17 8:57AM	0	0	0	50%	44%
FSP-Facility A	Phase 3	6/18 7:23AM	1	1	0	71%	26%
FSP-MSF	Phase 3	6/18 7:23AM	0	0	0	70%	78%
FSP-Central Service	Phase 3	6/18 7:23AM	0	0	0	75%	0%
FSP-Facility B	Phase 3	6/18 7:23AM	2	2	1	52%	99%
COR-Facility 03A	Phase 3	6/18 7:37AM	0	0	0	76%	18%
COR-Facility 03B	Phase 3	6/18 7:37AM	0	0	0	85%	12%
COR-Facility 03C	Phase 3	6/18 7:37AM	0	0	0	58%	18%
COR-Facility 04A	Phase 3	6/18 7:37AM	0	0	2	58%	28%
COR-Facility 04B	Phase 3	6/18 7:37AM	0	0	1	77%	27%
COR-MSF	Phase 3	6/18 7:37AM	0	0	0	61%	28%
COR-Central Service	Phase 3	6/18 7:37AM	0	0	0	70%	29%
COR-STRH	Phase 3	6/18 7:37AM	0	0	0	58%	28%
CTF-Facility A	Phase 3	6/18 8:02AM	0	0	0	94%	17%
CTF-Facility B	Phase 3	6/18 8:02AM	1	1	0	92%	18%
CTF-Facility C	Phase 3	6/18 8:02AM	0	0	0	84%	38%
CTF-Facility D	Phase 3	6/18 8:02AM	0	0	0	86%	16%
NKSP-Facility A	Phase 3	6/18 8:23AM	0	0	0	54%	12%
NKSP-MSF	Phase 3	6/18 8:23AM	0	0	0	75%	40%
SQ-Facility A	Phase 3	6/18 8:30AM	0	0	0	81%	48%
SQ-Facility B	Phase 3	6/18 8:30AM	0	0	0	87%	100%
SQ-Central Service	Phase 3	6/18 8:30AM	0	0	0	74%	67%
CMF-Facility A	Phase 3	6/18 8:55AM	1	1	0	78%	34%
CMF-Facility B	Phase 3	6/18 8:55AM	0	0	0	90%	89%
CMF-MSF	Phase 3	6/18 8:55AM	0	0	0	69%	63%
CMF-Central Service	Phase 3	6/18 8:55AM	0	0	0	75%	25%
CMF-Facility C	Phase 3	6/18 8:55AM	0	0	0	73%	45%
CIW-Facility A	Phase 3	6/18 9:43AM	0	0	0	71%	97%
CIW-Central Service	Phase 3	6/18 9:43AM	0	0	1	85%	50%
CIW-Malibu Camp	Phase 3	6/18 9:43AM	0	0	0	74%	100%
CIW-Puerta La Cruz	Phase 3	6/18 9:43AM	0	0	0	85%	0%
CCC-Facility A	Phase 3	6/18 10:40AM	0	0	1	49%	45%
CCC-Facility B	Phase 3	6/18 10:40AM	1	1	7	63%	61%
CCC-Facility C	Phase 3	6/18 10:40AM	7	15	0	64%	66%
CCC-MSF	Phase 3	6/18 10:40AM	0	0	0	60%	47%
CCC-Central Service	Phase 3	6/18 10:40AM	0	0	0	50%	100%
CCC-Alder Camp	Phase 3	6/18 10:40AM	0	0	0	54%	0%
CCC-Antelope Camp	Phase 3	6/18 10:40AM	0	0	0	36%	12%
CCC-Ben Lomond Camp	Phase 3	6/18 10:40AM	0	0	0	39%	0%
CCC-Deadwood Camp	Phase 3	6/18 10:40AM	0	0	0	28%	8%
CCC-Delta Camp	Phase 3	6/18 10:40AM	0	0	0	64%	0%
CCC-Eel River Camp	Phase 3	6/18 10:40AM	0	0	0	48%	3%
CCC-Intermountain	Phase 3	6/18 10:40AM	0	7	0	45%	0%
CCC-Ishi Camp	Phase 3	6/18 10:41AM	0	0	0	53%	0%
CCC-Konocti Camp	Phase 3	6/18 10:41AM	0	0	0	40%	7%
CCC-Parlin Fork Camp	Phase 3	6/18 10:41AM	0	0	0	48%	13%
CCC-Salt Creek Camp	Phase 3	6/18 10:41AM	0	0	0	42%	0%
CCC-Sugar Pine Camp	Phase 3	6/18 10:41AM	0	0	0	55%	4%
CCC-Trinity Camp	Phase 3	6/18 10:41AM	0	0	0	42%	0%
CCC-Washington Ridge Camp	Phase 3	6/18 10:41AM	0	0	0	43%	0%
CRC-Facility A	Phase 3	6/18 12:51PM	0	0	0	80%	69%
CRC-Facility B	Phase 3	6/18 12:51PM	0	0	0	76%	66%
CRC-Facility C	Phase 3	6/18 12:51PM	0	0	0	74%	70%
CRC-Facility D	Phase 3	6/18 12:51PM	0	0	1	75%	63%

CRC-Central Service	Phase 3	6/18 12:51PM	0	0	0	75%	100%
WSP-Facility A	Phase 3	6/18 3:51PM	0	0	0	57%	18%
WSP-MSF	Phase 3	6/18 3:51PM	0	0	0	47%	23%
CHCF-Facility A	Phase 3	6/21 6:17AM	0	2	0	87%	68%
CHCF-Facility C	Phase 3	6/21 6:17AM	1	1	1	95%	79%
CHCF-Facility D	Phase 3	6/21 6:17AM	0	0	0	90%	85%
CHCF-Facility E	Phase 3	6/21 6:17AM	0	0	0	86%	57%
HDSP-Facility A	Phase 3	6/21 7:03AM	0	0	0	80%	28%
HDSP-Facility B	Phase 3	6/21 7:03AM	0	0	0	73%	19%
HDSP-Facility C	Phase 3	6/21 7:03AM	0	0	0	66%	8%
HDSP-Facility D	Phase 3	6/21 7:03AM	0	0	0	60%	10%
HDSP-MSF	Phase 3	6/21 7:03AM	0	0	0	74%	20%
HDSP-Central Service	Phase 3	6/21 7:03AM	0	0	0	60%	86%
HDSP-STRH	Phase 3	6/21 7:03AM	0	0	0	59%	12%
CMC-Facility A	Phase 3	6/21 7:20AM	0	0	0	71%	52%
CMC-Facility B	Phase 3	6/21 7:20AM	0	0	0	67%	50%
CMC-Facility C	Phase 3	6/21 7:20AM	0	0	0	63%	50%
CMC-Facility D	Phase 3	6/21 7:20AM	0	0	0	76%	31%
CMC-Facility E	Phase 3	6/21 7:20AM	0	0	0	73%	58%
CMC-Facility F	Phase 3	6/21 7:20AM	0	0	0	79%	35%
CMC-Facility G	Phase 3	6/21 7:20AM	0	0	0	77%	59%
CMC-MSF	Phase 3	6/21 7:20AM	0	0	0	56%	38%
CMC-Central Service	Phase 3	6/21 7:20AM	0	0	0	77%	50%
CMC-Facility H	Phase 3	6/21 7:20AM	0	0	0	64%	38%
KVSP-Facility A	Phase 3	6/21 8:25AM	0	0	0	49%	13%
KVSP-Facility B	Phase 3	6/21 8:25AM	0	0	0	51%	11%
KVSP-Facility C	Phase 3	6/21 8:25AM	0	0	0	74%	11%
KVSP-Facility D	Phase 3	6/21 8:25AM	0	0	0	72%	20%
ISP-Facility A	Phase 3	6/21 8:25AM	0	0	0	77%	14%
KVSP-MSF	Phase 3	6/21 8:25AM	0	0	0	69%	8%
ISP-Facility B	Phase 3	6/21 8:25AM	0	0	0	80%	14%
ISP-Facility C	Phase 3	6/21 8:25AM	0	0	0	59%	29%
ISP-Facility D	Phase 3	6/21 8:25AM	0	0	0	59%	22%
ISP-MSF	Phase 3	6/21 8:25AM	0	0	0	56%	9%
ISP-Central Service	Phase 3	6/21 8:26AM	0	0	0	67%	20%
KVSP-Central Service	Phase 3	6/21 8:26AM	0	0	0	67%	50%
KVSP-Facility Z01 - STRH	Phase 3	6/21 8:26AM	0	0	0	54%	29%
KVSP-Facility Z02	Phase 3	6/21 8:26AM	0	0	0	62%	11%
DVI-Facility A	Phase 3	6/21 8:35AM	0	0	0	74%	79%
DVI-Central Service	Phase 3	6/21 8:35AM	0	0	0	88%	67%
CCI-Facility A	Phase 3	6/21 8:46AM	0	0	0	65%	16%
CCI-Facility B	Phase 3	6/21 8:46AM	0	0	1	68%	18%
CCI-Facility C	Phase 3	6/21 8:46AM	0	0	0	77%	19%
CCI-Facility D	Phase 3	6/21 8:46AM	0	0	0	78%	13%
CCI-Facility E	Phase 3	6/21 8:46AM	0	0	0	66%	35%
CCI-Central Service	Phase 3	6/21 8:46AM	0	0	0	75%	0%
CAL-Facility A	Phase 3	6/21 8:51AM	0	0	0	64%	32%
CAL-Facility B	Phase 3	6/21 8:51AM	0	0	0	65%	32%
CAL-Facility C	Phase 3	6/21 8:51AM	0	0	0	64%	21%
CAL-Facility D	Phase 3	6/21 8:51AM	0	0	0	81%	19%
CAL-MSF	Phase 3	6/21 8:51AM	0	0	0	51%	22%
CAL-Central Service	Phase 3	6/21 8:51AM	0	0	0	62%	38%
CAL-AD SEG	Phase 3	6/21 8:51AM	0	0	0	71%	20%
SATF-Facility A	Phase 3	6/21 8:56AM	0	0	0	90%	21%
SATF-Facility B	Phase 3	6/21 8:56AM	0	0	0	72%	21%
SATF-Facility C	Phase 3	6/21 8:56AM	0	0	0	56%	23%
SATF-Facility D	Phase 3	6/21 8:56AM	0	0	0	70%	18%
SATF-Facility E	Phase 3	6/21 8:56AM	0	0	0	71%	25%
SATF-Facility F	Phase 3	6/21 8:56AM	0	0	0	75%	16%
SATF-Facility G	Phase 3	6/21 8:56AM	0	0	0	77%	13%
SATF-Central Service	Phase 3	6/21 8:56AM	0	0	0	73%	90%
SATF-STRH	Phase 3	6/21 8:56AM	0	0	0	59%	7%
SVSP-Facility A	Phase 3	6/21 9:49AM	0	0	1	72%	13%
SVSP-Facility B	Phase 3	6/21 9:49AM	0	0	1	46%	13%
SVSP-Facility C	Phase 3	6/21 9:49AM	0	0	0	54%	21%
SVSP-Facility D	Phase 3	6/21 9:49AM	0	0	1	67%	16%
SVSP-Facility I	Phase 3	6/21 9:49AM	0	0	0	61%	10%
SVSP-MSF	Phase 3	6/21 9:49AM	0	0	0	32%	5%
SVSP-Central Service	Phase 3	6/21 9:49AM	0	0	0	80%	60%
SVSP-STRH	Phase 3	6/21 9:49AM	0	0	1	65%	22%
SCC-Facility A	Phase 3	6/21 9:55AM	0	0	0	60%	39%
SCC-Facility B	Phase 3	6/21 9:55AM	0	0	0	73%	30%
SCC-Facility C	Phase 3	6/21 9:55AM	0	0	1	58%	39%
SCC-Central Service	Phase 3	6/21 9:56AM	0	0	0	56%	25%

SCC-Acton Camp	Phase 3	6/21 9:56AM	0	0	0	38%	0%
SCC-Bautista Camp	Phase 3	6/21 9:56AM	0	0	0	34%	0%
SCC-Fenner Camp	Phase 3	6/21 9:56AM	0	0	0	49%	10%
SCC-Francisquito Camp	Phase 3	6/21 9:56AM	0	0	0	54%	9%
SCC-Gabilan Camp	Phase 3	6/21 9:56AM	0	0	0	50%	0%
SCC-Growlersburg Camp	Phase 3	6/21 9:56AM	0	0	0	28%	2%
SCC-Holton Camp	Phase 3	6/21 9:56AM	0	0	0	59%	0%
SCC-Julius Klein Camp	Phase 3	6/21 9:56AM	0	0	0	64%	16%
SCC-La Cima Camp	Phase 3	6/21 9:56AM	0	0	0	44%	0%
SCC-Miramonte Camp	Phase 3	6/21 9:56AM	0	0	0	66%	0%
SCC-Mountain Home Camp	Phase 3	6/21 9:56AM	0	0	0	61%	0%
SCC-Mt. Bullion Camp	Phase 3	6/21 9:56AM	0	0	0	46%	3%
SCC-Oak Glen Camp	Phase 3	6/21 9:56AM	0	0	0	71%	0%
SCC-Owens Valley Camp	Phase 3	6/21 9:56AM	0	0	0	35%	0%
SCC-Prado Camp	Phase 3	6/21 9:56AM	0	0	0	41%	3%
SCC-Vallecito Camp	Phase 3	6/21 9:56AM	0	0	0	37%	3%
CAC-Facility A	Phase 3	6/21 10:23AM	0	0	0	58%	75%
CAC-Facility B	Phase 3	6/21 10:23AM	0	0	0	61%	17%
CAC-Facility C	Phase 3	6/21 10:23AM	0	0	0	66%	27%

# **Roadmap Phase Report**

## **June 28, 2021**

INSTITUTION ROADMAP TO REOPENING



Region

All

Institution

All

SUMMARY

Phase (By Facility)



3

Outbreak (Phase 1)

26

Modified (Phase 2)

205

New Normal (Phase 3)

Patients and Staff



32

New Patient Cases Last 14 Days

87

New Staff Cases in Last 14 Days

63

Patients Currently Isolated

72%

Patients Fully Vaccinated (%)

50%

Staff Fully Vaccinated (%)

POPULATION BY FACILITY

FACILITY PHASE			FACILITY PATIENTS				
Facility	Phase	Last Phase Update Time	New Patient Cases In Last 14 Days	New Patient Cases In Last 42 Days	Patients Currently Isolated	Patients Fully Vaccinated (%)	Susceptible and Not Vaccinated Tested In Last 7 Days (%)
MCSP-Facility C	Phase 1	6/24 8:40AM	3	24	6	89%	80%
CHCF-Facility B	Phase 1	6/25 8:36AM	0	5	0	64%	63%
SOL-Facility A	Phase 1	6/27 9:33AM	0	82	1	53%	99%
CIM-Facility A	Phase 2	5/05 3:21PM	0	1	0	89%	22%
CIM-Facility C	Phase 2	5/05 3:21PM	0	0	0	88%	21%
VSP-Facility A	Phase 2	5/21 8:38AM	0	0	0	79%	15%
VSP-Facility B	Phase 2	5/21 8:38AM	0	0	0	84%	7%
VSP-Facility C	Phase 2	5/21 8:38AM	0	0	0	86%	11%
VSP-Facility D	Phase 2	5/21 8:38AM	0	0	0	89%	8%
VSP-Central Service	Phase 2	5/21 8:39AM	0	0	0	100%	N/A
MCSP-Facility A	Phase 2	6/24 8:40AM	0	1	6	76%	67%
MCSP-Facility B	Phase 2	6/24 8:40AM	0	0	0	81%	70%
MCSP-Central Service	Phase 2	6/24 8:40AM	0	0	0	75%	67%
MCSP-MSF	Phase 2	6/24 8:40AM	0	0	0	77%	100%



