Dunsmore v. San Diego County Sheriff's Office Case No. 3:20-cv-00406-AJB-DDL

Neutral Expert Site Inspection Report
Second Round

On-Site Review:
May 11-15, 2026

Respectfully Submitted
Julian Martinez Consulting LLC
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This is the second report on the status of compliance with the "ADA Settlement Agreement and Order" associated with the Joint Motion and Order RE: Remaining ADA Issues and Resolving Third Claim For Relief pursuant to the *Dunsmore v. San Diego County Sheriff's Office* Case No. 3:20-cv-00406-AJB-DDL The Neutral Expert has been tasked with reviewing policies, practices, procedures, and training relating to the ADA Settlement Agreement and Order.

This report will use four categories of compliance:

- **Substantial Compliance –** Represents that the County has implemented policies, training, and practices and presented sufficient proof of practice to demonstrate compliance. It should be noted that an isolated incident of apparent non-compliance may not prohibit this rating.
- **Partial Compliance –** Represents that the County initiated some policies, training, and practices, but has not yet fully implemented processes, and/or proof of practice is insufficient to demonstrate substantial compliance.
- **Non-Compliance –** Represents that the County has not yet initiated policies, training, and practices, and demonstrated in a significant, systemic, or measurable manner that the County has begun implementation of the paragraphs' requirements.
- **Unratable –** Represents proof of practice, policies, and/or training is unavailable or insufficient to support a compliance rating, or the date of the paragraph's requirements is not due.

The report documents the paragraph requirements of the "ADA Settlement Agreement and Order" followed by associated policies, training, review of documents produced by the County, and on-site observations, including incarcerated person (IP) and staff interviews. Following each Paragraph, a compliance rating will be assessed, and relevant comments and recommendations is also included.

This second Neutral Expert report is based on a review of a significant number of documents and data produced by the County during the document production period from December 1, 2025, to April 30, 2026, on-site observations, and interviews with staff and IPs.[1] Before conducting the inspection, policies and various documents were requested and reviewed. Following the document review, on-site inspections were conducted of the Las Colinas Detention and Reentry Facility (LCDRF), Rock Mountain Detention Facility (RMDF), George Bailey Detention Facility (GBDF), East Mesa Reentry Facility (EMRF), San Diego Central Jail (SDCJ), South Bay Detention Facility (SBDF), and Vista Detention Facility (VDF) during the week of May 11-15, 2026. The on-site inspections included walking through jail areas, interviewing staff and IPs (40), and conducting on-site observations.

The County has established a process for document sharing and has demonstrated a commitment to producing the requested documents.

In general, all County Jail staff (Sworn and Non-Sworn) and contract providers have been open, candid, and willing to discuss both challenges and plans for improving the County's compliance with the ADA Settlement Agreement and Order. During the on-site review, the Neutral Expert was provided with full access to the Jails, the requested information, and the opportunity to interview IPs and employees. Document requests have been facilitated, but in the future, significant information collection and refinement of information-sharing will still be necessary for the County to demonstrate proof of practice under the ADA Settlement Agreement and Order requirements. Systems and processes may not be in place in some areas to support self-review, and the County must continue to work with the Neutral Expert to develop them.

It is recognized that the County has demonstrated a commitment to ensuring compliance with the ADA Settlement Agreement and Order requirements, as evidenced by the Paragraphs in the ADA Settlement Agreement and Order in which the County is rated as Substantial Compliance. Examples include, but are not limited to:

- The County has created and staffed an ADA Unit to assist the County in ensuring disabled IPs have equal access to the jail's programs, services, and activities as required by the ADA and the ADA Settlement Agreement and Order.
- The County has revised and implemented systemwide Detention Services Bureau (DSB) policies and procedures, and facility-specific policies and procedures (Green Sheets)).
- The County continues revising policies and procedures as required by the ADA Settlement Agreement and Order.
- The County has created and uses a process for the ADA staff to conduct and document the seven (7) - day, sixty (60) - day, and six (6) - month face-to-face interviews of IPs with "ADA Mobility," "ADA Hearing," ADA Speech or "ADA Vision" flags.
- The County continues to develop and implement training (Training Bulletins) as required by the ADA Settlement Agreement and Order to ensure compliance with the ADA, related federal and state disability laws, the ADA's implementing regulations, and the requirements of the ADA Settlement Agreement and Order (more formalized annual training still needs to be developed)).

[1] [1] It should be noted that not all documents or data were available or provided, and in certain areas, documentation production was incomplete.

- The County continues to openly share the requested documentation and Sworn and Healthcare Policies during development. That process continues, as the Neutral Expert should, by providing feedback on any updated policies where appropriate.
- The County has established a comprehensive ADA Tracking System for staff that is enabled to track all Individuals with disabilities and the associated accommodations. [2]
- The County has established a comprehensive screening and identification process for most disabilities and the associated accommodations.
- The County has amended the Grievance form to include a clear means for a person to identify that their grievance is an "ADA" grievance.
- The County has established a process for medical staff to identify an IP with a communication disability and the associated effective communication accommodations (IP's preferred method of communication).
- The County has established a process for staff to identify and ensure that an IP with a prescribed and/or personal assistive device is released with an assistive device.
- The County maintains an adequate fleet of functional wheelchair accessible vehicles.

Since the last inspection, the County has implemented or is working on the following:

- Revised the San Diego County Sheriff's Office ADA Interview Questions
- Implemented the ADA Liaison and ADA Nurse Post Orders
- Is in the process of implementing a tracking mechanism for ADA-related medical request
- Is in the process of finalizing the Accessibility Bed Needs Assessment
- Is in the process of finalizing a process for the provision of audiobooks
- Is in the process of creating an ADA Cognitive Assessment Form
- Revised and implemented:
    - SDCJ Green Sheet M.39.C.1 2/19/26
    - SDCSO DSB I.51Movement of Incarcerated Persons 1/30/26
    - SDCSO DSB P.11 Effective Communication 12/19/25
    - SDCSO DSB R.11 Incarcerated Person Facility Assignment Criteria 1/30/26
    - SDCSO DSB I.52 Strip and Pat Down Searches of Incarcerated Persons 12/30/25
    - SDCSO DSB I.43 Count Procedures of Incarcerated Persons 2/20/26
    - Medical Assistive Devices Training Bulletin (2/6/26)
    - SDCSO Safety and Security Assessment Form (ADA-3) 2/4/26)
    - DSB P&P P.11 Effective Communication Update Training Bulletin 1/15/26
    - Medical Services Division ADA Hearing Flag Training Bulletin 6/8/26
    - SDCSO DSB I.50 Body Scanner and X-Rays 3/13/26
    - SDCSO DSB J.03 Separation: Definition and Use 3/13/26

The Neutral Expert recommends that the County focus on these areas during the next rating period. Examples include, but are not limited to:

- Develop the annual ADA training curriculum and ensure staff are trained.
- Ensure all IPs with a qualified disability are offered and provided with information of their rights under the ADA, the process for requesting a reasonable accommodation, and how and where to file grievances.
- Develop orientation materials (video) that include information on ADA rights; the process for requesting a reasonable accommodation; the ADA request and grievance processes,

[2] There is a need to ensure all accommodations are being tracked.

including the location of forms, how to submit them, and how to obtain assistance in completing them; and information about the ADA Unit and how to contact them.

- Ensure that the orientation material is accessible to all IPs with disabilities, including, but not limited to, IPs with vision, intellectual or cognitive, hearing, or other disabilities that may affect communication.
- Ensure medical staff ask all questions in the TechCare portion of the medical clearance section.
- Ensure all accommodations required by the settlement agreement (paragraph 38) are tracked in the ADA Tracking System.
- Ensure staff provide and document, when required, effective communication accommodations for all IPs with an identified disability affecting communication, such as those who have developmental or intellectual disabilities, are blind, low-vision, or hard of hearing, as necessary to ensure effective communication during the booking and orientation processes, due process events, medical encounters, and structured programming.
- Continue revising and implementing systemwide policies and procedures, and facility-specific policies and procedures, and training as necessary to ensure compliance with the ADA, related federal and state disability laws, the ADA's implementing regulations, and the requirements of the ADA Settlement Agreement and Order.
- Ensure IPs are expeditiously moved when they are inappropriately housed in inaccessible housing.
- Ensure that qualified IPs with a disability, who meet all essential eligibility requirements, are not excluded from participation in or denied the benefits of any in-custody program, service, or activity based upon their disability.
- Ensure the essential functions for each worker position are included in each work/job duty statement.
- Pending the physical plant modifications, consider allowing disabled IPs who require accessible housing to be escorted from their housing unit to work locations.
- Ensure that grievances and requests for accommodations related to glasses and lower bunk/tier are designated as ADA-related.
- Ensure staff who respond and categorize grievances and requests are trained
- Implement the process to track ADA related Healthcare Request forms and their resolutions for cases in which IPs request reasonable accommodations via the Healthcare Request form.
- For IPs with accommodations for reading and writing assistance, staff must periodically ask whether they need assistance completing grievances.
- Ensure the Safety and Security Assessment Form is completed when required.
- Ensure the County maintains a sufficient supply, as determined by the County health staff, of all HCA/AD/DME that is regularly used to assist IPs with disabilities at each jail facility.
- Ensure all facilities maintain an inventory with PAR levels for all HCA/AD/DME regularly used to assist IPs with disabilities.
- Ensure sufficient Evac Chairs are added to the inventories at SDCJ, GBDF, and VDF.
- Develop training on disability awareness and de-escalation related to the use of force on IPs with identified disabilities.
- Finalize the draft revisions to MSD policies to include requirements that the QMHP identify and document safety, vulnerability, and victimization concerns, as well as programming and housing needs.
- Finalize the cognitive/intellectual/learning disability evaluation process using screening tools that will ensure learning, intellectual, or developmental disabilities and necessary

accommodations are identified, including adaptive support needs, safety, vulnerability, victimization concerns and programming, housing, and accommodation needs.

- Develop a process for the County to demonstrate proof of practice in providing adaptive supports for cognitive/intellectually disabled IPs.
- Revise the San Diego County Sheriff's Detention Services Bureau policies to include the requirements for staff to provide discharge planning tailored to the needs of IPs with learning, intellectual, or developmental disabilities, including appropriate and effective linkages to housing assistance and community-based service providers.
- Ensure IPs with disabilities are provided equal and meaningful access to worker opportunities, classes, vocations, rehabilitation programs, and religious programs.
- Revise and implement policies that ensure that incarcerated persons with mental health or intellectual disabilities do not face discrimination in the use of disciplinary procedures or sanctions.
- Revise and implement policies that require a QMHP to assess IPs with mental health disabilities who receive rule violation reports and provide written findings as to (a) whether or not the reported behavior was related to mental illness, adaptive functioning deficits, or other mental health or intellectual disability; and (b) whether certain sanctions should be avoided in light of the person's mental health or intellectual disability, treatment plan, or adaptive support needs.
- Revise the DSB policies to require staff to provide reasonable accommodations to disabled IPs during the disciplinary process.
- Finalize the quality assurance and auditing program to ensure staff compliance with the ADA Settlement Agreement and Order.

Some of the necessary changes are complex and comprehensive and will take time, effort, and resources to achieve and to maintain sustained compliance. The County is committed, but much work remains to be done, and strategic implementation is critical. The Neutral Expert will continue data and document reviews, ongoing engagement with the County to review policies, procedures, and training, and consistent feedback to the County on implementation status.

In presenting the report, I want to thank the Sheriff, County employees, medical contracted employees, Counsel, and the IP population, each of whom appears willing to share information openly and work toward success in implementing the ADA Settlement Agreement and Order.

Findings:

The following are paragraphs from the *Dunsmore v. San Diego County Sheriff's Office* "ADA Settlement Agreement and Order", assigned to Julian Martinez for Neutral Expert Review. In the report, the specific paragraph provision language is followed by the Neutral Expert's findings, based on document review, staff and incarcerated person (IP) interviews, and on-site observations. The report also includes the Neutral Expert's recommendations for the County to consider implementing to move paragraphs into substantial compliance.

Paragraph	Requirement	Previous Rating	Current Rating
14	ADA Unit Policies, Procedures and Training	PC	PC
15	ADA Unit Face-to-Face Interviews	PC	PC
16	ADA Unit Staffing	PC	PC
17	ADA Notice of Rights	PC	PC

Paragraph	Requirement	Previous Rating	Current Rating
18	Orientation	NC	NC
19	Booking and Orientation Effective Communication	PC	PC
20	Policy Revisions and Implementation	PC	PC
21	Revision of Medical Services Division Policies	PC	PC
22	Annual ADA Staff Training	NC	NC
23	Provision of Draft Policies, Procedures and Training to Neutral Expert	PC	PC
24	Development and Implementation of Policies, Procedures and Trainings to Identify IPs with Disabilities	PC	PC
25	ADA Screening Process	PC	PC
26	Screening of IPs, Completion of Functional Performance Assessment and Tracking of Disabilities	PC	PC
27	Screening of IPs for Effective Communication	PC	PC
28	Disability Tracking of Vision, Hearing, Medical, Mobility, Cognitive/Learning and Speech	PC	PC
29	Disability Evaluations After Intake	PC	PC
30	Mobility Accommodations During Booking	PC	PC
31	Tracking of Disabilities and Accommodations	PC	PC
32	Tracking of Effective Communication Needs	SC	SC
33	Tracking of Housing, Classification, Transportation, Health Care Appliances, DME and AD	SC	PC
34	Housing of Disabled IPs	PC	PC
35	Housing of Disabled IPs in Different Classifications and Medical Units	PC	PC
36	Determination of Disability Housing Requirements	PC	PC
37	Housing of IPs With Assigned Wheelchairs in Low Tier and Accessible Low Bunk	PC	PC
38	Housing of Mobility Disabled IP in Top of a Triple Bunk, Provision of Shower Chair and Accessible Showers	PC	PC
39	Incidents When Accessible Housing is Not Available	PC	PC
40	Check During Night Hard Count to Ensure IPs With Mobility Disabilities Are Occupying Assigned Bunks	PC	PC
41	Training of Staff to Address IPs Sleeping on Floor	NC	NC
42	Interim Measures to Ensure IPs With Mobility Disabilities Are Accommodated	PC	PC
45	Accessible Housing for People with Disabilities	UR	UR
46	Accessibility Bed Needs Assessment	UR	UR
76	Disabled IPs' Access to Programs, Services and Activities	PC	PC
77	Access to Programs, Services and Activities for IPs With Disabilities on an Equivalent Basis	PC	PC
78	Equal Access to Educational, Vocational and Job	PC	PC

Paragraph	Requirement	Previous Rating	Current Rating
	Assignments		
79	Housing of Disabled IPs in a Manner That Allows Access to Programs, Services and Activities	PC	PC
80	Access to Veterans Moving Forward for IPs Not Housed at VDF	PC	PC
81	Plan to Provide Access to Vocational Programs Available at EMRF	PC	PC
82	Policies, Procedures and Training for ADA Grievances and ADA Requests for Accommodations	PC	PC
83	Healthcare Requests for New Reasonable Accommodations	PC	PC
84	ADA Unit Response to Requests for Accommodation	PC	PC
85	ADA Related Grievances	PC	PC
86	Amendment of Grievance Form to Identify ADA Grievances and Tracking of ADA Grievances	PC	PC
87	Availability of Grievance Forms	SC	SC
88	Assistance in Completing Grievance Forms and Healthcare Requests	PC	PC
89	Response Timeline for ADA Grievances	PC	PC
90	ADA Unit Tracking of ADA Grievances and Quality Assurance and Corrective Action	PC	PC
91	Effective Communication and Preferred Method of Communication	PC	PC
92	Staff Use of IPs' Preferred Method of Communication	PC	PC
93	Effective Communication for Due Process Events	NC	PC
94	Effective Communication for Health Care Encounters	PC	PC
95	Effective Communication for Structured Programing	NC	PC
96	Use of Auxiliary Aids and Services for Effective Communication	PC	PC
97	Restraining IPs Whose Preferred Method of Communication is Sign Language Interpreting	PC	PC
98	In-Person Response to Intercom for Deaf IPs Who Communicate in Sign Language	PC	PC
99	Access to HCA/AD/DME	PC	PC
100	Provision of County-Issued HCA/AD/DME	PC	PC
101	Removal of HCA/AD/DME Due to Safety and Security Reasons	PC	PC
102	Replacement of Personal HCA When Unusable	PC	PC
103	Removal of HCA/AD/DME in Temporary Holding, Sobering or Observation Cells	PC	SC
104	Provision of HCA/AD/DME Upon Release	PC	PC
105	Development and Implementation of Policies, Procedures and Training for Evacuations and	PC	PC

Paragraph	Requirement	Previous Rating	Current Rating
	Emergencies		
106	Training on Disability Awareness and De-Escalation Related to Use-of-Force on Disabled IPs	NC	NC
107	Screening for Intellectual, Learning and Developmental Disabilities	NC	NC
108	Contacting Regional Center for IPP	SC	SC
109	Provision of Adequate Supports for Intellectual, Learning and Developmentally Disabled IPs	PC	PC
110	Provision of Accommodations and Adaptive Supports for Intellectual, Learning and Developmental Disabilities (Effective Communication, More Time to Respond and Act With Directions)	PC	PC
111	Mental Health Staff Taking Appropriate Steps to Ensure Implementation of Individualized Plan	NC	NC
112	Training for Staff and Contractors on Intellectual, Learning and Developmental Disabilities to Monitor and Address Safety, Vulnerability, or Victimization	NC	NC
113	Equal Access to Books, Magazines and Future Electronic Tablet Program for Intellectual, Learning and Developmental Disabilities	NC	PC
114	Provision of Discharge Planning for Intellectual, Learning and Developmental Disabilities	PC	PC
115	Accommodations for Searches and Count	NC	PC
116	Accommodations for Application of Restraints	NC	PC
117	Accommodations When in Transit Between Facilities, Out to Court, and Outside Health Care Services	PC	PC
118	Provision of Accessible Transportation	SC	SC
119	Provision of Prescribed Assistive Devices During Transport Process	NC	PC
120	Provision of Assistance to Mobility Disabled IPs to Ensure Safe Access on and off Transport Vehicles	PC	PC
121	Inspection of Accessible Transportation Vehicles	PC	PC
122	Non-Discrimination Against IPs With Substance Use Disorders	NC	NC
124	Equal Access to Programs, Services and Activities for IPs With Mental Health Disabilities	PC	PC
125	Non-Discrimination Against People with Mental Health, Intellectual, Learning and Developmental Disabilities	NC	NC
126	QMHP Assessment and Written Findings for incarcerated persons with Intellectual, Learning and Developmental Disabilities During the Disciplinary Process	NC	NC
127	IPs Not Being Subjected to Discipline That Prevents the Delivery of Mental Health Treatment and Adaptive Supports	NC	NC

Paragraph	Requirement	Previous Rating	Current Rating
128	No Discipline for Refusing Treatment or Medications or Engaging or Threats of Self-Injurious Behavior	NC	NC
129	Provision of Accommodations During the Disciplinary Process	NC	NC
130	Development of Quality Assurance and Auditing Program	UR	PC
131	No Retaliation, Discrimination, Coercion, Intimidation, Threat, or Interference	PC	PC

III. ADA REMEDIAL ACTIONS

A. ADA Unit

14. *The County created an ADA Unit, effective June 2023. The County shall develop and implement policies, procedures, and training regarding the ADA Unit to ensure its effectiveness in facilitating the jail system's compliance with ADA requirements and the provisions set forth herein. The County shall ensure the ADA Unit has staffing, resources, and authority sufficient to carry out its duties, which include but are not limited to: coordinating and ensuring staff training related to ADA policies and requirements; ensuring provision of reasonable accommodations to incarcerated persons with identified disabilities; assisting staff, including facilities and health care staff, with identifying and accommodating incarcerated persons with disabilities; ensuring all complaints of alleged discrimination on the basis of disability in the San Diego County jail facilities that are received by the County are investigated and properly resolved in a timely manner; reviewing ADA-related requests and ensuring they are properly resolved in a timely manner; and reviewing and responding to ADA-related grievances in a timely fashion.*

    Compliance Rating: Partial Compliance

    Previous Compliance Rating: Partial Compliance

    Policies – Detention Services Bureau (DSB) Policy I.22 Lower Bunk Lower Tier Medical Instruction Assignment (May 29, 2024), DSB Policy M.39 Disabled Incarcerated persons (May 29, 2024), DSB Policy N.1 Grievance Procedure (December 17, 2024), DSB Policy P.11 Effective Communication (December 19, 2025), DSB Policy S.1 Supervision and Assignment of Incarcerated Workers (December 30, 2024), DSB I.21 Housing Unit Area Activity Log (November 6, 2024), DSB I.43 Count Procedures of Incarcerated Persons (February 20, 2026), DSB P.2 Telephone Access (February 13, 2025), DSB Policy I.52 Strip and Pat Down Searches of Incarcerated Persons (February 7, 2023), DSB Policy I.51 Movement of Incarcerated Persons (May 9, 2022), DSB Policy R.11 Incarcerated Person Facility Assignment Criteria (January 21, 2025), DSB Policy I.50 Body Scanner and X-Rays (January 21, 2025), DSB Policy J.3 Separation: Definition and Use (July 16, 2025)

    Training – (First Inspection) - Medical Services Division Training Unit (ADA Intake Procedures), San Diego County Sheriff Training Bulletin (ADA Intake Procedures), San Diego County Sheriff Training Bulletin (Incarcerated Persons ADA Accommodation Information), San Diego County Sheriff Training Bulletin [Americans with Disabilities Act (ADA) Unit], San Diego County Sheriff Training Bulletin (Service Animals for the Visiting Public), San Diego County Sheriff Training Bulletin [American Sign Language (ASL) Interpretation Services], Medical Services Division Training Unit (DSB.P.11: Effective Communication), San Diego County Sheriff Training Bulletin (I.22 Lower Bunk/Lower Tier and Medical Instruction Assignment P&P Update), San Diego County Sheriff Training Bulletin (M.39 Incarcerated Persons with Disabilities and H.3 Evacuation Plans P&P Update), San Diego County Sheriff Training Bulletin (P.11 Effective Communication P&P Update), Medical Services Division Training Unit (ADA Policy Updates), Medical Services Division Training Unit (ADA Cognitive Assessment – Mental Health), San Diego County Sheriff Training Bulletin (ADA Intake Procedures), San Diego County Sheriff Training Bulletin [American (ASL) Interpretation Services Update], Medical Services Division Training Unit (ADA Speech Flag), Detentions Processing Division Booking Process, Detentions

Processing Division Final Release Process, Detentions Processing Division Training Bulletin (Effective Communication with Incarcerated Person), San Diego County Sheriff Training Bulletin (Blue Envelope Program), San Diego County Sheriff Training Bulletin (Effective Communication) Second Inspection – ADA Unit DPD Updates, Effective Communication Training Bulletin Update, Medical Assistive Devices Training Bulletin (Safety and Security Form ADA-3)

Documents Produced/Reviewed – (First Inspection) - Email 11/15/24 J-114 Incarcerated Worker Contract Update, Service Animals ADA Reference Guide, Incarcerated Persons with Disabilities Quick Reference Guide for Staff, Assistive Devices and Durable Medical Equipment (DME) Reference Guide, Telephone Handset Amplifiers, Americans with Disabilities PowerPoint Training multiple trainings), InterpretManager App PowerPoint, ADA Unit PowerPoint, Purple Communications Video Phone Training, UbiDuo 3 Operator Training, Sheriff's Authorized Positions 8/21/25, ADA Unit Deputy Post Orders (June 20, 2024), ADA Unit Lieutenant Post Orders (June 24, 2024), ADA Unit Sergeant Post Orders (June 20, 2024) - Second Inspection - All policies, training and documents listed above and ADA Liaison Post Orders, ADA Nurse Post Order, Safety and Security Form ADA-3

Implementation

The County reports that the ADA Unit comprises three (3) deputies, one (1) sergeant, one (1) lieutenant, and one (1) nurse. The Unit reports to a Captain, who reports to a Commander. The documents produced and reviewed by the Neutral Expert reflect that all positions are currently filled. The ADA Unit Lieutenant Post Orders include all of the requirements of the ADA Unit listed in the Settlement Agreement and Order.

The ADA Unit reported that its staff coordinate and provide ADA training for new hires at the academy and for current staff during briefings, and that they create training bulletins. The ADA staff also conducts the 7-day, 60-day, and 6-month reviews to ensure that disabled IPs identified as needing reasonable accommodations receive them. The ADA Unit also reviews and responds to ADA requests, grievances, telephone calls, and letters/emails from disabled IPs and the public.

The Neutral Expert commends the ADA Unit's determination and dedication in managing the SDSO ADA policies and procedures and in assisting jail staff in ensuring they are aware of and trained in their specific responsibilities. It is evident that the ADA Unit staff understand their roles and the requirements of the Settlement Agreement and Order. However, the report cites cases where medical ADA grievances are not being reviewed and investigated. The Neutral Expert notes that nothing in the ADA Settlement limits the ADA Unit to its current staff, as Paragraph 16 simply states what the ADA Unit "currently" consists of with respect to staff. Paragraph 14 requires that "the County shall ensure the ADA Unit has staffing, resources, and authority sufficient to carry out its duties which include but are not limited to . . . ." The County must ensure that the ADA Unit can perform all tasks required under the settlement agreement.

Recommendations:

The ADA Unit must continue to:

- * [3]Coordinate and ensure staff are trained on ADA policies and requirements
- *Ensure reasonable accommodations are provided to incarcerated persons with identified disabilities
- *Assist staff, including facilities and health care staff, with identifying and accommodating incarcerated persons with disabilities
- *Ensure all complaints of alleged discrimination are investigated and properly resolved in a timely manner
- *Review ADA-related requests and ensure they are properly resolved
- *Review and respond to ADA-related grievances
- Conduct quality assurance reviews

15. *The ADA Unit shall conduct face-to-face interviews of people with "ADA Mobility," "ADA Hearing," or "ADA Vision" flags within seven (7) days of the initial flag placement, sixty (60) days after the first ADA interview, and every six (6) months thereafter. The ADA Unit shall also conduct a face-to-face meeting with an incarcerated person with an identified disability upon the incarcerated person's request. As part of the ADA Unit interview, the ADA Unit shall effectively communicate to the incarcerated person information about the auxiliary aids and accommodations at the jail facilities that may meet that person's needs, as well as the process for requesting reasonable accommodations. The ADA Unit shall document this interview, including what was communicated and the provision of effective communication.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), DSB Policy P.11 Effective Communication (December 19, 2025)

Training - NA

Documents Produced/Reviewed – Blank San Diego County Sheriff's Office ADA Interview Questions (Revised 1/26/26), 575 Completed San Diego County Sheriff's Office ADA Interview Questions (December 2025 to April 2026), January to April 2026 ADAI-ADAR-ADAA, December 2025 and April 2026 ADA Interview Review List (Overdue), December 2025 7D-60D-6 Mos ADA Interviews, Monthly information on Disabled incarcerated persons booked into the SDCJs

Implementation

DSB Policy M.39 Disabled Incarcerated Persons includes the requirement for ADA staff to conduct the ADA reviews and DSB Policy P.11 Effective Communication (December 19, 2025). In review of the documents produced by the County, it is evident that the ADA Unit is conducting required 7-Day, 60-Day, and 6-Month interviews. However, the Neutral Expert cannot determine if the ADA Unit is conducting the required face-to-face interviews within 7 days of flag placement or within 30 days and 6 months from the previous review. This is because the data produced does not include the dates the ADA flag was placed and when the previous review occurred. The January to March 2026 ADAI-ADAR-ADAA does include the date the IP was booked and the date the entry was created. The Neutral Expert reviewed

[3] All recommendations that begin with an asterisk were noted in the prior report.

these dates for the documents covering December 2025 to March 2026. Based on the review, the Expert notes the following (only reviewed cases booked during the month, and ADARs were not reviewed, and the documents only identify the booking date and not the date the flag was placed):

- December 2025 – of 63 cases, 6 ADAIs were not conducted within 7 days of booking
- January 2026 - of 132 cases, 29 ADAIs were not conducted within 7 days of booking
- February 2026 - of 161 cases, 45 ADAIs were not conducted within 7 days of booking
- March 2026 - of 95 cases, 23 ADAIs were not conducted within 7 days of booking
- April 2026 - of 14 cases, 75 ADAIs were not conducted within 7 days of booking

The County produced the March ADA Interview Review List (Overdue). Upon review of the documents, the data does not include cases in which the ADA Unit attempted to conduct the ADA Interview. During the inspection, the ADA Unit reported that when the ADA Unit attempts to conduct the review and the IP is not at the jail (at court or a medical appointment), the ADA Unit will conduct the interview the next time ADA Unit staff are at the facility. In these cases, the County should train the ADA liaison deputies and a nurse at each facility and assign them to conduct the ADA face-to-face interviews, as necessary to meet the required timeliness.