Case 2:90-cv-00520-KJM-DB Document 7237 Filed 07/15/21 Page 229 of 254

# ROADMAP TO REOPENING - DEFINITIONS



▲Data Element	Definition
Facility	The institution and facility currently housing patients per SOMS. Facilities not currently housing patients are excluded from this report.
Phase	The most recent facility's phase documented in the Corrections Services Institution Phase Reporting site.
Last Phase Update Time	The date and time the facility's phase was last updated in the Corrections Services sharepoint.
New Patient Cases In Last 14/42 Days	The unique number of patients who have had their first positive result for COVID-19 within the electronic health record system or directly reported to the CCHCS Public Health case surveillance system on the partial day the report was run and the previous 14 calendar days. Patients WILL continue to be counted in this New Cases In Last 14 or 42 Days count after transfer, release, or death if that event occurred within the previous 14 or 42 calendar days. Testing information for CDCR patients not occurring at one of the 35 adult institutions (e.g., patients having received tests when in jails, at community hospitals, in Department of State Hospital beds, at Community Correctional Facilities, under community supervision, when out to court, or after release) are not included in this count unless directly reported to the CCHCS Public Health case surveillance system. The facility is assigned based on the facility at which the patient resided or was endorsed on the day their first positive test for COVID-19 was collected or if directly reported, the reporting institution in the CCHCS Public Health case surveillance system. Positive test results that are determined to be false positive results in the CCHCS Public Health case surveillance system are not included as positive results.
Patients Currently Isolated	The current number of patients within the facility who have an active order for COVID-19 Isolation Surveillance Rounding.
Patients Fully Vaccinated (%)	The number of incarcerated people endorsed to that facility who have received both the first and second dose of either Pfizer-BNT or Moderna COVID-19 vaccine or one dose of the Johnson & Johnson/Janssen COVID-19 vaccine divided by the total incarcerated person population endorsed to that facility. Patients who have received their final dose within the last 14 days ARE included in this count. Patients who are out to court or not physically at a facility are not included in this percentage.
Susceptible and Not Vaccinated Tested In Last 7 Days (%)	Of the unique count of patients at each facility, who are either not newly infected with COVID-19 in the last 90 days (susceptible) and not at least 14 days after the final dose of a completed COVID-19 vaccination series or shot (not vaccinated) who have either documented results for a COVID-19 test or a lab result in the collected or in transit status on the partial day the report was run and the previous 7 calendar days. Testing information for CDCR patients not occurring at one of the 35 adult institutions (e.g., patients having received tests when in jails, at community hospitals, in Department of State Hospital beds, at Community Correctional Facilities, under community supervision, when out to court, or after release) are not included in this count unless directly reported to the CCHCS Public Health case surveillance system. N/A will display if there are no susceptible and not vaccinated patients currently housed in that facility.
New Staff Cases In Last 14 Days	The unique number of staff who have had their first positive result for COVID-19 within the BIS database or documented in the Employee Health Program Contact Investigation sharepoint on the partial day the report was run and the previous 14 or 42 calendar days. Staff testing information not recorded within BIS or the Employee Health Program sharepoint is not included in this count. Note that this count is for the entire institution, and not facility specific, as staff frequently move between facilities.
Staff Fully Vaccinated (%)	The number of staff at their current location who have received both the first and second dose of either Pfizer-BNT or Moderna COVID-19 vaccine or one dose of the Johnson & Johnson/Janssen COVID-19 vaccine divided by the count of all staff at the institution. Staff who have received their final dose within the last 14 days ARE included in this count. Reported vaccination rates for staff may under-represent actual vaccination rates, as CDCR/CCHCS personnel may receive COVID vaccinations from community healthcare providers and are not required to report vaccination status, at this time.

Data Refresh Frequency The facility phase information that is reported in the Corrections Services Institution Phase Reporting site will update by 7 am and 12 pm daily. The other data points will update



Case 2:19-cv-00520-KJM-DB Document 7237 Filed 07/15/21 Page 221 of 254

# ROADMAP TO REOPENING - VERSION HISTORY



## Version History

Date	Change
5/4/2021	Report Released
5/13/2021	Institution staff case and vaccine information added to summary data points on bottom left of report. The susceptible patients tested column was changed to susceptible and not fully vaccinated patients tested to reflect May testing guidance.

No filters applied

Facility	Phase	Last Phase Update Time	New Patient Cases In Last 14 Days	New Patient Cases In Last 42 Days	Patients Currently Isolated	Patients Fully Vaccinated (%)	Susceptible and Not Vaccinated Tested In Last 7 Days (%)
MCSP-Facility C	Phase 1	6/24 8:40AM	3	24	6	89%	80%
CHCF-Facility B	Phase 1	6/25 8:36AM	0	5	0	64%	63%
SOL-Facility A	Phase 1	6/27 9:33AM	0	82	1	53%	99%
CIM-Facility A	Phase 2	5/05 3:21PM	0	1	0	89%	22%
CIM-Facility C	Phase 2	5/05 3:21PM	0	0	0	88%	21%
VSP-Facility A	Phase 2	5/21 8:38AM	0	0	0	79%	15%
VSP-Facility B	Phase 2	5/21 8:38AM	0	0	0	84%	7%
VSP-Facility C	Phase 2	5/21 8:38AM	0	0	0	86%	11%
VSP-Facility D	Phase 2	5/21 8:38AM	0	0	0	89%	8%
VSP-Central Service	Phase 2	5/21 8:39AM	0	0	0	100%	N/A
MCSP-Facility A	Phase 2	6/24 8:40AM	0	1	6	76%	67%
MCSP-Facility B	Phase 2	6/24 8:40AM	0	0	0	81%	70%
MCSP-Central Service	Phase 2	6/24 8:40AM	0	0	0	75%	67%
MCSP-MSF	Phase 2	6/24 8:40AM	0	0	0	77%	100%
MCSP-Facility D	Phase 2	6/24 8:40AM	1	1	0	93%	68%
MCSP-Facility E	Phase 2	6/24 8:40AM	0	0	0	94%	100%
NKSP-Facility B	Phase 2	6/25 9:51AM	7	11	0	44%	44%
NKSP-Facility C	Phase 2	6/25 9:51AM	0	0	0	56%	35%
NKSP-Facility D	Phase 2	6/25 9:51AM	0	2	10	59%	41%
NKSP-Central Service	Phase 2	6/25 9:51AM	0	0	0	53%	50%
WSP-Facility B	Phase 2	6/25 3:11PM	0	0	0	52%	51%
WSP-Facility C	Phase 2	6/25 3:11PM	0	0	0	58%	31%
WSP-Facility D	Phase 2	6/25 3:11PM	0	0	0	36%	49%
WSP-Facility H	Phase 2	6/25 3:11PM	0	0	0	54%	27%
WSP-Central Service	Phase 2	6/25 3:11PM	0	0	0	69%	40%
SOL-Facility B	Phase 2	6/27 9:33AM	0	11	1	45%	10%
SOL-Facility C	Phase 2	6/27 9:33AM	0	0	0	71%	80%
SOL-Facility D	Phase 2	6/27 9:33AM	0	0	0	75%	62%
SOL-Central Service	Phase 2	6/27 9:33AM	0	0	0	83%	100%
CCWF-Facility A	Phase 3	5/03 2:30PM	0	0	0	56%	32%
CCWF-Facility B	Phase 3	5/03 2:30PM	0	0	0	79%	39%
CCWF-Facility C	Phase 3	5/03 2:30PM	0	0	0	74%	28%
CCWF-Facility D	Phase 3	5/03 2:30PM	0	0	0	67%	39%
CCWF-Central Service	Phase 3	5/03 2:30PM	0	0	0	78%	14%
CIM-Facility B	Phase 3	5/05 3:21PM	0	0	0	62%	67%
CIM-Facility D	Phase 3	5/05 3:21PM	0	1	0	78%	52%
PVSP-Facility A	Phase 3	5/14 7:45AM	0	0	0	67%	35%
PVSP-Facility B	Phase 3	5/14 7:45AM	0	0	0	51%	19%
PVSP-Facility C	Phase 3	5/14 7:45AM	0	0	0	55%	27%
PVSP-Facility D	Phase 3	5/14 7:45AM	0	0	1	57%	55%
PVSP-MSF	Phase 3	5/14 7:45AM	0	0	0	51%	14%
PVSP-STRH	Phase 3	5/14 7:45AM	0	0	0	56%	24%
LAC-Facility A	Phase 3	6/07 7:23AM	0	0	0	74%	16%
LAC-Facility B	Phase 3	6/07 7:23AM	0	0	0	52%	12%
LAC-Facility C	Phase 3	6/07 7:23AM	0	0	0	78%	9%
LAC-Facility D	Phase 3	6/07 7:23AM	0	0	0	69%	14%
LAC-MSF	Phase 3	6/07 7:23AM	0	0	0	73%	25%
LAC-Central Service	Phase 3	6/07 7:23AM	0	0	0	83%	0%
LAC-STRH	Phase 3	6/07 7:23AM	0	0	0	56%	23%
CEN-Facility A	Phase 3	6/07 3:49PM	0	0	0	75%	54%
CEN-Facility B	Phase 3	6/07 3:49PM	0	0	0	77%	28%
CEN-Facility C	Phase 3	6/07 3:49PM	0	0	0	72%	38%
CEN-Facility D	Phase 3	6/07 3:49PM	0	0	0	89%	25%
CEN-MSF	Phase 3	6/07 3:49PM	0	0	0	78%	100%
CEN-Central Service	Phase 3	6/07 3:49PM	0	0	0	100%	N/A
CEN-AD SEG	Phase 3	6/07 3:49PM	0	0	0	66%	28%
CVSP-Facility A	Phase 3	6/16 1:02PM	0	0	0	80%	75%
CVSP-Facility B	Phase 3	6/16 1:02PM	0	0	0	79%	68%

CVSP-Facility C	Phase 3	6/16 1:02PM	0	0	0	87%	50%
CVSP-Facility D	Phase 3	6/16 1:02PM	0	0	0	92%	68%
CVSP-MSF	Phase 3	6/16 1:02PM	0	0	0	66%	92%
CVSP-Central Service	Phase 3	6/16 1:02PM	0	0	1	83%	100%
ISP-MSF	Phase 3	6/22 7:51AM	0	0	0	57%	18%
ISP-Central Service	Phase 3	6/22 7:51AM	0	0	0	67%	33%
CAL-Facility A	Phase 3	6/23 8:09AM	0	0	0	66%	28%
CAL-Facility B	Phase 3	6/23 8:09AM	0	0	0	64%	27%
CAL-Facility C	Phase 3	6/23 8:09AM	0	0	0	67%	18%
CAL-Facility D	Phase 3	6/23 8:09AM	0	0	0	81%	25%
CAL-MSF	Phase 3	6/23 8:09AM	0	0	0	53%	16%
CAL-Central Service	Phase 3	6/23 8:09AM	0	0	0	69%	60%
CAL-AD SEG	Phase 3	6/23 8:09AM	0	0	0	67%	38%
ISP-Facility A	Phase 3	6/23 9:21AM	0	0	0	77%	16%
ISP-Facility B	Phase 3	6/23 9:21AM	0	0	0	79%	14%
ISP-Facility C	Phase 3	6/23 9:21AM	0	0	2	61%	21%
ISP-Facility D	Phase 3	6/23 9:21AM	0	0	0	59%	15%
CMC-Facility A	Phase 3	6/24 7:14AM	0	0	0	71%	53%
CMC-Facility B	Phase 3	6/24 7:14AM	0	0	0	68%	52%
CMC-Facility C	Phase 3	6/24 7:14AM	0	0	0	63%	50%
CMC-Facility D	Phase 3	6/24 7:14AM	0	0	0	77%	28%
CMC-Facility E	Phase 3	6/24 7:14AM	0	0	0	75%	54%
CMC-Facility F	Phase 3	6/24 7:14AM	0	0	0	80%	38%
CMC-Facility G	Phase 3	6/24 7:14AM	0	0	0	78%	62%
CMC-MSF	Phase 3	6/24 7:14AM	0	0	0	59%	36%
CMC-Central Service	Phase 3	6/24 7:14AM	0	0	0	77%	50%
CMC-Facility H	Phase 3	6/24 7:14AM	0	0	0	65%	38%
SCC-Facility A	Phase 3	6/24 7:42AM	0	0	0	64%	24%
SCC-Facility B	Phase 3	6/24 7:42AM	0	0	0	73%	12%
SCC-Facility C	Phase 3	6/24 7:42AM	0	0	1	58%	29%
SCC-Acton Camp	Phase 3	6/24 7:42AM	0	0	0	44%	7%
SCC-Central Service	Phase 3	6/24 7:42AM	0	0	0	56%	0%
SCC-Bautista Camp	Phase 3	6/24 7:42AM	0	0	0	37%	0%
SCC-Fenner Camp	Phase 3	6/24 7:42AM	0	0	0	51%	0%
SCC-Francisquito Camp	Phase 3	6/24 7:42AM	0	0	0	57%	17%
SCC-Gabilan Camp	Phase 3	6/24 7:43AM	0	0	0	50%	0%
SCC-Growlersburg Camp	Phase 3	6/24 7:43AM	0	0	0	27%	0%
SCC-Holton Camp	Phase 3	6/24 7:43AM	0	0	0	65%	0%
SCC-Julius Klein Camp	Phase 3	6/24 7:43AM	0	0	0	64%	0%
SCC-La Cima Camp	Phase 3	6/24 7:43AM	0	0	0	42%	6%
SCC-Miramonte Camp	Phase 3	6/24 7:43AM	0	0	0	65%	0%
SCC-Mountain Home Camp	Phase 3	6/24 7:43AM	0	0	0	65%	0%
SCC-Mt. Bullion Camp	Phase 3	6/24 7:43AM	0	0	0	48%	0%
SCC-Oak Glen Camp	Phase 3	6/24 7:43AM	0	0	0	69%	0%
SCC-Owens Valley Camp	Phase 3	6/24 7:43AM	0	0	0	35%	0%
SCC-Prado Camp	Phase 3	6/24 7:43AM	0	0	0	44%	3%
SCC-Vallecito Camp	Phase 3	6/24 7:43AM	0	0	0	40%	0%
SQ-Facility A	Phase 3	6/24 9:47AM	0	0	0	82%	52%
SQ-Facility B	Phase 3	6/24 9:47AM	0	0	0	87%	100%
SQ-Central Service	Phase 3	6/24 9:47AM	0	0	0	73%	89%
HDSP-Facility A	Phase 3	6/24 10:36AM	0	0	0	79%	18%
HDSP-Facility B	Phase 3	6/24 10:36AM	0	0	0	73%	14%
HDSP-Facility C	Phase 3	6/24 10:36AM	0	0	0	67%	28%
HDSP-Facility D	Phase 3	6/24 10:37AM	0	0	0	60%	10%
HDSP-MSF	Phase 3	6/24 10:37AM	0	0	0	73%	9%
HDSP-Central Service	Phase 3	6/24 10:37AM	0	0	1	70%	75%
HDSP-STRH	Phase 3	6/24 10:37AM	0	0	0	57%	7%
FSP-Facility A	Phase 3	6/25 7:22AM	0	0	0	70%	21%
FSP-MSF	Phase 3	6/25 7:22AM	0	0	0	74%	92%
FSP-Facility B	Phase 3	6/25 7:22AM	1	1	1	52%	98%
PBSP-Facility A	Phase 3	6/25 7:27AM	0	1	0	70%	94%
PBSP-Facility B	Phase 3	6/25 7:27AM	0	0	0	64%	85%
PBSP-Facility C	Phase 3	6/25 7:27AM	0	0	1	50%	35%
PBSP-Facility D	Phase 3	6/25 7:27AM	0	0	0	80%	28%
PBSP-MSF	Phase 3	6/25 7:27AM	0	0	0	46%	92%

PBSP-Central Service	Phase 3	6/25 7:27AM	0	0	0	70%	33%
PBSP-STRH	Phase 3	6/25 7:27AM	0	0	0	46%	37%
DVI-Facility A	Phase 3	6/25 8:02AM	1	1	2	74%	98%
DVI-Central Service	Phase 3	6/25 8:02AM	0	0	0	88%	100%
CCI-Facility A	Phase 3	6/25 8:31AM	0	0	0	65%	15%
CCI-Facility B	Phase 3	6/25 8:31AM	0	0	0	67%	11%
CCI-Facility C	Phase 3	6/25 8:31AM	0	0	0	79%	27%
CCI-Facility D	Phase 3	6/25 8:31AM	0	0	0	78%	11%
CCI-Facility E	Phase 3	6/25 8:31AM	0	0	0	66%	45%
CCI-Central Service	Phase 3	6/25 8:31AM	0	0	0	75%	0%
CHCF-Facility A	Phase 3	6/25 8:36AM	2	2	1	89%	68%
CHCF-Facility C	Phase 3	6/25 8:37AM	0	1	0	95%	79%
CHCF-Facility D	Phase 3	6/25 8:37AM	0	0	0	90%	82%
CHCF-Facility E	Phase 3	6/25 8:37AM	0	0	0	86%	61%
CCC-Facility A	Phase 3	6/25 8:57AM	0	0	0	59%	49%
CCC-Facility B	Phase 3	6/25 8:58AM	2	2	12	65%	95%
CCC-Facility C	Phase 3	6/25 8:58AM	11	20	0	63%	60%
CCC-MSF	Phase 3	6/25 8:58AM	0	0	0	68%	54%
CCC-Central Service	Phase 3	6/25 8:58AM	0	0	0	83%	100%
CCC-Alder Camp	Phase 3	6/25 8:58AM	0	0	0	53%	0%
CCC-Antelope Camp	Phase 3	6/25 8:58AM	0	0	0	37%	2%
CCC-Ben Lomond Camp	Phase 3	6/25 8:58AM	0	0	0	39%	0%
CCC-Deadwood Camp	Phase 3	6/25 8:58AM	0	0	0	29%	0%
CCC-Delta Camp	Phase 3	6/25 8:58AM	0	0	0	68%	0%
CCC-Eel River Camp	Phase 3	6/25 8:58AM	0	0	0	48%	0%
CCC-Intermountain	Phase 3	6/25 8:58AM	0	7	0	44%	8%
CCC-Ishi Camp	Phase 3	6/25 8:58AM	0	0	0	52%	0%
CCC-Konocti Camp	Phase 3	6/25 8:58AM	0	0	0	41%	0%
CCC-Parlin Fork Camp	Phase 3	6/25 8:58AM	0	0	0	49%	4%
CCC-Salt Creek Camp	Phase 3	6/25 8:58AM	0	0	0	41%	0%
CCC-Sugar Pine Camp	Phase 3	6/25 8:58AM	0	0	0	54%	0%
CCC-Trinity Camp	Phase 3	6/25 8:58AM	0	0	0	41%	0%
CCC-Washington Ridge Camp	Phase 3	6/25 8:58AM	0	0	0	43%	0%
CAC-Facility A	Phase 3	6/25 9:46AM	0	0	0	53%	74%
CAC-Facility B	Phase 3	6/25 9:46AM	0	0	0	62%	10%
CAC-Facility C	Phase 3	6/25 9:47AM	0	0	0	66%	14%
NKSP-Facility A	Phase 3	6/25 9:51AM	0	0	0	54%	20%
NKSP-MSF	Phase 3	6/25 9:51AM	0	0	0	80%	24%
CMF-Facility A	Phase 3	6/25 10:19AM	1	1	0	79%	25%
CMF-Facility B	Phase 3	6/25 10:19AM	0	0	0	91%	24%
CMF-MSF	Phase 3	6/25 10:19AM	0	0	0	75%	0%
CMF-Central Service	Phase 3	6/25 10:19AM	0	0	0	67%	42%
CMF-Facility C	Phase 3	6/25 10:19AM	0	0	0	68%	46%
SATF-Facility A	Phase 3	6/25 10:35AM	0	0	0	90%	3%
SATF-Facility B	Phase 3	6/25 10:35AM	0	0	0	73%	17%
SATF-Facility C	Phase 3	6/25 10:35AM	0	0	0	55%	22%
SATF-Facility D	Phase 3	6/25 10:35AM	0	0	0	70%	12%
SATF-Facility E	Phase 3	6/25 10:35AM	0	0	0	71%	21%
SATF-Facility F	Phase 3	6/25 10:35AM	0	0	0	76%	12%
SATF-Facility G	Phase 3	6/25 10:35AM	0	0	0	79%	8%
SATF-Central Service	Phase 3	6/25 10:35AM	0	0	0	73%	89%
SATF-STRH	Phase 3	6/25 10:35AM	0	0	0	55%	22%
COR-Facility 03A	Phase 3	6/25 11:08AM	2	2	0	76%	31%
COR-Facility 03B	Phase 3	6/25 11:08AM	0	0	0	85%	42%
COR-Facility 03C	Phase 3	6/25 11:08AM	1	1	0	59%	19%
COR-Facility 04A	Phase 3	6/25 11:08AM	0	0	3	60%	28%
COR-Facility 04B	Phase 3	6/25 11:08AM	0	0	0	78%	39%
COR-MSF	Phase 3	6/25 11:08AM	0	0	0	62%	58%
COR-Central Service	Phase 3	6/25 11:08AM	0	1	0	71%	46%
COR-STRH	Phase 3	6/25 11:08AM	0	0	0	50%	33%
CIW-Facility A	Phase 3	6/25 11:16AM	0	0	1	73%	97%
CIW-Central Service	Phase 3	6/25 11:16AM	0	0	0	83%	100%
CIW-Malibu Camp	Phase 3	6/25 11:16AM	0	0	0	76%	0%
CIW-Puerta La Cruz	Phase 3	6/25 11:16AM	0	0	0	87%	0%
CTF-Facility A	Phase 3	6/25 12:03PM	0	0	0	94%	18%

CTF-Facility B	Phase 3	6/25 12:03PM	0	0	0	93%	26%
CTF-Facility C	Phase 3	6/25 12:03PM	0	0	0	85%	37%
CTF-Facility D	Phase 3	6/25 12:03PM	0	0	0	87%	33%
RJD-Facility A	Phase 3	6/25 1:34PM	0	0	0	78%	14%
RJD-Facility B	Phase 3	6/25 1:34PM	0	0	0	70%	30%
RJD-Facility C	Phase 3	6/25 1:34PM	0	0	0	79%	16%
RJD-Facility D	Phase 3	6/25 1:34PM	0	0	3	78%	31%
RJD-MSF	Phase 3	6/25 1:34PM	0	0	0	58%	40%
RJD-Central Service	Phase 3	6/25 1:34PM	0	0	0	81%	80%
RJD-Facility E	Phase 3	6/25 1:34PM	0	0	0	86%	36%
ASP-Facility A	Phase 3	6/25 1:37PM	0	0	0	81%	49%
ASP-Facility B	Phase 3	6/25 1:37PM	0	0	0	90%	9%
ASP-Facility C	Phase 3	6/25 1:37PM	0	0	0	90%	6%
ASP-Facility D	Phase 3	6/25 1:37PM	0	0	0	83%	35%
ASP-Facility E	Phase 3	6/25 1:37PM	0	0	0	83%	8%
ASP-Facility F	Phase 3	6/25 1:37PM	0	0	0	82%	19%
ASP-Central Service	Phase 3	6/25 1:37PM	0	0	0	73%	50%
CRC-Facility A	Phase 3	6/25 3:03PM	0	0	0	82%	65%
CRC-Facility B	Phase 3	6/25 3:03PM	0	0	0	78%	75%
CRC-Facility C	Phase 3	6/25 3:03PM	0	0	0	73%	59%
CRC-Facility D	Phase 3	6/25 3:03PM	0	0	0	76%	56%
CRC-Central Service	Phase 3	6/25 3:03PM	0	0	0	71%	100%
WSP-Facility A	Phase 3	6/25 3:11PM	0	0	0	57%	18%
WSP-MSF	Phase 3	6/25 3:11PM	0	0	0	47%	13%
SAC-Facility A	Phase 3	6/25 4:04PM	0	0	1	66%	12%
SAC-Facility B	Phase 3	6/25 4:04PM	0	0	0	65%	15%
SAC-Facility C	Phase 3	6/25 4:04PM	0	0	0	65%	43%
SAC-MSF	Phase 3	6/25 4:04PM	0	0	0	49%	37%
SAC-Central Service	Phase 3	6/25 4:04PM	0	0	0	70%	13%
SAC-STRH	Phase 3	6/25 4:04PM	0	0	0	51%	14%
KVSP-Facility A	Phase 3	6/25 4:06PM	0	0	0	49%	12%
KVSP-Facility B	Phase 3	6/25 4:06PM	0	0	0	51%	12%
KVSP-Facility C	Phase 3	6/25 4:06PM	0	0	0	74%	11%
KVSP-Facility D	Phase 3	6/25 4:06PM	0	0	1	73%	24%
KVSP-MSF	Phase 3	6/25 4:06PM	0	0	0	71%	8%
KVSP-Central Service	Phase 3	6/25 4:06PM	0	0	0	79%	67%
KVSP-Facility Z01 - STRH	Phase 3	6/25 4:06PM	0	0	0	55%	18%
KVSP-Facility Z02	Phase 3	6/25 4:06PM	0	0	0	66%	10%
SVSP-Facility A	Phase 3	6/27 8:12AM	0	0	1	72%	18%
SVSP-Facility B	Phase 3	6/27 8:12AM	0	0	1	46%	15%
SVSP-Facility C	Phase 3	6/27 8:12AM	0	0	1	54%	20%
SVSP-Facility D	Phase 3	6/27 8:12AM	0	0	2	68%	14%
SVSP-Facility I	Phase 3	6/27 8:12AM	0	0	1	62%	13%
SVSP-MSF	Phase 3	6/27 8:12AM	0	0	0	32%	0%
SVSP-Central Service	Phase 3	6/27 8:12AM	0	0	0	67%	67%
SVSP-STRH	Phase 3	6/27 8:12AM	0	0	1	64%	20%

# **Roadmap Phase Report**

## **July 6, 2021**

INSTITUTION ROADMAP TO REOPENING



Region

All

Institution

All

SUMMARY

Phase (By Facility)



3

Outbreak (Phase 1)

24

Modified (Phase 2)

210

New Normal (Phase 3)

Patients and Staff



25

New Patient Cases Last 14 Days

98

New Staff Cases in Last 14 Days

50

Patients Currently Isolated

72%

Patients Fully Vaccinated (%)

50%

Staff Fully Vaccinated (%)

POPULATION BY FACILITY

FACILITY PHASE			FACILITY PATIENTS				
Facility	Phase	Last Phase Update Time	New Patient Cases In Last 14 Days	New Patient Cases In Last 42 Days	Patients Currently Isolated	Patients Fully Vaccinated (%)	Susceptible and Not Vaccinated Tested In Last 7 Days (%)
MCSP-Facility C	Phase 1	6/29 11:34AM	1	24	1	89%	61%
CCC-Facility B	Phase 1	7/01 9:21AM	0	2	10	65%	5%
CHCF-Facility B	Phase 1	7/02 8:45AM	0	4	0	66%	65%
CIM-Facility A	Phase 2	5/05 3:21PM	0	1	0	89%	34%
CIM-Facility C	Phase 2	5/05 3:21PM	1	1	2	88%	45%
VSP-Facility A	Phase 2	5/21 8:38AM	1	1	0	80%	17%
VSP-Facility B	Phase 2	5/21 8:38AM	0	0	0	85%	10%
VSP-Facility C	Phase 2	5/21 8:38AM	1	1	0	86%	26%
VSP-Facility D	Phase 2	5/21 8:38AM	0	0	0	89%	8%
VSP-Central Service	Phase 2	5/21 8:39AM	0	0	3	91%	100%
MCSP-Facility A	Phase 2	6/29 11:34AM	0	1	3	77%	64%
MCSP-Facility B	Phase 2	6/29 11:34AM	0	0	0	82%	68%
MCSP-Central Service	Phase 2	6/29 11:34AM	0	0	2	87%	50%
MCSP-MSF	Phase 2	6/29 11:34AM	0	0	0	76%	88%



Case 2:90-cv-00520-KJM-DB Document 7237 Filed 07/15/21 Page 229 of 254

# ROADMAP TO REOPENING - DEFINITIONS



▲Data Element	Definition
Facility	The institution and facility currently housing patients per SOMS. Facilities not currently housing patients are excluded from this report.
Phase	The most recent facility's phase documented in the Corrections Services Institution Phase Reporting site.
Last Phase Update Time	The date and time the facility's phase was last updated in the Corrections Services sharepoint.
New Patient Cases In Last 14/42 Days	The unique number of patients who have had their first positive result for COVID-19 within the electronic health record system or directly reported to the CCHCS Public Health case surveillance system on the partial day the report was run and the previous 14 calendar days. Patients WILL continue to be counted in this New Cases In Last 14 or 42 Days count after transfer, release, or death if that event occurred within the previous 14 or 42 calendar days. Testing information for CDCR patients not occurring at one of the 35 adult institutions (e.g., patients having received tests when in jails, at community hospitals, in Department of State Hospital beds, at Community Correctional Facilities, under community supervision, when out to court, or after release) are not included in this count unless directly reported to the CCHCS Public Health case surveillance system. The facility is assigned based on the facility at which the patient resided or was endorsed on the day their first positive test for COVID-19 was collected or if directly reported, the reporting institution in the CCHCS Public Health case surveillance system. Positive test results that are determined to be false positive results in the CCHCS Public Health case surveillance system are not included as positive results.
Patients Currently Isolated	The current number of patients within the facility who have an active order for COVID-19 Isolation Surveillance Rounding.
Patients Fully Vaccinated (%)	The number of incarcerated people endorsed to that facility who have received both the first and second dose of either Pfizer-BNT or Moderna COVID-19 vaccine or one dose of the Johnson & Johnson/Janssen COVID-19 vaccine divided by the total incarcerated person population endorsed to that facility. Patients who have received their final dose within the last 14 days ARE included in this count. Patients who are out to court or not physically at a facility are not included in this percentage.
Susceptible and Not Vaccinated Tested In Last 7 Days (%)	Of the unique count of patients at each facility, who are either not newly infected with COVID-19 in the last 90 days (susceptible) and not at least 14 days after the final dose of a completed COVID-19 vaccination series or shot (not vaccinated) who have either documented results for a COVID-19 test or a lab result in the collected or in transit status on the partial day the report was run and the previous 7 calendar days. Testing information for CDCR patients not occurring at one of the 35 adult institutions (e.g., patients having received tests when in jails, at community hospitals, in Department of State Hospital beds, at Community Correctional Facilities, under community supervision, when out to court, or after release) are not included in this count unless directly reported to the CCHCS Public Health case surveillance system. N/A will display if there are no susceptible and not vaccinated patients currently housed in that facility.
New Staff Cases In Last 14 Days	The unique number of staff who have had their first positive result for COVID-19 within the BIS database or documented in the Employee Health Program Contact Investigation sharepoint on the partial day the report was run and the previous 14 or 42 calendar days. Staff testing information not recorded within BIS or the Employee Health Program sharepoint is not included in this count. Note that this count is for the entire institution, and not facility specific, as staff frequently move between facilities.
Staff Fully Vaccinated (%)	The number of staff at their current location who have received both the first and second dose of either Pfizer-BNT or Moderna COVID-19 vaccine or one dose of the Johnson & Johnson/Janssen COVID-19 vaccine divided by the count of all staff at the institution. Staff who have received their final dose within the last 14 days ARE included in this count. Reported vaccination rates for staff may under-represent actual vaccination rates, as CDCR/CCHCS personnel may receive COVID vaccinations from community healthcare providers and are not required to report vaccination status, at this time.
Data Refresh Frequency	The facility phase information that is reported in the Corrections Services Institution Phase Reporting site will update by 7 am and 12 pm daily. The other data points will update



Case 2:19-cv-00520-KJM-DB Document 7237 Filed 07/15/21 Page 229 of 254

# ROADMAP TO REOPENING - VERSION HISTORY



## Version History

Date	Change
5/4/2021	Report Released
5/13/2021	Institution staff case and vaccine information added to summary data points on bottom left of report. The susceptible patients tested column was changed to susceptible and not fully vaccinated patients tested to reflect May testing guidance.