No documents were produced for cases in which the IPs requested a face-to-face meeting with the ADA staff. The ADA Unit reported that the ADA nurse conducts the 7-Day, 60-Day, and 6-Month interviews with the ADA Unit custody staff. However, during the IP interviews, some IPs reported that only custody staff were present, not the ADA nurse. It is unclear whether the ADA nurse was (a) absent or (b) present but non-participatory. During the IP interviews, 11 IPs stated that the ADA Unit had not conducted an interview. Nine (9) of the 11 IPs had an “ADA Mobility,” “ADA Hearing,” or “ADA Vision” flag, and two (2) of the IPs did not have an “ADA Mobility,” “ADA Hearing,” or “ADA Vision” flag.

The Settlement Agreement and Order requires the ADA Unit to effectively communicate to the IP information about the auxiliary aids and accommodations at the jail facilities that may meet that person’s needs, as well as the process for requesting reasonable accommodations. The Neutral Expert notes that the completed San Diego County Sheriff’s Office ADA Interview Questions (December 2025 to March 2026), reflect the ADA staff effectively communicated with IPs information about the auxiliary aids and accommodations at the jail facilities that may meet their needs, as well as the process for requesting reasonable accommodations for cases with “ADA Mobility,” “ADA Hearing,” or “ADA Vision” flags who require effective communication.

Recommendations:

- *Include the date of flag placement on the ADA 7-Day, 60-Day, and 6 Month Interview Excel Spreadsheets
- *Include the date of the last ADA interview on the ADA 7-Day, 60-Day, and 6 Month Interview Excel Spreadsheets
- *Provide proof-of-practice that the ADA staff conducts a face-to-face meeting with an IP upon their request
- Ensure the ADA Unit conducts the interviews within the required 7-day, 60-day, and 6-month timeframe

16. *The ADA Unit currently consists of three deputies, one sergeant, one lieutenant, and one nurse. The Unit reports to a Captain, who reports to a Commander. Additionally, the Unit is supported by an attorney and a supervisory nurse. A designated mental health clinician supports the ADA Unit for individuals with mental health or intellectual disabilities to ensure that reasonable accommodations and equal, meaningful program access are provided. The custody, medical, and mental health staff members within and supporting the ADA Unit shall have staffing, resources, and authority necessary to ensure that incarcerated people with disabilities timely receive reasonable accommodation and equal, meaningful access to programs, services, and activities. The designated ADA deputies currently function as liaisons for each facility with their primary office located with the ADA Unit. Each facility shall also have at least one staff member who is designated to liaison with the ADA Unit as needed along with their other assigned duties. The County shall maintain an ADA Unit and ensure that the contact information for the ADA Unit and the name and contact information for the ADA Coordinator are clearly posted and accessible in the intake area, in every jail facility housing unit, and in the public lobby of each facility.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024)

Training - NA

Documents Produced/Reviewed – Notice of Non-Discrimination on the Basis of Disability (English and Spanish), San Diego Sheriff's Office Incarcerated Person ADA Information Brochure (English and Spanish), Post Orders for ADA Liaisons (EMDRF, GBDF, LCDRF, RMDF, SBDF, VDF), Post Order for ADA RN, ADA Liaisons for Facilities and Courts (6/2/26), ADA Certificates for Rocky Mountain ADA Training Center for 23 staff

Implementation

During the previous inspection, the Neutral Expert noted that the ADA Unit Deputy Post Orders (June 20, 2024), ADA Unit Lieutenant Post Orders (June 24, 2024), and ADA Unit Sergeant Post Orders (June 20, 2024) include detailed responsibilities and specific duties for the ADA Custody positions. The County did not produce the post orders for the ADA nurse, the designated mental health clinician who supports the ADA Unit, or the ADA liaisons. The County drafted and implemented the ADA liaison and ADA Nurse post-order, outlining their specific roles and responsibilities. The duties include:

- Attend ADA-related training.
- Attend ADA Unit meetings (in person or via TEAMS).
- Serve as liaison between the assigned facility and the ADA Unit.
- Act as an ADA resource for the assigned facility.
- Assist with recommending reasonable accommodations for IPs with ADA disabilities.
- Assist with answering ADA-related requests and grievances (as needed).
- Assist with conducting ADA Unit interviews (as needed).
- Assist the facility with ADA auxiliary aids and services (including connectivity matters and tracking).
- Assist with community events (if available).

- Perform any additional duties assigned by the ADA Unit Sergeant.

The ADA Unit's staff Post Orders include all requirements of the ADA Unit listed in the Settlement Agreement and Order. The Neutral Expert commends the ADA Unit's determination and dedication in managing the SDSO ADA policies and procedures and assisting the jail staff in ensuring they are aware and are trained in their specific responsibilities, ensuring that IPs with disabilities receive timely, reasonable accommodation and equal, meaningful access to programs, services, and activities. It is evident that the ADA unit staff understand their roles and the requirements of the Settlement Agreement and Order. The ADA Registered Nurse Post Order details the ADA RN's duties and responsibilities.

The County produced a list of ADA Liaisons. The Neutral Expert notes that the County has an identified ADA Liaison for each facility (San Diego Central Jail [SDCJ], George Bailey Detention Facility [GBDF], Rock Mountain Detention Facility [RMDF], East Mesa Reentry Facility [EMRF], South Bay Detention Facility [SBDF], Las Colinas Detention and Reentry Facility [LCDRF], and Vista Detention Facility [VDF]), San Diego Court, El Cajon Court, Chula Vista Court, Vista Court, Juvenile Court, Kearny Mesa Court, Madge Bradley Building, [4]and for the Contraband Narcotics Interdiction Team. The Neutral Expert notes that at RMDF there are three (3) ADA Liaisons, at SBDF there are four (4) ADA Liaisons, and at all other facilities there is one (1). The Neutral Expert noted that the LCDRF ADA liaison is quite engaged; she reported that she does all ADA work "on my own" and is not assisted by facility health care staff. The GBDF ADA liaison reported that he is not involved with ADA housing issues or ADA requests/grievances. He reported, "I've interviewed a couple of IPs who had an overdue ADA unit check-in," and his ADA liaison role is to check devices monthly. The VDF ADA liaison reported that his ADA duties are less than 10% of his job. He reported that he checks the UbiDuo and VRI iPad monthly and "sometimes meets with ADA IPs" to give them the brochure; in such interactions, he does not provide an ADA orientation. The SBDF ADA liaison was new to the position and had not begun his ADA duties.

During the on-site inspection, the Neutral Expert confirmed that the contact information for the ADA Unit and the name and contact information for the ADA Coordinator were clearly posted and accessible in the intake area in all jail facility housing units and intake areas toured, and in the public lobby of each facility.

During the previous inspection, the Neutral Expert noted that there is currently one (1) ADA nurse assigned to the ADA Unit, and it could not be determined if the nurse has the time/capacity to complete all ADA nurse tasks required under the Settlement Agreement and Order and post-order. These tasks include conducting complete functional assessments, providing 1:1 ADA contacts, reviewing and responding to ADA health care requests/grievances, and completing tasks related to work and program clearance/accommodations (when implemented). As no change was reported during this inspection, the County must continue to evaluate the need for additional medical staff as part of the ADA Unit staffing/structure, as paragraph 14 requires that the ADA Unit has staffing, resources, and authority sufficient to carry out its duties.

During the IP interviews, 19 IPs reported not being informed and not knowing how to contact ADA staff.

[4] The court facilities are not encompassed by the ADA Settlement

Recommendations:

The ADA Unit must continue to:

- *Ensure that IPs with disabilities receive timely, reasonable accommodations and equal, meaningful access to programs, services, and activities
- Ensure the ADA Liaisons are engaged in assisting the ADA Unit in its functions, including the ADA interviews, ensuring IPs are housed based on their housing accommodations
- Ensure the custody, medical, and mental health staff members within and supporting the ADA Unit have staffing, resources, and authority necessary to ensure that incarcerated people with disabilities receive reasonable accommodation and equal, meaningful access to programs, services, and activities timely

B. ADA Notices and Orientation

17. The Sheriff's Office shall ensure that people with disabilities are informed of their rights under the ADA via the ADA Notice, IP Handbook and/or ADA/Disability information brochures. This includes the process for requesting a reasonable accommodation and how and where to file grievances. This ADA Settlement Agreement and Order and the 2023 ADA Order shall be made available to incarcerated people through video kiosks and in hard copy upon request.

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), DSB Policy O.3 Rules and Regulations of Incarcerated Persons (March 24, 2025), P.11 Effective Communication (December 19, 2025)

Training – NA

Documents Produced/Reviewed – Previous Inspection _ Notice of Non-Discrimination on the Basis of Disability (English and Spanish), San Diego Sheriff's Office Incarcerated Person ADA Information Brochure (English and Spanish), San Diego County Sheriff's Office ADA Unit Interview Questions, San Diego Sheriff's Office Facility Handbook (March 2025), Joint Motion and Order Re Accessibility at Central Jail, Effective Communication Policy and Practice, and Provisional Class Certification, Joint Motion and Order RE: Remaining ADA Issues and Resolving Claim for Relief, and Order Granting Joint Motion for Class Certification and Approval of Proposed Class Action Notice Plan, and the San Diego County Sheriff's Office Dunsmore Class Certification Notice Request Logs (SDCJ, GBDF and SBDF), ADA-1 ADA Unit Interview Questions (1/26/26)

Implementation

During the previous inspection, the Neutral Expert noted that the Notice of Non-Discrimination on the Basis of Disability (English and Spanish), San Diego Sheriff's Office Incarcerated Person ADA Information Brochure (English and Spanish), and the San Diego Sheriff's Office Facility Handbook (March 2025), contain information regarding the IPs' rights

under the ADA and the process for requesting a reasonable accommodation and how and where to file grievances. These are available for IPs to view (with the notice of non-discrimination posted on the housing unit walls and the other documents on the kiosk). The County has added a checkbox (January 2026) for ADA staff to indicate whether the ADA brochure was offered to the IP.

However, during the inspection, 18 of 40 IPs interviewed reported not being provided with a copy of the San Diego Sheriff's Office Incarcerated Person ADA Information Brochure. 15 interviewed IPs reported not knowing how to request an accommodation or how and where to file grievances, and 11 reported not knowing about disability-related information in the handbook.

The San Diego Sheriff's Office Facility Handbook is not provided (hard copy) to IPs and is available on the Kiosks. The Neutral Expert notes that the San Diego County Sheriff's Office ADA Unit Interview Questions include the following question. "Do you know how to and/or have you been able to request or access: New Reasonable Accommodations and File a Grievance?" During the on-site inspection, the Neutral Expert did not have the opportunity to observe an ADA Unit 7-Day review, during which the ADA Unit Interview Questions would be asked and the required information provided to the IPs. The Neutral Expert will ensure an initial ADA interview is observed during the next inspection.

The ADA Unit conducts ADA reviews only for IPs with "ADA Mobility," "ADA Hearing," "ADA Speech", or "ADA Vision" flags, and MH staff or Counselors meet with IPs identified with cognitive, learning, developmental, intellectual, and mental health disabilities. The ADA orientation materials (i.e., information regarding the ADA Unit, ADA requests/grievances, etc.) must be provided during the counselor meeting and delivered with effective communication accommodations. As with the first inspection, IPs with these disabilities reported being unaware of how to request an accommodation, how and where to file grievances, and where to find disability-related information in the handbook.

Additionally, although the ADA Settlement Agreement and Order and the 2023 ADA Order are available on the Kiosks, IPs interviewed, especially those with cognitive, learning, intellectual, and developmental disabilities, reported that they do not know how to access the Kiosks. The County must implement a process to ensure that IPs know how to use the video kiosks and can access the ADA information.

During the previous inspection, the Neutral Expert noted that the County has a process for documenting the provision of hard copies of the ADA Settlement Agreement and Order and the 2023 ADA Order upon the IPs' request. During this inspection, the County did not produce the San Diego County Sheriff's Office Dunsmore Class Certification Notice Request Logs. These logs, when previously produced, documented the provision of the ADA Settlement and the 2023 ADA Order.

Recommendations:

- *Ensure all IPs with a qualified disability are offered and provided information about their rights under the ADA, the process for requesting a reasonable accommodation, and how and where to file grievances
- Implement a process to ensure that IPs know how to use the video kiosks and can access the ADA information

- *Ensure IPs are provided a hard copy of the ADA Settlement Agreement and Order and the 2023 ADA Order when requested

18. *The County shall ensure that any orientation materials it provides (including written and video materials) are accessible to all people with disabilities, including but not limited to individuals with vision disabilities, intellectual or cognitive disabilities, hearing disabilities, or any other disabilities that may affect communication. The orientation materials shall include information on ADA rights; the process for requesting a reasonable accommodation; the ADA request and grievance processes, including the location of forms, how to submit them, and how to obtain assistance completing them; and information about the ADA Unit and how to contact them. The orientation video shall be available in closed captioning and Spanish. The video shall be provided in sign language consistent with effective communication requirements, including as set forth in the 2023 ADA Order.*

Compliance Rating: Non- Compliance

Previous Compliance Rating: Non-Compliance

Policies – DSB Policy T.2 Orientation for Incarcerated Persons (November 7, 2023), and DSB Policy P.11 Effective Communication (December 19, 2025)

Training - NA

Documents Produced/Reviewed – San Diego Sheriff's Office Facility Handbook (March 2025)

Implementation

The County reported that this paragraph is not ready for review. The County is developing orientation materials related to this provision.

During the previous inspection, the Neutral Expert noted that DSB Policy T.2, Orientation for Incarcerated Persons, requires all facilities to ensure that IPs are oriented at or before placement into a living unit. The orientation must be provided to IPs in English, Spanish, and sign language. The orientation must be documented and include information on rules and disciplinary procedures, grievance procedures for IPs, available programs and activities, medical services, and classification/housing assignments. The orientation must also be documented. The policy also requires that the orientation video be played at least once per day at each of the Sheriff's detention facilities, and that a verbal orientation be provided by the Jail Population Management Unit (JPMU) deputy when the IP is assigned a housing designation. The Neutral Expert will review this paragraph for compliance during future inspections and will focus on the requirements for the County to ensure that the orientation materials it provides (including written and video materials) are accessible to all people with disabilities, including but not limited to individuals with vision disabilities, intellectual or cognitive disabilities, hearing disabilities, or any other disabilities that may affect communication. The Neutral Expert will also focus on the requirements for the orientation materials to include information on ADA rights; the process for requesting a reasonable accommodation; the ADA request and grievance processes, including the location of forms, how to submit them, and how to obtain assistance completing them; and information about the ADA Unit and how to contact them and that the orientation video is available in closed captioning and Spanish and provided in sign language consistent with effective communication requirements. During the IP interviews, 34 of the 40 IPs reported they had not viewed the orientation video.

Post-inspection, the County produced the San Diego Sheriff's Office Area Activities Summary Reports (Orientation Video) for all facilities. The reports reflect that the orientation video at VDF was played every day, and at all other facilities, it was mostly played every day.

Recommendations:

- *Ensure that any orientation materials the County provides to IPs (including written and video materials) are accessible and effectively communicated to all IPs with disabilities, including but not limited to IPs with vision disabilities, intellectual or cognitive disabilities, hearing disabilities, or any other disabilities that may affect communication
- *Ensure the orientation materials, when developed, include information on ADA rights; the process for requesting a reasonable accommodation; the ADA request and grievance processes, including the location of forms, how to submit them, and how to obtain assistance completing them; and information about the ADA Unit and how to contact them
- *Ensure the orientation video is available in closed captioning and Spanish
- *Ensure the orientation video is provided in sign language, consistent with the effective communication requirements

19. *At all stages of the booking and orientation process, the County shall continue to provide reasonable accommodations and support to incarcerated persons with disabilities affecting communication, such as those who have developmental or intellectual disabilities, are blind, low-vision, or hard of hearing, as necessary to ensure effective communication of booking or orientation information that is being shared. Incarcerated persons with hearing disabilities who use sign language are covered in the 2023 ADA Order and shall receive effective communication as previously agreed to and as required by current Detentions Services Bureau Policy.*

    Compliance Rating: Partial Compliance

    Previous Compliance Rating: Partial Compliance

    Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), DSB Policy O.3 Rules and Regulations of Incarcerated Persons (March 24, 2025), DSB Policy P.11 Effective Communication (December 19, 2025), San Diego Sheriff's Office Medical Services Division Receiving Screening E.2.1. (March 21, 2025)

    Training – First Inspection - Incarcerated Persons with Disabilities Quick Reference Guide for Staff, Assistive Devices and Durable Medical Equipment (DME) Reference Guide, Telephone Handset Amplifiers, Americans with Disabilities PowerPoint Training (multiple trainings), InterpretManager App PowerPoint, ADA Unit PowerPoint, Purple Communications Video Phone Training, UbiDuo 3 Operator Training. No documents during this inspection.

    Documents Produced/Reviewed – December 2025 Effective Communication at Booking, December 2025 ADAE, January 2026 ADAE, February 2026 ADA E, March 2026 ADA EC, March 2026 ADAE, April 2026 ADAE Only, February, March and April 2026 ADA EC Bookings, EC Event Entries at Booking February 2026, March 2026 EC at Intake Booking, VRI-JIMS Logs January 2026, Medical Progress Notes of Selected Cases

Implementation

Medical staff interviewed reported that the IP's preferred method of communication is identified during the intake medical receiving screening and the second-stage medical screening, where a medical provider and/or a QMHP conducts an ADA Functional Assessment. The medical staff also reported that staff create an alert in TechCare, which populates in the Jail Information Management System (JIMS), where booking, intake, classification, and all other staff can view the flag and required accommodations. The San Diego Sheriff's Office Medical Services Division Receiving Screening E.2.1. includes the process for medical intake staff to identify IPs with communication disabilities and their accommodation needs, refer them to the second-stage medical screening, and complete the ADA Functional Assessment. Custody staff interviewed reported that intake booking staff identify IPs with communication disabilities and their accommodation needs by reviewing the JIMS ADA report, the accommodations noted on the Booking Intake/Personal Property Inventory (J-15), and the IP's face card. Custody staff also reported that they can access disability-related information and accommodations on JIMS (Flags), consistent with policy M.39, Disabled Incarcerated Persons. Both the custody and medical staff reported that the identified accommodations are provided during the booking and orientation processes. DPT and custody staff interviewed reported that they are made aware of disabled IPs who require accommodations, such as effective communication and accessible holding cell placement, by healthcare staff or by viewing the flags in JIMS. Staff reported that accommodations are provided, such as VRI, UbiDuo, speaking louder, using simple language, and placement in accessible holding cells. In addition, sworn staff have access to an electronic system (Titan) on handheld devices that includes disability information for the incarcerated persons along with the associated accommodations.

The County produced the medical clearance questions and the ADA Functional Assessment questions, and the Neutral Expert confirmed that both include questions about communication disabilities and accommodation needs. However, during the on-site observation of the medical clearance process at SDCJ, the Neutral Expert noted that the RN conducting the intake did not ask all of the disability-related questions. Therefore, custody staff may not be made aware of a communication disability and related accommodation needs, and, as a result, effective communication accommodations may not be provided.

The documents produced by the County (December 2025 ADAE, February 2026 ADAE, March 2026 ADA EC, March 2026 ADAE, April 2026 ADAE Only, March and April 2026 ADA EC Bookings) reflect five (5) cases where staff documented the provision of effective communication accommodations (VRI, speaking louder) during the booking process. The Neutral Expert notes that in most cases, staff did not document the type of encounter for which effective communication accommodations were intended. The progress notes reviewed reflect that there was one (1) case where an SLI was provided during the booking process. The Neutral Expert selected cases involving IPs whose preferred method of communication is ASL and requested documentation of effective communication accommodations provided during the booking process. Of the six (6) cases booked, in only two (2) cases did medical staff provide and document effective communication. For the six (6) cases selected, there was no documentation that accommodations for effective communication (ASL/VRI) were provided during the custody booking and classification process.

During the IP interviews, 6 of the 16 IPs with identified communication disabilities reported that effective communication was not provided during the booking/intake process.

The Neutral Expert selected 11 cases involving IPs with communication accommodations who were booked into the jails and requested Body Worn Camera (BWC) footage and medical progress notes as evidence that staff provided the required accommodations. Of the 11 cases that were booked during the document production period, there was only one (1) case where medical staff documented effective communication. Additionally, a review of the BWC did not reflect that effective communication was provided during the custody booking and classification process for all cases.

Recommendations:

- *Ensure medical staff ask all questions in the TechCare portion of the medical clearance and receiving screening
- *Although not required by the ADA Settlement Agreement and Order, ensure staff document in JIMS the type of encounter EC is being provided for the Neutral Expert to identify the type of encounter when rating the provision of effective communication required by this paragraph
- *Ensure staff provide EC accommodations for all IPs with an identified disability affecting communication, such as those who have developmental or intellectual disabilities, are blind, low-vision, or hard of hearing, as necessary to ensure effective communication of booking or orientation processes

C. ADA Policies, Procedures, and Training

20. The County shall revise and implement systemwide Detention Services Bureau policies and procedures and facility specific-policies and procedures, and training as necessary to ensure compliance with the ADA, related federal and state disability laws, the ADA's implementing regulations, and the requirements set forth herein.

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - Policies listed in Paragraph 14

Training – Trainings listed in Paragraph 14

Documents Produced/Reviewed – See Above

Implementation

The Neutral Expert notes that the County has revised and implemented some policies (DSB Policies), facility-specific policies and procedures (Green Sheets), and training. Since the last inspection, the County has revised the following policies and DSB policies, facility-specific policies and procedures (Green Sheets), and training:

- SDCJ Green Sheet M.39.C.1 3/6/26
- SDCSO DSB I.64 Safety Checks: Housing and Holding Areas of Incarcerated Persons 8/5/25
- SDCSO DSB I.51 Movement of Incarcerated Persons 1/30/26
- SDCSO DSB P.11 Effective Communication 12/19/25

- SDCSO DSB R.11 Incarcerated Person Facility Assignment Criteria 1/30/26
- GBDF Green Sheet P.9.G Social Visiting 10/14/25
- GBDF Green Sheet J.3.G Separation: Definition and Use 10/14/25
- SDCSO DSB I.52 Strip and Pat Down Searches of Incarcerated Persons 12/1130/25
- SDCSO DSB I.43 Count Procedures of Incarcerated Persons 2/20/26
- Medical Assistive Devices (ADA-3)
- DSB P&P P.11 Effective Communication Update Training Bulletin
- Medical Services Division ADA Hearing Flag Training Bulletin
- SDCSO DSB I.50 Body Scanner and X-Rays 3/13/26
- SDCSO DSB J.03 Separation: Definition and Use 3/13/26

The Neutral Expert notes that revision and implementation of systemwide Detention Services Bureau policies and procedures, facility-specific policies and procedures, and training are ongoing.

Recommendations:

- *Continue revising and implementing systemwide policies and procedures, and facility-specific policies and procedures, and training as necessary to ensure compliance with the ADA, related federal and state disability laws, the ADA's implementing regulations, and the requirements of the ADA Settlement Agreement and Order

21. *The County shall revise and implement Medical Services Division policies as necessary to ensure compliance with the ADA, related federal and state disability laws, the ADA's implementing regulations, and the requirements set forth herein.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies – (First Inspection) San Diego Sheriff's Office Medical Services Division, Orientation for Health Staff C.9.1 (7/10/24), San Diego Sheriff's Office Medical Services Division Receiving Screening E.2.1 (3/21/25), San Diego Sheriff's Office Medical Services Division Incarcerated Persons with Chronic Diseases, Disabilities, or Other Special Needs F.1 (3/21/25) (3/3/25) - Revised policies produced for the second inspection: MSD B.4.1 Medical Surveillance of Incarcerated Workers (2/7/25), MSD G.1 Grievances (4/18/25), MSD S.3. Non-Emergent Healthcare Requests and Sick Call (4/18/25)

Training - NA

Documents Produced/Reviewed – All policies listed above

Implementation

The Neutral Expert notes that the County has revised and implemented some Medical Services Division policies since the settlement agreement was signed and prior to the appointment of the Neutral Expert. However, the Medical Services Division must review and, as appropriate, revise policies to ensure compliance with the ADA, related federal and state disability laws, the ADA's implementing regulations, and the requirements of the ADA

Settlement Agreement and Order. No revised MSD Policies were produced for the second inspection.

Recommendations:

- *Continue revising and implementing Medical Services Division policies as necessary to ensure compliance with the ADA, related federal and state disability laws, the ADA's implementing regulations, and the requirements of the ADA Settlement Agreement and Order

22. *The County shall ensure that all current and future jail staff receive annual ADA training appropriate to their position. This requirement includes County and contracted staff (custody, health care, programs, administrative, etc.), who must follow the Sheriff's Office's Detention Services Bureau's and/or Medical Services Division's policies and procedures. The ADA training may include, but is not limited to, training bulletin, in-classroom, real-time virtual, and/or interactive virtual training for staff. Trainers will have subject matter expertise or be provided training-for-trainers instruction by the ADA Unit. All new jail staff shall also receive ADA training appropriate to their position. The initial training provided to staff and contractors will cover all topics addressed in section III, ADA Remedial Actions, of this ADA Settlement Agreement and Order, as relevant to their respective positions and job duties.*

Compliance Rating: Non-Compliance

Previous Compliance Rating: Non- Compliance

Policies - NA

Training – Trainings listed in Paragraph 14

Documents Produced/Reviewed – See bullets below for training documents produced

Implementation

The County reported that this paragraph is not ready for review. The County is working on training related to this provision. No documents were produced.

During the last inspection, in review of the training documents produced, the Neutral Expert noted that the County has developed and provided training to staff (custody and medical). However, aside from training provided to new recruits in the academy, the Neutral Expert noted that the training is primarily delivered through training bulletins via the Learning Management System (LMS) and through briefings. The Neutral Expert strongly recommended that the initial annual ADA training be presented in an in-classroom setting, where participants can engage with the presenter on any questions or areas of the training that require clarification. All staff interviewed reported receiving ADA training through Training Bulletins via the LMS and in person briefings.

Post-inspection, the County provided the Neutral Expert with ADA-related training for staff. This includes:

- Assignment Completion AD Hoc View Report – DSB Effective Communication Update of 4372 staff, 4335 staff completed the training (37 have not)

- Assignment Completion AD Hoc View Report – Safety and Security Form Training of 4372 staff, 4282 staff completed the training (90 have not)
- List of ADA Training since July 2024 (the number of staff trained was not provided)
    - July 17, 2024 - Train the trainer
    - Oct 20, 2025 - VPED (ADA portion)
    - Oct 22, 2025- Det Academy
    - Oct 24, 2025 - VDF TM4 briefing
    - Oct 28, 2025 - LCDRF TM 2 briefing
    - Oct 31, 2025- RMDF TM 2 briefing
    - Nov 3, 2025- EMRF TM 2 briefing
    - Nov 5, 2025- SDCJ TM 4 briefing
    - Nov 6, 2025- SBDF TM 4 briefing
    - Nov 7, 2025- VPED (ADA portion)
    - Nov 10, 2025- GBDF TM 2 briefing
    - April 14, 2026- EMRF TM 2 morning briefing- ADA-3, ADAE, VRI, ADA list, TBs
    - April 20, 2026- RMDF TM 2 morning briefing- same
    - April 22, 2026- SDCJ TM 4 morning briefing- same
    - April 23, 2026- SBDF TM 4 morning briefing- same
    - April 24, 2026 - VDFTM 4 morning briefing- same
    - April 27, 2026- SDCJ TM 2 morning briefing- same
    - April 28, 2026- LCDRF TM 2 morning briefing- same
    - May 2, 2026- GBDF TM 2 morning briefing- same
    - May 7, 2026- Det Academy- Title 2, Dept P&P, practical application
- MSD Training Bulletin ADA Safety and Security Form 5/19/26
    - 61 staff
        - CHP/NaphCare
        - Liberty
        - UNI
- Training Bulletin Safety and Security Form (Medical Staff) February 2026
    - 10 completed and 21 not completed (67% not completed)

Other than the Ad Hoc reports for two (2) trainings, detailed information for the staff trained on all other ADA trainings was not provided.