No filters applied

Facility	Phase	Last Phase Update Time	New Patient Cases In Last 14 Days	New Patient Cases In Last 42 Days	Patients Currently Isolated	Patients Fully Vaccinated (%)	Susceptible and Not Vaccinated Tested In Last 7 Days (%)
MCSP-Facility C	Phase 1	6/29 11:34AM	1	24	1	89%	61%
CCC-Facility B	Phase 1	7/01 9:21AM	0	2	10	65%	5%
CHCF-Facility B	Phase 1	7/02 8:45AM	0	4	0	66%	65%
CIM-Facility A	Phase 2	5/05 3:21PM	0	1	0	89%	34%
CIM-Facility C	Phase 2	5/05 3:21PM	1	1	2	88%	45%
VSP-Facility A	Phase 2	5/21 8:38AM	1	1	0	80%	17%
VSP-Facility B	Phase 2	5/21 8:38AM	0	0	0	85%	10%
VSP-Facility C	Phase 2	5/21 8:38AM	1	1	0	86%	26%
VSP-Facility D	Phase 2	5/21 8:38AM	0	0	0	89%	8%
VSP-Central Service	Phase 2	5/21 8:39AM	0	0	3	91%	100%
MCSP-Facility A	Phase 2	6/29 11:34AM	0	1	3	77%	64%
MCSP-Facility B	Phase 2	6/29 11:34AM	0	0	0	82%	68%
MCSP-Central Service	Phase 2	6/29 11:34AM	0	0	2	87%	50%
MCSP-MSF	Phase 2	6/29 11:34AM	0	0	0	76%	88%
MCSP-Facility D	Phase 2	6/29 11:34AM	0	1	0	93%	66%
MCSP-Facility E	Phase 2	6/29 11:34AM	0	0	0	95%	98%
NKSP-Facility B	Phase 2	7/02 8:28AM	5	11	0	45%	41%
NKSP-Facility C	Phase 2	7/02 8:28AM	0	0	0	54%	22%
NKSP-Facility D	Phase 2	7/02 8:28AM	0	2	4	62%	29%
NKSP-Central Service	Phase 2	7/02 8:28AM	0	0	0	63%	50%
WSP-Facility B	Phase 2	7/02 4:27PM	0	0	0	57%	33%
WSP-Facility C	Phase 2	7/02 4:27PM	0	0	0	58%	17%
WSP-Facility D	Phase 2	7/02 4:27PM	0	0	0	36%	42%
WSP-Facility H	Phase 2	7/02 4:27PM	0	0	0	55%	18%
WSP-Central Service	Phase 2	7/02 4:27PM	0	0	0	63%	33%
SOL-Facility A	Phase 2	7/05 9:14AM	0	75	0	59%	7%
SOL-Central Service	Phase 2	7/05 9:14AM	1	1	0	93%	0%
CCWF-Facility A	Phase 3	5/03 2:30PM	0	0	0	58%	24%
CCWF-Facility B	Phase 3	5/03 2:30PM	0	0	0	80%	42%
CCWF-Facility C	Phase 3	5/03 2:30PM	0	0	0	76%	29%
CCWF-Facility D	Phase 3	5/03 2:30PM	0	0	0	69%	41%
CCWF-Central Service	Phase 3	5/03 2:30PM	0	0	0	85%	50%
CIM-Facility B	Phase 3	5/05 3:21PM	0	0	0	60%	37%
CIM-Facility D	Phase 3	5/05 3:21PM	0	1	0	79%	22%
PVSP-Facility A	Phase 3	5/14 7:45AM	0	0	0	69%	24%
PVSP-Facility B	Phase 3	5/14 7:45AM	0	0	0	52%	17%
PVSP-Facility C	Phase 3	5/14 7:45AM	0	0	0	56%	21%
PVSP-Facility D	Phase 3	5/14 7:45AM	0	0	0	55%	47%
PVSP-MSF	Phase 3	5/14 7:45AM	0	0	0	52%	24%
PVSP-Central Service	Phase 3	5/14 7:45AM	0	0	0	0%	100%
PVSP-STRH	Phase 3	5/14 7:45AM	0	0	0	55%	21%
LAC-Facility A	Phase 3	6/07 7:23AM	0	0	0	74%	15%
LAC-Facility B	Phase 3	6/07 7:23AM	0	0	0	53%	12%
LAC-Facility C	Phase 3	6/07 7:23AM	0	0	2	78%	12%
LAC-Facility D	Phase 3	6/07 7:23AM	0	0	0	69%	12%
LAC-MSF	Phase 3	6/07 7:23AM	0	0	0	75%	30%
LAC-Central Service	Phase 3	6/07 7:23AM	0	0	0	80%	100%
LAC-STRH	Phase 3	6/07 7:23AM	0	0	0	57%	35%
CEN-Facility A	Phase 3	6/07 3:49PM	0	0	0	75%	16%
CEN-Facility B	Phase 3	6/07 3:49PM	0	0	0	78%	24%
CEN-Facility C	Phase 3	6/07 3:49PM	0	0	0	72%	12%
CEN-Facility D	Phase 3	6/07 3:49PM	0	0	0	89%	26%
CEN-MSF	Phase 3	6/07 3:49PM	0	0	0	78%	100%
CEN-Central Service	Phase 3	6/07 3:49PM	0	0	0	100%	N/A
CEN-AD SEG	Phase 3	6/07 3:49PM	0	0	0	64%	38%
CVSP-Facility A	Phase 3	6/16 1:02PM	0	0	0	81%	47%
CVSP-Facility B	Phase 3	6/16 1:02PM	0	0	0	79%	67%
CVSP-Facility C	Phase 3	6/16 1:02PM	0	0	0	86%	54%
CVSP-Facility D	Phase 3	6/16 1:02PM	0	0	0	92%	53%
CVSP-MSF	Phase 3	6/16 1:02PM	0	0	0	70%	86%
CVSP-Central Service	Phase 3	6/16 1:02PM	0	0	0	100%	N/A
ASP-Facility A	Phase 3	6/25 1:37PM	0	0	0	77%	27%
ASP-Facility B	Phase 3	6/25 1:37PM	0	0	0	89%	8%
ASP-Facility C	Phase 3	6/25 1:37PM	0	0	0	90%	59%
ASP-Facility D	Phase 3	6/25 1:37PM	0	0	0	83%	6%
ASP-Facility E	Phase 3	6/25 1:37PM	0	0	0	82%	9%
ASP-Facility F	Phase 3	6/25 1:37PM	0	0	0	82%	4%

ASP-Central Service	Phase 3	6/25 1:37PM	0	0	0	71%	50%
SQ-Facility A	Phase 3	6/30 8:15AM	0	0	0	82%	49%
SQ-Facility B	Phase 3	6/30 8:15AM	0	0	0	87%	91%
SQ-Central Service	Phase 3	6/30 8:16AM	0	0	0	75%	0%
ISP-Facility A	Phase 3	7/01 9:04AM	0	0	0	76%	8%
ISP-Facility B	Phase 3	7/01 9:04AM	0	0	0	79%	11%
ISP-Facility C	Phase 3	7/01 9:04AM	0	0	2	57%	12%
ISP-Facility D	Phase 3	7/01 9:04AM	0	0	0	61%	16%
ISP-MSF	Phase 3	7/01 9:04AM	0	0	0	57%	3%
ISP-Central Service	Phase 3	7/01 9:04AM	0	0	0	83%	0%
CCC-Facility A	Phase 3	7/01 9:21AM	0	0	0	57%	24%
CCC-Facility C	Phase 3	7/01 9:21AM	9	24	0	65%	65%
CCC-MSF	Phase 3	7/01 9:21AM	0	0	0	63%	48%
CCC-Central Service	Phase 3	7/01 9:21AM	0	0	0	83%	0%
CCC-Alder Camp	Phase 3	7/01 9:21AM	0	0	0	50%	0%
CCC-Antelope Camp	Phase 3	7/01 9:21AM	0	0	0	35%	0%
CCC-Ben Lomond Camp	Phase 3	7/01 9:21AM	0	0	0	49%	0%
CCC-Deadwood Camp	Phase 3	7/01 9:21AM	0	0	0	29%	3%
CCC-Delta Camp	Phase 3	7/01 9:21AM	0	0	0	72%	0%
CCC-Eel River Camp	Phase 3	7/01 9:21AM	0	0	0	50%	0%
CCC-Intermountain	Phase 3	7/01 9:21AM	0	7	0	49%	0%
CCC-Ishi Camp	Phase 3	7/01 9:22AM	0	0	0	53%	0%
CCC-Konocti Camp	Phase 3	7/01 9:22AM	0	0	0	44%	0%
CCC-Parlin Fork Camp	Phase 3	7/01 9:22AM	0	0	0	48%	0%
CCC-Salt Creek Camp	Phase 3	7/01 9:22AM	0	0	0	43%	0%
CCC-Sugar Pine Camp	Phase 3	7/01 9:22AM	0	0	0	56%	0%
CCC-Trinity Camp	Phase 3	7/01 9:22AM	0	0	0	40%	0%
CCC-Washington Ridge Camp	Phase 3	7/01 9:22AM	0	0	0	48%	0%
CTF-Facility A	Phase 3	7/01 3:50PM	0	0	0	94%	21%
CTF-Facility B	Phase 3	7/01 3:50PM	0	0	0	92%	25%
CTF-Facility C	Phase 3	7/01 3:50PM	0	0	0	85%	19%
CTF-Facility D	Phase 3	7/01 3:50PM	0	0	0	86%	46%
SAC-Facility A	Phase 3	7/01 4:37PM	0	0	0	66%	16%
SAC-Facility B	Phase 3	7/01 4:37PM	0	0	0	65%	24%
SAC-Facility C	Phase 3	7/01 4:37PM	0	0	0	65%	48%
SAC-MSF	Phase 3	7/01 4:37PM	0	0	0	50%	24%
SAC-Central Service	Phase 3	7/01 4:37PM	0	0	0	62%	25%
SAC-STRH	Phase 3	7/01 4:37PM	0	0	0	51%	6%
CCI-Facility A	Phase 3	7/02 6:30AM	0	0	2	64%	10%
CCI-Facility B	Phase 3	7/02 6:30AM	2	2	2	67%	8%
CCI-Facility C	Phase 3	7/02 6:30AM	0	0	0	80%	12%
CCI-Facility D	Phase 3	7/02 6:30AM	0	0	0	78%	23%
CCI-Facility E	Phase 3	7/02 6:30AM	0	0	0	66%	10%
CCI-Central Service	Phase 3	7/02 6:30AM	0	0	0	75%	0%
KVSP-Facility A	Phase 3	7/02 7:12AM	0	0	0	49%	13%
KVSP-Facility B	Phase 3	7/02 7:12AM	0	0	0	51%	10%
KVSP-Facility C	Phase 3	7/02 7:12AM	0	0	0	73%	8%
KVSP-Facility D	Phase 3	7/02 7:12AM	0	0	2	73%	13%
KVSP-MSF	Phase 3	7/02 7:12AM	0	0	0	69%	5%
KVSP-Central Service	Phase 3	7/02 7:12AM	0	0	1	79%	67%
KVSP-Facility Z01 - STRH	Phase 3	7/02 7:12AM	0	0	0	59%	20%
KVSP-Facility Z02	Phase 3	7/02 7:12AM	0	0	0	65%	16%
SCC-Facility A	Phase 3	7/02 7:12AM	0	0	0	67%	27%
SCC-Facility B	Phase 3	7/02 7:12AM	0	0	0	73%	18%
SCC-Facility C	Phase 3	7/02 7:12AM	0	0	0	57%	32%
SCC-Central Service	Phase 3	7/02 7:12AM	0	0	0	64%	0%
SCC-Acton Camp	Phase 3	7/02 7:12AM	0	0	0	43%	0%
SCC-Bautista Camp	Phase 3	7/02 7:12AM	0	0	0	38%	0%
SCC-Fenner Camp	Phase 3	7/02 7:12AM	0	0	0	55%	0%
SCC-Francisquito Camp	Phase 3	7/02 7:12AM	0	0	0	62%	0%
SCC-Gabilan Camp	Phase 3	7/02 7:12AM	0	0	0	53%	0%
SCC-Growlersburg Camp	Phase 3	7/02 7:12AM	0	0	0	32%	0%
SCC-Holton Camp	Phase 3	7/02 7:12AM	0	0	0	69%	0%
SCC-Julius Klein Camp	Phase 3	7/02 7:12AM	0	0	0	64%	0%
SCC-La Cima Camp	Phase 3	7/02 7:12AM	0	0	0	46%	0%
SCC-Miramonte Camp	Phase 3	7/02 7:12AM	0	0	0	65%	0%
SCC-Mountain Home Camp	Phase 3	7/02 7:12AM	0	0	0	60%	4%
SCC-Mt. Bullion Camp	Phase 3	7/02 7:12AM	0	0	0	48%	0%
SCC-Oak Glen Camp	Phase 3	7/02 7:13AM	0	0	0	69%	0%
SCC-Owens Valley Camp	Phase 3	7/02 7:13AM	0	0	0	35%	0%
SCC-Prado Camp	Phase 3	7/02 7:13AM	0	0	0	44%	0%
SCC-Vallecito Camp	Phase 3	7/02 7:13AM	0	0	0	35%	2%

NKSP-Facility A	Phase 3	7/02 8:28AM	0	0	0	56%	17%
NKSP-MSF	Phase 3	7/02 8:28AM	0	0	0	80%	21%
HDSP-Facility A	Phase 3	7/02 8:30AM	0	0	0	79%	15%
HDSP-Facility B	Phase 3	7/02 8:30AM	0	0	0	73%	9%
HDSP-Facility C	Phase 3	7/02 8:30AM	0	0	0	66%	20%
HDSP-Facility D	Phase 3	7/02 8:30AM	0	0	0	60%	13%
HDSP-MSF	Phase 3	7/02 8:30AM	0	0	0	72%	9%
HDSP-Central Service	Phase 3	7/02 8:31AM	0	0	0	67%	17%
HDSP-STRH	Phase 3	7/02 8:31AM	0	0	0	61%	12%
CHCF-Facility A	Phase 3	7/02 8:45AM	0	1	1	89%	13%
CHCF-Facility C	Phase 3	7/02 8:45AM	0	1	1	95%	81%
CHCF-Facility D	Phase 3	7/02 8:45AM	1	1	1	90%	82%
CHCF-Central Services	Phase 3	7/02 8:45AM	0	0	0	100% N/A	
CHCF-Facility E	Phase 3	7/02 8:45AM	0	0	1	86%	45%
CIW-Facility A	Phase 3	7/02 9:02AM	0	0	0	73%	97%
CIW-Central Service	Phase 3	7/02 9:02AM	0	0	0	87%	100%
CIW-Malibu Camp	Phase 3	7/02 9:03AM	0	0	0	76%	0%
CIW-Puerta La Cruz	Phase 3	7/02 9:03AM	0	0	0	86%	0%
FSP-Facility A	Phase 3	7/02 9:03AM	0	0	0	70%	22%
FSP-MSF	Phase 3	7/02 9:03AM	0	0	0	73%	80%
FSP-Central Service	Phase 3	7/02 9:03AM	0	0	0	100% N/A	
FSP-Facility B	Phase 3	7/02 9:03AM	0	0	0	53%	98%
CMC-Facility A	Phase 3	7/02 9:04AM	0	0	0	71%	53%
CMC-Facility B	Phase 3	7/02 9:04AM	0	0	0	68%	51%
CMC-Facility C	Phase 3	7/02 9:04AM	0	0	0	61%	46%
CMC-Facility D	Phase 3	7/02 9:04AM	0	0	0	77%	26%
CMC-Facility E	Phase 3	7/02 9:04AM	0	0	0	75%	48%
CMC-Facility F	Phase 3	7/02 9:04AM	0	0	0	80%	36%
CMC-Facility G	Phase 3	7/02 9:04AM	0	0	0	79%	63%
CMC-MSF	Phase 3	7/02 9:04AM	0	0	0	61%	41%
CMC-Central Service	Phase 3	7/02 9:05AM	0	0	0	80%	60%
CMC-Facility H	Phase 3	7/02 9:05AM	0	0	0	71%	46%
PBSP-Facility A	Phase 3	7/02 9:33AM	0	0	1	69%	92%
PBSP-Facility B	Phase 3	7/02 9:33AM	0	0	0	65%	87%
PBSP-Facility C	Phase 3	7/02 9:33AM	0	0	0	50%	10%
PBSP-Facility D	Phase 3	7/02 9:33AM	0	0	0	81%	62%
PBSP-MSF	Phase 3	7/02 9:33AM	0	0	0	49%	92%
PBSP-Central Service	Phase 3	7/02 9:33AM	0	0	0	75%	67%
PBSP-STRH	Phase 3	7/02 9:33AM	0	0	0	51%	41%
COR-Facility 03A	Phase 3	7/02 9:39AM	0	0	0	76%	21%
COR-Facility 03B	Phase 3	7/02 9:39AM	0	0	0	84%	4%
COR-Facility 03C	Phase 3	7/02 9:39AM	0	0	0	61%	15%
COR-Facility 04A	Phase 3	7/02 9:39AM	0	0	4	60%	19%
COR-Facility 04B	Phase 3	7/02 9:39AM	0	0	0	78%	27%
COR-MSF	Phase 3	7/02 9:39AM	0	0	0	59%	22%
COR-Central Service	Phase 3	7/02 9:39AM	0	1	0	70%	20%
COR-STRH	Phase 3	7/02 9:39AM	0	0	0	51%	30%
CAC-Facility A	Phase 3	7/02 9:45AM	0	0	0	48%	68%
CAC-Facility B	Phase 3	7/02 9:45AM	0	0	0	62%	68%
CAC-Facility C	Phase 3	7/02 9:45AM	0	0	0	67%	40%
CRC-Facility A	Phase 3	7/02 10:10AM	0	0	0	79%	43%
CRC-Facility B	Phase 3	7/02 10:10AM	0	0	0	78%	54%
CRC-Facility C	Phase 3	7/02 10:10AM	0	0	0	74%	81%
CRC-Facility D	Phase 3	7/02 10:10AM	0	0	0	77%	64%
CRC-Central Service	Phase 3	7/02 10:10AM	0	0	0	71%	50%
CMF-Facility A	Phase 3	7/02 10:17AM	1	1	0	79%	37%
CMF-Facility B	Phase 3	7/02 10:17AM	0	0	0	92%	81%
CMF-MSF	Phase 3	7/02 10:17AM	0	0	0	79%	75%
CMF-Central Service	Phase 3	7/02 10:17AM	0	0	0	66%	63%
CMF-Facility C	Phase 3	7/02 10:17AM	0	0	0	69%	38%
CAL-Facility A	Phase 3	7/02 10:28AM	1	1	0	67%	28%
CAL-Facility B	Phase 3	7/02 10:28AM	0	0	0	67%	19%
CAL-Facility C	Phase 3	7/02 10:29AM	0	0	0	67%	12%
CAL-Facility D	Phase 3	7/02 10:29AM	0	0	0	82%	15%
CAL-MSF	Phase 3	7/02 10:29AM	0	0	0	53%	5%
CAL-Central Service	Phase 3	7/02 10:29AM	0	0	0	77%	60%
CAL-AD SEG	Phase 3	7/02 10:29AM	0	0	0	58%	48%
RJD-Facility A	Phase 3	7/02 12:59PM	0	0	0	78%	25%
RJD-Facility B	Phase 3	7/02 12:59PM	0	0	0	72%	33%
RJD-Facility C	Phase 3	7/02 12:59PM	0	0	0	79%	21%
RJD-Facility D	Phase 3	7/02 12:59PM	0	0	0	78%	28%
RJD-Central Service	Phase 3	7/02 12:59PM	0	0	0	72%	25%

RJD-Facility E	Phase 3	7/02 12:59PM	0	0	0	87%	35%
RJD-MSF	Phase 3	7/02 12:59PM	0	0	0	59%	27%
DVI-Facility A	Phase 3	7/02 2:10PM	0	0	0	77%	84%
DVI-Central Service	Phase 3	7/02 2:10PM	0	0	0	86%	100%
SATF-Facility A	Phase 3	7/02 2:29PM	0	0	0	90%	20%
SATF-Facility B	Phase 3	7/02 2:29PM	0	0	0	73%	18%
SATF-Facility C	Phase 3	7/02 2:29PM	0	0	0	55%	17%
SATF-Facility D	Phase 3	7/02 2:29PM	0	0	0	70%	14%
SATF-Facility E	Phase 3	7/02 2:29PM	1	1	1	73%	22%
SATF-Facility F	Phase 3	7/02 2:29PM	0	0	0	75%	15%
SATF-Facility G	Phase 3	7/02 2:29PM	0	0	0	80%	12%
SATF-Central Service	Phase 3	7/02 2:30PM	0	0	0	75%	86%
SATF-STRH	Phase 3	7/02 2:30PM	0	0	0	59%	17%
WSP-Facility A	Phase 3	7/02 4:27PM	0	0	0	57%	20%
WSP-MSF	Phase 3	7/02 4:27PM	0	0	0	45%	16%
SVSP-Facility A	Phase 3	7/03 6:28AM	0	0	0	73%	10%
SVSP-Facility B	Phase 3	7/03 6:28AM	0	0	0	45%	13%
SVSP-Facility C	Phase 3	7/03 6:28AM	0	0	1	53%	17%
SVSP-Facility D	Phase 3	7/03 6:28AM	0	0	1	68%	8%
SVSP-Facility I	Phase 3	7/03 6:28AM	0	0	0	62%	7%
SVSP-MSF	Phase 3	7/03 6:28AM	0	0	0	36%	0%
SVSP-Central Service	Phase 3	7/03 6:28AM	0	0	0	84%	25%
SVSP-STRH	Phase 3	7/03 6:28AM	0	0	0	63%	12%
SOL-Facility B	Phase 3	7/05 9:14AM	0	11	2	51%	19%
SOL-Facility C	Phase 3	7/05 9:14AM	0	0	0	74%	14%
SOL-Facility D	Phase 3	7/05 9:14AM	0	0	0	78%	14%

# **Roadmap Phase Report**

## **July 12, 2021**

INSTITUTION ROADMAP TO REOPENING

Case 2:90-cv-00520-KJM-DE Document 723-1 Filed 07/15/21 Page 133 of 251



Region

All

▼

Institution

All

▼

SUMMARY

Phase (By Facility)



0

Outbreak (Phase 1)

27

Modified (Phase 2)

207

New Normal (Phase 3)

Patients and Staff



21

New Patient Cases Last 14 Days

137

New Staff Cases in Last 14 Days

48

Patients Currently Isolated

72%

Patients Fully Vaccinated (%)

50%

Staff Fully Vaccinated (%)

POPULATION BY FACILITY

FACILITY PHASE			FACILITY PATIENTS				
Facility	Phase	Last Phase Update Time	New Patient Cases In Last 14 Days	New Patient Cases In Last 42 Days	Patients Currently Isolated	Patients Fully Vaccinated (%)	Susceptible and Not Vaccinated Tested In Last 7 Days (%)
CIM-Facility A	Phase 2	5/05 3:21PM	0	1	0	90%	19%
CIM-Facility C	Phase 2	5/05 3:21PM	1	1	1	88%	40%
VSP-Facility A	Phase 2	5/21 8:38AM	0	0	0	80%	29%
VSP-Facility B	Phase 2	5/21 8:38AM	0	0	0	85%	48%
VSP-Facility C	Phase 2	5/21 8:38AM	0	0	0	86%	4%
VSP-Facility D	Phase 2	5/21 8:38AM	0	0	0	89%	27%
VSP-Central Service	Phase 2	5/21 8:39AM	0	0	1	96%	100%
MCSP-Facility A	Phase 2	7/06 8:44AM	1	1	0	78%	78%
MCSP-Facility B	Phase 2	7/06 8:44AM	0	0	0	82%	67%
MCSP-Facility C	Phase 2	7/06 8:44AM	0	21	0	88%	67%
MCSP-MSF	Phase 2	7/06 8:44AM	0	0	0	75%	93%
MCSP-Central Service	Phase 2	7/06 8:44AM	0	0	1	92%	N/A
MCSP-Facility D	Phase 2	7/06 8:44AM	0	1	0	93%	66%
MCSP-Facility E	Phase 2	7/06 8:44AM	0	0	0	94%	96%

For questions, email: [QMStaff@cdcr.ca.gov](mailto:QMStaff@cdcr.ca.gov)

Data Last Updated: Jul 12 2021 6:16AM



Case 2:90-cv-00520-KJM-DB Document 7237 Filed 07/15/21 Page 226 of 254

# ROADMAP TO REOPENING - DEFINITIONS



▲Data Element	Definition
Facility	The institution and facility currently housing patients per SOMS. Facilities not currently housing patients are excluded from this report.
Phase	The most recent facility's phase documented in the Corrections Services Institution Phase Reporting site.
Last Phase Update Time	The date and time the facility's phase was last updated in the Corrections Services sharepoint.
New Patient Cases In Last 14/42 Days	The unique number of patients who have had their first positive result for COVID-19 within the electronic health record system or directly reported to the CCHCS Public Health case surveillance system on the partial day the report was run and the previous 14 calendar days. Patients WILL continue to be counted in this New Cases In Last 14 or 42 Days count after transfer, release, or death if that event occurred within the previous 14 or 42 calendar days. Testing information for CDCR patients not occurring at one of the 35 adult institutions (e.g., patients having received tests when in jails, at community hospitals, in Department of State Hospital beds, at Community Correctional Facilities, under community supervision, when out to court, or after release) are not included in this count unless directly reported to the CCHCS Public Health case surveillance system. The facility is assigned based on the facility at which the patient resided or was endorsed on the day their first positive test for COVID-19 was collected or if directly reported, the reporting institution in the CCHCS Public Health case surveillance system. Positive test results that are determined to be false positive results in the CCHCS Public Health case surveillance system are not included as positive results.
Patients Currently Isolated	The current number of patients within the facility who have an active order for COVID-19 Isolation Surveillance Rounding.
Patients Fully Vaccinated (%)	The number of incarcerated people endorsed to that facility who have received both the first and second dose of either Pfizer-BNT or Moderna COVID-19 vaccine or one dose of the Johnson & Johnson/Janssen COVID-19 vaccine divided by the total incarcerated person population endorsed to that facility. Patients who have received their final dose within the last 14 days ARE included in this count. Patients who are out to court or not physically at a facility are not included in this percentage.
Susceptible and Not Vaccinated Tested In Last 7 Days (%)	Of the unique count of patients at each facility, who are either not newly infected with COVID-19 in the last 90 days (susceptible) and not at least 14 days after the final dose of a completed COVID-19 vaccination series or shot (not vaccinated) who have either documented results for a COVID-19 test or a lab result in the collected or in transit status on the partial day the report was run and the previous 7 calendar days. Testing information for CDCR patients not occurring at one of the 35 adult institutions (e.g., patients having received tests when in jails, at community hospitals, in Department of State Hospital beds, at Community Correctional Facilities, under community supervision, when out to court, or after release) are not included in this count unless directly reported to the CCHCS Public Health case surveillance system. N/A will display if there are no susceptible and not vaccinated patients currently housed in that facility.
New Staff Cases In Last 14 Days	The unique number of staff who have had their first positive result for COVID-19 within the BIS database or documented in the Employee Health Program Contact Investigation sharepoint on the partial day the report was run and the previous 14 or 42 calendar days. Staff testing information not recorded within BIS or the Employee Health Program sharepoint is not included in this count. Note that this count is for the entire institution, and not facility specific, as staff frequently move between facilities.
Staff Fully Vaccinated (%)	The number of staff at their current location who have received both the first and second dose of either Pfizer-BNT or Moderna COVID-19 vaccine or one dose of the Johnson & Johnson/Janssen COVID-19 vaccine divided by the count of all staff at the institution. Staff who have received their final dose within the last 14 days ARE included in this count. Reported vaccination rates for staff may under-represent actual vaccination rates, as CDCR/CCHCS personnel may receive COVID vaccinations from community healthcare providers and are not required to report vaccination status, at this time.
Data Refresh Frequency	The facility phase information that is reported in the Corrections Services Institution Phase Reporting site will update by 7 am and 12 pm daily. The other data points will update



Case 2:19-cv-00520-KJM-DB Document 7237 Filed 07/15/21 Page 227 of 254

# ROADMAP TO REOPENING - VERSION HISTORY



Version History

Date	Change
5/4/2021	Report Released
5/13/2021	Institution staff case and vaccine information added to summary data points on bottom left of report. The susceptible patients tested column was changed to susceptible and not fully vaccinated patients tested to reflect May testing guidance.