During the inspection, a GBDF dental hygienist (Naphcare) reported having no training or familiarity with ADA flags and no information about SLI or other EC procedures/requirements. A GBDF Psych Nurse Practitioner (Naphcare) stated: “I’m not familiar with any ADA policy here.” Also, CHP providers reported that they have not received any ADA training and don’t know what a “Training Bulletin” is. The County later confirmed that the CHP provider who said they had no ADA training had signed off on the training bulletins. The County also provides custody ADA training during “briefings” and conducting the trainings in person is positive; however, the briefings are informal. The County should document the trainings and participants and provide the information to the Neutral Expert. The Neutral Expert also strongly recommends that the initial annual ADA training be presented in an in-classroom setting, where participants can engage with the presenter on any questions or areas of the training that require clarification. Follow-up training can be presented using other training modalities.

Recommendations:

- *Develop the annual training curriculum for all staff that is appropriate to the staff's (County and contracted) position
- *The Neutral Expert strongly recommends that the initial annual ADA training be presented in a in classroom setting where the class participants can engage with the presenter on any questions or areas of the training that require clarification. Follow-up training can be presented using other training modalities
- *Ensure all new jail staff receive ADA training appropriate to their position
- *Ensure the training curriculum covers all topics addressed in section III, ADA Remedial Actions, of the ADA Settlement Agreement and Order, as relevant to their respective positions and job duties

23. *The County shall provide draft revisions of the aforementioned policies, procedures, and trainings to the neutral expert for prompt review and comment. Any documents, including draft revisions of the aforementioned policies, procedures, and trainings, that either side provides to the neutral expert shall be shared with counsel for the other side as noted in paragraph 137 of this ADA Settlement Agreement and Order.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies – Policies listed in Paragraph 20

Training - NA

Documents Produced/Reviewed – Policies listed in Paragraph 20

Implementation

The Neutral Expert notes that the County continues to revise and implement DSB Policies, facility-specific policies and procedures (Green Sheets), and training. However, revision and implementation of systemwide Detention Services Bureau policies and procedures, facility-specific policies and procedures, and training is ongoing. The County provides draft revisions of policies and procedures to the Neutral Expert for review and comment. Refer to Paragraph 20 for the policies and training provided to the Neutral Expert.

Recommendations:

- *Continue to provide draft revisions of policies, procedures, and training to the Neutral Expert for review and comment

D. Identification and Tracking of Incarcerated Persons with Disabilities

24. *The County shall develop and implement policies, procedures, and training to ensure that the jail system, including all relevant custody, health care, administrative, and program staff, identifies and tracks all incarcerated persons with disabilities who report and/or have been identified to require accommodations throughout a person's time in custody.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies – Policies listed in Paragraph 14

Training – Trainings listed in Paragraph 14

Documents Produced/Reviewed – NA

Implementation

The Neutral Expert notes that the County has revised and implemented some DSB Policies, facility-specific policies and procedures (Green Sheets), and training. However, the revision and implementation of systemwide and facility specific DSB policies and procedures, as well as training, are ongoing.

Recommendations:

- *Continue revising and implementing systemwide policies and procedures, and facility-specific policies and procedures, and training to ensure that the jail system, including all relevant custody, health care, administrative, and program staff, identifies and tracks all incarcerated persons with disabilities who report and/or have been identified to require accommodations throughout a person's time in custody

25. *The County shall ensure that the jail facility ADA screening process includes, at minimum, consideration of the individual's own claim to have a disability, documentation of a disability in the County's health record, staff observation that the person may have a disability, communications regarding a person's disabilities provided by the California Department of Corrections and Rehabilitation or other law enforcement agencies, and any information from a third party, such as a friend or family, about a person's disability-related conditions and needs.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), DSB Policy P.11 Effective Communication (December 19, 2025), San Diego Sheriff's Office Medical Services Division Receiving Screening E.2.1. (March 21, 2025).

Training - NA

Documents Produced/Reviewed – Completed ADA Functional Assessment, Receiving Screening and Medical Screenings for December 2025 to April 2026, Medical Clearance questions, Armstrong Notifications – How to (5/20/26)

Implementation

Medical staff interviewed reported that disabilities and the associated accommodations are identified during the intake medical receiving screening and the 2nd stage medical screening,

where a medical provider and/or a QMHP conducts an ADA Functional Assessment. The medical staff also reported that staff create an alert in TechCare (flag), which populates in the Jail Management System (JIMS), where booking, intake, classification, and all other staff can view the disability-related flag and required accommodations. The San Diego Sheriff's Office Medical Services Division Receiving Screening E.2.1. includes the process for medical intake staff to identify IPs with physical, intellectual, cognitive learning, and psychiatric disabilities and associated accommodation needs; refer IPs to the 2nd-stage medical screening; and complete the ADA Functional Assessment. The policy also includes obtaining information from the arresting officer regarding disabilities and accommodation needs. DSB Policy M.39 Disabled Incarcerated Persons states, "Identification of an incarcerated person with a disability can occur at any point during an individual's incarceration (e.g., Jail Population Management Unit (JPMU) interview, outside agency, by the advisement of a family member, etc.)."

The County produced the medical clearance questions and the ADA Functional Assessment questions, and the Neutral Expert confirmed that both include questions about disabilities and accommodation needs. However, during the on-site observation of the medical clearance process at SDCJ, the Neutral Expert noted that the RN conducting the intake did not ask all of the disability-related questions. Based on this, it is possible that disabilities and their associated accommodations are not being identified; therefore, staff are not being made aware of the disability and its associated accommodation needs, and, potentially, accommodations are not being provided.

The County is required to consider CDCR Armstrong notifications as part of the disability evaluation process. The policies do not require the ADA screening process to include, at a minimum, consideration of and documentation of a disability in the County's health record, staff observation that the person may have a disability, and communications regarding a person's disabilities. Although outside the rating period, the County produced a document titled "How to Address Armstrong Notifications." The process provides guidance for staff to follow when receiving "Armstrong Notifications" from CDCR. The Neutral Expert will review this process during the next inspection.

Recommendations:

- *Ensure medical staff ask all questions in the TechCare portion of the medical clearance and receiving screening
- *Revise San Diego Sheriff's Office Medical Services Division Receiving Screening E.2.1 to include the requirement for the ADA screening process to include, at minimum, consideration of, documentation of a disability in the County's health record, staff observation that the person may have a disability, and communications regarding a person's disabilities provided by the CDCR
- *Produce CDCR notifications for people with disabilities to the Neutral Expert

26. *All incarcerated persons shall be screened by health care staff who have received the training specified in Paragraph 22 during the intake process to identify disabilities and reasonable accommodations. If an incarcerated person is identified to have a disability that requires accommodation, health care staff will update the person's health record and collaborate with sworn staff as needed to ensure the person is appropriately accommodated through the booking and classification process. For incarcerated persons who health care staff have preliminarily screened and identified to have a disability, health care staff shall conduct an effective ADA Functional Performance assessment during the booking process. Health care*

staff shall document any housing accessibility features and accommodations required by an incarcerated person during their time in custody in the person's health record, and that information will be reflected in the disability tracking system. Health care staff conducting the intake shall be responsible for documenting the person's disability and any accommodations the person requires in the person's health record, and that information will be reflected in the disability tracking system.

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - **Policies** - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), DSB Policy P.11 Effective Communication (December 19, 2025), San Diego Sheriff's Office Medical Services Division Receiving Screening E.2.1. (March 21, 2025)

Training – Training documents listed in Paragraph 14

Documents Produced/Reviewed – Completed ADA Functional Assessment, Receiving Screening and Medical Screenings for December 2025 to April 2026

Implementation

Medical staff interviewed reported that all arrestees processed into the San Diego County Jails are screened for disabilities, and the associated accommodations are identified during the intake medical receiving screening and the 2nd-stage medical screening, where medical staff and/or a QMHP conduct an ADA Functional Assessment. The medical staff also reported that staff update the person's health record by creating an alert in TechCare (flag), which populates in the Jail Management System (JIMS), where booking, intake, classification, and all other staff can view the disability related flag and required accommodations. The San Diego Sheriff's Office Medical Services Division Receiving Screening E.2.1. includes the process for medical intake staff to screen and identify IPs with physical, intellectual, cognitive learning, and psychiatric disabilities and associated accommodation needs, to refer to the 2nd-stage medical screening, and to complete the ADA Functional Assessment. Custody staff interviewed reported that intake booking staff identify IPs with disabilities and their accommodation needs by reviewing the JIMS ADA report, the accommodations noted on the Booking Intake/Personal Property Inventory (J-15), and the IP's face card. Custody staff also reported that they can access disability-related information and accommodations on JIMS (Flags), consistent with DSB Policy M.39, Disabled Incarcerated Persons. Both the custody and medical staff reported that the identified accommodations would be provided during the booking and classification processes.

The County previously produced the medical clearance questions, the ADA Functional Assessment questions, and the Neutral Expert confirmed that both include screening questions for disabilities and their associated accommodation needs. The County also produced completed ADA Functional Assessments, completed Medical Clearances, and completed Receiving Screenings. These documents indicate that health care staff are screening arrestees being processed at the San Diego County Jails to identify disabilities and determine reasonable accommodations. In cases where an IP is identified as having a disability requiring accommodation, medical staff update the health record (create a flag), and the disability-related information is made available to custody staff so they can provide the required accommodations during the booking and classification process. For

incarcerated persons, medical staff have preliminarily screened and identified as having a disability, and medical/QMHP staff conduct an ADA Functional Performance assessment as part of the booking process. Medical staff also document some housing accessibility features and accommodations required by the IP during their time in custody in the health record, and that information is reflected in the ADA Tracking System. However, during the on-site observation of the medical clearance process at SDCJ, the Neutral Expert noted that the RN conducting the intake did not ask all of the disability-related questions. Based on this, it is possible that disabilities and their associated accommodations are not being identified; therefore, staff are not being made aware of the disability and its associated accommodation needs, and, potentially, accommodations are not being provided.

The County produced a blank "Appliance and Prosthesis Authorization" form providers use to "approve" assistive devices/DME/orange shoes. The Neutral Expert notes that the form does not include information regarding Lower Bunk/Tier accommodations. The Neutral Expert notes that the ADA Functional Performance Assessment asks the IP, "Are there any issues with housing accommodations (lower bunk/lower tier/accessible cell)?" The ADA Functional Performance Assessment also includes an "Action Plan" which includes:

- Obtain Verbal Order for Accommodations
- Refer to MD Sick Call
- Refer to QMHP Sick Call
- Other

However, aside from a comments field, there is no section for the RN to identify approved/authorized accommodations, such as low bunk/tier, accessible cell, shower accommodations, transportation accommodations, etc. It is unclear how medical staff document the accommodations other than entering the flag in TechCare. During the ADA Functional Performance Assessment observed by the Neutral Expert at SDCJ, the RN documented that the IP needed a lower bunk and lower tier. However, the RN did not add the flags – until he was prompted to ensure that the IP had those flags added to the flag in TechCare. The IP only had a lower bunk flag from the receiving screening.

In reviewing the ADA Functional Performance Assessments produced by the County, the Neutral Expert notes that they often lack clear next steps. At times, the "Action Plan" section is blank (SD 1690976, SD 1691006, SD 1691201, SD 1691052, SD 1691067, SD 1693566, SD 1693542, SD 1693527, SD 1693495, SD 1693480, SD 1687538, SD 1687532, SD 1687502, SD 1687496, SD 1687490. At times, the "Action Plan" section just says "Refer to MD Sick Call" without any comments to clarify for the provider what they need to assess SD 1691348. The County must provide clear guidance to staff on how to complete the ADA Functional Performance Assessments and audit the process to ensure they are completed as required.

Additionally, although the County produced the Medical Services Division Training Unit (ADA Intake Procedures), San Diego County Sheriff Training Bulletin (ADA Intake Procedures), Medical Services Division Training Unit (DSB.P.11: Effective Communication), San Diego County Sheriff Training Bulletin (I.22 Lower Bunk/Lower Tier and Medical Instruction Assignment P&P Update), San Diego County Sheriff Training Bulletin (M.39 Incarcerated Persons with Disabilities, Medical Services Division Training Unit (ADA Policy Updates), Medical Services Division Training Unit (ADA Cognitive Assessment – Mental Health), Medical Services Division Training Unit (ADA Speech Flag), and San Diego County Sheriff

Training Bulletin (Effective Communication). Other than the MSD Training Bulletin ADA Safety and Security Form, the County did not produce training records for medical staff who received the training.

Recommendations:

- *Ensure medical staff screen and ask all questions in the TechCare portion of the medical clearance and receiving screening.
- *Provide training records for health care staff who have received the training specified in Paragraph 22
- Ensure the RNs complete the ADA Functional Performance Assessments with all required information

27. *The intake screening shall assess all incarcerated persons for whether they have a disability that affects communication. Health care staff shall identify the accommodations necessary to achieve effective communication with an incarcerated person determined to have a communication-related disability, and document them in the person's health record. That information will be reflected in the disability tracking system. Health care staff shall give primary consideration to the preference of the person with a disability as to the method of communication and accommodation.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), DSB Policy P.11 Effective Communication (December 19, 2025), San Diego Sheriff's Office Medical Services Division Receiving Screening E.2.1. (3/21/25)

Training – Training listed in Paragraph 14

Documents Produced/Reviewed – December 2025 Effective Communication at Booking, February 2026 Effective Communication at Booking, February 2026 EC Events at Booking, January 2026 ADAE, February 2026 ADAE, March 2026 ADAE, April 2026 ADAE, December 2025 JIMS Archived Effective Communication Medical Instruction, January 2026 JIMS Archived Effective Communication Medical Instruction Medical Clearance questions, and ADA Functional Assessment, JIMS Archived ADA Medical Instructions Neutral (3)

Implementation

Medical staff interviewed reported that the IP's preferred method of communication is identified during the intake medical receiving screening and the second-stage medical screening, where a medical provider and/or a QMHP conducts an ADA Functional Assessment. The medical staff also reported that staff create an alert in TechCare, which populates in the Jail Management System (JIMS), where booking, intake, classification, and all other staff can view the flags. In addition, the effective communication accommodations are displayed as notes in TechCare, Titan, and the ADA List. The San Diego Sheriff's Office Medical Services Division Receiving Screening E.2.1. includes the process for medical intake staff to identify IPs with communication disabilities and their accommodation needs, to refer them to the second-stage medical screening, and to complete the ADA Functional Assessment. Custody staff interviewed reported that IPs with communication disabilities and

their accommodation needs are tracked and that this information is available to staff in the JIMS ADA report, which is consistent with DSB Policy M.39, Disabled Incarcerated Persons.

The County produced the medical clearance questions and the ADA Functional Assessment questions, and the Neutral Expert confirmed that both include questions about communication disabilities and accommodation needs. During the previous inspection, the Neutral Expert noted that the medical clearance did not first ask questions about a disability that affects communication. The Neutral Expert recommended reorganizing the questions so that the need for effective communication can be identified at the beginning of the receiving screening, allowing the required accommodations to be identified and provided throughout the rest of the screening process. During this inspection, the order of questions remained the same.

The documents produced by the County, January 2026 ADAE, February 2026 ADAE, March 2026 ADAE, December 2025 Effective Communication at Booking, February 2026 Effective Communication at Booking, February 2026 EC Events at Booking, April 2026 ADAE, December 2025 JIMS Archived Effective Communication Medical Instruction, January 2026 JIMS Archived Effective Communication Medical Instruction and JIMS Archived ADA Medical Instructions Neutral (3) reflect that the County is identifying IPs who have a communication disability and their associated accommodation needs (preferred method of communication). The Neutral Expert confirmed that this information is reflected on the ADA Tracking Report as required by the Settlement Agreement and Order. However, during the on-site observation of the medical clearance process at SDCJ, the Neutral Expert noted that the RN conducting the intake did not ask all of the disability-related questions. Based on this, it is possible that disabilities and their associated accommodations are not being identified; therefore, staff are not being made aware of the disability and its associated accommodation needs, and, potentially, accommodations are not being provided.

Recommendations:

- *Ensure medical staff ask all questions in the TechCare portion of the medical clearance and receiving screening
- *Reorganize the initial screening questions so that the need for effective communication can be identified at the start of the receiving screening, enabling the required accommodations to be identified and provided throughout the remainder of the screening process.

28. *"Disability tracking system" refers to the manner by which ADA disability and accommodation needs information is maintained and utilized across disciplines (custody, health care, reentry services, etc.). The County shall track individuals who have disabilities that require accommodations, other than medical or mental health treatment, using 6 medical flags: ADA Vision, ADA Hearing, ADA Medical, ADA Mobility, ADA Cognitive/Learning, and ADA Speech. If health care staff add one of these flags into a person's health record, that flag and the accompanying accommodation notes populate into other systems and reports that can be accessed without seeing the rest of the health record. The information cannot be modified outside of the health system.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024)

Training – NA

Documents Produced/Reviewed – JIMS Live ADA Medical Instructions Reports (VDF, LCDRF, GBDF, RMDF, SDCJ, SBDF, EMRF)

Implementation

The County tracks all IPs who have disabilities and their associated accommodations in the JIMS ADA Tracking System (Active Wheelchair Transport Special Cond, No Stairs Special Cond, Housing Accessibility Features). When ADA Flags are entered in TechCare by medical staff, the flags are populated in JIMS. The information is available to staff by accessing JIMS and viewing it on the screen or printing it as a housing report, facility report, or jail system report (all facilities). During the inspection, the County provided the Neutral Expert with daily JIMS Live ADA Medical Instructions Reports for each facility under review. The Neutral Expert notes that the report contains the medical flags required under paragraph 28. They include ADA Cognitive Learn, ADA Hearing, ADA Mobility, ADA Medical, ADA Vision, and ADA Speech. When medical staff adds one of these flags to an IP's health record, the flag populates into JIMS and the accompanying accommodation notes populate into Titan and the ADA List. The flags and notes can be accessed without seeing the rest of the health record. Additionally, the information cannot be modified outside of TechCare. However, this paragraph requires that, in addition to the flag populating in the ADA tracking system, the accompanying accommodation notes also populate other systems and reports accessible without viewing the rest of the health record. Paragraph 38 requires medical staff to evaluate an IP with an identified mobility disability to determine if they require a lower bunk and/or lower tier and whether the IP can access the bottom or middle bunk of a triple bunk. In addition, health staff must evaluate mobility-disabled IPs to determine whether they require access to an accessible shower, including a fold-down shower seat, shower chair, a reduced shower curb or lip, high/low showerheads, and grab bars in the shower. The ADA Functional Assessment includes the following questions for the medical staff to evaluate the IP for mobility and dexterity:

Jail Management System (JIMS), where booking, intake, classification, and all other staff can view the flags. In addition, the effective communication accommodations are displayed as notes in TechCare, Titan, and the ADA List.

- Can you perform the following without assistance?
    - Walk on level surface – Yes/No
    - Climb stairs – Yes/No
    - Transfer to bed – Yes/No
    - Transfer to toilet – Yes/No
    - Transfer to shower – Yes/No
    - Step on/off bus – Yes/No
    - Maneuver wheelchair – Yes/No
    - Stand – Yes/No
    - Lift – Yes/No
    - Bend – Yes/No
    - Reach – Yes/No
    - Use Hands – Yes/No

This evaluation allows the medical staff to identify the required accommodations. However, in reviewing the JIMS Live Medical Instruction Reports, the Neutral Expert notes that the reports include the following mobility-related medical instructions:

- Lower Bunk
- Lower Bunk and Tier
- No Top Triple Bunk

The SDCJ JIMS Live Medical Instruction Report also includes the following information in the "ADA Bed Accommodation" column, which the County reported is tied to the cell or bed and not the IP:

- ADA Compliant Shower
- ADA Compliant Shower and Grab Bars
- ADA Wheelchair Compliant
- Non-compliant toilet grab bars
- Non-compliant shower without step
- Non-compliant shower grab bars

During the previous inspection, the Neutral Expert noted that these accessible features are available; however, it is unknown how custody staff are being made aware of the accessible features mobility-disabled IPs require, so the County can ensure the IPs are provided with the required accommodations. Additionally, although the medical staff can evaluate the accommodations required by Paragraph 38 with the questions in the ADA Functional Assessment, it is unknown if they are providing custody with the following accommodations: access to an accessible shower, including a fold-down shower seat, shower chair, reduced shower curb or lip, high/low shower heads, and grab bars in the shower. It is possible that medical staff are providing this information because some IPs are housed in accessible locations; however, the Neutral Expert notes that this information is not being populated in the JIMS Live Medical Instruction Report and is not aware of how custody is making housing determinations. The County did not provide any updates regarding this issue.

Custody and Programs staff have access to ADA information in JIMS, and all housing unit staff interviewed reported that the ADA roster report is printed daily, ensuring staff are aware of disabled IPs and their associated accommodations. In review of the "Active ADA Medical Instruction (with notes) column, the Neutral Expert notes that this column includes information about whether an IP requires accessible transportation. All IPs with a full-time wheelchair flag require accessible transportation, and if an IP does not have a full-time wheelchair flag and requires accessible transportation, they have a WCT (Wheelchair Transport) special condition flag in the notes section of the ADA roster. Paragraph 33 states, "The disability tracking system shall identify any other accommodations a person needs, including but not limited to housing, classification, transportation, health care appliances, durable medical equipment, and assistive devices. Staff shall utilize the disability tracking system as necessary to ensure timely provision of accommodations. Examples of Transportation-related Accommodations include:

- Alternate restraint application (waist chains/leg irons)
- Hand(s)-free to utilize assistive device (may be one or both hands, depending on use of cane vs. walker)
- Staff assistance navigating the bus steps

The Functional Assessment Performance includes the following questions:

- Can you perform the following without assistance?
  - Climb Stairs
  - Are there any issues with transportation accommodations (vehicle/restraints)?

If there are no flags for these accommodations, flags will need to be added so these accommodations can be tracked in the ADA Tracking system.

The functionality of the tracking system meets the Settlement Agreement and Order; however, in some cases, the "Active Medical Instructions" column still only states "Please see progress note and QMHP note." This is not sufficient information for staff to know the accommodations they must provide to the IP.

Recommendations:

- *Ensure the accommodations of access to an accessible shower, including a fold-down shower seat, shower chair, reduced shower curb or lip, high/low shower heads, and grab bars in the shower, are included in the Disability Tracking System
- *Ensure that the "Active Medical Instructions" column includes all necessary ADA-related information gathered by health care staff to address the issues of JIMS providing only a reference to medical record information to which custody staff does not have access (e.g., "Please see progress note and QMHP note")
- Ensure information about transportation accommodations is included in the ADA tracking system

29. *The County shall maintain a process for conducting disability evaluations for persons after the medical intake screening, when warranted by individual circumstances. The identification of disabilities or requests for reasonable accommodations may occur at any time during an individual's incarceration (e.g., staff observation, incarcerated person request, reported by third parties such as family, etc.). Health care staff shall then conduct an ADA Functional Performance assessment. Health care staff conducting the assessment shall be responsible for documenting the person's disability and any new or modified accommodation needs in the person's health record, and that information will be reflected in the disability tracking system. Health care staff shall notify the Jail Population Management Unit ("JPMU") immediately of any impact to the person's housing needs.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024)

Training - NA

Documents Produced/Reviewed – Functional Performance Assessments

Implementation

DSB Policy M.39 includes a detailed process that staff must follow to identify disability accommodations after intake. This includes:

- If at any point during an individual's incarceration, a staff member identifies that an incarcerated person has a disability that requires accommodation that is not identified in their JIMS Medical Instructions, the incarcerated person shall be referred to the Sheriff's health staff for assessment.
  - The staff member who routed the incarcerated person to health staff shall document the incident in an Incident Report within JIMS with the primary incident type code: "ISR, Inmate Status Report".
  - Health staff shall notify JPMU if the incarcerated person has added JIMS Medical Instructions that impact their housing needs. At a minimum, this is done using Medical Instruction flags in TechCare that populate into JIMS and the ADA List included in the JIMS Web Floor Count (Updated) report (or the unit equivalent list containing ADA information).
  - Incarcerated persons can submit requests for new reasonable accommodations via the Healthcare Request form and process.

Medical staff reported that they conduct disability evaluations after the medical intake screening for cases referred by staff, based on an IP request, or reported by a third party. The ADA Nurse, QMHP, or other medical staff would conduct an ADA Functional Assessment and refer to a medical provider to determine housing and/or other accommodations.

Custody staff interviewed reported that, in cases where they observed an IP with a potential disability that wasn't identified as such in the ADA Tracking reports, they would refer the IP to medical/mental health for an evaluation.

During the previous inspection, the County produced "ADA Flags After Booking" (January 2025 to October 2025) and completed ADA Functional Assessments (January 2025 to October 2025); the Neutral Expert noted that it was evident that the County has established and maintains a process for conducting disability evaluations for IPs after the medical intake screening. Medical staff conduct an ADA Functional Performance assessment, document the IP's disability and any new or modified accommodation needs in TechCare, and populate the information into the ADA tracking system, including notifying JPMU of any impact on the IP's housing needs. However, the Neutral Expert noted that to ensure the process is completed as required, he would need to evaluate it in its entirety. As reported in paragraph 83, the County is in the process of establishing a process to track and provide the Neutral Expert with completed Healthcare Request forms requesting disability accommodations.

Recommendations:

- *Provide the Neutral Expert with completed Healthcare Request forms where the IP is requesting a disability evaluation

30. *During the booking and intake process, persons with mobility disabilities who require accessible accommodations, including but not limited to those who use a wheelchair in housing, shall be placed in accessible holding cells. Such persons shall be permitted to retain and have access to the assistive device(s) they need to accommodate their disability unless there is a specific safety risk (see Assistive Devices section, below).*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024)

Training – Training listed in Paragraph 14

Documents Produced/Reviewed – Monthly ADA Lists and completed ADA-3 forms

Implementation

DSB Policy M.39 requires that IPs with mobility disabilities who require accessible accommodations, including but not limited to those who use a wheelchair, be placed in accessible holding cells and assisted through the booking and intake process as necessary. Sworn staff reported mobility disabilities and the associated housing accommodations are identified during the intake medical receiving screening and the 2nd stage medical screening, where the medical staff conducts an ADA Functional Assessment and medical staff creates an alert in TechCare which populates in the Jail Information Management System (JIMS) where booking, intake and classification and all other staff can view the flag and the required mobility housing accommodations can be viewed as notes in Titan and the ADA List. Sworn staff also reported that intake booking staff identify IPs with mobility disabilities and housing accommodation needs by reviewing the JIMS ADA report, the accommodations noted on the Booking Intake/Personal Property Inventory (J-15), and the IP's face card. Sworn staff also reported that, based on the accommodations listed, mobility disabled IPs who require accessible housing accommodations are placed in accessible holding cells. The documents produced by the County only include cases that were placed in inaccessible cells post-intake.

Sworn staff reported that the identified accommodations are provided during the booking and orientation processes. Sworn staff interviewed reported that they are made aware of disabled IPs who require accommodations, such as accessible holding cell placement and assistive devices, either by healthcare staff or by reviewing flags in JIMS. Staff reported that IPs are placed in accessible holding cells and are allowed to retain their prescribed assistive devices there unless there is a safety or security concern.