No filters applied

Facility	Phase	Last Phase Update Time	New Patient Cases In Last 14 Days	New Patient Cases In Last 42 Days	Patients Currently Isolated	Patients Fully Vaccinated (%)	Susceptible and Not Vaccinated Tested In Last 7 Days (%)
CIM-Facility A	Phase 2	5/05 3:21PM	0	1	0	90%	19%
CIM-Facility C	Phase 2	5/05 3:21PM	1	1	1	88%	40%
VSP-Facility A	Phase 2	5/21 8:38AM	0	0	0	80%	29%
VSP-Facility B	Phase 2	5/21 8:38AM	0	0	0	85%	48%
VSP-Facility C	Phase 2	5/21 8:38AM	0	0	0	86%	4%
VSP-Facility D	Phase 2	5/21 8:38AM	0	0	0	89%	27%
VSP-Central Service	Phase 2	5/21 8:39AM	0	0	1	96%	100%
MCSP-Facility A	Phase 2	7/06 8:44AM	1	1	0	78%	78%
MCSP-Facility B	Phase 2	7/06 8:44AM	0	0	0	82%	67%
MCSP-Facility C	Phase 2	7/06 8:44AM	0	21	0	88%	67%
MCSP-MSF	Phase 2	7/06 8:44AM	0	0	0	75%	93%
MCSP-Central Service	Phase 2	7/06 8:44AM	0	0	1	92% N/A	
MCSP-Facility D	Phase 2	7/06 8:44AM	0	1	0	93%	66%
MCSP-Facility E	Phase 2	7/06 8:44AM	0	0	0	94%	96%
WSP-Facility B	Phase 2	7/07 8:27AM	1	1	1	56%	32%
WSP-Facility C	Phase 2	7/07 8:27AM	0	0	0	58%	24%
WSP-Facility D	Phase 2	7/07 8:27AM	0	0	0	40%	40%
WSP-Facility H	Phase 2	7/07 8:27AM	0	0	0	55%	17%
WSP-Central Service	Phase 2	7/07 8:27AM	0	0	0	60%	50%
CHCF-Facility B	Phase 2	7/09 6:09AM	0	4	0	66%	63%
NKSP-Facility B	Phase 2	7/09 8:41AM	0	11	0	46%	45%
NKSP-Facility C	Phase 2	7/09 8:41AM	0	0	0	54%	26%
NKSP-Facility D	Phase 2	7/09 8:41AM	1	2	1	63%	27%
NKSP-Central Service	Phase 2	7/09 8:41AM	0	0	0	79%	60%
CCC-Facility B	Phase 2	7/09 3:37PM	0	2	5	66%	99%
SOL-Facility A	Phase 2	7/11 9:14AM	0	26	0	61%	12%
SOL-Central Service	Phase 2	7/11 9:14AM	1	1	0	91%	100%
CCWF-Facility A	Phase 3	5/03 2:30PM	0	0	0	56%	30%
CCWF-Facility B	Phase 3	5/03 2:30PM	0	0	0	82%	6%
CCWF-Facility C	Phase 3	5/03 2:30PM	0	0	0	77%	9%
CCWF-Facility D	Phase 3	5/03 2:30PM	0	0	0	70%	6%
CCWF-Central Service	Phase 3	5/03 2:30PM	0	0	0	81%	17%
CIM-Facility B	Phase 3	5/05 3:21PM	0	0	0	60%	51%
CIM-Facility D	Phase 3	5/05 3:21PM	0	0	0	78%	40%
PVSP-Facility A	Phase 3	5/14 7:45AM	1	1	0	70%	28%
PVSP-Facility B	Phase 3	5/14 7:45AM	0	0	0	53%	21%
PVSP-Facility C	Phase 3	5/14 7:45AM	0	0	0	56%	28%
PVSP-Facility D	Phase 3	5/14 7:45AM	0	0	1	59%	44%
PVSP-MSF	Phase 3	5/14 7:45AM	0	0	0	49%	27%
PVSP-STRH	Phase 3	5/14 7:45AM	0	0	0	55%	31%
LAC-Facility A	Phase 3	6/07 7:23AM	0	0	0	74%	37%
LAC-Facility B	Phase 3	6/07 7:23AM	0	0	0	53%	14%
LAC-Facility C	Phase 3	6/07 7:23AM	0	0	2	77%	21%
LAC-Facility D	Phase 3	6/07 7:23AM	0	0	0	70%	17%
LAC-MSF	Phase 3	6/07 7:23AM	0	0	0	75%	20%
LAC-Central Service	Phase 3	6/07 7:23AM	0	0	0	63%	67%
LAC-STRH	Phase 3	6/07 7:23AM	0	0	0	55%	19%
CEN-Facility A	Phase 3	6/07 3:49PM	0	0	0	75%	27%
CEN-Facility B	Phase 3	6/07 3:49PM	0	0	0	78%	21%
CEN-Facility C	Phase 3	6/07 3:49PM	0	0	0	72%	17%
CEN-Facility D	Phase 3	6/07 3:49PM	0	0	1	89%	64%
CEN-MSF	Phase 3	6/07 3:49PM	0	0	0	75%	80%
CEN-Central Service	Phase 3	6/07 3:49PM	0	0	0	100% N/A	
CEN-AD SEG	Phase 3	6/07 3:49PM	0	0	0	68%	39%
CVSP-Facility A	Phase 3	6/16 1:02PM	0	0	0	80%	77%
CVSP-Facility B	Phase 3	6/16 1:02PM	0	0	0	80%	69%
CVSP-Facility C	Phase 3	6/16 1:02PM	0	0	0	87%	53%
CVSP-Facility D	Phase 3	6/16 1:02PM	0	0	0	91%	60%
CVSP-MSF	Phase 3	6/16 1:02PM	0	0	0	67%	97%
CVSP-Central Service	Phase 3	6/16 1:02PM	0	0	0	100% N/A	
ASP-Facility A	Phase 3	6/25 1:37PM	0	0	1	79%	57%
ASP-Facility B	Phase 3	6/25 1:37PM	0	0	0	90%	23%
ASP-Facility C	Phase 3	6/25 1:37PM	0	0	0	90%	6%
ASP-Facility D	Phase 3	6/25 1:37PM	0	0	0	83%	9%
ASP-Facility E	Phase 3	6/25 1:37PM	0	0	0	83%	7%
ASP-Facility F	Phase 3	6/25 1:37PM	0	0	0	82%	9%
ASP-Central Service	Phase 3	6/25 1:37PM	0	0	0	79%	83%
SQ-Facility A	Phase 3	6/30 8:15AM	0	0	0	82%	49%

SQ-Facility B	Phase 3	6/30 8:15AM	0	0	0	88%	93%
SQ-Central Service	Phase 3	6/30 8:16AM	0	0	0	77%	50%
KVSP-Facility A	Phase 3	7/02 7:12AM	0	0	0	49%	14%
KVSP-Facility B	Phase 3	7/02 7:12AM	0	0	0	51%	8%
KVSP-Facility C	Phase 3	7/02 7:12AM	0	0	0	74%	9%
KVSP-Facility D	Phase 3	7/02 7:12AM	0	0	1	72%	14%
KVSP-MSF	Phase 3	7/02 7:12AM	0	0	0	72%	7%
KVSP-Central Service	Phase 3	7/02 7:12AM	0	0	0	93%	100%
KVSP-Facility Z01 - STRH	Phase 3	7/02 7:12AM	0	0	0	59%	8%
KVSP-Facility Z02	Phase 3	7/02 7:12AM	0	0	0	65%	16%
CMC-Facility A	Phase 3	7/02 9:04AM	0	0	0	70%	43%
CMC-Facility B	Phase 3	7/02 9:04AM	0	0	0	70%	54%
CMC-Facility C	Phase 3	7/02 9:04AM	0	0	1	61%	50%
CMC-Facility D	Phase 3	7/02 9:04AM	0	0	0	76%	24%
CMC-Facility E	Phase 3	7/02 9:04AM	1	1	0	75%	56%
CMC-Facility F	Phase 3	7/02 9:04AM	0	0	0	80%	39%
CMC-Facility G	Phase 3	7/02 9:04AM	0	0	0	78%	64%
CMC-MSF	Phase 3	7/02 9:04AM	0	0	0	60%	48%
CMC-Central Service	Phase 3	7/02 9:05AM	0	0	0	81%	40%
CMC-Facility H	Phase 3	7/02 9:05AM	0	0	0	70%	38%
WSP-Facility A	Phase 3	7/07 8:27AM	0	0	0	56%	20%
WSP-MSF	Phase 3	7/07 8:27AM	0	0	0	45%	17%
HDSP-Facility A	Phase 3	7/08 7:39AM	0	0	0	81%	14%
HDSP-Facility B	Phase 3	7/08 7:39AM	0	0	0	72%	14%
HDSP-Facility C	Phase 3	7/08 7:39AM	0	0	0	66%	9%
HDSP-Facility D	Phase 3	7/08 7:39AM	0	0	0	59%	11%
HDSP-MSF	Phase 3	7/08 7:39AM	0	0	0	70%	45%
HDSP-Central Service	Phase 3	7/08 7:39AM	0	0	0	52%	80%
HDSP-STRH	Phase 3	7/08 7:39AM	0	0	0	64%	23%
RJD-Facility A	Phase 3	7/08 3:37PM	0	0	0	79%	15%
RJD-Facility B	Phase 3	7/08 3:37PM	0	0	1	72%	33%
RJD-Facility C	Phase 3	7/08 3:37PM	1	1	0	80%	13%
RJD-Facility D	Phase 3	7/08 3:37PM	0	0	1	80%	34%
RJD-MSF	Phase 3	7/08 3:37PM	0	0	0	54%	50%
RJD-Central Service	Phase 3	7/08 3:37PM	0	0	0	74%	33%
RJD-Facility E	Phase 3	7/08 3:37PM	0	0	0	87%	30%
CHCF-Facility A	Phase 3	7/09 6:09AM	0	1	0	90%	73%
CHCF-Facility C	Phase 3	7/09 6:09AM	0	1	2	95%	82%
CHCF-Facility D	Phase 3	7/09 6:09AM	1	1	1	90%	79%
CHCF-Facility E	Phase 3	7/09 6:09AM	0	0	1	86%	61%
FSP-Facility A	Phase 3	7/09 7:28AM	0	0	0	71%	23%
FSP-MSF	Phase 3	7/09 7:28AM	0	0	0	75%	100%
FSP-Facility B	Phase 3	7/09 7:28AM	0	0	0	57%	98%
PBSP-Facility A	Phase 3	7/09 7:30AM	0	0	2	68%	73%
PBSP-Facility B	Phase 3	7/09 7:30AM	0	0	0	65%	86%
PBSP-Facility C	Phase 3	7/09 7:30AM	0	0	0	50%	31%
PBSP-Facility D	Phase 3	7/09 7:30AM	1	1	0	82%	83%
PBSP-MSF	Phase 3	7/09 7:30AM	0	0	0	48%	96%
PBSP-Central Service	Phase 3	7/09 7:30AM	0	0	1	89%	100%
PBSP-STRH	Phase 3	7/09 7:30AM	0	0	0	54%	42%
DVI-Facility A	Phase 3	7/09 8:29AM	0	0	0	82%	95%
DVI-Central Service	Phase 3	7/09 8:30AM	0	0	0	86%	100%
ISP-Facility A	Phase 3	7/09 8:36AM	0	0	0	77%	16%
ISP-Facility B	Phase 3	7/09 8:36AM	0	0	0	79%	8%
ISP-Facility C	Phase 3	7/09 8:36AM	0	0	0	55%	23%
ISP-Facility D	Phase 3	7/09 8:36AM	0	0	0	62%	19%
ISP-MSF	Phase 3	7/09 8:36AM	0	0	0	57%	9%
ISP-Central Service	Phase 3	7/09 8:36AM	0	0	0	50%	100%
NKSP-Facility A	Phase 3	7/09 8:41AM	0	0	0	56%	18%
NKSP-MSF	Phase 3	7/09 8:41AM	0	0	0	78%	17%
CIW-Facility A	Phase 3	7/09 9:48AM	0	0	0	74%	98%
CIW-Central Service	Phase 3	7/09 9:48AM	0	0	3	84%	100%
CIW-Malibu Camp	Phase 3	7/09 9:48AM	0	0	0	78%	0%
CIW-Puerta La Cruz	Phase 3	7/09 9:49AM	0	0	0	86%	33%
CAC-Facility A	Phase 3	7/09 9:50AM	0	0	0	47%	74%
CAC-Facility B	Phase 3	7/09 9:50AM	0	0	0	62%	13%
CAC-Facility C	Phase 3	7/09 9:50AM	0	0	0	68%	45%
CCI-Facility A	Phase 3	7/09 9:52AM	1	1	1	66%	24%
CCI-Facility B	Phase 3	7/09 9:52AM	2	2	2	68%	45%
CCI-Facility C	Phase 3	7/09 9:52AM	0	0	0	80%	51%
CCI-Facility D	Phase 3	7/09 9:52AM	0	0	0	80%	36%
CCI-Facility E	Phase 3	7/09 9:52AM	0	0	0	67%	78%
CCI-Central Service	Phase 3	7/09 9:53AM	0	0	0	75%	0%

CTF-Facility A	Phase 3	7/09 9:54AM	0	0	0	94%	23%
CTF-Facility B	Phase 3	7/09 9:54AM	0	0	0	92%	16%
CTF-Facility C	Phase 3	7/09 9:54AM	0	0	2	85%	30%
CTF-Facility D	Phase 3	7/09 9:54AM	0	0	0	87%	16%
SAC-Facility A	Phase 3	7/09 9:58AM	0	0	0	68%	37%
SAC-Facility B	Phase 3	7/09 9:58AM	0	0	0	65%	19%
SAC-Facility C	Phase 3	7/09 9:58AM	0	0	0	66%	41%
SAC-MSF	Phase 3	7/09 9:58AM	0	0	0	51%	28%
SAC-Central Service	Phase 3	7/09 9:58AM	0	0	0	56%	27%
SAC-STRH	Phase 3	7/09 9:58AM	0	0	0	55%	8%
CAL-Facility A	Phase 3	7/09 11:23AM	0	0	0	67%	14%
CAL-Facility B	Phase 3	7/09 11:23AM	0	0	0	67%	21%
CAL-Facility C	Phase 3	7/09 11:23AM	0	0	0	67%	11%
CAL-Facility D	Phase 3	7/09 11:23AM	0	0	0	82%	19%
CAL-MSF	Phase 3	7/09 11:23AM	0	0	0	53%	15%
CAL-Central Service	Phase 3	7/09 11:23AM	0	0	0	71%	40%
CAL-AD SEG	Phase 3	7/09 11:23AM	0	0	0	65%	41%
SCC-Facility A	Phase 3	7/09 12:06PM	0	0	0	67%	20%
SCC-Facility B	Phase 3	7/09 12:06PM	0	0	0	73%	12%
SCC-Facility C	Phase 3	7/09 12:06PM	0	0	0	57%	31%
SCC-Central Service	Phase 3	7/09 12:06PM	0	0	0	56%	0%
SCC-Acton Camp	Phase 3	7/09 12:06PM	0	0	0	45%	0%
SCC-Bautista Camp	Phase 3	7/09 12:06PM	0	0	0	35%	0%
SCC-Fenner Camp	Phase 3	7/09 12:06PM	0	0	0	54%	0%
SCC-Francisquito Camp	Phase 3	7/09 12:06PM	0	0	0	67%	0%
SCC-Gabilan Camp	Phase 3	7/09 12:06PM	0	0	0	55%	0%
SCC-Growlersburg Camp	Phase 3	7/09 12:06PM	0	0	0	36%	0%
SCC-Holton Camp	Phase 3	7/09 12:06PM	0	0	0	72%	0%
SCC-Julius Klein Camp	Phase 3	7/09 12:06PM	0	0	0	64%	5%
SCC-La Cima Camp	Phase 3	7/09 12:06PM	0	0	0	46%	3%
SCC-Miramonte Camp	Phase 3	7/09 12:06PM	0	0	0	65%	0%
SCC-Mountain Home Camp	Phase 3	7/09 12:06PM	0	0	0	60%	5%
SCC-Mt. Bullion Camp	Phase 3	7/09 12:06PM	0	0	0	47%	0%
SCC-Oak Glen Camp	Phase 3	7/09 12:06PM	0	0	0	69%	0%
SCC-Owens Valley Camp	Phase 3	7/09 12:06PM	0	0	0	40%	0%
SCC-Prado Camp	Phase 3	7/09 12:07PM	0	0	0	46%	0%
SCC-Vallecito Camp	Phase 3	7/09 12:07PM	0	0	0	35%	0%
CRC-Facility A	Phase 3	7/09 1:36PM	0	0	0	80%	53%
CRC-Facility B	Phase 3	7/09 1:36PM	0	0	0	76%	60%
CRC-Facility C	Phase 3	7/09 1:36PM	1	1	0	75%	60%
CRC-Facility D	Phase 3	7/09 1:36PM	0	0	1	77%	69%
CRC-Central Service	Phase 3	7/09 1:36PM	0	0	0	80%	50%
SATF-Facility A	Phase 3	7/09 2:16PM	0	0	0	91%	17%
SATF-Facility B	Phase 3	7/09 2:16PM	0	0	0	75%	21%
SATF-Facility C	Phase 3	7/09 2:16PM	2	2	2	54%	28%
SATF-Facility D	Phase 3	7/09 2:16PM	0	0	0	71%	16%
SATF-Facility E	Phase 3	7/09 2:16PM	0	0	0	72%	23%
SATF-Facility F	Phase 3	7/09 2:16PM	0	0	0	75%	18%
SATF-Facility G	Phase 3	7/09 2:16PM	0	0	0	81%	10%
SATF-Central Service	Phase 3	7/09 2:16PM	0	0	0	81%	60%
SATF-STRH	Phase 3	7/09 2:16PM	0	0	0	56%	5%
CCC-Facility A	Phase 3	7/09 3:37PM	0	0	0	58%	47%
CCC-Facility C	Phase 3	7/09 3:37PM	4	25	0	64%	70%
CCC-MSF	Phase 3	7/09 3:37PM	0	0	0	66%	51%
CCC-Central Service	Phase 3	7/09 3:37PM	0	0	0	50%	50%
CCC-Alder Camp	Phase 3	7/09 3:37PM	0	0	0	49%	0%
CCC-Antelope Camp	Phase 3	7/09 3:37PM	0	0	0	38%	0%
CCC-Ben Lomond Camp	Phase 3	7/09 3:38PM	0	0	0	51%	0%
CCC-Deadwood Camp	Phase 3	7/09 3:38PM	0	0	0	35%	0%
CCC-Delta Camp	Phase 3	7/09 3:38PM	0	0	0	70%	0%
CCC-Eel River Camp	Phase 3	7/09 3:38PM	0	0	0	52%	0%
CCC-Intermountain	Phase 3	7/09 3:38PM	0	7	0	55%	0%
CCC-Ishi Camp	Phase 3	7/09 3:38PM	0	0	0	50%	0%
CCC-Konocti Camp	Phase 3	7/09 3:38PM	0	0	0	45%	0%
CCC-Parlin Fork Camp	Phase 3	7/09 3:38PM	0	0	0	44%	0%
CCC-Salt Creek Camp	Phase 3	7/09 3:38PM	0	0	0	43%	3%
CCC-Sugar Pine Camp	Phase 3	7/09 3:38PM	0	0	0	58%	0%
CCC-Trinity Camp	Phase 3	7/09 3:38PM	0	0	0	53%	0%
CCC-Washington Ridge Camp	Phase 3	7/09 3:38PM	0	0	0	52%	0%
CMF-Facility A	Phase 3	7/09 5:53PM	0	0	0	79%	39%
CMF-Facility B	Phase 3	7/09 5:53PM	1	1	0	92%	100%
CMF-MSF	Phase 3	7/09 5:53PM	0	0	0	79%	75%
CMF-Central Service	Phase 3	7/09 5:53PM	0	0	0	64%	46%

CMF-Facility C	Phase 3	7/09 5:54PM	0	0	0	64%	53%
COR-Facility 03A	Phase 3	7/09 6:33PM	0	0	0	78%	20%
COR-Facility 03B	Phase 3	7/09 6:33PM	0	0	0	85%	6%
COR-Facility 03C	Phase 3	7/09 6:33PM	0	0	0	63%	13%
COR-Facility 04A	Phase 3	7/09 6:33PM	0	0	6	63%	18%
COR-Facility 04B	Phase 3	7/09 6:33PM	0	0	0	77%	30%
COR-MSF	Phase 3	7/09 6:33PM	0	0	0	62%	17%
COR-Central Service	Phase 3	7/09 6:33PM	0	1	0	72%	22%
COR-STRH	Phase 3	7/09 6:33PM	0	0	0	56%	27%
SVSP-Facility A	Phase 3	7/11 8:16AM	0	0	0	72%	11%
SVSP-Facility B	Phase 3	7/11 8:16AM	0	0	1	45%	15%
SVSP-Facility C	Phase 3	7/11 8:16AM	0	0	0	54%	16%
SVSP-Facility D	Phase 3	7/11 8:16AM	0	0	0	69%	17%
SVSP-Facility I	Phase 3	7/11 8:16AM	0	0	0	60%	10%
SVSP-MSF	Phase 3	7/11 8:16AM	0	0	0	36%	0%
SVSP-Central Service	Phase 3	7/11 8:16AM	0	0	0	85%	0%
SVSP-STRH	Phase 3	7/11 8:16AM	0	0	2	61%	14%
SOL-Facility B	Phase 3	7/11 9:14AM	0	10	2	51%	25%
SOL-Facility C	Phase 3	7/11 9:14AM	0	0	0	75%	11%
SOL-Facility D	Phase 3	7/11 9:14AM	0	0	0	79%	9%

# **EXHIBIT 5**

# **SATF STRH**

## **June 2021**

UNIT: STRH			
Item	Response		Comments
<b>Thermometer</b>			
1. Is a working Thermometer present?	1	100%	
2. Is the thermometer in a location that give an accurate reading of the temperature?	Yes	NR	
3. Is there a heat log that is current? (Logged last hour)	Yes	NR	
4. Are the staff documenting the highest reading (NOT averaging them)?	Yes	NR	
5. Is there a current heat risk list available on the unit?	Yes	NR	
6. Does the DAR reflect alternative out of cell activities were offered during periods in which temperatures exceeded 90 degrees?	N/A	NR	
<i>**Complete Heat Plan audit during May-October in all housing units where MH inmate patients are housed. Check DAR for random period of 10 days when temp exceeded 90 degrees.</i>			
<b>Mental Health Referral Process</b>			
1. Are housing unit staff aware of their responsibility to complete a 128MH5 when inmates exhibit signs of mental illness?	1	100%	
2. Are 128MH5's accessible and available to staff? (revised 8/19)	Yes	NR	
<i>** Interview all staff in units. Respond once for each individual housing unit staff person interviewed. Physically check units for 128MH5, respond once for each housing unit observed.</i>			
<b>Intake Procedures</b>			
1. How many inmates are in ASU for 21 days or less on "intake" status?	32	NR	
2. How many inmates in ASU for 21 days or less have "intake" identifying markers posted on the outside of their cell doors?	32	NR	
3. How many inmates are within the first 72 hours of intake?	8	NR	
4. How many inmates housed in ASU for the first 72 hours are either double celled with an appropriate cell partner or are celled alone in a retrofitted intake cell?	8	100%	
<i>**Generate SOM5 housing roster for ASU building and cross reference with the Printout of ASU Retrofitted Intake Cells to determine current 72 hour ASU placement, (generate day of audit).</i>			
<b>Entertainment Appliances</b>			
1. How many cells were observed?	75	NR	
2. Of those, in how many were entertainment appliances permitted and/or provided? (Approved appliances are a television, tablet or radio)	75	100%	
<i>**Query staff for number of cell w/ electricity. (Bring ASU housing list electricity cell survey. Review DOM sup / LOP re: Property) Spot check for entertainment appliances in cells.</i>			
<b>Welfare Checks</b>			
1. How many Rounds Tracker Shift Summary reports reviewed were signed by the custody supervisor responsible at the end of each shift (should be 90)?	90	100%	
2. How many Rounds Tracker Shift Summary reports were reviewed (should be 90)?	90		
<i>**Respond to questions overall for all checks in each 24 hour review period. Review 24 hour periods for past 30 days using the round tracker shift summary.</i>			
<b>Treatment Module Standards</b>			
1. For groups, are the modules in a semi-circle?	1	100%	
2. Are the modules in an area where other inmates and/or staff are not able to hear or see the interaction?	1	100%	
3. Do the modules meet PIA approval standards?	1	100%	
4. Do staff report sufficient number of tx modules for providing treatment?	1	100%	
5. Are treatment modules clean?	1	100%	
<i>**PIA standards are: 42 inches wide, 72 inches tall, depth 49.5 inches. Must have a fold down desk and fold down chair.</i>			
<b>Out of Cell Time and Showers</b>			
1. Out of the past 4 weeks, how many weeks were required (not prevented by safety security etc.)?	80	NR	
2. Of those, how many weeks were 18.5 hours of yard offered within time allocated 7 days per week?	80	100%	
3. Out of the past 4 weeks, how many weeks were showers offered at least three times per week?	80	100%	
<i>**Yard time and showers audit - Exclude l/p who have not gone to ICC or not in ASU for 4 weeks. Count "R" refused times as offered.</i>			
<b>Officers with CPR Mouth Shields</b>			
1. How many peace officers were observed?	8	NR	
2. Of these, how many peace officers were observed to carry a (CPR) mouth shield on person?	8	100%	
<i>**Ask housing unit and floor staff.</i>			
<b>Cut-Down Kits/Tools</b>			
1. Does the housing unit/inmate living area have an approved cut-down kit/tool?	1	100%	
2. Is the cut-down kit/tool inventoried each shift on standardized "Cut Down Kit" Inventory Sheet?	Yes	NR	
<i>** Select one random date over the past 30 days, prior to visit, to check in each applicable unit/area for compliance.</i>			
<b>Phone Calls, Issuance of Property and Transfer Timelines for NDS</b>			
1. Are non-NDS inmates offered 2 phone calls a month?	1	100%	
2. Do staff know which inmates are NDS?	1	100%	
3. Is there tracking for provision of phone calls?	1	100%	
4. Are NDS inmates offered a weekly phone call?	1	100%	
5. Is there tracking for issuance of property for NDS inmates?	1	100%	
6. How many NDS inmates were reviewed for transfer timelines?	0	NR	
7. When applicable, how many were transferred within 72 hours?	0	#DIV/0!	
<i>**Run NDS report in SOM5 72 hours prior to visit. Ask staff the following: 1. How do you track your NDS inmates? 2. Can you show me how you track NDS phone calls and issuance of property?</i>			
<b>Unclothed Body Search</b>			
1. Are unclothed body searches done in a private area?	1	100%	
<b>Custody and Mental Health Partnership Plan</b>			
1. Are Huddles being conducted and logged in the unit log book during each shift change?	Yes		
2. Are all disciplines attending the Huddles?	Yes		



3. Are the Huddle reports (Attachment B) in a binder for staff to review?	Yes		
4. Are Quarterly Roundtables occurring on both 2W and 3W?	No		Q1 and Q2 (2021) are not uploaded on the SharePoint Site.

# **SVSP STRH**

## **June 2021**

UNIT: STRH			
Item	Response		Comments
<b>Thermometer</b>			
How many buildings were checked?	1		
1. Is a working Thermometer present?	1	100%	
2. Is the thermometer in a location that give an accurate reading of the temperature?	1	NR	Thermometer located in center of HU (single level unit).
3. Is there a heat log that is current? (Logged last hour)	1	NR	Current Heat Log reviewed.
4. Are the staff documenting the highest reading (NOT averaging them)?	1	NR	
5. Is there a current heat risk list available on the unit?	0	NR	The team discovered most units did not have a current Heat Risk List available on the unit with some being over a week old, but most were able to navigate to the correct folder where the daily Heat Risk List is uploaded.
6. Does the DAR reflect alternative out of cell activities were offered during periods in which temperatures exceeded 90 degrees?	0	NR	Upon reviewing the DAR for documentation, there does not appear to be documentation for alternative activities being offered during periods when Heat Alert has been activated (06/16/2021 and 06/17/2021).
<i>**Complete Heat Plan audit during May-October in all housing units where MH inmate patients are housed. Check DAR for random period of 10 days when temp exceeded 96 degrees.</i>			
<b>Mental Health Referral Process</b>			
1. Are housing unit staff aware of their responsibility to complete a 128MH5 when inmates exhibit signs of mental illness?	5	100%	
2. Are 128MH5's accessible and available to staff? (revised 4/21)	1	100%	
<i>** Interview all staff in units. Respond once for each individual housing unit staff person interviewed. Physically check units for 128MH5, respond once for each housing unit observed.</i>			
<b>Intake Procedures</b>			
1. How many inmates are in ASU for 21 days or less on "intake" status?	39	NR	
2. How many inmates in ASU for 21 days or less have "intake" identifying markers posted on the outside of their cell doors?	38	97%	1 I/M without the required intake placard, HU staff remedied prior to the teams departure.
3. How many inmates are within the first 72 hours of intake?	3	NR	
4. How many inmates housed in ASU for the first 72 hours are either double celled with an appropriate cell partner or are celled alone in a retrofitted intake cell?	3	100%	
<i>**Generate SOMS housing roster for ASU building and cross reference with the Printout of ASU Retrofitted Intake Cells to determine current 72 hour ASU placement, (generate day of audit).</i>			
<b>Entertainment Appliances</b>			
1. How many cells were observed?	92	NR	
2. Of those, in how many were entertainment appliances permitted and/or provided? (Approved appliances are a television, tablet or radio)	92	100%	
<i>**Query staff for number of cell w/ electricity. (Bring ASU housing list electricity cell survey. Review DOM sup / LOP re: Property) Spot check for entertainment appliances in cells.</i>			
<b>Welfare Checks</b>			
1. How many Rounds Tracker Shift Summary reports reviewed were signed by the custody supervisor responsible at the end of each shift (should be 90)?	76	84%	81 Printed (9 late/wrong range prints), 83 (7 missing signatures).
2. How many Rounds Tracker Shift Summary reports were reviewed (should be 90)?	90	NR	
<i>**Respond to questions overall for all checks in each 24 hour review period. Review 24 hour periods for past 30 days using the round tracker shift summary.</i>			
<b>Treatment Module Standards</b>			
1. For groups, are the modules in a semi-circle?	1	100%	SVSP utilizes the security desks with the Lexan divider.
2. Are the modules in an area where other inmates and/or staff are not able to hear or see the interaction?	1	100%	
3. Do the modules meet PIA approval standards?	1	100%	
4. Do staff report sufficient number of TX modules for providing treatment?	1	100%	
5. Are treatment modules clean?	1	100%	
<i>**PIA standards are: 42 inches wide, 72 inches tall, depth 49.5 inches. Must have a fold down desk and fold down chair.</i>			
<b>Out of Cell Time and Showers</b>			
1. Out of the past 4 weeks, how many weeks were required (not prevented by safety security etc.)?	80	NR	
2. Of those, how many weeks were 18.5 hours of yard offered within time allocated 7 days per week?	80	100%	
3. Out of the past 4 weeks, how many weeks were showers offered at least three times per week?	79	99%	
<i>**Yard time and showers audit - Exclude I/p who have not gone to ICC or not in ASU for 4 weeks. Count "R" refused times as offered.</i>			
<b>Officers with CPR Mouth Shields</b>			
1. How many peace officers were observed?	5	NR	
2. Of these, how many peace officers were observed to carry a (CPR) mouth shield on person?	5	100%	
<i>**Ask housing unit and floor staff.</i>			
<b>Cut-Down Kits/Tools</b>			
1. Does the housing unit/inmate living area have an approved cut-down kit/tool?	1	100%	
2. Is the cut-down kit/tool inventoried each shift on standardized "Cut Down Kit" Inventory Sheet?	1	NR	
<i>** Select one random date over the past 30 days, prior to visit, to check in each applicable unit/area for compliance.</i>			
<b>Phone Calls, Issuance of Property and Transfer Timelines for NDS</b>			
1. Are non-NDS inmates offered 2 phone calls a month?	1	100%	All inmates are being offered the appropriate phones relative to COVID-19 guidelines.
2. Do staff know which inmates are NDS?	1	100%	An NDS roster is maintained by unit staff.
3. Is there tracking for provision of phone calls?	1	100%	Phone calls are being documented within the 114 files.
4. Are NDS inmates offered a weekly phone call?	1	100%	
5. Is there tracking for issuance of property for NDS inmates?	1	100%	NDS property issuance is occurring within 7-10 days of designation is generally recorded within the 114 files.
6. How many NDS inmates were reviewed for transfer timelines?	2	NR	

7. When applicable, how many were transferred within 72 hours?	0		At the time of review, the NDS eligible transfers were at the audit phase awaiting auditor approval and Covid transfer protocol. NR Upon exit, CDW followed up with CSR for expedited transfer. SOMS review confirms both have transferred since.
<b>**Run NDS report in SOMS 72 hours prior to visit. Ask staff the following: 1. How do you track your NDS inmates? 2. Can you show me how you track NDS phone calls and issuance of property?</b>			
		100%	
<b>Unclothed Body Search</b>			
1. Are unclothed body searches done in a private area?	1	100%	Staff identified holding cell built within the main walkway as the area where unclothed body searches are conducted.
<b>Custody and Mental Health Partnership Plan</b>			
1. Are Huddles being conducted and logged in the unit log book during each shift change?	1		
2. Are all disciplines attending the Huddles?	1		
3. Are the Huddle reports (Attachment B) in a binder for staff to review?	1		
4. Are Quarterly Roundtables occurring on both 2W and 3W?	1		The institution reported- Yes and 844's are uploaded to the SharePoint.