All mobility-disabled IPs who had been issued assistive devices during intake reported they were allowed to retain and access their assistive device(s) during intake. The Expert identified 24 cases (IPs assigned a full-time wheelchair) and requested Body-Worn Camera (BWC) footage of their processing into the jails. A review of the BWC is as follows:

- In three (3) cases, the IP was not placed in an accessible holding cell
- In 10 cases, there is no footage of the IP being placed into or removed from the holding cell
- In 10 cases, the IP is being placed and restrained in the corridor adjacent to the bench
- In one (1) case, the IP was not in a wheelchair during booking

In summary, in the three (3) cases where BWC reflected the IP not being placed in an accessible holding cell were not compliant with the SA requirement.

Additionally, conflicting information was reported regarding wheelchair bookings at VDF. In the first round, full-time wheelchair users were being booked at VDF. During this round. the VDF Captain reported that they book wheelchair users but then try to "expedite the transfer" to another facility. The classification deputy was unaware of the process. The DON later reported that they don't complete intake for IPs with a "full-time wheelchair," which was inconsistent with the VDF facility captain's report. Sworn staff in intake reported having wheelchair users in the booking cells. It is also unclear whether and how staff confirm whether someone is a full-time wheelchair user "pre-intake," and when the person is reportedly refused a booking.

Post-inspection, the County produced an email dated 5/18/26 from the ADA Sergeant, addressed to Detention Supervisors, regarding the provision of ADA Accommodations during the body-scanning process. The email states, "Individuals with mobility disabilities must not be placed into secondary screening during intake solely due to an inability to step into or stand for the body scan."

Recommendations:

- *Ensure IPs with mobility disabilities who require accessible accommodations, including but not limited to those who use a wheelchair, are provided the required accessible holding cell accommodations during the booking and intake process
- *The County must ensure that sufficient accessible holding cell capacity is available

31. *The County shall maintain an electronic disability tracking system to identify, based on an individualized assessment, all incarcerated persons with disabilities who require accommodations and the accommodations they require.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024)

Training – NA

Documents Produced/Reviewed – JIMS Live ADA Medical Instructions Reports (VDF, LCDRF, GBDF, RMDF, SDCJ, SBDF, EMRF)

Implementation

The Neutral Expert notes that the Disability Tracking System's structure and functionality are quite good, but some accommodations are not yet being tracked. As reported in Paragraph 28, the County maintains an electronic disability-tracking system that, based on individualized assessments, identifies all IPs with disabilities who require accommodations, as well as the specific accommodations they need. Although accessible features are available for IPs, it is unknown how sworn staff are made aware of the accessible features (accessible shower, including a fold-down shower seat, shower chair, reduced shower curb or lip, high/low shower heads, and grab bars in the shower) mobility-disabled IPs require, so the County can ensure IPs receive the required accommodations. Additionally, although the medical staff can evaluate the accommodations required by paragraph 38 with the questions in the ADA Functional Assessment, it is unknown if they are providing sworn staff with the

information on the following accommodations needs: access to an accessible shower, including a fold-down shower seat, shower chair, reduced shower curb or lip, high/low shower heads, and grab bars in the shower. Medical staff may be providing this information because some IPs are housed in accessible locations; however, the Neutral Expert notes that this information is not being populated in the JIMS Live Medical Instruction Report and is not aware of how sworn staff is making housing determinations.

The VDF Classification Deputy reported that there are "Delays in ADA flags populating into JIMS," so he does not have access to ADA information during initial classification/housing face-to-face review. Based on this, he "relies on verbal reports" from medical staff about ADA accommodation needs. Paragraph 33 states, "The disability tracking system shall identify any other accommodations a person needs, including but not limited to housing, classification, transportation, health care appliances, durable medical equipment, and assistive devices. Staff shall utilize the disability tracking system as necessary to ensure timely provision of accommodations." The County reported that the Classification Deputy's statement was incorrect and he has been retrained.

Listed below are examples where ADA/medical flags do not match actual needs:

- An IP at RMDF had multiple ADA flags/devices that were not being provided at the time of the inspection
- An IP at LCDRF reported using an assistive device prior to arrest and was transported from the hospital to the jail for booking. She reported mobility device needs at intake, and the intake RN reportedly did not add the ADA flag and did not refer her for an ADA Functional Assessment

Sworn and Programs staff have access to ADA information in JIMS, and all housing unit staff interviewed reported that the ADA roster is printed daily to ensure staff are aware of disabled IPs and their associated accommodations. Post-inspection, the County produced an email dated 5/18/26 from the ADA Sergeant, addressed to Detention Supervisors, regarding staff's identification of required accommodations. The email states, "Ensure staff are using the ADA List to identify required accommodations for the incarcerated population."

The functionality of the tracking system meets the Settlement Agreement and Order; however, in some cases, the "Active Medical Instructions" column only states "Please see progress note and QMHP note." This is not sufficient information for staff to know the accommodations they must provide to the IP.

Recommendations:

- *Ensure the accommodations of access to an accessible shower, including a fold-down shower seat, shower chair, reduced shower curb or lip, high/low shower heads, and grab bars in the shower, are included in the Disability Tracking System.
- *Ensure that the "Active Medical Instructions" column includes all necessary ADA-related information gathered by health care staff to address the issues of JIMS providing only a reference to medical record information to which sworn staff does not have access (e.g., "Please see progress note and QMHP note").

32. *The disability tracking system shall identify any barriers to communication, including but not limited to whether the person has a speech, hearing, vision, learning, intellectual, or developmental disability. The disability tracking system shall adequately identify, based on an*

individualized assessment, the specific accommodations required to achieve effective communication with that person.

Compliance Rating: Substantial Compliance

Previous Compliance Rating: Substantial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024)

Training – NA

Documents Produced/Reviewed – JIMS Live ADA Medical Instructions Reports (VDF, LCDRF, GBDF, RMDF, SDCJ, SBDF, EMRF)

Implementation

As reported in paragraph 28, the County maintains an electronic disability-tracking system that identifies barriers to communication, including, but not limited to, whether the IP has a speech, hearing, vision, learning, intellectual, or developmental disability. The disability tracking system also includes the specific accommodations required to achieve effective communication with the IP.

Recommendations:

Although the Neutral Expert finds the County in substantial compliance with this provision, it is essential for the County to track accurately and, based on individualized assessment, all the effective communication accommodations required in paragraphs 91-98.

33. *The disability tracking system shall identify any other accommodations a person needs, including but not limited to housing, classification, transportation, health care appliances, durable medical equipment, and assistive devices. Staff shall utilize the disability tracking system as necessary to ensure timely provision of accommodations.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Substantial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024)

Training – NA

Documents Produced/Reviewed – JIMS Live ADA Medical Instructions Reports (VDF, LCDRF, GBDF, RMDF, SDCJ, SBDF, EMRF)

Implementation

The Neutral Expert notes that the Disability Tracking System's structure and functionality are quite good. As reported in paragraph 28, the County maintains an electronic disability tracking system that identifies other accommodations IP needs, including but not limited to housing, health care appliances, durable medical equipment, and assistive devices. Although the JIMS Live ADA Medical Instructions Reports do not include the IP classification, JIMS does include

it, and staff can access it in JIMS. Additionally, all staff interviewed were aware of how to access disability related information in JIMS.

Of note is that currently, all IPs with a full-time wheelchair flag require accessible transportation, and if an IP does not have a full-time wheelchair flag and requires accessible transportation, they have a WCT (Wheelchair Transport) special condition flag in the notes section of the ADA roster. Paragraph 33 states, "The disability tracking system shall identify any other accommodations a person needs, including but not limited to housing, classification, transportation, health care appliances, durable medical equipment, and assistive devices. Staff shall utilize the disability tracking system as necessary to ensure timely provision of accommodations. Examples of Transportation-related Accommodations include:

- Alternate restraint application (waist chains/leg irons)
- Hand(s)-free to utilize assistive device (may be one or both hands, depending on use of cane vs. walker)
- Staff assistance navigating the bus steps

The Functional Assessment Performance includes the following questions:

- Can you perform the following without assistance?
  - Climb Stairs
  - Are there any issues with transportation accommodations (vehicle/restraints)?

If there are no flags for these accommodations, flags will need to be added so these accommodations can be tracked in the ADA Tracking system.

Additionally, the County identifies non-compliant cells with grab bars at SDCJ on the ADA Tracking Report as "Wheelchair Accessible." This may be confusing for the housing staff responsible for housing mobility-disabled IPs. Sworn housing staff on the 5th floor at SDCJ expressed confusion about this and were unaware that the cells with grab bars are temporary and not fully ADA-compliant. The Neutral Expert notes that the settlement agreement allows the use of partial compliant cells to house wheelchair users during construction, and once construction is completed, the non-compliant cell housing for wheelchair individuals will not be used. The Neutral Expert recommends that the ADA Tracking System identify these cells as partially accessible and/or only temporary housing for wheelchair users. This will assist staff in identifying IPs who require ADA-compliant cells and are housed in these temporary cells, so they can be re-housed in ADA-compliant cells.

Recommendations:

- Ensure information about transportation accommodations is included in the ADA tracking system

E. Housing Assignments for People with Disabilities.

34. The County shall ensure that incarcerated persons with disabilities are properly placed in housing that is safe and appropriate for their disability, and consistent with their security classification and the requirements set forth in 28 C.F.R. § 35.152. Such housing must also

allow for an incarcerated person's ADA reasonable accommodations to be provided/accessible, e.g., auxiliary aids/services, effective communication as otherwise required by this ADA Settlement Agreement and Order or the 2023 ADA Order, and required adaptive supports.

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024)

Training - NA

Documents Produced/Reviewed – Inaccessible ADA Housing ISRs (XX), Inaccessible ADA Housing, January 2026 (All Other ADA Mobility Population – Average Per Day, All Intermittent Wheelchair Population – Average Per Day, All Walker Population – Average Per Day, ay, LCDRF Average Population Per Day, SDCJ Wheelchair Population Counts Per Day), February 2026 (All Other ADA Mobility Population – Average Per Day, All Intermittent Wheelchair Population – Average Per Day, Walker Population – Average Per Day, SDCJ Wheelchair Population – Average Per Day, LCDRF Average Population Per Day, SDCJ Wheelchair Population Counts Per Day), March 2026 (SDCJ All Other ADA Mobility Population – Average Per Day, SDCJ Intermittent Wheelchair Population – Average Per Day, SDCJ Walker Population – Average Per Day, SDCJ Wheelchair – Average Per Day)

Implementation

Paragraph 45 of the ADA Settlement Agreement and Order states, "Within four years of the signing of this ADA Settlement Agreement and Order, the County shall ensure that every person with a mobility disability who uses a wheelchair in housing is housed in a bed that accommodates their accommodation needs and that every person with a disability is housed with access to any appropriate accessibility features related to their bed, toilet, and shower, as individually determined by health care staff." The Neutral Expert notes that the County is still modifying facility housing features to comply with this paragraph. The Expert also notes that, given the limited number of accessible cells and cells with accessible features, the County has made some in-cell modifications to accommodate IPs requiring in-cell accessible features. The County also has a process in place to prioritize housing for IPs who require accessible housing and are housed in non-accessible cells.

The JIMS Live ADA Medical Instructions Reports show IPs in wheelchairs who are assigned to cells that lack grab bars or are non-accessible. Additionally, the logs of IPs in non-accessible housing reflect this. The Neutral Expert notes that this is due to the County's ongoing modification of facility housing features to comply with this paragraph. The Inaccessible ADA Housing Excel Spreadsheet the County produced reflects that, as of April 5, 2026, 15 IPs who require accessible housing are housed in inaccessible cells/beds.

- General Population - 11
- Ad-Sep/PC - 4

The ADA Housing Excel Spreadsheet reflects that some IPs that require accessible housing have been housed in non-accessible cells/beds since 2024:

- 4/33/24 – 2
- 9/22/24 – 1

The eight (8) ISRs that the County produced also reflect the placement of IPs in inaccessible ADA housing. Staff reported that they attempt to prioritize them, but the process for doing so and who is responsible for it have not been provided. The County should provide staff with guidance in the form of policy, procedure, and training. JPMU at SDCJ also reported that the only fully accessible cells for people classified as in protective custody are at RMDF. The County must continue to work to increase accessible housing capacity. The County must prioritize housing IPs in the most appropriate/accessible housing location possible and avoid placing them in more restrictive settings, especially Ad-Sep housing.

JPMU staff also reported that JPMU staff assigns IPs to a Mod unless the IP requires an accessible cell. The housing deputies then assign the IP to a tier/cell/bunk.

During the previous inspection, the Neutral Expert noted that there is no formalized process for staff to request repair of ADA features in the housing units. There is no process in place for staff to designate a repair of an ADA asset or feature as a priority, as is the practice in other County Jails. Based on this, the Neutral Expert recommended that the County implement an ADA priority-maintenance designation for work orders, as needed (e.g., grab bars, shower benches, other accessible features) and for program access (e.g., elevators). The County did not provide an update on this recommendation.

The DON reported that the practice of placing IPs in more restrictive settings based on their having devices is “no longer policy”, but it appears this remains the practice.

- An IP at GBDF reported he was housed in the MOB medical dorm because he has a metal prosthetic and was not receiving medical care requiring medical housing.
    - The IP’s medical record was not reviewed to determine whether medical staff determined the IP required MOB placement. Shouldn’t have to chose no other. Housing appropriate accommodations
- An IP at GBDF reported he was housed in the MOB medical dorm due to a vision disability and safety concerns in crowded dorms, and he was not receiving medical care requiring medical housing.
    - The Neutral Expert notes that the IP requested to be housed in MOB despite not requiring MOB placement.

A CHP provider also stated, “I think there’s no reason [people with metal/rigid braces] need to be in a medical unit from a true medical perspective,” but putting such IPs in MOB is the “direction from the County.” However, post inspection, the County produced an email dated May 14, 2026, from the Medical Director to Medical staff regarding Clarification Regarding Housing of Patients with Medical Devices or Sensory Impairments. The email states, “Patients do not need to be housed in Medical solely because they have a medical metal device (e.g., orthopedic hardware, prosthetic devices, or other implanted devices) or because they are deaf and/or blind. These conditions alone are not indications for placement in Medical housing. Housing decisions should continue to be based on the patient's overall clinical condition and specific medical needs rather than the mere presence of a device or sensory impairment.”

Listed below are cases where the IPs reported they were not provided with the required housing accommodations:

- An IP at RMDF, a full-time wheelchair user, reported that he is housed in an inaccessible cell.
    - The Neutral Expert notes he has a medical instruction flag for intermittent wheelchair use and does not require an accessible cell.
- An IP at VDF reported he was assigned to the top of a triple bunk in February 2026 despite having a cane. He also reported he fell off the triple bunk and was subsequently given a lower bunk.
    - County response: There is nothing in JIMS related to either allegation.
    - The Neutral Expert notes that the Housing History reflects he was housed in a top bunk from 3/26/26 to 4/30/26.
- An IP at VDF who uses a cane reported that he was placed on the upper tier and requested lower-tier placement in two health care requests, but he was not seen for the issue. He also reported that he was assigned to a top bunk but is now on a lower bunk.
    - County response: He has had a Lower Bunk/Lower Tier flag since 1/1/25
    - The Neutral Expert notes that the housing history reflects he was assigned to a middle bunk from 4/24/25 to 11/19/25, 11/19/25 to 11/23/15, 11/23/25 to 12/12/25, 12/25/25 to 3/29/26, 4/2/26 to 4/10/26, and 4/24/26 to the date the report was generated.
- An IP at SDCJ who uses a walker reported he was assigned to the middle bunk and does not have an LB/LT medical instruction.
    - County response: Added 5/15/26.
    - The Neutral Expert notes the housing history reflects he was assigned to a middle bunk from 5/1/26 to 5/15/26.
- An IP at SDCJ who is blind reported that he was housed on the upper tier for some time.
    - The Neutral Expert notes that the housing history reflects that he was assigned to a top bunk from 9/2/25 to 9/6/25 and a middle bunk from 8/13/25 to 9/2/25. He also had a low bunk medical instruction during a previous incarceration, and the current medical instruction for low bunk is dated 9/26/25.
    - The Neutral Expert notes that the IP's low bunk flag is dated 9/26/25.

Recommendations:

- *Provide proof of practice that disabled IPs who require accessible cell placement in the booking cells (1st and 2nd floor at SDCJ) are being placed in accessible holding cells
- *Prioritize housing IPs in the most appropriate/accessible housing location possible, and avoid placing them in more restrictive settings, especially Ad-Sep housing
- *Implement an ADA priority maintenance designation for work orders, as needed (e.g., grab bars, shower benches, other accessible features, etc.), and program access (e.g., elevators)

35. *The County shall not house incarcerated persons with identified disabilities in different security classifications simply because no ADA-accessible placements are available. The County shall not place incarcerated persons with identified disabilities in medical cells or medical dorms unless the person is currently receiving medical care or treatment that necessitates housing*

in a medical setting. The parties acknowledge that full compliance with the previous sentence will not be achieved until completion of ADA-related construction. The County shall inform the neutral expert and copy Class Counsel on the communication when ADA-related construction is occurring, what housing units are affected, and what interim accommodations are being provided.

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), DSB R.11 Incarcerated Person Facility Assignment Criteria (January 30, 2026), DSB R.1 Incarcerated Person Classification (March 24, 2025)

Training - NA

Documents Produced/Reviewed – Email notification dated December 18, 2025

Implementation

Paragraph 45 of the ADA Settlement Agreement and Order states, "Within four years of the signing of this ADA Settlement Agreement and Order, the County shall ensure that every person with a mobility disability who uses a wheelchair in housing is housed in a bed that accommodates their accommodation needs and that every person with a disability is housed with access to any appropriate accessibility features related to their bed, toilet, and shower, as individually determined by health care staff." The Neutral Expert notes that the County is still modifying facility housing features to comply with this paragraph. The County has made some in-cell modifications to accommodate IPs that require in-cell accessible features. The County has also revised DSB Policy R.11, Incarcerated Person Facility Assignment Criteria, to align with the requirements of the ADA Settlement Agreement and Order. The Neutral Expert notes that the parties acknowledge that full compliance will not be achieved until completion of ADA-related construction.

See the example of cases detailed in Paragraph 34.

On December 18, 2025, the County advised the Neutral Expert that ADA-related construction at the SDCJ Psychiatric Stabilization Unit A-Side, including the Recreation Yard, was scheduled to begin on January 5, 2026. The County also provided the interim accommodations that would be provided during construction, as required by this Paragraph. No other notifications were made during the document production period.

In future inspections, the Neutral Expert will randomly select a sample size of IPs and request the reason for housing placement in the medical cells/dorms.

Recommendations:

- *Ensure IPs with identified disabilities are housed based on their security classification
- *Ensure IPs with identified disabilities are not placed in medical cells or medical dorms unless the person is currently receiving medical care or treatment that necessitates housing in a medical setting

- *Continue informing the Neutral Expert when ADA-related construction is occurring, what housing units are affected, and what interim accommodations are being provided

36. *Any health-related or disability-related housing requirements shall be determined by health care staff based on individualized assessment and notated in the person's health record. Disability-related housing accommodations shall also be notated in the disability tracking system.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), DSB Policy P.11 Effective Communication (December 19, 2025), San Diego Sheriff's Office Medical Services Division Receiving Screening E.2.1. (3/21/25)

Training - Training listed in Paragraph 14

Documents Produced/Reviewed – NA

Implementation

Paragraphs 26 and 29 detail the process that health care staff use to assess IPs for health-related or disability-related housing requirements during and after the medical intake screening. The assessments are conducted by health care staff and are based on individualized assessments. However, during the on-site observation of the medical clearance process at SDCJ, the Neutral Expert noted that the RN conducting the intake did not ask all of the disability-related questions.

Medical staff interviewed stated that the medical determination of health-related or disability-related housing accommodations is documented in TechCare. The Neutral Expert reviewed completed ADA Functional Assessments, Medical Screening, Receiving Screening, and Progress Notes, which are located within the IP's health record in TechCare.

As detailed in paragraph 28, disability-related housing accommodations are tracked in the disability tracking system. As detailed in Paragraph 28, aside from a comments field, there is no section for the RN to identify approved/authorized accommodations, such as low bunk/tier, accessible cell, shower accommodations, transportation accommodations, etc. Medical staff documents the accommodations by entering the flag in TechCare, and the notes are populated in Titan and the ADA List. In addition, a review of completed ADA Functional Performance Assessments produced by the County, the Neutral Expert notes that medical staff often fail to include clear next steps.

Recommendations:

- *Ensure health care staff conduct complete assessments for health-related and disability-related housing requirements during the medical intake screening
- *Ensure the accommodations of access to an accessible shower, including a fold-down shower seat, shower chair, reduced shower curb or lip, high/low shower heads, and grab bars in the shower, are included in the Disability Tracking System.

37. *Incarcerated people who are assigned wheelchairs in housing shall in all cases be assigned to a lower tier and an accessible lower bunk. The parties acknowledge that full compliance with an accessible lower bunk will not be achieved until completion of ADA-related construction.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024)

Training - NA

Documents Produced/Reviewed – NA

Implementation

Paragraph 45 of the ADA Settlement Agreement and Order states, "Within four years of the signing of this ADA Settlement Agreement and Order, the County shall ensure that every person with a mobility disability who uses a wheelchair in housing is housed in a bed that accommodates their accommodation needs and that every person with a disability is housed with access to any appropriate accessibility features related to their bed, toilet, and shower, as individually determined by health care staff." The Neutral Expert notes that the County is still modifying facility housing features to comply with this paragraph. The County has made some in-cell modifications to accommodate IPs that require in-cell accessible features. The Neutral Expert notes that the parties acknowledge that full compliance will not be achieved until completion of ADA-related construction.

The housing deputies interviewed were aware of the housing requirements for IPs assigned wheelchairs. JPMU staff also reported that JPMU staff assigns IPs to a Mod unless the IP requires an accessible cell. The housing deputies then assign the IP to a tier/cell/bunk.

Recommendations:

- *Ensure IPs who are assigned wheelchairs in housing are assigned to a lower tier and an accessible lower bunk
- *Continue with the Facility Alterations identified in the 2023 ADA Order

38. *No incarcerated person with a mobility disability shall be assigned to the top of a triple bunk. Health staff shall specifically evaluate an incarcerated person with an identified mobility disability to determine if they require a lower bunk and/or lower tier and whether the person can access the bottom or middle bunk of a triple bunk. In addition, health staff shall specifically evaluate such persons to determine if they require access to an accessible shower, including a fold-down shower seat, shower chair, reduced shower curb or lip, high/low shower heads, and grab bars in the shower.*
    a. *The County agrees that any provided shower chair will have at least 350 pounds of weight capacity and non-slip feet.*
    b. *The County agrees that ADA Showers will comply with 2010 ADA Standards and California Building Code, including high/low shower heads with horizontal and vertical swivel adjustments, as long as the shower heads also meet BSCC anti-ligature requirements.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies – DSB Policy M.29 Disabled Incarcerated Persons (May 29, 2024), DSB Policy I.22 Lower Tier / Lower. Bunk Assignment (May 29, 2024)

Training – Trainings listed in Paragraph 14

Documents Produced/Reviewed – JIMS Archived ADA Mobility (All Notes December 2025 to April 2026

Implementation

Paragraphs 26 and 29 detail the process that medical staff use to assess IPs for health-related or disability-related housing requirements during and after the medical intake screening. The assessments are conducted by health care staff and are based on individualized assessments.

Health care staff interviewed stated that the medical determination of health-related or disability-related housing accommodations is documented in TechCare. The Neutral Expert reviewed completed ADA Functional Assessments, Medical Screening, Receiving Screening, and Progress Notes, which are located within the IP's health record in TechCare.

DSB Policy I.22 Lower Tier / Lower. Bunk Assignment states, “If the health staff requirement for a lower bunk and/or lower tier housing restriction is established during the intake process, Jail Population Management Unit (JPMU) deputies will notate such housing restriction on the incarcerated person's face card. If the restriction is determined after the incarcerated person has been housed, health staff will notify the housing deputies of the restriction. Housing deputies will be responsible for assigning these incarcerated persons in the Jail Information Management System (JIMS) to either a lower bunk ("LOWER BUNK"), lower tier ("LOWER TIER") or a lower bunk on the lower tier ("LOWER BUNK/LOWER TIER"). Note: A middle bunk in a triple bunk does not qualify as a bottom bunk. Incarcerated persons with the lower bunk and lower tier medical instructions will only be housed on bottom bunks. Incarcerated persons with only lower tier instructions may be housed on the bottom/middle of a triple bunk or the bottom/top of a double bunk. No person with a mobility disability using a wheelchair will be assigned to any bed in a triple bunk. No person with a mobility disability will be assigned to the top bed of a triple bunk.” The policy also states, “Medical instructions for "ADA MOBILITY" and "ORTHOPEDIC DEVICE – WHEELCHAIR" have additional housing requirements, as follows:

1. Incarcerated persons with the "ADA MOBILITY" medical instruction shall not be assigned to the top bed of a triple bunk.
2. Incarcerated persons with the "ORTHOPEDIC DEVICE – WHEELCHAIR" medical instruction shall be assigned a bottom bunk on the lower tier and cannot be assigned to any bed in a triple bunk. They shall be housed in ADA accessible housing.
3. Incarcerated persons with "INTERMITTENT WHEELCHAIR" medical instruction or other mobility disabilities shall be individually assessed for accessible housing accommodation needs. With the exception that incarcerated persons with the "ADA

MOBILITY" and "INTERMITTENT WHEELCHAIR" medical instruction shall not be assigned to any bed in a triple bunk.

a. People with mobility disabilities will be assigned to accessible housing based on their accessibility needs, which may include accessible beds, grab bars, clearance space, and low bunk or low tier.
b. People with mobility disabilities will be provided accessible toileting based on their accessibility needs, which if appropriate shall have 2010 ADAS-compliant grab bars and other features.
c. People with mobility disabilities will be provided accessible showers based on their accessibility needs which, if appropriate, shall have 2010 ADAS-compliant grab bars and shower chairs.

The Neutral Expert notes that the JIMS Live ADA Medical Instructions Report produced during the inspection identifies the following ADA housing restrictions:

- Lower Bunk
- Lower Bunk and Tier
- No Top Triple Bunk

The JIMS Live ADA Medical Instructions Report also identifies the following Housing Accessibility Features in the assigned cell/dorm/bed that the IP has access to:

- Non-compliant shower grab bars
- Non-compliant shower without step
- Wheelchair Accessible
- ADA Compliant Shower
- ADA Compliant Shower Grab Bars
- ADA Wheelchair Compliant
- Non-compliant toilet grab bars
- ADA Compliant Bed
- ADA Compliant Toilet
- ADA Compliant Sink
- ADA Compliant Dayroom Tables
- ADA Compliant Mirror
- ADA Compliant Dayroom Boxes
- ADA Compliant Telephone and Videophone

JPMU staff also reported that JPMU staff assigns IPs to a Mod unless the IP requires an accessible cell. The housing deputies then assign the IP to a tier/cell/bunk. The housing deputies interviewed were aware of the housing requirements for mobility-disabled IPs. They reported that if they attempt to house a disabled IP with a lower bunk/lower-tier medical instruction, they receive an alert in JIMS and are not allowed to complete the housing. This was confirmed during the inspection. However, during the inspection, a Lieutenant reported that the County cannot program JIMS to prevent deputies from housing a person in a triple bunk or in a particular bed within it. The housing discrepancy reports often show a person mis-housed for multiple days. The same IP is in the reports for March 2, 2026, to March 5, 2026 (SD 1693910-1693914) and April 13, 2026, to April 17, 2026 (SD 1696560-1696564). The discrepancy report is not leading to effective action (rehousing of the IP).

The Neutral Expert noted that the shower chairs used by the County in the housing unit showers have a weight capacity of at least 350 pounds and non-slip feet.