# **EXHIBIT 6**



7/15/2021 5:01:00 AM

Refresh Date / Time (PST)

# Tx Offered

Placement

All



Region

All



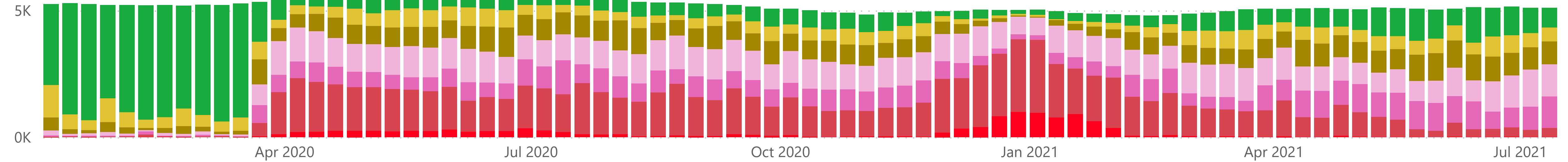
Institution

All



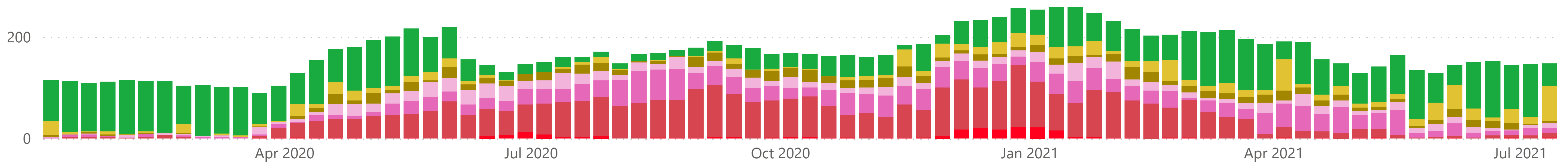
## Weekly Tx Hours Offered (ML, ASU Hub & PSU EOP)

Weekly Tx Hours Offered   0   >0 to <2   2 to <4   4 to <6   6 to 8   8 to <10   over 10+



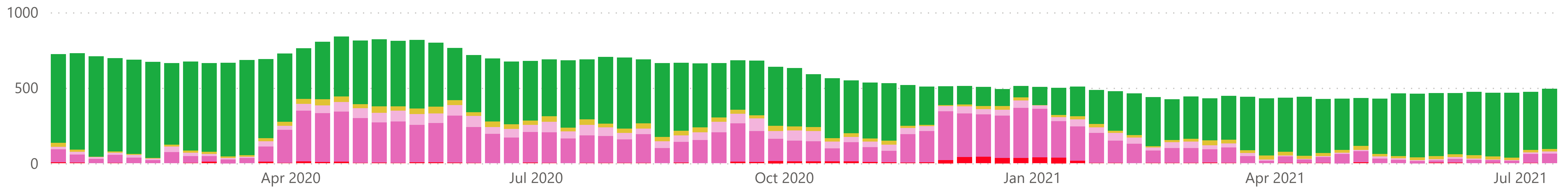
## Weekly Tx Hours Offered (RC EOP & ASU EOP non-hub)

Weekly Tx Hours Offered   0   >0 to <1   1 to <2   2   3   4   5+



## Weekly Tx Hours Offered (STRH/LTRH CCCMS)

Weekly Tx Hours Offered   0   >0 to <0.5   0.5 to <1   1 to <1.5   1.5+





# Tx Scheduled

Placement

All

Region

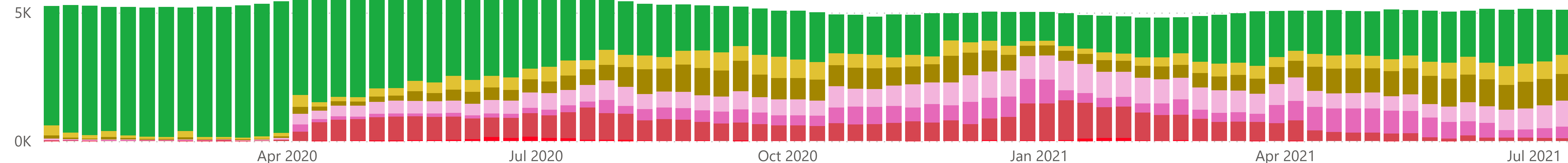
All

Institution

All

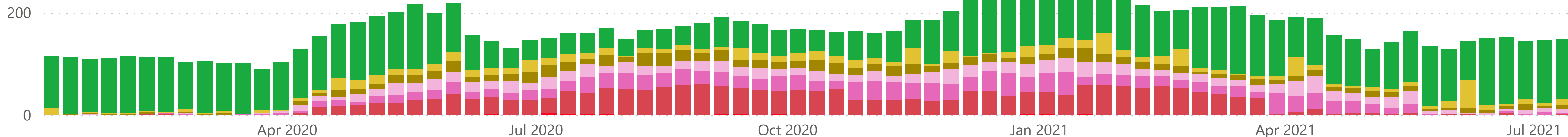
Weekly Tx Hours Scheduled (ML, ASU Hub & PSU EOP)

Weekly Tx Hour s Scheduled   0   >0 to <2   2 to <4   4 to <6   6 to <8   8 to <10   over 10



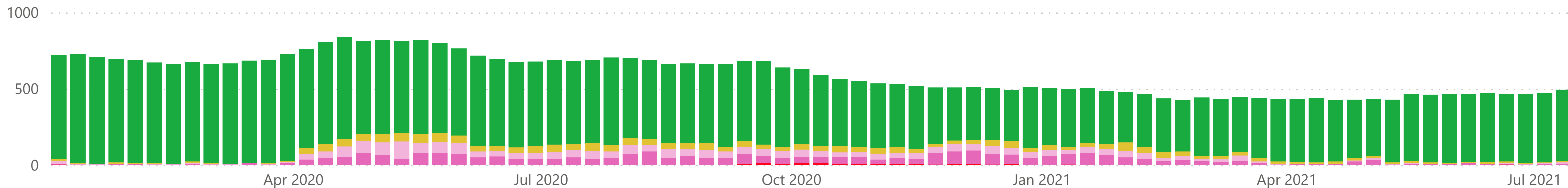
Weekly Tx Hours Scheduled (RC EOP & ASU EOP non-hub)

Weekly Tx Hour s Scheduled   0   >0 to <1   1   2   3   4   5



Weekly Tx Hours Scheduled (STRH/LTRH CCCMS)

Weekly Tx Hour s Scheduled   0   >0 to <0.5   0.5 to <1   1 to <1.5   1.5+



# Tx Attended

Placement

All

Region

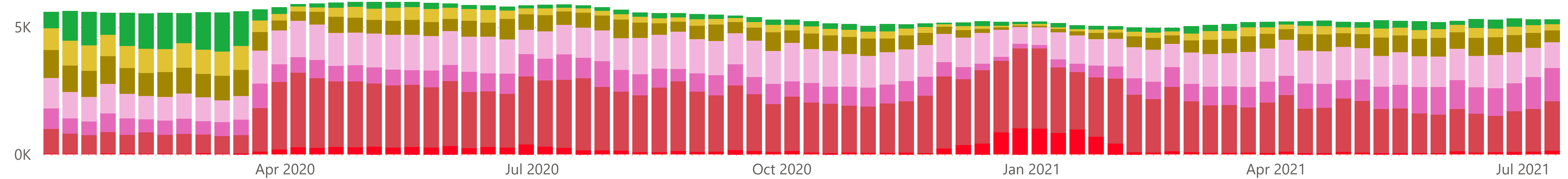
All

Institution

All

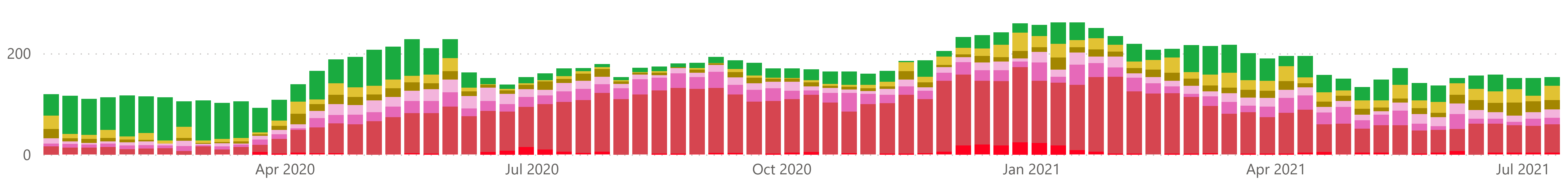
## Weekly Tx Hours Attended (ML, ASU Hub & PSU EOP)

Weekly Tx Hour s Attended    0    >0 to <2    2 to <4    4 to <6    6 to <8    8 to <10    Over 10



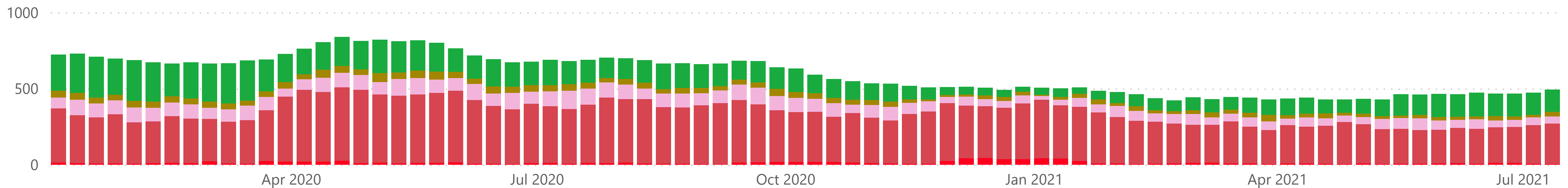
## Weekly Tx Hours Attended (RC EOP & ASU EOP non-hub)

Weekly Tx Hour s Attended    0    >0 to <1    1    2    3    4    5+



## Weekly Tx Hours Attended (STRH/LTRH CCCMS)

Weekly Tx Hour s Attended    0    >0 to <0.5    0.5 to <1    1 to <1.5    1.5+







# PIP Tx Hours

Placement

All

Region

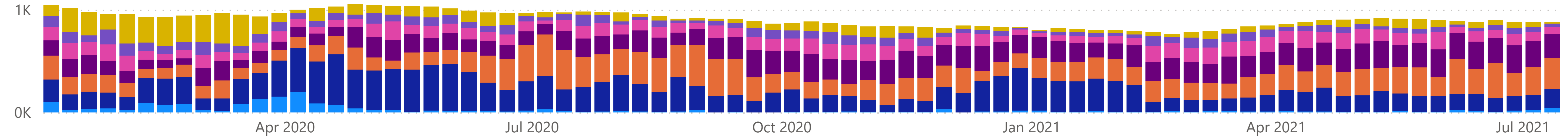
All

Institution

All

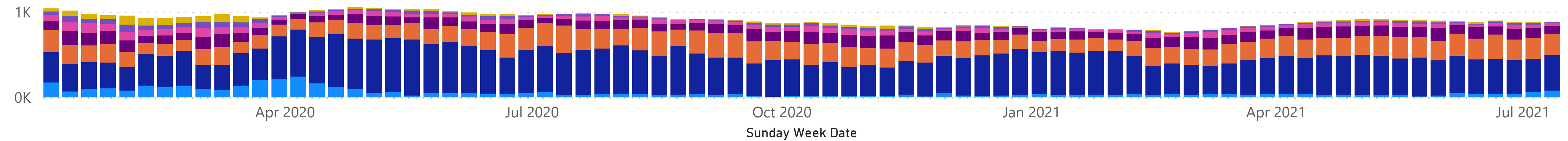
## Weekly Tx Hours Offered (PIP)

Weekly Tx Offer ed Hour s ● 0 ● >0 to <2 ● 2 to <4 ● 4 to <6 ● 6 to <8 ● 8 to <10 ● over 10



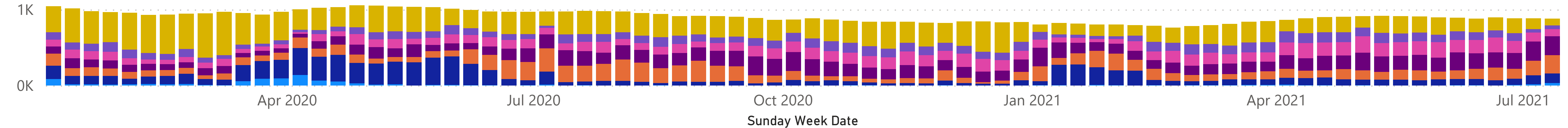
## Weekly Tx Hours Attended (PIP)

● 0 ● >0 to <2 ● 2 to <4 ● 4 to <6 ● 6 to <8 ● 8 to <10 ● Over 10



## Weekly Tx Hours Scheduled (PIP)

● 0 ● >0 to <2 ● 2 to <4 ● 4 to <6 ● 6 to <8 ● 8 to <10 ● over 10





Refresh Date / Time...

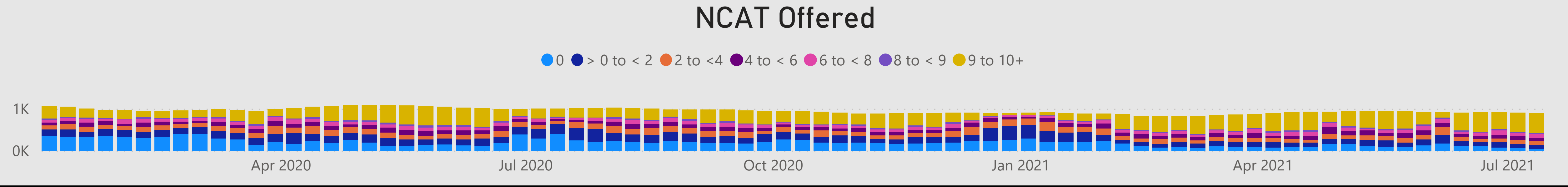
All

All

All

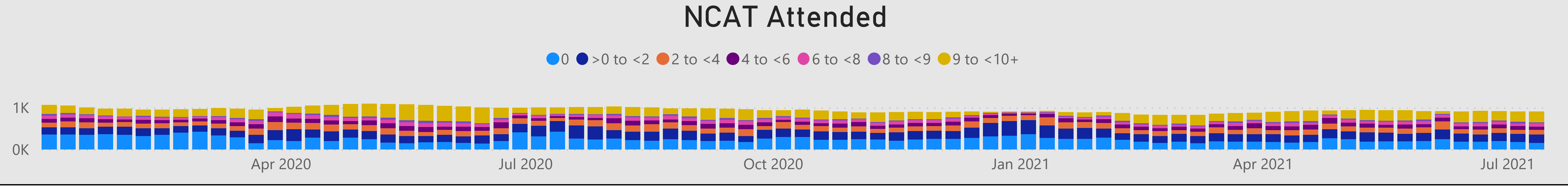
NCAT Offered

0 > 0 to < 2 2 to < 4 4 to < 6 6 to < 8 8 to < 9 9 to 10+



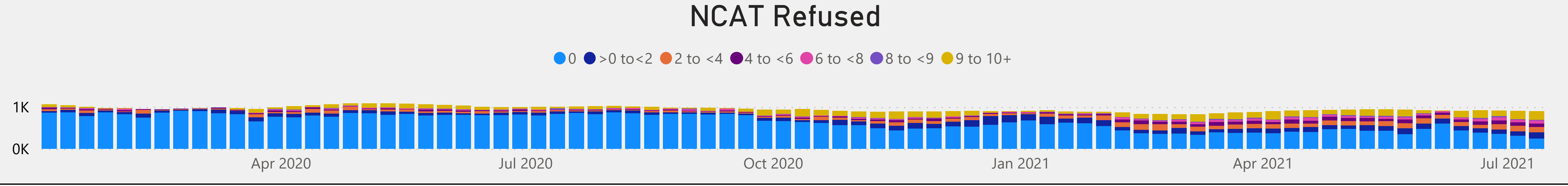
NCAT Attended

0 > 0 to < 2 2 to < 4 4 to < 6 6 to < 8 8 to < 9 9 to < 10+



NCAT Refused

0 > 0 to < 2 2 to < 4 4 to < 6 6 to < 8 8 to < 9 9 to 10+



NCAT Canceled

0 > 0 to < 2 2 to < 4 4 to < 6 6 to < 8 8 to < 9 9 to 10+