The Neutral Expert notes that the County is using non-compliant shower accommodations pending the physical plant modifications. However, once the physical plant modifications are completed, the Construction Neutral Expert will confirm that the ADA Showers comply with 2010 ADA Standards and the California Building Code, including high/low shower heads with horizontal and vertical swivel adjustments, provided the shower heads also meet BSCC anti-ligature requirements.

During the IP interviews, there were no reports of IPs being assigned to the top bunk of a triple bunk. For reports regarding low bunk, low tier, and middle bunk issues see details in Paragraph 34

Recommendations:

- *Ensure medical staff ask all questions in the TechCare portion of the medical intake screening to identify mobility disabilities and the associated housing and shower accommodations
- Once identified, ensure IPs who are inappropriately housed are moved to appropriate housing based on the medical instruction

39. *Sworn staff shall document incidents where disability-related housing accessibility accommodations cannot be provided, and shall promptly notify an appropriate supervisor about the issue. The Sheriff's Office shall expeditiously move people who are inappropriately housed in an inaccessible placement to an accessible placement. The ADA Unit shall conduct a quality assurance audit process to assess whether incarcerated persons with documented reasonable accommodations are appropriately housed. The ADA Unit shall assess, as part of the audit process, whether additional training and/or policy changes are necessary.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies – DSB Policy M.29 Disabled Incarcerated Persons (May 29, 2024), DSB Policy I.22 Lower Tier / Lower Bunk Assignment (May 29, 2024)

Training – Trainings listed in Paragraph 14

Documents Produced/Reviewed – Inaccessible ADA Housing Excel Spreadsheets, Emails (46) from ADA Unit to JPMU requesting IP rehousing to ADA Accessible Housing February, March and April 2026, Nine (9) ISRs

Implementation

DSB Policy I.22 Lower Tier / Lower. Bunk Assignment states, "If sworn staff is unable to accommodate disability related housing requirements, sworn staff shall confer with JPMU and health staff to determine appropriate housing options. Incidents where disability related housing accessibility accommodations cannot be provided shall be documented in a JIMS Incident Report with the type code: "ADA – Americans with Disabilities Act." The individual

will be provided accessible housing as soon as it becomes available for the individual. While the ADA housing renovations are in process, accessible housing will be provided as available. A single bunk or a bottom bunk of a double shall be provided to all incarcerated persons with wheelchairs or with a mobility disability that medical staff determines require lower bunk/lower tier placement. Portable shower chairs will be provided as an interim solution if an ADA-compliant shower is not available."

Housing staff reported that if an IP required accessible housing and it was unavailable, they would contact JPMU and the ADA Unit.

The County produced an Inaccessible ADA Housing Excel Spreadsheet that reflects that, as of April 5, 2026, 15 IPs who require accessible housing are housed in inaccessible cells/beds.

- General Population - 11
- Ad-Sep/PC - 4

The ADA Housing Excel Spreadsheet reflects that some IPs that require accessible housing have been housed in non-accessible cells/beds since 2024:

- 4/33/24 – 2
- 9/22/24 - 1

The ADA Housing Excel Spreadsheet shows that, in most cases, staff completed an Inmate Status Report (ISR) and promptly notified a supervisor of the date of placement in an inaccessible cell/bed, as required by this paragraph. However, in the following cases, the ISR/notifications were not completed promptly:

Date Placed in no accessible cell/bed	Date ISR completed
2/7/26	4/3/26
3/7/26	4/3/26
2/4/26	4/3/26

The Neutral Expert also notes that in one (1) case, the IP refused an ADA-compliant cell/bed.

The County did not produce ISRs for all cases placed in non-accessible cells during the document review period, preventing the Neutral Expert from determining the number of days the IP was housed in a non-accessible cell/bed. Based on a review, the Neutral Expert identified 18 cases, and the County produced eight (8) ISRs. The County produced 27 emails from the ADA Sergeant to JPMU staff requesting that IPs be moved to ADA-compliant cells/beds. Additionally, the SA requires sworn staff to document incidents where disability-related housing accessibility accommodations cannot be provided and promptly notify an appropriate supervisor about the issue. The County is also required to expeditiously move people who are inappropriately housed in an inaccessible placement to an accessible placement. The ISR # [redacted] (SD_1689119) does not reflect supervisory approval.

Housing staff and JPMU staff interviewed reported that, in cases where an IP with disability-related housing accessibility accommodations could not be met, staff completed an ADA ISR.

Recommendations:

- *Produce completed ISRs where disability-related housing accessibility accommodations could not be provided, which reflect the notification to a supervisor about the issue.
- *Maintain and produce data/information on when the IP was placed in non-accessible housing and when the IP was rehoused to accessible housing
- *Ensure IPs are expeditiously moved when they are inappropriately housed in inaccessible housing.
- *As part of the ADA Unit quality assurance audit process, assess whether incarcerated persons with documented reasonable accommodations are appropriately housed and whether additional training and/or policy changes are necessary.

40. The Sheriff's Office shall conduct a check during night hard count to ensure that incarcerated persons with mobility disabilities are occupying their assigned beds in accordance with Detentions Services Bureau Policy I.43.

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies – DSB Policy I.43 Count Procedures (February 20, 2026)

Training – Training Bulletins listed in Paragraph 14

Documents Produced/Reviewed – Night Count Audit

Implementation

DSB Policy I.43 Count Procedures states, "During night hard count, sworn staff shall:

a) Verify each incarcerated person occupies the bed/bunk they are assigned to in JIMS.
b) Ensure each incarcerated person with mobility disabilities is occupying their assigned bed/bunk.
c) Immediately address any incarcerated persons with mobility disabilities found sleeping on the floor. Staff shall verify the incarcerated persons bed assignment and confirm that the incarcerated person is aware of their assigned bed/bunk.
d) Discrepancies shall be resolved immediately after the conclusion of the hard count.
e) Verify count numbers for each unit/module utilizing the Facility Count in JIMS."

Upon review of the Training Bulletins produced by the County, the Neutral Expert notes that the trainings do not include detailed guidance for staff on the requirements for conducting a check during the night hard count to ensure that IPs with mobility disabilities are occupying their assigned beds in accordance with DSB Policy I.43.

Housing staff interviewed reported that they conduct a check during the night hard count to ensure that IPs with mobility disabilities are occupying their assigned beds. They also reported that they would inform the IP of their assigned bed.

The County produced the Night Count Audit for February and March 2026. The audit reflects that, of the four (4) days audited, staff did not verify the assigned beds on three (3) days. There must be additional training provided to staff who do not verify the beds.

- During the inspection an IP reported that he fell from a triple bunk at GBDF and slept on the floor at GBDF around February 14-15, 2026.
    - County response: There is nothing in JIMS related to either allegation.

Recommendations:

- *Develop training on the requirements for staff to conduct a check during the night hard count to ensure that IPs with mobility disabilities are occupying their assigned beds in accordance with DSB Policy I.43
- *Once the training is developed, ensure that staff are trained

41. The Sheriff's Office shall train sworn staff to address incarcerated persons with mobility disabilities who are found sleeping on the floor and confirm that they have an assigned bed and are aware of their assignment.

Compliance Rating: Non-Compliance

Previous Compliance Rating: Non-Compliance

Policies – DSB Policy I.43 Count Procedures (February 20, 2026)

Training – Training Bulletins listed in Paragraph 14

Documents Produced/Reviewed – Night Count Audit for February and March 2026

Implementation

The County reported that this paragraph is not ready for review. The County is working on policies related to this provision. N.

See details in Paragraph 40 above.

Recommendations:

- *Develop training on the requirements for staff to conduct a check during night hard count to ensure that IPs with mobility disabilities are occupying their assigned beds in accordance with DSB Policy I.43
- *Once the training is developed, ensure that staff are trained

42. At each facility, during ADA-related construction at the facilities as described below, the County shall maintain interim measures to ensure that incarcerated persons with mobility disabilities are accommodated to the greatest extent possible during the booking and intake

process, and to the greatest extent possible placed in safe and accessible housing locations throughout the process.

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies – DSB I.22 Lower Bunk/Lower Tier and Medical Instruction Assignment (May 29, 2024)

Training – NA

Documents Produced/Reviewed – January 2026 Mobility Arrest

Implementation

DSB I.22 Lower Bunk/Lower Tier and Medical Instruction Assignment states, "If sworn staff is unable to accommodate disability related housing requirements, sworn staff shall confer with JPMU and health staff to determine appropriate housing options. Incidents where disability related housing accessibility accommodations cannot be provided shall be documented in a JIMS Incident Report with the type code: "ADA – Americans with Disabilities Act." The individual will be provided accessible housing as soon as it becomes available for the individual. While the ADA housing renovations are in process, accessible housing will be provided as available. A single bunk or a bottom bunk of a double shall be provided to all incarcerated persons with wheelchairs or with a mobility disability that medical staff determines require lower bunk/lower tier placement. Portable shower chairs will be provided as an interim solution if an ADA compliant shower is not available."

Staff interviewed stated that disabled IPs are provided with accommodations during the intake and booking process when identified by medical staff. However, when the identified accommodations are not available, the County provides interim accommodations. The County produced an Excel spreadsheet "January 2026 Mobility Arrest." The spreadsheet reflects that of the 29 cases listed, in two (2) cases the IPs were restrained (handcuffed to the bench). The County also accommodates mobility-disabled IPs who cannot stand for the body scanner by processing them for the second-stage screening.

The Expert identified 25 cases (IPs assigned a full-time wheelchair) and requested Body-Worn Camera (BWC) footage of their processing at the jails. A review of the BWC footage shows 10 cases in which the IP is being placed and restrained in the corridor adjacent to the bench.

A review of the BWC also showed the following:

- In three (3) cases, the IP was not placed in an accessible holding cell
- In 10 cases, there is no footage of the IP being placed into or removed from the holding cell
- In 10 cases, the IP is being placed and restrained in the corridor adjacent to the bench
- In one (1) case, the IP was not in a wheelchair during booking

In summary, in the three (3) cases where BWC reflected the IP not being placed in an accessible holding cell were not compliant with the SA requirement.

Recommendations:

- *Develop a process to show proof of practice for placement of IPs who require accessible housing in accessible booking cells at the SDCJ
- *Continue to provide interim accommodations to ensure that IPs with mobility disabilities are accommodated to the greatest extent possible during the booking and intake process and, to the greatest extent possible, placed in safe and accessible housing locations throughout the process.

45. *Within four years of the signing of this ADA Settlement Agreement and Order, the County shall ensure that every person with a mobility disability who uses a wheelchair in housing is housed in a bed that accommodates their accommodation needs and that every person with a disability is housed with access to any appropriate accessibility features related to their bed, toilet, and shower, as individually determined by health care staff. A person's disability-related housing accommodation needs shall be documented in their health record and the disability. tracking system.*

Compliance Rating: Unratable

Previous Compliance Rating: Unratable

Policies – N/A

Training – N/A

Documents Produced/Reviewed – December 2025 to April 2026 (All Other ADA Mobility Population – Average Per Day, All Intermittent Wheelchair Population – Average Per Day, All Walker Population – Average Per Day, ay, LCDRF Average Population Per Day, SDCJ Wheelchair Population Counts Per Day)

Implementation

The Neutral Expert notes that compliance with this paragraph is required within (4) years of the signing of the ADA Settlement Agreement and Order. The County produced the reports listed above. The Neutral Expert notes that the reports allow the County to report detailed data for the number of IPs assigned a full-time wheelchair by classification, including General Population (Levels 1-3 and 4+), AD SEP, Protective Custody (KSA, SVP, AGE, TG/F/M/X), PC Level 1-3, PC Level 4+, JBCT, OPSD, PSU/WPSU, COVID+, SPIU, IP Worker, LB/LT, SDCJ EOH, SDCJ JBCT, and SDCJ Med.

This data will assist the County in completing the Accessibility Bed Needs Assessment required by Paragraph 46. The County has been working with the Neutral Expert on the Accessibility Needs Assessment required by that Paragraph.

Recommendations:

- *Continue with the Facility Alterations identified in the 2023 ADA Order

46. *Within 18 months of this Order, the County will complete a comprehensive assessment of the accessible housing needs of the disability subclass member population (the "Accessibility Bed Needs Assessment") in consultation with both neutral experts, as appropriate. The Accessibility Bed Needs Assessment will be informed by relevant jail population data regarding incarcerated people with a disability requiring housing accessibility accommodation needs and if the assessment determines that additional housing or other measures are necessary, it will include identification of the additional construction or other measures that will occur and a reasonable timeline for implementation. The Accessibility Bed Needs Assessment will consider population data based on sex and classification levels, including at a minimum security level and health/mental health care housing needs. The neutral experts will review and approve the Accessibility Bed Needs Assessment.*

Compliance Rating: Unratable

Previous Compliance Rating: Unratable

Policies – N/A

Training – N/A

Documents Produced/Reviewed – January 2026 (All Other ADA Mobility Population – Average Per Day, All Intermittent Wheelchair Population – Average Per Day, All Walker Population – Average Per Day, ay, LCDRF Average Population Per Day, SDCJ Wheelchair Population Counts Per Day), February 2026 (All Other ADA Mobility Population – Average Per Day, All Intermittent Wheelchair Population – Average Per Day, Walker Population – Average Per Day, SDCJ Wheelchair Population – Average Per Day, LCDRF Average Population Per Day, SDCJ Wheelchair Population Counts Per Day), March 2026 (SDCJ All Other ADA Mobility Population – Average Per Day, SDCJ Intermittent Wheelchair Population – Average Per Day, SDCJ Walker Population – Average Per Day, SDCJ Wheelchair – Average Per Day)

Implementation

The Neutral Expert notes that compliance with this paragraph is required within 18 months of the signing of the ADA Settlement Agreement and Order. The County produced the reports listed above. The Neutral Expert notes that the reports allow the County to report detailed data for the number of IPs assigned a full-time wheelchair by classification, including General Population (Levels 1-3 and 4+), AD SEP, Protective Custody (KSA, SVP, AGE, TG/F/M/X), PC Level 1-3, PC Level 4+, JBCT, OPSD, PSU/WPSU, COVID+, SPIU, IP Worker, LB/LT, SDCJ EOH, SDCJ JBCT, and SDCJ Med.

This data will assist the County in completing the Accessibility Bed Needs Assessment required by this paragraph. The County has been working with the Neutral Expert on the Accessibility Needs Assessment required by this Paragraph.

Recommendations:

- *Continue collecting data on the number of IPs that require housing accessibility accommodations

- *Finalize the Accessibility Bed Needs Assessment in consultation with the Neutral Experts

H. Program Access

76. *The County shall ensure that no qualified incarcerated person with a disability, who meets all essential eligibility requirements, shall be excluded from participation in or denied the benefits of any in-custody program, service, or activity based upon their disability. The County shall provide the reasonable accommodations needed for incarcerated persons with an identified disability to have an equal opportunity to participate in and benefit from the County's programs, services, and activities.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies – DSB Policy M.39 Incarcerated Persons With Disabilities (May 29, 2024), DSB Policy P.11 Effective Communication (December 19, 2025), and DSB Policy S.1 Supervision and Assignment of Incarcerated Workers (December 30, 2024)

Training - Training Bulletins listed in Paragraph 14

Documents Produced/Reviewed – San Diego County Sheriff's Office Detention Services Bureau Reentry Services Division Programs and Support Services, December 2025 ADAE, January 2026 ADAE, February ADA EC, March 2026 ADAE, March 2026 ADA EC, March 2026 ADAE (Due Process), JIMS Archived Effect Comm Medical Instruction Reports, JIMS January- March 2026 VRI JIMS Logs, Preferred Method of Communication February 2026, and Medical Progress Notes, April 2026 ADAE

Implementation

DSB Policy M.39 requires the Sheriff's Office to provide the reasonable accommodations needed for qualified incarcerated persons with a disability to have an equal opportunity to participate in and benefit from in-custody programs, services, or activities, unless the accommodation would result in a fundamental alteration, direct threat or safety and security risk, undue financial or administrative burden, or during an emergency situation. The policy states, "Accommodations shall be provided to ensure incarcerated persons with disabilities have equal access to participate in and benefit from in-custody programs, services, and activities. Staff shall provide reasonable modifications to jail rules, policies, and practices based on the incarcerated person's documented ADA instructions to provide equal opportunity to incarcerated persons with disabilities to participate in the services, programs, and activities offered to other incarcerated persons of the same classification level. This includes but is not limited to visitation, dayroom and recreation, transportation, communication systems (e.g., forms, telecommunications, etc.), and structured programming, including vocational and work positions."

DSB Policy P.11 states, "Effective communication is the responsibility of all staff working within the detention facilities when interacting with the incarcerated population. Staff shall provide reasonable accommodations, including auxiliary aids and services, when needed for effective communication to ensure that incarcerated persons with disabilities can participate

as equally and fully as possible in jail programs, services, and activities for which they are otherwise qualified. Staff shall use the incarcerated person's documented preferred method of communication for all due process events, health care encounters, and structured programming, unless the preferred method would result in a fundamental alteration, direct threat or safety and security risk, undue financial or administrative burden, or during an emergency situation."

DSB Policy S.1 Supervision and Assignment of Incarcerated Workers states, "The Sheriff's Office shall provide the reasonable accommodations needed for qualified incarcerated persons with disabilities to have an equal opportunity to participate in and benefit from in-custody programs, services, or activities, including vocational and work positions."

The Training Bulletins produced by the County include information on the requirement for the County and staff to provide accommodations so that IPs can have an equal opportunity to participate in and benefit from the County's programs, services, and activities. Although the County produced Training Bulletins regarding the requirements of this provision, the County did not provide the Neutral Expert with training records to confirm that staff have been trained.

In the previous inspection report, the Neutral Expert noted that although the County provided the Neutral Expert with information regarding the County's programs and access for disabled IPs to those programs, more information about the disabled IPs assigned to specific programs was needed so the Neutral Expert could compare the percentage of IPs with disabilities participating in those programs.

The County produced the San Diego County Sheriff's Office Detention Services Bureau Reentry Services Division Programs and Support Services provided/available to IPs housed in the San Diego County Jails. This includes:

- Education
  - Book Club (Peer-led) - SDSO
  - College Courses - Community College Southwestern/Grossmont/Palomar (EMRF, LCDRF, VDF)
  - Computer Literacy - Grossmont Adult Education
  - High School Equivalency (HSE) - Grossmont Adult Education
  - Job Center - Workforce Partnership (EMRF, LCDRF)
  - Pathway to Home - PATH
  - Science, Technology, Engineering, Mathematics (STEM) Program - UCSD (EMRF, LCDRF)

- Career Technical Education
  - Bakery - Grossmont Adult Education (EMRF)
  - Bicycle Program - SDSO (EMRF)
  - Commercial Laundry - Grossmont Adult Education (EMRF, LCDRF)
  - Construction Trades - Grossmont Adult Education (EMRF)
  - Culinary Arts - Restaurant Management - Grossmont Adult Education (EMRF, LCDRF)
  - Food Handler's - Grossmont Adult Education (EMRF)
  - Healthcare Services Assistant Training (HSAT) - Grossmont Adult Education (EMRF, GBDF, SDCJ, RMDF, SBDF)
  - Industrial Sewing Program - Grossmont Adult Education (LCDRF)

- Landscaping and Horticulture Program - Grossmont Adult Education (EMRF, LCDRF)
- Screen Print - Grossmont Adult Education (LCDRF)

- Psychological
  - 12 Step Meetings - NA/AA
  - Anger Management Healthy Relationships of CA
  - Anti-Theft - Healthy Relationships of CA
  - Art of Inclusive Communication - National Conflict Resolution Center
  - Celebrate Recovery - Celebrate Recovery
  - Communications - SDSU School of Communications
  - Getting Healthy - Healthy Relationships of CA
  - Getting Motivated to Change - SDSO
  - Healthy Relationships - Healthy Relationships of CA
  - Interactive Journals - SDSO
  - Parenting - Healthy Relationships of CA
  - Substance Use Disorder
  - Restorative Justice Foundations - National Conflict Resolution Center
  - The Bystander Challenge - National Conflict Resolution Center
  - The Family Connection - National Conflict Resolution Center
  - Thinking for a Change - SDSO
  - Understanding and Reducing Angry Feelings – SDSO
  - Unlock Your Thoughts, Open Your Mind - SDSO

- Wellness
  - Old Globe - The Old Globe Theater
  - Playwrights Project - Playwrights Project
  - Poetic Justice - Poetic Justice
  - Prison Yoga Project - Prison Yoga Project
  - Religious Services - Various Faith-Based Volunteers
  - Toastmasters - Toastmasters

- Supportive Services
  - Birth Certificate Program - SD County Assessor Recorder County Clerk
  - Child Support Services - SD County Department of Child Support Services
  - Child and Family Wellbeing Services - SD County HHSA Child and Family Wellbeing (LCDRF)
  - DMV ID Program – DMV
  - Know Your Rights - SD County Office of Labor Standards and Enforcement
  - Medi-Cal Enrollment Assistance - Family Health Centers of San Diego
  - Raising a Reader - SD County Santee County Library
  - Reading Legacies - Reading Legacies
  - Reentry Class - SDSO
  - Reentry Planning - SDSO
  - Veteran's Outreach - US DOJ Veterans Affairs of San Diego

- Gender Responsive Trauma Informed (LCDRF)
  - Book Club – Freedom Through Words - National Association of Women Judges
  - A Woman's Way - SDSO
  - Healing Trauma - SDSO

- Ending the Game - North County Lifeline/ Freedom from Exploitation
- Every Woman Counts - California Health Collaborative
- Planned Parenthood - Planned Parenthood
- Women's Health - University of California San Diego

Staff interviewed stated that disabled IPs who meet all essential eligibility requirements are not excluded from participation in or denied the benefits of any in-custody program, service, or activity.

The County reported that the following Special Program Units are the Veteran's Moving Forward (VMF) at VDF Lower West 3, the Medication-Assisted Treatment Module (MAT) at VDF Lower West 6, and the Incentive-Based Housing (IBH) at EMRF D2. These three special programs are located in facilities that do not house full-time wheelchair users. The County also reported that RSD does not track participant disabilities in the case management system and that all ADA accommodations provided are documented in JIMS, under ADAC (counselor contact) and/or ADAE (effective communication).

The County reported that the Reentry Services Division's (RSD) case management system does not have the capability to indicate any disabilities or accommodation needs that participants in work, education, or career technical education may have. All ADA accommodations that are provided by the Reentry Services Division are documented in JIMS under ADAC and/or ADAE.

The Programs staff reported that all ADA needs for IPs participating in programs facilitated by outside providers must be “self-reported” by the IP to the outside providers. Program staff reported that accommodations for external programs (e.g., college courses) have not been implemented. “Not working as it should yet.” Program staff also reported that religious program providers are not given information on ADA accommodations. Program staff continues to use the Offender360 case management system, which lacks ADA information and does not communicate with JIMS or TechCare. The County is working on implementing a new system.

The Neutral Expert reviewed the ADAE and ADAC Excel spreadsheets produced by the County, which include numerous entries indicating that Programs Counselors met with IPs; however, there are no entries documenting that Programs staff provided accommodations during IPs’ participation in programming.

In addition, as detailed in paragraph 91, the Neutral Expert notes that in most of the cases, staff did not document the type of encounter for which the provision of effective communication accommodations (VRI) was intended. The Neutral Expert cannot assess the provision of effective communication for encounters where staff did not use auxiliary aids.

In paragraphs 77 and 78 the Neutral Expert will detail the County’s requirements to provide accommodations and ensure IPs are provided with equal opportunities to participate in dayroom, out-of-cell time, outdoor recreation and exercise equipment, showers, telephones, videophones, television, tablets (when available), reading materials, library, writing materials, religious services, substance use programs, reentry services, clinical services, family and public visiting, attorney visiting, educational, vocational and work opportunities.

The Neutral Expert notes that the County has developed a PowerPoint Training, “ADA Rosters Ensuring Access and Reasonable Accommodation,” that includes guidance for

instructors, counselors, and supervisors on how to identify disabled IPs assigned to programs and their accommodations, and how to document the provision of accommodations during programming. The County also developed a PowerPoint training that provides guidance to the counselors who conduct the ADA Checks. However, more guidance is needed on the requirements of providing information required by Paragraph 17.

Recommendations:

- *Ensure that qualified incarcerated persons with a disability who meet all essential eligibility requirements are not excluded from participation in or denied the benefits of any in-custody program, service, or activity based upon their disability.
- Based on the significant difference between the VDF MAT unit programming and the MAT programming provided for IPs in other facilities and because disabled IPs who are full-time wheelchair users cannot be housed at VDF, the County must ensure that disabled IPs are provided equal access to the MAT program and other programs available to non-disabled IPs.
- *Ensure staff provides the IPs identified with reasonable accommodations to allow IPs with disabilities an equal opportunity to participate in and benefit from the County's programs, services, and activities.
- *Provide the Neutral Expert proof-of-practice when staff provide the accommodations

77. *The programs, services, and activities at the facilities, which must be provided on an equivalent basis to incarcerated persons with identified disabilities to the extent they meet all essential eligibility requirements, include dayroom, out-of-cell time, outdoor recreation and exercise equipment, showers, telephones, videophones, television, tablets (when available), reading materials, library, writing materials, religious services, substance use programs, reentry services, clinical services, family and public visiting, and attorney visiting.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies – DSB Policy M.39 Incarcerated Persons With Disabilities (May 29, 2024), DSB Policy P.11 Effective Communication (December 19, 2025) and Policy DSB Policy S.1 Supervision and Assignment of Incarcerated Workers (December 30, 2024), DSB Policy P.2 Telephone Access (May 29, 2024), DSB Policy I.22 Lower Bunk/Lower Tier and Medical Instruction Assignment (May 29, 2024)

Training - Training Bulletins listed in Paragraph 14

Documents Produced/Reviewed – San Diego County Sheriff's Office Detention Services Bureau Reentry Services Division Programs and Support Services, December 2025 ADAE, January 2026 ADAE, February ADA EC, March 2026 ADAE, March 2026 ADA EC, March 2026 ADAE (Due Process), JIMS Archived Effect Comm Medical Instruction Reports, JIMS January- March 2026 VRI JIMS Logs, Preferred Method of Communication February 2026, and Medical Progress Notes, April 2026 ADAE

Implementation

As detailed in paragraph 76, the County requires the Sheriff's Office to provide the reasonable accommodations needed for qualified incarcerated persons with a disability to have an equal opportunity to participate in and benefit from in custody programs, services, or activities, unless the accommodation would result in a fundamental alteration, direct threat or safety and security risk, undue financial or administrative burden, or during an emergency situation.

DSB Policy P.11 states, “During scheduled dayroom hours, incarcerated persons with communication-related disabilities shall be provided an equal opportunity to participate in and benefit from programs, services, and activities available to other incarcerated persons without disabilities for which they are otherwise qualified (e.g., telephone, television, reading material, etc.).”

The Neutral Expert assessed the County’s compliance with the provision of equivalent access for disabled IPs with the following programs:

Dayroom/ Out-of-Cell Time

During the IP interviews, IPs housed in celled housing reported receiving 1 to 3 hours of dayroom per day.

Outdoor Recreation and Exercise Equipment

DSB Policy M.39 Incarcerated Persons with Disabilities states, “Sheriff's Correctional Counselors shall meet with incarcerated persons with newly assigned JIMS Medical Instructions for ADA Vision, ADA Hearing, and/or ADA Cognitive/Learning, in order to provide information on how to access or request accommodations for in-custody personal recreation and structured programming managed by DSB's Re-Entry Services Division. Accommodations are available in compliance with DSB P&P Section P.11.”

During the IP interviews, the IPs reported that the provision of outdoor recreation time is inconsistent, with some reporting the following:

- IP at SDCJ MOB reported that he receives no yard
    - The SDCSO Incarcerated Person History by Date/Time reflects that the IP refused yard on 4/13/26, 3/30/26, 3/24/26, 3/17/26, 3/5/26, 3/3/26, 2/28/26, 2/26/26, 2/17/26, 2/14/26, 2/11/26, 2/6/26, 1/30/26, 1/25/26, 1/14/26, 1/9/26, 1/7/26, 12/27/25, 12/22/25, 12/29/25, 12/8/25; Rec yard was unavailable on 3/10/26, 2/19/26, 1/4/26, 1/3/26; participated in yard 1/28/26. There are no additional yard entries noted.
- IP at SBDF reported he has not received gym in 2 months
    - The SDCSO Incarcerated Person History by Date/Time does not reflect any recreation/gym entries
- IP at GBDF reported that he does not receive yard
    - The SDCSO Incarcerated Person History by Date/Time reflects that the IP refused yard on 1/12/26, 1/24/26, and 125/26; Rec Yard was unavailable on 12/23/25; and participated in yard on 4/22/26. There are no additional yard entries noted.
- IP at VDF reported that he cannot walk upstairs to the yard

    - The SDCSO Incarcerated Person History by Date/Time reflects that the IP refused yard on 5/24/26 and 1/29/26; and participated in yard on 12/9/25. There are no additional yard entries noted.
- IPs (2) at SDCJ reported they receive no yard
    - The SDCSO Incarcerated Person History by Date/Time does not reflect any recreation entries
    - The SDCSO Incarcerated Person History by Date/Time does not reflect any recreation entries

The Neutral Expert could not confirm these claims.

The Neutral Expert noted that outdoor recreation areas are accessible (and/or the County provides access to the recreation areas), and that accessible exercise equipment is available in recreation yards that have conventional exercise equipment.

Showers

DSB Policy I.22 Lower Bunk/Lower Tier and Medical Instruction Assignment states, " People with mobility disabilities will be provided accessible showers based on their accessibility needs, which, if appropriate, shall have 2010 ADAS-compliant grab bars and shower chairs."

The Neutral Expert noted that the County has shower chairs as required by paragraph 38. However, during the IP interviews, the following was reported:

- An IP reported having difficulty navigating a large step in/out of the shower.
    - County response: She was seen 6.13.26 for a reported ankle complaint, where they determined braces/devices are not medically needed. For the shower request, the doctor noted that he referred it to the deputies.
- An IP reported that a request for daily shower accommodations was made and granted due to disability, incontinence, and the need for self-cleaning; however, he still often is made to wait several hours when he soils himself and requests access to a shower.
    - County response: He did not have a flag or not related to this.

Telephones/Videophones

DSB Policy P.2 states, "Telephones will be located in areas accessible to incarcerated persons during dayroom or recreation time when they are allowed outside of their assigned cells or dorm living units. Telephone calls will be at no cost in accordance with County of San Diego Policy." DSB Policy P.11 states, "All facilities shall be equipped with devices designated for Video Relay Service (VRS) communication. VRS shall be made available to incarcerated persons who use sign language to communicate with voice telephone users through video equipment, rather than through type text, or with other persons who use sign language to communicate via point-to-point video services. All facilities shall have phones for incarcerated persons, including the social visiting phones, equipped with adaptive feedback cancellation and amplification. All facilities shall be equipped with screen-equipped telephones that can enable Captioned Telephone Services (CTS) for incarcerated persons with communication disabilities who prefer to read spoken communications. All facilities shall be equipped with a Telecommunications Device for the Deaf (TDD) (e.g., Teletypewriter (TTY)), which shall be made available to incarcerated persons who need accommodations for communication-related disabilities, to send typed text over telephone lines.

Telecommunication Relay Services (TRS) shall be available for incarcerated persons with communication disabilities whenever use of a telephone would be used by an incarcerated person without a communication disability. (Refer to DSB P&P Section P.2) If a TRS device (e.g., TDD/TTY, CTS, or VRS) is not readily available in the incarcerated person's assigned housing module or holding area, staff shall honor requests to utilize the device in a timely manner, as subject to their assigned dayroom schedule, or as permitted during the intake process. Such persons shall have at least the same amount of time to access the device as compared to similarly situated non-disabled individuals are afforded for regular telephone usage. Staff shall, whenever reasonably possible, provide individuals additional time for calls using a TRS device, to account for the fact that signed and typed conversations take longer than spoken conversations."

During the IP interviews, an IP reported that the VRS will sometimes lose signal/shut off. The County confirmed that during the inspection, they "reset" the VRS at SDCJ due to connection issues. Post-inspection, the County produced an email dated May 13, 2026, that states, "Just to follow up, we reset all kiosks again, made a purple call that lasted about 10 minutes, and all was good. Smartcom is once again stating that Purple is a third-party vendor, so the issue is either with Purple or the recipient's connection."

The Neutral Expert notes that County does not track "Purple" use and IPs can make as many calls as they want via the Smart kiosk using "Purple.". There was also a Paragraph 149 request dated March 24 about VRS connectivity issues at SDCJ. Based on the County not tracking VRS use, it will be difficult for the Neutral Expert to verify compliance. The County reports that IPs have access to VRS at any time that they are in the dayroom (with the exception of ASSEP at GBDF. There is a general log in an IP's housing history that says dayroom - the VRS is available during those hours. Additionally, the Neutral Expert notes that there is only one video kiosk across many units, and it is not used exclusively for VRS; it is also used for IP video visits and to access other electronic information. Some units (8C and 8D at SDCJ) have multiple kiosks. Based on this, staff need to monitor to ensure that IPs who need VRS can access it, as some units only have one kiosk and non-disabled IPs also use the kiosk and, in addition, they are able to use the conventional phones, However, disabled IPs that require VRS only have access to the VRS by using the kiosk

Television

DSB Policy P.11 states, "The Closed Captioning (CC) feature on televisions shall be turned on where an incarcerated person with an "ADA Hearing" Medical Instruction is located. If the CC feature is not functional, and cannot be fixed within a reasonable time, staff shall confer with JPMU to find an appropriate housing or holding area for incarcerated persons with "ADA Hearing" Medical Instructions that use CC."

During the IP interviews, there were no complaints regarding the television's closed captioning; however, an IP submitted a grievance #[redacted] requesting that the closed captioning be turned on the television. The grievance response reflects the closed captioning was turned on the same day.

Tablets (when available)

The Neutral Expert notes that Tablets are currently only available at EMRF. During the IP interviews, there were no complaints regarding equal access to the Tablets. The Neutral Expert notes that tablets are currently only provided at EMRF, and EMRF does not house

IPs with certain disabilities. The Neutral Expert will evaluate this as the County implements the distribution of use of tablets at other facilities.

Reading Material/Library

DSB Policy P.11. states, "During scheduled dayroom hours, incarcerated persons with communication related disabilities shall be provided an equal opportunity to participate in and benefit from programs, services, and activities available to other incarcerated persons without disabilities for which they are otherwise qualified (e.g., telephone, television, reading material, etc.)."

The County reported that books are received through donations. During the previous inspection, the Neutral Expert toured the libraries at the LCRDF and EMRF and noted that there is currently no section for easy-reading and large-print books. The neutral Expert did not tour the libraries to confirm if the County now has these selections in place.

During the IP interviews, IPs with learning, intellectual, and developmental disabilities reported that they are not provided with easy-reading books. Additionally, five (5) IPs requested access to audiobooks. The Neutral Expert notes that the County is in the process of finalizing a process and training bulletin to provide IPs with access to audiobooks. The County also reported that magnifiers are provided to IPs who require accommodations for large-print reading material. However, during the IP interviews, the following was reported:

- An IP assigned to the MAT module reported that, due to a vision disability (nearly blind), he cannot read standard print. The MAT unit staff distribute larger print worksheet/program materials, but only 50% of the time. He also reported that medical staff give him forms for after-care instructions; however, never in large print and are not read to him. He requested a magnifier.
- An IP reported that a nurse helped him complete an ADA request for a magnifier one (1) month ago, and he has not yet received a response.
    - County response: IP XXXX was provided a magnifier on 5/12/2026 by counseling staff at GBDF, noted in JIMS under ADAE
- An IP requested large print and audiobooks.
    - County response: IP XXXX has several ADAC notes in JIMS regarding Interim Housing; there was no mention of a magnifier being requested or provided. A request for a magnifier and audiobooks was relayed to Reentry. He was released on 5/24/26.

Writing materials

DSB Policy P.11 states, "Scribes or writing assistance shall be provided by staff to complete necessary forms or written complaints, grievances, etc. in cases where the incarcerated person requires such accommodation to access such jail procedures." The policy also states, "Requests for reading and writing assistance shall be honored by staff in a reasonable time and in such a manner that does not impede jail operations."

Paragraph 88 details the County's process for identifying IPs who require accommodations for reading and writing assistance. Staff interviewed reported that they would assist IPs in completing forms (writing assistance); however, during the IP interviews, the four (4) IPs with cognitive/intellectual/learning/vision disabilities reported that staff does not offer assistance with reading, writing, or completing forms. One (1) of the IPs had a medical flag for assistance

with reading and writing, and one (1) did not. The medical flag history for the other (2) were not reviewed. For IPs with accommodations for reading and writing assistance, staff must periodically ask whether they need assistance and, in cases where assistance is provided, document and provide the Neutral Expert with proof-of-practice that staff is providing writing assistance.

Religious Services/Substance Use Programs/Reentry Services

In DSB Policy P.11 Effective Communication, the County refers to Structured Programming as in-custody and reentry programs and services that are managed by the Sheriff's Office Reentry Services Division (RSD) (e.g., education, self-help, AA/NA, vocational, work positions, or religious programs, services, or activities). This includes communications between incarcerated workers and their supervisors that are outside the general day-to-day communication (e.g., training, performance evaluations, discipline). The policy also states, "Staff shall communicate with incarcerated persons with communication-related disabilities using their preferred means of communication for all due process events, health care encounters, and structured programming, unless the preferred method would result in a fundamental alteration, direct threat or safety and security risk, undue financial or administrative burden, or during an emergency situation."

DSB Policy M.39 Incarcerated Persons with Disabilities states, "Sheriff's Correctional Counselors shall meet with incarcerated persons with newly assigned JIMS Medical Instructions for ADA Vision, ADA Hearing, and/or ADA Cognitive/Learning, in order to provide information on how to access or request accommodations for in-custody personal recreation and structured programming managed by DSB's Re-Entry Services Division. Accommodations are available in compliance with DSB P&P Section P.11."

Paragraph 91 details the process by which program staff provides accommodations during structured programming. However, as also reported in paragraph 91, documentation for the provision of effective communication for structured programming was not produced. For future reviews, the County will need to provide documentation demonstrating effective communication for structured programming. The County will also need to provide the Neutral Expert with a list of IPs who require accommodations for effective communication that are enrolled and/or attend structured programming.

With the exception of IPs housed in LCDRF, EMRF, and SBDF, most IPs interviewed reported that they are not provided with substance use programs and reentry services. They also reported that they are not provided with religious services (group or one-on-one) and only receive religious materials. The Neutral Expert notes that the County did not provide any documentation of IPs being accommodated during religious, substance use, and reentry programs or detailed information on disabled IPs who have participated in these programs.

Clinical Services

DSB Policy P.11 states, "Staff shall communicate with incarcerated persons with communication-related disabilities using their preferred means of communication for all due process events, health care encounters, and structured programming, unless the preferred method would result in a fundamental alteration, direct threat or safety and security risk, undue financial or administrative burden, or during an emergency situation."

Paragraph 91 details the process by which clinical staff provide accommodations during clinical encounters.

Family and Public Visiting/Attorney Visiting

DSB Policy M.39 Incarcerated Persons with Disabilities states, “Accommodations shall be provided to ensure incarcerated persons with disabilities have equal access to participate in and benefit from in-custody programs, services, and activities. Staff shall provide reasonable modifications to jail rules, policies, and practices, based on the incarcerated person's documented ADA instructions, to ensure equal opportunity for incarcerated persons with disabilities to participate in the services, programs, and activities offered to other incarcerated persons of the same classification level. This includes but is not limited to visitation, dayroom and recreation, transportation, communication systems (e.g., forms, telecommunications, etc.), and structured programming, including vocational and work positions.”

During the IP interviews, there were no complaints regarding access to family/public visiting and attorney visiting.

Recommendations:

- *Ensure disabled IPs have equal access to the Tablets when implemented
- *Ensure easy-reading and large-print books or magnifiers are available for disabled IPs who require the accommodations
- *Ensure writing assistance is provided to disabled IPs who require the accommodations
- *Ensure accommodations are provided to disabled IPs during Religious Services/Substance Use Programs/Reentry Services
- *Ensure accommodations are provided to IPs during clinical encounters
- *Provide the Neutral Expert proof-of-practice for the provision of the accommodations

78. *Incarcerated persons with an identified disability shall have equal, meaningful access to educational programs, vocational programs, and job assignments at the jail facilities. The County shall provide reasonable accommodations as necessary for qualified individuals with an identified disability to participate in and have meaningful access to educational programs. For vocational programs and job assignments, the County will provide equal opportunities and reasonable accommodations to qualified individuals with an identified disability who can perform the essential functions with or without reasonable accommodations.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies – DSB Policy M.39 Incarcerated Persons With Disabilities (May 29, 2024), DSB Policy P.11 Effective Communication (December 19, 2025), and DSB Policy S.1 Supervision and Assignment of Incarcerated Workers (December 30, 2024)

Training - Training Bulletins listed in Paragraph 14

Documents Produced/Reviewed – San Diego County Sheriff's Office Detention Services Bureau Reentry Services Division Programs and Support Services, December 2025 ADAE, January 2026 ADAE, February ADA EC, March 2026 ADAE, March 2026 ADA EC, March 2026 ADAE (Due Process), JIMS Archived Effect Comm Medical Instruction Reports, JIMS January- March 2026 VRI JIMS Logs, Preferred Method of Communication February 2026, and Medical Progress Notes, April 2026 ADAE

Implementation

DSB Policy M.39 Incarcerated Persons with Disabilities states, "Accommodations shall be provided to ensure incarcerated persons with disabilities have equal access to participate in and benefit from in-custody programs, services, and activities. Staff shall provide reasonable modifications to jail rules, policies, and practices based on the incarcerated person's documented ADA instructions to provide equal opportunity incarcerated persons with disabilities to participate in the services, programs, and activities offered to other incarcerated persons of the same classification level. This includes but is not limited to visitation, dayroom and recreation, transportation, communication systems (e.g., forms, telecommunications, etc.) and structured programming, including vocational and work positions." DSB Policy S.1 Supervision and Assignment of Incarcerated Workers (December 30, 2024) states, "The Sheriff's Office shall provide the reasonable accommodations needed for qualified incarcerated persons with disabilities to have an equal opportunity to participate in and benefit from in-custody programs, services, or activities, including vocational and work positions.

Qualified incarcerated persons with disabilities requiring accommodation will be assessed by health staff. Health staff will identify any work restrictions or accommodations.

The IWD (Inmate Work Deputy) and ADA Unit will review the work restrictions or accommodations to determine the type of assignment and provision of reasonable accommodations. Incarcerated workers must be able to perform the essential job functions of a position, with or without reasonable accommodations.

Staff supervising the incarcerated worker must provide the incarcerated person's reasonable accommodations or restrictions.

The IWD shall notify the ADA Unit if they notice that an incarcerated person with a disability is having trouble participating in programs and services, to discuss provision of reasonable accommodations or a different job assignment as necessary to address the issue. Staff shall consider, with input from the incarcerated person, reasonable accommodations that would make it possible for the incarcerated worker to perform the essential job functions of the position or another position."

MSD Policy B.4.1. Medical Surveillance of Incarcerated Workers (2/7/25) states, Any screening results or subsequent clinical findings indicating a disability requiring an accommodation will require a functional assessment (if not already completed) and further evaluation by a Qualified Health Professional (QHP) to identify any work restrictions or accommodations. The QHP shall complete the work restrictions and accommodations portion of the J235 form. The results will be shared with the Incarcerated Worker Deputy and the Americans with Disabilities Act Unit (ADA Unit) staff. This policy satisfies the requirements of the settlement agreement.

The vocational (Career Technical Education) and educational programs available to IPs are detailed in paragraph 76. Access and provision of accommodations for educational and vocational programs are detailed in paragraphs 76 and 81.

During the IP interviews, with the exception of IPs housed in LCDRF, EMRF, and SBDF, most IPs interviewed reported that they are not provided with educational and vocational programs. The Neutral Expert notes that disabled IPs must meet the custody and program eligibility requirements for the vocational programs.

During the previous inspection, the County produced IP Worker Housing Locations that reflected IP workers are housed in the following housing locations:

- SDCJ – Housing Units 8A and 8B
- LCDRF – Housing Units 1A and 1B
- EMRF – Housing Units 1, 2 (all IPs housed at EMRF),
- GBDF – Housing Unit 5C
- VDF – Housing Units S2 and S3
- SBDF – Housing Unit 3B
- RMDF – None Noted

DSB Policy S.1 Supervision and Assignment of Incarcerated Workers (December 30, 2024) states, “The Sheriff's Office shall provide the reasonable accommodations needed for qualified incarcerated persons with disabilities to have an equal opportunity to participate in and benefit from in-custody programs, services, or activities, including vocational and work positions.

Qualified incarcerated persons with disabilities requiring accommodation will be assessed by health staff. Health staff will identify any work restrictions or accommodations.

The IWD and ADA Unit will review the work restrictions or accommodations to determine the type of assignment and provision of reasonable accommodations. Incarcerated workers must be able to perform the essential job functions of a position, with or without reasonable accommodations.

Staff supervising the incarcerated worker must provide the incarcerated person's reasonable accommodations or restrictions.

The IWD shall notify the ADA Unit if they notice that an incarcerated person with a disability is having trouble participating in programs and services, to discuss provision of reasonable accommodations or a different job assignment as necessary to address the issue. Staff shall consider, with input from the incarcerated person, reasonable accommodations that would make it possible for the incarcerated worker to perform the essential job functions of the position or another position.”

MSD Policy B.4.1. Medical Surveillance of Incarcerated Workers (2/7/25) states, “Any screening results or subsequent clinical findings indicating a disability requiring an accommodation will require a functional assessment (if not already completed) and further evaluation by a Qualified Health Professional (QHP) to identify any work restrictions or accommodations. The QHP shall complete the work restrictions and accommodations

portion of the J235 form. The results will be shared with the Incarcerated Worker Deputy and the Americans with Disabilities Act Unit (ADA Unit) staff."

The County previously produced a document titled IWs with ADA Flags for the months of April to September 2025. During this inspection, the County did not produce documents related to disabled IP workers.

During the previous inspection, a Worker Deputy interviewed stated that IPs who are interested in being assigned as a worker submit an IP Request Form to the Worker Deputy. The Worker Deputy will review JIMS and identify if there is any exclusionary information, as eligibility criteria is based on criminal charges and in-custody behavior history. If the IP meets the eligibility criteria, the Worker Deputy will interview the IP, have the IP complete a pre-medical questionnaire, and refer the case for medical and mental health clearance. The SDCJ IP Worker Deputy stated that all disabled IPs would be considered for worker positions; however, based on no accessible housing being available in the worker housing unit, disabled IPs who require accessible housing would not be able to be assigned to a worker position, as they could not be housed in the worker housing unit.

During this inspection, the VDF work deputy described ways in which IPs with disabilities can be accommodated and expressed willingness to take such steps. He recommended that staff (e.g., intake staff) inform IPs with disabilities, "you can work [and we can accommodate your needs]." Classification staff and ADA Unit/Liaisons should also play a role in this by informing the IPs during ADA meetings and the orientation component of their right to participate in the worker program if they meet the eligibility criteria.

The GBDF work deputy stated he has never seen anyone else with a disability as a worker (there is one other IP currently wearing a wrist brace due to an injury who is listed on the ADA tracker). During the inspection, there was only one (1) disabled IP in the worker dorms at SDCJ (8A and 8B). He reported that he asked to work while using a wheelchair, but he was not hired until after he gave up his wheelchair. He has to stand at his job in the laundry right now and is looking for another job where he can sit. The SDCJ worker deputy reported understanding that he has restrictions on sitting and stated that he would follow up with the work supervisor. It is unclear whether this accommodation is documented anywhere. If documented, this would help all staff ensure the accommodation is provided. An IP who uses a cane reported that he was assigned as a worker after submitting more than 10 requests. The Neutral Expert could not confirm the requests were made.

The work clearance form is outdated and includes "jumping jacks" as part of the medical evaluation process. Medical staff interviewed reported that "jumping jacks aren't always required," despite the form listing them. The County reports that it is working on a new form. When the form is revised, the Neutral Expert must be given the opportunity to review it.

The GBDF work deputy says he has never received information on "restrictions" or "accommodations," nor has he ever provided an accommodation. He stated that accommodations are "up to staff." When asked, "Can an IP who cannot stand be allowed to sit while doing kitchen work?" the Work Deputy stated, "That would be up to kitchen staff."

The Housing Unit for IP Workers at SDCJ is not accessible, leading to worker program access exclusions based on the IP's disability. This should be addressed by adding ADA-accessible housing capacity and, in the interim, adjusting procedures so that IPs with

disabilities can access worker opportunities even if they cannot be housed in the worker units due to a lack of accessible housing options.

The County has not created job descriptions that identify the duties/essential functions for the worker positions. Based on this, there is no way for health care staff to know what restrictions are pertinent and what reasonable accommodations should be considered. These IP worker job descriptions need to be drafted as soon as possible so that the accommodation process can then be developed. The County did not provide the Neutral Expert with proof of the practice of worker-related accommodations provided to disabled IP workers. A work deputy acknowledged that he has never provided a work-related accommodation for an IP with a disability. The GBDF work deputy reported being unaware of whether any of the assigned workers had ADA-related or effective communication accommodation needs. In addition, during the next inspection, the Neutral Expert will evaluate if the County is providing IPs with Cognitive/Learning and mental health disabilities equal access to work opportunities.

The Neutral Expert notes a significant difference between the VDF MAT unit programming and the MAT programming provided for IPs in other facilities. An IP who was enrolled in MAT at SDCJ reported that he received only a MAT handbook and spoke with a counselor for 5 minutes but received no other MAT programming. The VDF MAT program is a structured in-person program with various groups and programming opportunities. Because disabled IPs who are full-time wheelchair users cannot be housed at VDF, the County must ensure that disabled IPs are provided equal access to the MAT program and other programs available to non-disabled IPs. The Neutral Expert notes that information about disabled IPs' access to MAT was not requested from the County during this inspection.

Recommendations:

- *Ensure disabled IPs are provided with equal, meaningful access to educational programs
- *Ensure disabled IPs who meet the custody and program eligibility requirements are provided equal, meaningful access to vocational programs
- *Ensure the essential functions for each worker position are included in each worker's duty statement
- *Pending the physical plant modifications, consider allowing disabled IPs who require accessible housing to be escorted to their work location or programs from their housing unit
- *Provide reasonable accommodations as necessary for qualified IPs with an identified disability to participate in and have meaningful access to educational programs.

79. *All incarcerated persons with disabilities shall be housed in a manner which allows for access to programs, services, and activities that they are qualified to participate in, with or without reasonable accommodation, in accordance with their security/custody level.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - Policies listed in Paragraph 14

Training – Trainings listed in Paragraph 14

Documents Produced/Reviewed – NA

Implementation

As detailed in paragraphs 34 and 35, paragraph 45 of the ADA Settlement Agreement and Order states, "Within four years of the signing of this ADA Settlement Agreement and Order, the County shall ensure that every person with a mobility disability who uses a wheelchair in housing is housed in a bed that accommodates their accommodation needs and that every person with a disability is housed with access to any appropriate accessibility features related to their bed, toilet, and shower, as individually determined by health care staff." The Neutral Expert notes that the County is still modifying facility housing features to comply with the ADA Settlement Agreement and Order. Until the modifications are completed, all IPs with disabilities cannot be housed in a manner that allows them to access the programs, services, and activities they are qualified to participate in, with or without reasonable accommodation, in accordance with their security/custody level.

Recommendations:

- *Pending the completion of the facility modifications, ensure IPs with disabilities are housed in a manner that allows for access to programs, services, and activities that they are qualified to participate in, with or without reasonable accommodation, in accordance with their security/custody level
- *Ensure IPs with identified disabilities are housed based on their security classification
- *Continue with the Facility Alterations identified in the 2023 ADA Order

80. *Within six months of the signing of this ADA Settlement Agreement and Order, the County shall ensure that any otherwise qualified individual with a mobility disability who cannot be housed at Vista due to housing accommodations for their disability is able to access the programs and services available in the Veterans Moving Forward module, through individual and/or virtual means. The County is committed to providing access to the Veterans Moving Forward module to ensure full participation of qualified individuals with mobility disabilities in this program in the future, including housing in the program, to the extent possible based upon future construction, other than as identified in Paragraphs 45 and 46 above, and programmatic constraints.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - NA

Training - NA

Documents Produced/Reviewed – Letter dated June 6, 2025, "Dunsmore ADA Settlement #80: Providing Access To Veterans Moving Forward Module Programs And Services To Qualified Individuals With Mobility Disabilities Who Cannot Be Housed At Visit Due To

Housing Accommodations For Their Disability." Screening Logs for Potential VMF Candidates (December 2025, January 2026, February 2026, March 2026 and April 2026)

Implementation

In the previous report, the Neutral Expert noted that the County developed a plan to ensure that any otherwise qualified individual with a mobility disability who cannot be housed at Vista due to housing accommodations for their disability is able to access the programs and services available in the Veterans Moving Forward module by the date required by the ADA Settlement Agreement and Order (no later than six months from the date of the signing of this ADA Settlement Agreement and Order by all counsel), June 11, 2025. The County's plan includes the criteria (classification, disciplinary, and military service requirements) and the process the County uses to identify IPs for the VMF program. The County details the process by which IP veterans with mobility disabilities who cannot be housed at VDF will be offered and provided services through "outside the module" means. The County also details the programs and services that will be offered/provided via the "outside the module" means. The County also reported that the RSD will utilize its records management system to document:

1. That the individual would otherwise qualify for VMF but cannot be housed at VDF due to housing accommodations for their disability
2. That the individual was offered the available services
3. Whether or not the individual chose to utilize the services

The County reported that all services offered in the VMF program are available at all facilities via:

- Professional visits
- Correspondence via interactive workbooks
- Individual sessions with RSD staff and or providers
- In a group setting (if eligible due to classification levels or specialized housing)
- In-person or virtually, where available

However, proof of practice (information on how the VMF services listed above are being provided) was not provided. The County did provide Screening Logs for Potential VMF Candidates (December 2025, January 2026, February 2026, March 2026, and April 2026). The Logs include a "Note" section with comments that reflect "individual services were provided by CC." The April 2026 log lists one (1) case with an entry "No wheelchairs at VDF/Unable to accommodate"; however, there was no documentation produced that this IP received equivalent programming. Additionally, the Neutral Expert notes that the logs for some cases reflect "Not appropriate for VMF. See case note." The Neutral Expert requests that the case notes referenced be produced."

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In the October 2025 and November 2025 document production, the County reported that RSD does not track ADA indicators in the case management system, and all ADA accommodations provided are documented in JIMS. Additionally, the County reported that the following process is in place to screen for eligible veterans for the VMF program.

A Power BI search is conducted for IPs that fit the criteria

- Gender = male
- Classification level (1-4)

- Classification Status (Ad-Sep, PC do not qualify for the program)

The VMF Counselor and Deputy reported that during intake, all IPs are asked about military service. This is also asked during the initial classification. Classification levels 1-4 are eligible for the VMF program. and meet additional criteria. However, IPs designated as SMI, Ad-Sep, Protective Custody, Enhanced Observation, Psychiatric Services Unit, and OPSD are not eligible for the VMF program. Disciplinary incidents are reviewed by the VMF deputy, and serious disciplinary issues may result in the IP being excluded from the program/module. The counselor evaluates an IP's willingness and ability to participate in extensive programming, and if the IP is cleared, the IP will be transferred to the VMF Module.

Recommendations:

- *Ensure the IP is offered the available services
- *Document whether or not the individual chose to utilize the services
- *Provide the information to the Neutral Expert

81. *Within six months of the signing of this ADA Settlement Agreement and Order, the County shall develop a plan to provide access to the vocational programs available at East Mesa to all qualified individuals with mobility disabilities who can perform the essential functions with or without accommodation and who must be housed at other facilities due to their disabilities.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - NA

Training - NA

Documents Produced/Reviewed – Letter dated June 10, 2025, “Dunsmore ADA Settlement Provision #81: Plan to Provide Access to East Mesa Reentry Facility Vocational Programs to Qualified Individuals with Mobility Disabilities who Can't be Housed at East Mesa.”

Implementation

In the previous report, the Neutral Expert notes that the County developed the plan by the date required by the ADA Settlement Agreement and Order (no later than six months from the date of the signing of this ADA Settlement Agreement and Order by all counsel), June 11, 2025. The County also provided a plan. The plan includes the housing criteria (classification and medical) for IPs housed at EMRF, the Career Technical Education programs offered through coordination with Grossmont Education, and additional programs offered by the County. They include:

- Grossmont Education
  - Construction Trades
  - Culinary Arts
    - Barista
  - Bakery
  - Landscaping/CIVICS

    - Laundry
    - HSAT
- County Programs
    - Commissary
    - Bike Shop

The plan states,

> *"EMRF does not meet the ADA Standards for Accessible Design and cannot house persons who utilize wheelchairs. Incarcerated persons who utilize wheelchairs in housing must be housed at San Diego Central Jail (SDCJ) or Rock Mountain Detention Facility (RMDF). Incarcerated persons who utilize wheelchairs in housing that would otherwise qualify for EMRF would only be housed at SDCJ because they must be classification level 1-3 and RMDF does not currently house incarcerated persons classification level 1-3.*
>
> *EMRF can house incarcerated persons with mobility disabilities, including persons who use intermittent wheelchair, unless the person requires ADA Standards for Accessible Design housing accommodations, such as an accessible shower or toilet, that are not available at EMRF. These persons would only be housed at SDCJ because they must be classification level I -3 and RMDF does not currently house incarcerated persons classification level 1-3.*
>
> *Based on the reasons above, incarcerated persons who qualify for accommodated CTE programs would currently only be housed at SDCJ. Thus, the required accommodated programs will be provided at SDCJ. This is subject to change if the population at RMDF changes."*

The plan details the CTE curriculum and the CTE certificate requirements that the IP must complete to participate in and successfully complete the program. The plan also identifies programs for IPs with a mobility disability who cannot be housed at EMRF due to their disability and are not able to meet the essential functions of the program, with or without reasonable accommodation. The plan also includes plans for RSD staff to work with Grossmont Adult Education to provide access to the culinary programs and the Environmental Janitorial Services Customer Services Certificate for IPs with a mobility disability who cannot be housed at EMRF due to their disability. The plan also states that although IPs with a mobility disability who cannot be housed at EMRF due to their disability cannot participate in the CTE Laundry program, IPs can work in laundry positions focusing on a singular job.

During the inspection, the Neutral Expert noted that four IPs with ADA Flags (2 ADA-Mobility, one ADA Hearing, and 1 ADA Cognitive/Learning) were housed at EMRF. The County reported that all IPs are screened for housing eligibility at EMRF. The Neutral Expert will need the County to produce a list of ADA Mobility (Full-time Wheelchair) who are eligible for EMRF and are not housed at EMRF.

The County has not provided the Neutral Expert with the plans for RSD staff to work with Grossmont Adult Education to provide access to the culinary programs and the Environmental Janitorial Services Customer Services Certificate for IPs with a mobility disability who cannot be housed at EMRF due to their disability.

Recommendations:

- *Finalize the coordination with Grossmont Adult Education to identify how to provide the instructional portion of the customer service curriculum and the examination for the Environmental Janitorial Services Customer Service Certificate
  - County response: Amendment for one-on-one session is now included in Grossmont Adult Education (GAE) contract for all facilities; currently, the HSAT instructor position at SDCJ continues to be vacant; GAE is working on filing position.
- *Finalize the coordination with Grossmont Adult Education to identify how to provide ServSafe at SDCJ.
  - Culinary Arts staff in backgrounds to get ServSafe in other facilities, SDCJ will be prioritized as needed.
- *Finalize the coordination with Grossmont Adult Education to identify an instructor to provide on-the-job culinary instruction.
  - Person in GAE backgrounds, if cleared, that person will have to go through SDSO background; we can inquire if GAE has someone available if needed before this individual is cleared.
- *Finalize the coordination with Grossmont Adult Education to provide the instructional portion and the examination portion of the Food Handlers program to the qualified IPs at SDCJ.
  - Food Handlers is happening as needed once a month at all facilities and can be offered as frequent as needed.

I. Requests for Disability Accommodations and Grievances

82. The County shall maintain policies, procedures, and training regarding incarcerated person requests for disability accommodations and grievances regarding disability accommodations.

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies – DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), DSB Policy N.1 Grievance Procedure (December 17, 2024), DSB Policy N.3 Incarcerated Person Request Forms (May 30, 2025)

Training – Training Bulletins listed in Paragraph 14

Documents Produced/Reviewed – NA

Implementation

The County's policies and procedures regarding incarcerated persons' requests for disability accommodations and grievances regarding disability accommodations, DSB Policies M.39 Disabled Incarcerated Persons, DSB Policy N.1 Grievance Procedure, and DSB Policy N.3 Incarcerated Person Request Forms, include the requirements of this paragraph. Although the County previously produced Training Bulletins regarding this provision's requirements, it has not provided the Neutral Expert with training records to confirm that staff have been trained.

Staff reported that grievances are processed as follows:

The IP obtains the grievance from the staff, or the stack located in the housing unit. The IP can submit the grievance to the Deputy or place it in the grievance boxes located in the housing units. The Deputy who is provided the grievance provides the IP with a signed receipt copy of the grievance form and enters the grievance into JIMS. Grievances placed in the grievance boxes are processed by sergeants. A signed copy is provided to the IP, and the sergeant enters the grievance into JIMS. The Deputy or Sergeant can route the grievance to the appropriate staff for response. The completed grievance is delivered to the IP by staff. In addition, the County's policy includes a process for processing and responding to grievances that do not meet the criteria for grievances. Staff interviewed said that a grievance stating "I need my ADA device" is a request, but a grievance stating "I need my device, and it hasn't been given to me" may be a grievance. In cases where staff determine that a grievance is an "inmate request," staff note this on the second page of the grievance form, provide the IP with a signed receipt, and advise the IP to submit the request on the appropriate form. In these cases, no entry is made in JIMS, and staff file the original grievance form in the IP's custody record and resolve the IP's request. An IP at LCDRF reported watching a Sergeant review grievances from the grievance box, place several grievances into the inmate request box, and walk away (this could not be confirmed). A Sergeant who was interviewed at SDCJ confirmed that any staff member can receive a grievance and decide whether it is a grievance or an IP request. Staff also reported that grievances converted to IP requests are scanned and placed in the booking jacket, so they should be producible to the Neutral Expert for review.

The County must ensure IPs have access to the ADA grievance system. Based on this, for grievances submitted by the IP as ADA grievances and staff determine that the issue addressed in the grievance was an IP request, the Neutral Expert cannot review these grievances because they are not tracked as ADA grievances or ADA requests, even though ADA requests are required to be timely responded to by the ADA Unit and tracked under the SA at Paragraph 84. In addition, Paragraph 90 requires that "As part of the ADA Unit's quality assurance processes, the ADA Unit shall track all ADA grievances for quality assurance and take corrective action as necessary to address issues." ADA grievances converted to an IP request are not being tracked, thereby preventing implementation of the quality assurance processes required by Paragraph 90. Paragraph 89 also requires that "ADA grievances shall receive a response to the grievance within seven (7) calendar days or sooner based upon the nature of the request and well-being of the grievant." All ADA grievances must be addressed with a statement such as, "This grievance has been reclassified/converted to an IP request and is resolved as follows…."

In the previous report, the Neutral Expert noted in paragraph 85 that the County does not designate requests for a lower bunk/tier and glasses as ADA accommodations or ADA-related grievances. The County is required to ensure the IP has equal access to the jail's programs, services, and activities, and these requests and grievances relate to the IP's request for accommodations to read. In addition, DSB Policy I.22 states, "Accessible housing features may include, but are not limited to: ADA-compliant cell, ADA-compliant shower, bed location, clearance space, toilet grab bars, shower grab bars, shower bench/chair, lower bunk, lower tier, or lower bunk and lower tier." In addition, in the "Draft Medical Services Division Training Bulletin, ADA Related Checkbox in Techcare", the County included examples of ADA-related requests, including but not limited to "shoes, lower bunk and/or tier, MAT/MOUD, cane, walker, wheelchair, crutches, braces, hearing aids, glasses, or other vision, hearing, mobility requests." These examples need to be included in the policies for grievances and requests.

Recommendations:

- *Ensure that grievances and requests for accommodations related to glasses and lower bunk/tier are designated as ADA-related
- *Ensure staff who respond to and categorize grievances and requests are trained
- *Provide the Neutral Expert staff training records

83. *Incarcerated persons can submit requests for new reasonable accommodations via the Healthcare Request form and process. The County shall timely respond to Healthcare Request forms requesting reasonable accommodations and shall track all such Healthcare Request forms and their resolutions.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies – DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), DSB Policy N.1 Grievance Procedure (December 17, 2024), DSB Policy N.3 Incarcerated Person Request Forms (May 30, 2025)

Training – Training Bulletins listed in Paragraph 14

Documents Produced/Reviewed – March 2026 ADA-Related Sick Calls and April 2026 ADA-Related Sick Calls

Implementation

DSB Policy M.39 states, “A request for reasonable accommodation may be initiated by the incarcerated person, their family members, or an outside agency. A request for an assessment of accommodations will be forwarded to the MSD ADA case manager for review. Assessments can be completed by either a registered nurse or by a physician. The findings and disposition will be documented in the incarcerated person's health record. Requests will be acted upon within 72 hours.”

The Neutral Expert notes that the County has policies in place to satisfy this requirement; however, the County does not have a process to track ADA-related Healthcare Request forms and their resolutions for cases in which IPs request reasonable accommodations using the Healthcare Request form.

The Neutral Expert notes that in the “Draft Medical Services Division Training Bulletin, ADA Related Checkbox in Techcare”, the County is implementing a process for staff when scheduling a sick call, and the medical request is ADA-related; staff will have an option to select ADA-related, and these medical requests will be tracked as ADA-related.

As this process has not been implemented, the County did not provide the Neutral Expert with completed Healthcare Request forms requesting disability accommodations. However, the County did produce the March and April 2026 ADA-Related Sick Calls. The document includes 85 cases. The log includes the date of the request, what is being requested, the date completed, and the outcome. Although the County produced Training Bulletins outlining the requirements of this provision, it did not provide the Neutral Expert with the training records to confirm whether staff had been trained.

Recommendations:

- Implement the process to track ADA-related Healthcare Request forms and their resolutions for cases where IPs request reasonable accommodations using the Healthcare Request form
- *Provide the Neutral Expert staff training records

84. *An incarcerated person with a disability may contact the ADA Unit regarding the provision of their reasonable accommodations to access programs, services, and activities by using the Incarcerated Person Request form. The ADA Unit shall timely respond to Incarcerated Person Requests regarding reasonable accommodations and shall track all such Incarcerated Person Requests and their resolutions.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), DSB Policy N.1 Grievance Procedure (December 17, 2024), DSB Policy N.3 Incarcerated Person Request Forms (May 30, 2025)

Training – Training Bulletins listed in Paragraph 14

Documents Produced/Reviewed – ADA Phone Request Log February and March 2026, Responses to phone calls/messages

Implementation

DSB Policy M.39 states, “A request for reasonable accommodation may be initiated by the incarcerated person, their family members, or an outside agency. A request for an assessment of accommodations will be forwarded to the MSD ADA case manager for review. Assessments can be completed by either a registered nurse or by a physician. The findings and disposition will be documented in the incarcerated person's health record. Requests will be acted upon within 72 hours.” DSB Policy N.1 Grievance Procedure states, “All ADA related grievances will be entered into JIMS as an ADA grievance and forwarded within one business day to the ADA Unit for processing. The ADA Unit will respond within the time frame outlined in paragraph III.B.1. The ADA Unit or their designee in collaboration with health staff will determine if an interim accommodation is needed, pending a final response to the grievance.” DSB Policy N.3 Incarcerated Person Request Forms states, “Incarcerated person request forms shall be routed out of the housing area for actions only when the housing deputy is unable, or is not authorized, to provide the final disposition. The forms will be routed to the party responsible for effecting a final disposition of the request (e.g., Medical Services Division, Detentions Processing Division, Reentry Services Division, etc.).”

Although the County’s policies and procedures do not specifically state that “An incarcerated person with a disability may contact the ADA Unit regarding the provision of their reasonable accommodations to access programs, services, and activities by using the Incarcerated Person Request form”, the policy does state that the forms will be routed to the party responsible for effecting a final disposition of the request. Additionally, the County has a

process that allows IPs to contact the ADA Unit by telephone and leave a recorded message for the ADA staff.

The County did not produce any ADA Request forms. The County produced the ADA Phone Request Log for February and March 2026. The February log includes 26 calls, and the March log includes 40 calls. The County also produced documents that include responses to 13 of the 66 phone calls/messages. The method the County uses to track IP requests (phone calls/messages) and their resolutions does not include detailed information for all cases; therefore, the Neutral Expert could not determine timeliness because the documents lacked the dates of receipt or response.

Recommendations:

- *Maintain a tracking system for ADA-related IP requests (Request Forms, phone calls, emails, and letters) and their resolutions.
- *Ensure the tracking includes the date of receipt, date of response, issue requested, and resolution

85. *An incarcerated person with a disability may grieve alleged discrimination due to a disability or dispute decisions related to accommodations by using the Incarcerated Person Grievance form.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), DSB Policy N.1 Grievance Procedure (December 17, 2024), and I.22 Lower Bunk Lower Tier Medical Instruction Assignment (May 29, 2024)

Training – Training Bulletins listed in Paragraph 14

Documents Produced/Reviewed – February 2026 JIMS Grievances (2), February 2026 Medical (ADA) Grievances (5), March 2026 ADA Grievances (2), March 2026 ADA Grievance Tracking Log (3 Grievances), March 2026 Medical Grievances (7), April 2026 Medical Grievances (9)

Implementation

DSB Policy M.39 Disabled Incarcerated Persons and DSB Policy N.1 Grievance Procedure include a detailed process for IPs to grieve issues related to ADA and alleged discrimination due to a disability or dispute decisions related to accommodations. However, upon reviewing the completed grievances produced by the County, the Neutral Expert noted that none related to accommodations for a lower bunk or lower tier.

In the previous report, the Neutral Expert noted in paragraph 85 that the County does not designate requests for a lower bunk as ADA-related grievances. The County is required to ensure the IP has equal access to the jail's programs, services, and activities, and these requests and grievances relate to the IP's request for accommodations to read. In addition, DSB Policy I.22 states, "Accessible housing features may include, but are not limited to: ADA-compliant cell, ADA-compliant shower, bed location, clearance space, toilet grab bars, shower

grab bars, shower bench/chair, lower bunk, lower tier, or lower bunk and lower tier." In addition, in the "Draft Medical Services Division Training Bulletin, ADA Related Checkbox in Techcare", the County included examples of ADA-related requests, including but not limited to "shoes, lower bunk and/or tier, MAT/MOUD, cane, walker, wheelchair, crutches, braces, hearing aids, glasses, or other vision, hearing, mobility requests." These examples need to be included in the policies for grievances and requests.

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The Neutral Expert notes that the grievance process under Paragraph 93 is a "Due Process" event, and that an IP with a communication-related disability may not receive adequate, effective communication accommodations for an inmate request (for which EC is not subject to the same proof-of-practice requirements as those in Paragraph 92). The grievance process must be accessible to IPs to safeguard their due process and effective communication-related rights under the settlement agreement. In addition, if the County does not process a grievance (including with no notice to the IP), then the IP is unable to exhaust the grievance procedures that the jail requires as a prerequisite to filing an individual legal claim – this results in a further denial of their rights under the ADA.

Recommendations:

- *Ensure that grievances and requests for accommodations related to a lower bunk/tier are designated as ADA-related
- *Ensure staff who respond and categorize grievances and requests are trained
- *Provide the Neutral Expert staff training records

86. *Within 6 months of all counsel signing this ADA Settlement Agreement and Order, the County will amend the Grievance form to include a clear means for a person to identify that their grievance is an "ADA" grievance. The County shall track all such "ADA" grievances and their resolutions.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), DSB Policy N.1 Grievance Procedure (December 17, 2024)

Training – Training Bulletins listed in Paragraph 14

Documents Produced/Reviewed – February 2026 JIMS Grievances (2), February 2026 Medical (ADA) Grievances (5), March 2026 ADA Grievances (2), March 2026 ADA Grievance Tracking Log (3 Grievances), March 2026 Medical Grievances (7), April 2026 Medical Grievances (9)

Implementation

The County produced a blank San Diego County Sheriff's Office Incarcerated Person Grievance/Appeal Form (J-22 Rev 07/24). The Neutral Expert notes that the grievance form includes a "checkbox" for the IP to designate as "ADA." The County also produced the February 2026 JIMS Grievances (2), February 2026 Medical (ADA) Grievances (5), March 2026 ADA Grievances (2), March 2026 ADA Grievance Tracking Log (3 Grievances), and

March 2026 Medical Grievances (7). The County's policy includes a process for processing and responding to grievances that do not meet the criteria for grievances.

If a grievance is determined to be a request, staff can check the two corresponding boxes, "This is not a grievance," and "This is a request," on the J-22 form. If staff make this determination, the second page of the J-22 form is given to the IP as a signed receipt. Staff will provide the IP with a Request (J-21) form and advise the IP to submit the request on the appropriate form. For these cases, no entry in JIMS is required by current policy, and staff file the original copy of the J-22 form in the IP's custody record and resolve the IP request according to DSB Policy N.3. Based on this, grievances filed by IPs as ADA grievances and designated by staff as an IP request are not being tracked by the County. In addition, the medical grievances the County produced are not included in the March 2026 ADA Grievance Tracking Log. Based on this, the Neutral Expert finds that the County is not tracking all ADA Grievances as required by this paragraph.

A review of the grievances produced found two (2) grievances that were submitted on the outdated grievance forms (SD 1693967 and SD 1693972).

Recommendations:

- *Ensure the County tracks all ADA grievances, including those related to lower bunk/tier, medical ADA grievances, and grievances submitted by IPs as ADA grievances and categorized as an IP request by staff

87. *Blank grievance forms shall be available in every housing unit and in health care areas, and shall be provided to incarcerated persons upon request at any time.*

Compliance Rating: Substantial Compliance

Previous Compliance Rating: Substantial Compliance

Policies - **Policies** - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), DSB Policy N.1 Grievance Procedure (December 17, 2024)

Training - NA

Documents Produced/Reviewed – February 2026 JIMS Grievances (2), February 2026 Medical (ADA) Grievances (5), March 2026 ADA Grievances (2), March 2026 ADA Grievance Tracking Log (3 Grievances), March 2026 Medical Grievances (7)

Implementation

During the inspection, the Neutral Expert confirmed that grievance forms are available in every housing unit toured and in the health care areas the Neutral Expert toured. Additionally, interviewed staff reported that grievance forms are provided to IPs upon request.

An IP wrote on a grievance that he had been unable to receive grievance forms (SD 1693965). During the IP interviews, multiple IPs reported that staff demand to know "what is the grievance about" before providing the grievance form, and that staff refuse to provide grievance forms. It is encouraged to resolve an IP concern at the lowest possible level, but appropriate practice should be to provide the grievance form "upon request at any time" (as

required by Paragraph 87. An IP at LCDRF reported that staff at times print the grievance form and, as a result, no duplicate copy is given to the IP for their own record.

Recommendations:

- *Although the Neutral Expert finds the County in substantial compliance with this provision, it is recommended that grievances be provided to all IPs upon request
- *The Neutral Expert recommends that grievances be maintained in each dayroom so that IPs can obtain them as needed
- *The Neutral Expert also recommends that, as part of the ADA interviews, the County provide the disabled IPs a grievance and request form

Note: Although the Neutral Expert finds the County in substantial compliance with this paragraph, the Neutral Expert will continue to review this paragraph during the next inspection.

88. *The County shall provide assistance completing grievances, Incarcerated Person Requests, and Healthcare Request forms to those incarcerated persons with disabilities who require reasonable accommodations to complete the forms.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - **Policies** - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), DSB Policy N.1 Grievance Procedure (December 17, 2024)

Training - NA

Documents Produced/Reviewed – Excel spreadsheet Grievance Assistance Reading and Writing December 2025, “Staff Assistance Provided February to April, 2026.”

Implementation

DSB Policy N.1 Grievance Procedure states, “Reading assistance shall be provided by staff for all visually presented information (e.g., forms, reports, documents, etc.) in cases where the incarcerated person requires such accommodation to understand written materials. Scribes or writing assistance shall be provided by staff to complete necessary forms or written complaints, grievances, etc. in cases where the incarcerated person requires such accommodation to access such jail procedures.” Policy MSD.S.3 (4/18/25) states, “Incarcerated persons requiring assistance or an accommodation with documenting their requests, staff can transcribe the request onto the J212/J212S.”

The County reported that Program Counselors meet with all IPs identified as having a Medical Instruction Flag for ADA Cognitive Learning, ADA Hearing, ADA Speech, and ADA Vision to advise them on how to request accommodations and on the accommodations available to the IP for accessing the jail’s programs, services, and activities. The County produced Excel spreadsheets titled “Grievance Assistance Reading and Writing December 2025” and “Staff Assistance Provided February to April 2026.” Documents for January 2026 were not produced. Listed below are entries identified by the Neutral Expert:

- CC met with IP to complete ADA check. IP requested help completing a IP request form to get in contact with psychiatrist.
- Client who requested assistance filing a grievance due to his belief he is not being prescribed necessary medication he was receiving in the community. He claims the medications he is being prescribed are incorrect and giving him negative side effects.
- CC listened to client's needs and articulated this for him on a grievance form. CC will submit grievance information supervisor and requesting ADA lieutenant.

Staff interviewed reported that they would assist IPs in completing forms (grievances); however, during the IP interviews, the five (5) IPs with cognitive/intellectual/learning disabilities interviewed reported that staff does not offer assistance in reading and writing and completing forms, and they must rely on other IPs for reading and writing assistance. For IPs that have accommodations for reading and writing assistance, staff must periodically ask if they need assistance (and ensure there is proof of practice that this occurs), and in cases where assistance is provided in completing the grievances document, provide the Neutral Expert with proof of practice that staff is assisting.

Post-inspection, the County produced an email dated 5/18/26 from the ADA Sergeant, addressed to Detention Supervisors, regarding the provision of assistance in reading and writing. The email states, “For individuals with documented vision disabilities or those who cannot read or write, staff must read documents aloud and assist with completing forms as needed.”

Recommendations:

- *For IPs that have accommodations for reading and writing assistance, staff must periodically ask the IP if they need assistance in completing grievances
- *In cases where assistance is provided in completing grievances, document and continue to provide the Neutral Expert with proof-of-practice staff is providing the assistance.
- *Ensure that staff are trained on the paragraph’s requirements

89. *ADA grievances shall receive a response to the grievance within seven (7) calendar days or sooner based upon the nature of the request and well-being of the grievant. In response to an ADA grievance alleging the incarcerated person’s health or safety is being threatened by a condition of their confinement or that the conditions of confinement prevent their effective communication or participation in a court or administrative proceeding, the ADA Unit will respond within four (4) calendar days. The ADA Unit or their designee in collaboration with health staff will provide an interim accommodation when warranted, pending a final response to the grievance.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), DSB Policy N.1 Grievance Procedure (December 17, 2024), MSD G.1 Grievances (4/18/25)

Training – Training Bulletins listed in Paragraph 14 and Line-Up-Training Incarcerated Person Request and Grievance Procedures

Documents Produced/Reviewed – February 2026 JIMS Grievances (2), February 2026 Medical (ADA) Grievances (5), March 2026 ADA Grievances (2), March 2026 ADA Grievance Tracking Log (3 Grievances), March 2026 Medical Grievances (7), April 2026 Medical Grievances (9)

Implementation

DSB Policy M.39 Disabled Incarcerated Persons and DSB Policy N.1 Grievance Procedure include the timelines required by this paragraph for staff to respond to ADA grievances, including ADA grievances that allege the IP's health or safety is being threatened by a condition of their confinement or that conditions of confinement prevent their effective communication or participation in a court or administrative proceeding.

MSD G.1 Grievances (4/18/25) states, "If the submitted grievance is ADA-related, it will be forwarded to the ADA Unit within one business day for processing in accordance with DSB Policy M. 39.

If the submitted grievance is determined to be a request, staff triaging the request will write, This is a request on handwritten grievances or select the box on the J-22G form indicating the submission is not a grievance but is a request. Staff will then facilitate the response and/or intervention to address the request pursuant to MSD Policy S.4, or as otherwise appropriate. All requests will be scanned, and documentation completed in the health record.

When an ADA grievance is received alleging an urgent issue regarding an incarcerated person's safety or well-being, staff shall either (a) provide an interim accommodation that addresses the urgent issue pending a final response to the grievance or (b) resolve the grievance promptly with participation of health care staff, as appropriate.

For grievances that raise significant and imminent health or safety risks, staff shall address the grievance immediately. Non-emergency ADA grievances shall be processed in accordance with DSB P&P section M.39."

The MSD policy includes all the requirements of the settlement agreement.

The County also produced the February 2026 JIMS Grievances (2), February 2026 Medical (ADA) Grievances (5), March 2026 ADA Grievances (2), March 2026 ADA Grievance Tracking Log (3 Grievances), March 2026 Medical Grievances (7), and April 2026 Medical Grievances (. In review of the 25 grievances, the Neutral Expert notes that 20 were responded to within the required seven (7) days. Three (3) did not include a response; one was responded to in 20 days, and one (1) was responded to in 30 days.

In addition, the Neutral Expert's review of the 16 grievances found one (1) grievance where an IP stated, "I'm hearing impaired. I've written medical as well as to the ADA coordinator with no response. I'm requesting a hearing-impaired vest due to a lot of incidents with staff, mainly with obeying orders. Like "lock it down," I can hear like 50-60% in left ear only but I need deputies to realize that Im just not hearing their comanns." The grievance response does not include information on when the IP was provided the vest, and the ADA Unit did not respond to the grievance.

The Neutral Expert also notes that the Line-Up-Training Incarcerated Person Request and Grievance Procedures do not include information and guidance on ADA-related grievances.

Recommendations:

- Ensure IPs receive a response within seven (7) calendar days or sooner, based on the nature of the request and the IP's well-being.
- *For grievance response to an ADA grievance alleging the incarcerated person's health or safety is being threatened by a condition of their confinement or that the conditions of confinement prevent their effective communication or participation in a court or administrative proceeding, ensure the ADA Unit responds within four (4) calendar days.
- *Ensure all timelines related to the grievance and the response to the grievance are included in the grievance tracking spreadsheet

90. *As part of the ADA Unit's quality assurance processes, the ADA Unit shall track all ADA grievances for quality assurance and take corrective action as necessary to address issues.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), DSB Policy N.1 Grievance Procedure (December 17, 2024)

Training – Training Bulletins listed in Paragraph 14

Documents Produced/Reviewed – February 2026 JIMS Grievances (2), February 2026 Medical (ADA) Grievances (5), March 2026 ADA Grievances (2), March 2026 ADA Grievance Tracking Log (3 Grievances), March 2026 Medical Grievances (7), April 2026 Medical Grievances (9)

Implementation

The 2026 ADA Unit Quality Assurance Audit includes the following components:

- Inaccessible Placement
- Preferred Method of Comm (JIMS/Techcare/BWC)
- Mobility Housing Quality Assurance
- ADA Cognitive/ADA Vision/ADA Hearing/ADA Speech
- Inaccessible ADA Housing
- Quality Assurance
- Track Released DME's and IP Personal Stored DME

Although the ADA Unit tracks some ADA grievances, the Neutral Expert notes that the County has not developed a quality assurance and auditing program for ADA grievances to address issues such as the provision of required effective communication during the grievance response process, timeliness of response, and issues identified in grievances being submitted by IPs related to disability accommodations.

Recommendations:

- *Develop a quality assurance and auditing program to ensure staff are in compliance with the grievance process, the provision of effective communication, and issues identified in grievances being submitted by IPs related to disability accommodations

J. Effective Communication.

91. *The County shall ensure that incarcerated persons with identified disabilities receive accommodations and services necessary for effective communication, and are able to equally and fully access jail facility programs, services, and activities, including as part of the 2023 ADA Order. Staff shall give primary consideration to a person's preferred method of communication.*

Joint Motion and Order Re Accessibility at Central Jail, Effective Communication Policy and Practice, and Provisional Class Certification dated 6/21/23

Within sixty days of the Court approving this Stipulation and [Proposed] Order, Defendants shall develop and provide to Plaintiffs a plan to remedy the accessibility and effective communication issues identified in Plaintiffs' Motions, which shall include, at a minimum, the following elements:

a. For incarcerated people with hearing disabilities at San Diego County jail facilities:

i. Defendants will provide Sign Language Interpretation via in person (or remote technology as appropriate) to all incarcerated people with hearing disabilities who use Sign Language Interpretation as their primary means of communication for all medical and mental health encounters, booking, classification proceedings, available structured programming (e.g., classes, religious services, etc.), investigative purposes, and disciplinary proceedings.

ii. During booking, Defendants will evaluate every person to determine whether they have a hearing or speaking disability and, if so, the person's primary method of communication (e.g., sign language, written notes, hearing aids, etc.). In determining a person's primary method of communication, Defendants must ensure that the incarcerated person is assessed by a nurse and must give deference to the preference of the incarcerated person. Defendants will then document that method of communication and require that their staff and contractors use that method as appropriate when interacting with the incarcerated person during all medical and mental health encounters, booking, classification proceedings, available structured programming (e.g., classes, religious services, etc.), investigative processes, and disciplinary proceedings.

iii. Defendants will provide access to Sign Language Interpretation services at all San Diego County jail facilities that house people with hearing disabilities who use Sign Language Interpretation as their primary means of communication, including with a telecommunication service provider, videophones, VRS technology, and in-person Sign Language Interpretation, as appropriate to ensure effective communication;

iv. Defendants will track disability-related effective communication needs, including as to Sign Language Interpretation, through its San Diego County jail management systems; and

v. These changes will be incorporated into policy and Defendants will train all deputies, health care staff, and other relevant staff to follow the policy.

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons May 29, 2024, DSB Policy O.3 Rules and Regulations of Incarcerated Persons (March 24, 2025), DSB Policy P.11 Effective Communication (December 19, 2025), San Diego Sheriff's Office Medical Services Division Receiving Screening E.2.1. (3/21/25)

Training – Training listed in Paragraph 14

Documents Produced/Reviewed – December 2025 ADAE, January 2026 ADAE, February ADA EC, March 2026 ADAE, March 2026 ADA EC, March 2026 ADAE (Due Process), JIMS Archived Effect Comm Medical Instruction Reports, JIMS January- March 2026 VRI JIMS Logs, Preferred Method of Communication February 2026, and various Medical Progress Notes, April 2026 ADAE, Rule Violation Reports, March and April 2026 Health Care Appointments

Implementation

Paragraph 19 details the process the County uses to identify IPs who require Effective Communication and the IPs' preferred/primary method of communication. It also details the process for tracking IPs who require effective communication, the accommodations in place, and how staff can access effective communication-related information and accommodations on JIMS.

As detailed in paragraph 19, during the on-site observation of the medical clearance process at SDCJ, the Neutral Expert noted that the RN conducting the intake did not ask all of the disability-related questions. Therefore, sworn staff may not be made aware of communication disabilities or the accommodations IPs need to communicate effectively.

The documents produced by the County reflect the following number of cases reviewed for whether staff provided effective communication:

Preferred Method of Communication Feb 2026

Case #1
- No JIMS Incidents
- No Medical Appointments

Case #2
- No JIMS Incidents
- Four (4) MH encounters
    - Three (3) ASL Interpreter Used
    - One (1) hand written notes

Case #3
- One (1) JIMS Incident – ASL Interpreter used
- Four (4) Medical encounters
    - One (1) handwritten notes
    - One (1) No ASL documented

    - One (1) handwritten ASL interpreted used
    - One (1) handcuffed uncooperative

Case #4
- No JIMS Incidents
- One (1) Medical encounter ASL not documented

February 2026 – ADAE
- 23 entries (10 are for language translation)

March 2026 ADAEC
- 43 entries (9 are for language translation)

March 2026 ADAE
- 24 entries (10 are for language translation)

April 2026 ADAE
- 31 entries (3 are for language translation)
    - Note: The April 2026 ADAE also includes cases from June 2024 to May 2026

December 2025 ADAE
- Ten (10) entries

January 2026 ADAE
- Seven (7) entries

January 2026 VRI JIMS Logs
- Seven (7) entries
    - 51 minutes

March 2026 ADA EC Due Process, DPD, RSD
- 24 entries (10 are for language translation)

27 Medical Progress Notes

The Neutral Expert also requested documentation and BWC for the provision of EC for randomly selected cases. A review of the documents and BWC is detailed below.

Preferred Method of Communication ASL

- Case #1- Preferred method of Communication ASL/Hearing Aids
    - One (1) Medical Intake – Documented EC

- Case #2 - Preferred method of Communication ASL
    - Three (3) medical encounters – ASL provided in all cases

- Case #3 - Preferred method of Communication ASL
    - Two (2) medical encounters – ASL provided in one (1) and writing in one (1)

- Case #4 - Preferred method of Communication ASL
    - Nine (9) medical encounters – ASL provided in two (2), writing in five (5), and two (2) documented EC accommodation needs only

- Case #5 - Preferred method of Communication ASL
    - One (1) medical encounter - Documented EC accommodation needs only

- Case #6 - Preferred method of Communication ASL
    - One (1) medical encounter – ASL provided

- Case #7 - Preferred method of Communication ASL
    - Five (5) medical encounters – ASL provided in one (1), writing in three (3), and hand gestures in one (1)
    - This case was housed in AD-SEP, and wellness rounds are conducted. There was no documentation that ASL was used during these checks

ID/DD and Other Sensory Disabilities with Effective Communication Accommodation Needs

- Case #1 – Simple language
    - Rule Violation
    - Initial – 4/23/26 – No EC
    - Hearing – 4/23/26 - No EC
    - Final Copy - No BWC produced

- Case #2 – Amplifiers
    - One (1) medical encounter
    - Provided hearing aids at encounter, no EC documented

- Case #3 – Amplifier
    - One (1) medical encounter
    - No EC documented

- Case #4 – Reading Lips/speaking loudly
    - One (1) medical encounter
    - Identified EC accommodations at encounter, no EC documented

- Case #5 – Hearing aids/writing as back-up
    - Classification -EC documented in ISR
    - Identified EC accommodations at Intake, no EC documented

- Case #6 – Simple language/speak slow
    - Rule Violation
    - Initial – No BWC produced
    - Hearing – 3/11/26 - No EC
    - Final Copy - No BWC produced
    - No BWC produced for RVRs dated 2/4/26 and 3/21/26

- Case #7 – Simple language/speak slow
    - Rule Violation

        - Initial – 2/20/26 No EC
        - Hearing – 2/21/26 - No EC
        - Final Copy - No BWC produced
    - Rule Violation
        - Initial – No BWC produced
        - Hearing – 3/10/26 - No EC
        - Final Copy - No BWC produced

- Case #8 – Simple language/speak slow
    - Rule Violation
        - Initial – 2/1/26 No EC
        - Hearing – 2/4/26 - No EC
        - Final Copy - No BWC produced
    - Rule Violation
        - Initial – 2/13/26 Mo EC
        - Hearing – 2/14/26 - No EC
        - Final Copy - No BWC produced

- Case #9 – Speaking loudly
    - One (1) medical encounter – provided EC

- Case #10 – Writing/speaking louder
    - Two (2) medical encounters
    - Treatment for hearing loss and Intake, no EC documented

- Case #11 – Reading Lips/speaking loudly
    - One (1) medical encounter
    - Identified EC accommodations at encounter, no EC documented

- Case #13 – Cognitive Learning
    - Classification AD-Sep – 1/5/26 No EC

- Case #14 – Amplifier
    - Classification AD-Sep – 1/23/26 No EC

- Case #15 – Cognitive/Learning
    - Classification AD-Sep – 3/25/26 No EC

- Case #16 – Speak louder/Face patient
    - Three medical encounter no EC
    - Classification AD-Sep ISR 1/16/26 – No EC

- Case #17 – Cognitive/Learning
    - Classification AD-Sep 12/27/25 – No EC

- Case #18 – Cognitive/Learning
    - Classification AD-Sep 2/12/26 – No EC

- Case #19 – ASL
    - Classification 4/28/26 – ASL provided

- Six medical encounters
  - Three (3) - ASL provided
  - Three (3) - No ASL provided

Cases #13- #19 were housed in AD-Sep, and weekly classification reviews are conducted. For all these cases, no documentation/BWC was produced for the Neutral Expert to determine if EC was provided during the review.

The Neutral Expert notes that in most cases reflected in the ADAE logs, staff did not document the type of encounter or the provision of effective communication accommodations when (VRI) was not used. Additionally, the Neutral Expert cannot assess whether communication was effective in encounters in which staff did not use auxiliary aids.

During staff interviews, some staff who interact with IPs in settings that require effective communication lacked knowledge of the EC requirements. The DPD staff member at GBDF When interviewed was not familiar with the ADAE form. She stated, "We don't have folks at GB" with EC needs, even though the Neutral Expert observed her conducting a release with an IP with an EC ADA during the inspection. The GBDF MH Chief, when interviewed, reported using VRI/SLI at the cell front through the cell door, with the deputy holding the tablet while the MHC and IP met. Multiple staff members continue to say that VRI is used on staff cellphones. The VDF classification deputy stated he uses a cell phone for VRI because "it is more convenient." It is the Neutral Expert's position that VRI should primarily be used on a tablet and/or a desktop computer, as the screen on a cellphone would make it difficult for the IP to see the interpreter. However, in emergency situations, using a cell phone for VRI would be appropriate. The VDF classification deputy has seen the UbiDuo but has "no idea what it is for." He reported that he frequently relies on written notes and has never used an amplifier for an IP who is hard of hearing. The VDF classification deputy also reported that he has never "run into" anyone who needs help with reading and writing in his one (1) year conducting classification reviews/face-to-face interviews. He was also unaware of the ADA-E and has never used it. Additionally, at VDF and SDCJ, there is a sign in intake that says, "If you are Deaf or Hard of Hearing, a TTY is available. Contact the deputy." This sign should be updated.

During the IP interviews, the following information was reported:

- A deaf IP reported that he has never been shown how to use VRS, so he hasn't been able to communicate with his family. He also reported that medical staff write notes.
- An IP reported that healthcare staff give forms with aftercare instructions; however, they are never in large print and are not read to him. He requested a magnifier.

For future reviews, the County will need to provide documentation demonstrating effective communication in medical encounters and structured programs. The County will also need to provide the Neutral Expert with a list of IPs who require accommodations for effective communication and are enrolled in and/or attend structured programming. The County must also provide the Neutral Expert with a list of IPs who require effective communication accommodations for due-process encounters.

The Neutral Expert will also select a random sample of cases listed in the JIMS Archived Effect Comm Medical Instruction Reports, and from this list, the Neutral Expert will select random cases for the County to produce BWC of due process encounters, medical progress notes, and/or ADAE information.

Post-inspection, the County produced an email dated 5/18/26 from the ADA Sergeant, addressed to Detention Supervisors, regarding the provision of effective communication. The email states, “Use iPads to communicate with all Deaf individuals who use sign language during all due-process events, health care encounters, and structured programming and document this under ADAE Effective Communication in their history. (See DSB P&P P.11)”

Recommendations:

- *Ensure staff provide the required effective communication accommodations (primary method of communication) for due process, medical encounters, and structured programming
- *Ensure staff document the effective communication provided for medical encounters and structured programming, and when auxiliary aids and services are used for due process events
- *Ensure staff document in JIMS the type of encounter, and that effective communication is being provided
- *Provide the Neutral Expert with monthly lists of IPs who participate in structured programming
- *Provide the Neutral Expert with monthly lists of IPs with effective communication accommodations who received rules violations, submitted grievances, and other due process events

92. *Staff shall use the incarcerated person’s documented preferred method of communication for all due process events, health care encounters, and structured programming. The provision of effective communication shall be documented for health care encounters and structured programming. The provision of effective communication shall be documented for due process events when an auxiliary aid or contracted service is used. The neutral expert for policies, procedures, and implementation thereof shall conduct audits of compliance with the effective communication requirements in this section, including through documentation review, body worn camera footage review, and in-person observations, as the neutral deems appropriate, and include their findings in their twice-yearly reports.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), DSB Policy O.3 Rules and Regulations of Incarcerated Persons (March 24, 2025), DSB Policy P.11 Effective Communication (December 19, 2025), San Diego Sheriff’s Office Medical Services Division Receiving Screening E.2.1. (3/21/25)

Training – Training listed in Paragraph 14

Documents Produced/Reviewed – December 2025 ADAE, January 2026 ADAE, February ADA EC, March 2026 ADAE, March 2026 ADA EC, March 2026 ADAE (Due Process), April 2026 ADAE, JIMS Archived Effect Comm Medical Instruction Reports, JIMS January- March 2026 VRI JIMS Logs, Preferred Method of Communication February 2026, and various Medical Progress Notes, Rule Violation Reports, March and April 2026 Health Care Appointments

Implementation

See details in Paragraph 91 above.

Post-inspection, the County produced an email dated 5/18/26 from the ADA Sergeant, addressed to Detention Supervisors, regarding the provision of effective communication. The email states, “Staff shall use the incarcerated person's documented preferred method of communication for all due process events, health care encounters, and structured programming. Effective communication that is provided to an incarcerated person with an ADA Hearing, ADA Speech, ADA Vision, or ADA Cognitive/Learn flag shall be documented for health care encounters and structured programming. Additionally, it shall be documented for due process events when an auxiliary aid or contracted service is used.”

Recommendations:

- See recommendations in Paragraph 91 above

93. *“Due process” refers to requirements for judicial, non-judicial, and administrative proceedings that protect an incarcerated person’s life, liberty, or property interests. This includes, but is not limited to, notices of new charges, notice to appear, booking, discipline, grievance, classification, investigative, probation, and release processes.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Non-Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), DSB Policy O.3 Rules and Regulations of Incarcerated Persons (March 24, 2025), P.11 Effective Communication (December 19, 2025), San Diego Sheriff’s Office Medical Services Division Receiving Screening E.2.1. (3/21/25)

Training – Training listed in Paragraph 14

Documents Produced/Reviewed – December 2025 ADAE, January 2026 ADAE, February ADA EC, March 2026 ADAE, March 2026 ADA EC, March 2026 ADAE (Due Process), JIMS Archived Effect Comm Medical Instruction Reports, JIMS January- March 2026 VRI JIMS Logs, Preferred Method of Communication February 2026, and Medical Progress Notes

Implementation

The following process is followed for disciplinary rule violations. Upon staff’s observation or determination of a rule violation, staff write the Rule Violation Report (Jail Incident Report) and issue a copy of the rule violation, along with a J-72 (Segregated Housing Order) for major rule violations and a J-72B (Disciplinary Hearing Rights Waiver). If the IP waives the 72-hour hearing timeline, the disciplinary hearing officers conduct the hearing. If the IP does not waive the 72-hour hearing timeline, the hearing is not held until 72 hours after issuance of the charges and the rights form. If the charge is a major rule violation, the IP is placed in segregated housing pending the hearing and final disposition of the rule violation.

A sergeant interviewed stated that he would review the ADA list to identify effective communication accommodations required for the hearing and document the effective communication provided at the hearing on an ADAE. However, a concern for IPs with effective communication accommodations is that the County, at times, delivers the final copy of the adjudicated rule violation to IPs via facility mail rather than by staff; therefore, effective communication may not be provided for this due process event.

JPMU staff interviewed reported that they identify IPs that require effective communication accommodations by reviewing the ADA Flag and the IP's face card. If the IP requires effective communication accommodations, classification staff reported they would provide the accommodations and document them on an ADAE if an auxiliary aid or contracted service (VRI) is used. This includes initial classification interviews, reclassification interviews, and Ad-Sep reviews.

Refer to the cases in paragraph 91 for details on the review of EC for due process encounters.

Recommendations:

- *Ensure staff provide the required effective communication accommodations (primary method of communication) for due process events
- *Ensure staff document the effective communication provided for when auxiliary aids and services are used for due process events
- *Ensure staff document in JIMS the type of encounter for which effective communication is being provided for
- *Provide the Neutral Expert with monthly lists of IPs with effective communication accommodations who received rules violations, submitted grievances, and other due process events

94. *"Health care encounter" refers to an interaction between a patient and health care staff (to include medical, mental health, dental, and vision care) that involves an assessment, examination, treatment, counseling, and/or exchange of protected health information. This includes, but is not limited to, health screenings, sick calls, informed consent or refusal of health care, explanation of medication, treatment, or discharge instructions.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), DSB Policy O.3 Rules and Regulations of Incarcerated Persons (March 24, 2025), DSB Policy P.11 Effective Communication (December 19, 2025), San Diego Sheriff's Office Medical Services Division Receiving Screening E.2.1. (3/21/25)

Training – Training listed in Paragraph 14

Documents Produced/Reviewed – December 2025 ADAE, January 2026 ADAE, February ADA EC, March 2026 ADAE, March 2026 ADA EC, March 2026 ADAE (Due Process), JIMS Archived Effect Comm Medical Instruction Reports, JIMS January- March 2026 VRI JIMS Logs, Preferred Method of Communication February 2026, and Medical Progress Notes

Implementation

Healthcare staff (County, Naphcare/QMHPs, Liberty/EASS, CHP/RNs) interviewed stated they identify IPs who require effective communication accommodations by reviewing the flags in TechCare. Healthcare staff reported that they provide the required accommodations, including the use of auxiliary aids (VRI/UbiDuo), and document their provision in a SOAP note.

Refer to the cases in paragraph 91 for details on the review of EC for medical encounters.

The Expert notes that the County provides services to IPs through the JBCT and Liberty/EASS. The ADA Plan requirements apply to the delivery of JBCT and EASS programming. The County needs to ensure that it identifies, tracks, and provides disability/accommodation information to JBCT and EASS staff.

Recommendations:

- *Ensure medical staff provide the required effective communication accommodations (primary method of communication) for clinical encounters
- *Ensure staff document the effective communication for clinical encounters

95. *"Structured programming" refers to in-custody and reentry programs and services that are managed by the Sheriff's Office Reentry Services Division ("RSD") (e.g., education, self-help, AA/NA, vocational, work positions, or religious programs, discharge planning, services, or activities). This includes communications between incarcerated workers and their supervisors that are outside general day-to-day communication (e.g., training, performance evaluations, discipline).*

Compliance Rating: Partial-Compliance

Previous Compliance Rating: Non-Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), DSB Policy O.3 Rules and Regulations of Incarcerated Persons (March 24, 2025), DSB Policy P.11 Effective Communication (December 19, 2025), San Diego Sheriff's Office Medical Services Division Receiving Screening E.2.1. (3/21/25)

Training – Training listed in Paragraph 14

Documents Produced/Reviewed – December 2025 ADAE, January 2026 ADAE, February ADA EC, March 2026 ADAE, March 2026 ADA EC, March 2026 ADAE (Due Process), JIMS Archived Effect Comm Medical Instruction Reports, JIMS January- March 2026 VRI JIMS Logs, Preferred Method of Communication February 2026, and Medical Progress Notes

Implementation

Program staff interviewed stated that County program facilitators (counselors) identify IPs who require effective communication accommodations by reviewing the ADA List. All ADA accommodations that are provided by the Reentry Services Division are documented in JIMS, under ADAC and/or ADAE. The Programs staff reported that all ADA needs for IPs

participating in programs facilitated by outside providers are "self-reported" by the IP, as information related to effective communication accommodation needs is currently not reported to the outside providers. Program staff are using the Offender360 case management system, which has no ADA information and does not communicate with JIMS or TechCare. The County is working on a new system.

The County did not provide effective communication documents for disabled IPs who require effective communication accommodations during structured programming. This includes education, self-help, AA/NA, vocational, work, religious, discharge planning, and communications between IP workers and their supervisors that are outside general day-to-day communication (e.g., training, performance evaluations, discipline).

Recommendations:

- *Ensure staff provide the required effective communication accommodations (primary method of communication) for structured programming
- *Ensure staff document the effective communication for structured programming

96. *Providing effective communication may require the use of auxiliary aids and services, such as qualified sign language interpreters, certified deaf interpreters, sound amplification devices, hearing aids, captioned telephones, captioned televisions, video relay services ("VRS"), video relay interpretation ("VRI"), electronic and other magnifiers, Braille materials, screen reading software, large-print materials, audio recordings, writing materials, and written notes.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), and DSB Policy P.11 Effective Communication (December 19, 2025)

Training – Training listed in Paragraph 14

Documents Produced/Reviewed – December 2025 ADAE, January 2026 ADAE, February ADA EC, March 2026 ADAE, March 2026 ADA EC, March 2026 ADAE (Due Process), JIMS Archived Effect Comm Medical Instruction Reports, JIMS January- March 2026 VRI JIMS Logs, Preferred Method of Communication February 2026, and Medical Progress Notes, Lionbridge Contract documents

Implementation

DSB Policy P.11 Effective Communication lists the following Commonly Used Auxiliary Aids and Services for Effective Communication:

- Hearing aid or cochlear implant
- Exchange of written notes
- Communication boards (pictures)
- Speaking louder
- In-person sign language interpreting (SLI)

- Video Remote Interpreting (VRI)
- Real-time Typed Text (e.g., UbiDuo)
- Closed Captioning (CC)
- Communication Access Realtime
- Translation (CART) captioning
- Lip reading
- Sound amplification device
- Optical readers
- Reading documents aloud
- Audio recordings
- Braille materials
- Large print materials (18 pt. sans-serif font min.)
- Screen reading software
- Magnifier

During the previous inspection, the Neutral Expert noted that at SDCJ, the Purple VRS is located on the 2nd-floor holding cells, and there is none on the 1st-floor holding cells; conventional phones are located in both. The County did not provide updated information regarding this. The County must ensure that access to VRS is provided to IPs who use this technology, as they may spend many hours on the 1st floor and are the only IPs who cannot access phones on the 1st floor.

All staff interviewed reported that they identify IPs with disabilities that require effective communication by reviewing the ADA Flags in JIMS or the ADA Tracking List. Staff also reported that they provide the required accommodations, such as:

- Hearing Aids
- Writing notes
- Communication boards (pictures)
- Speaking louder
- SLI/VRI
- UbiDuo
- Closed Captioning (CC)
- Lip reading
- Sound amplification device (PocketTalker)
- Reading documents aloud
- Large print materials
- Screen reading software

- An IP reported needing hearing aids and having to buy them from another IP. He also reported that his attorney had brought a new pair of hearing aids to the jail, but he has not received them.
    - County response: He was provided with new batteries after the inspection. He had aids on him when the ADA nurse saw him on 6.4.26, and an ENT referral is pending to replace them.

Based on staff and IP interviews, review of documents, and on-site observations, the Neutral Expert could not confirm that the following auxiliary aids and services are available and/or have been provided:

- Communication Access Realtime
- Translation (CART) captioning
- Optical readers
- Braille materials
- Screen reading software

Recommendations:

- *The County must ensure that the auxiliary aids and services listed above are available and/or provided to IPs who require the accommodations to access the jail's programs, services, and activities
- *The Neutral Expert also recommends that the County strongly consider providing talk-to-text technology as an accommodation

97. *For individuals who use sign language to communicate, they shall not be cuffed or shackled by their hands while signing or when using any auxiliary aid (such as VRI or VRS) to communicate with their hands, unless there is a safety and security concern. If this occurs, staff will document the specific individualized safety and security concern, which will be reviewed by a supervisor to ensure it meets criteria for the action.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies – DSB Policy P.11 Effective Communication (December 19, 2025), DSB Policy P.2 Telephone Access (February 13, 2025)

Training –Training Bulletin DSB P&P P.11 Effective Communication Update

Documents Produced/Reviewed – NA

Implementation

DSB Policy P.2 Telephone Access (February 13, 2025) states, "Incarcerated persons who require the use of their hands to communicate using a non-conventional phone, such as individuals using a videophone or a TTY/TDD, shall not be restrained in a manner that restricts the use of their hands and arms for communication, unless there is a safety and security concern."

DSB Policy P.11, Effective Communication, states, "Incarcerated persons who use sign language to communicate shall not be cuffed or shackled by their hands while signing or when using any auxiliary aid (such as VRI or VRS) to communicate with their hands, unless there is a safety and security concern. If this occurs, staff will document the specific individualized safety and security concern, which will be reviewed by a supervisor to ensure it meets criteria for the action." The County has also developed a Training Bulletin to provide guidance to staff on this requirement. The Assignment Completion AD Hoc View Report –

DSB Effective Communication Update reflects that of 4372 staff, 4335 staff completed the training (37 have not).

A review of SD 1694177 Preferred Method of Communication (JIMS/Techcare/BWC), February 2026) indicates that on 2/25/26, during a Medical Post UOF, the IP, whose preferred method of communication is ASL, was “handcuffed/uncoop.” However, there was no documentation that staff documented the specific individualized safety and security concern, nor was there a supervisor’s review as required by this paragraph.

Post-inspection, the County produced an email dated 5/18/26 from the ADA Sergeant, addressed to Detention Supervisors, regarding the restraint of IPs whose preferred method of communication is ASL. The email states, “Incarcerated persons who use sign language to communicate shall not be cuffed or shackled by their hands while signing or when using any auxiliary aid (such as VRI or VRS) to communicate with their hands, unless there is a safety and security concern. If this occurs, staff will document the specific individualized safety and security concern, which will be reviewed by a supervisor to ensure it meets criteria for the action.”

Recommendations:

- Document and ensure a supervisor reviews the cases where there is a specific individualized safety and security concern and the IP whose preferred method of communication is ASL and the IP is cuffed/shackled during the use of the VRI
- *Provide the Neutral Expert documentation for the cases

98. For individuals who use sign language to communicate and/or who are Deaf, the County shall ensure that deputies promptly respond in-person when those individuals push the intercom button in their cell and/or housing unit.

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies – DSB Policy I.2 Intercom System (December 17, 2024, DSB Policy P.11 Effective Communication (December 19, 2025)

Training –Training Bulletin DSB P&P P.11 Effective Communication Update

Documents Produced/Reviewed – NA

Implementation

DSP Policy I.2 Intercom System states, “When the intercom call button is activated, and the deputy is unable to communicate with the incarcerated person via the intercom, a deputy shall promptly respond to the cell in person. This includes, but is not limited to, incarcerated persons who are deaf, nonverbal, or use sign language to communicate.”

DSB Policy P.11 Effective Communication states, “For incarcerated persons who use sign language to communicate and/or who are Deaf, or are Mute, staff shall promptly respond in-person when those individuals push the intercom button in their cell and/or housing unit. Staff shall document the response in the incarcerated person's "Inmate History" under "Event

Type" as ADAE – 'Effective Communication.'" The County also developed a Training Bulletin providing guidance to staff on this requirement. The Assignment Completion AD Hoc View Report – DSB Effective Communication Update reflects that of 4372 staff, 4335 staff completed the training (37 have not).

All staff interviewed reported they would conduct a face-to-face notification, go to the cell front/dorm, walk to the door, or go to the IP to advise them of the announcement. However, the documents produced do not reflect entries in the Inmate History "Event Type" ADAE where staff documented they promptly responded in person when an IP who uses sign to communicate pushed the intercom button in their cell and/or housing unit.

During the IP interviews, two (2) IPs whose preferred method of communication is SLI reported that when they press the cell intercom, staff sometimes do not come, or they have to wait 15-20 minutes for staff.

During the IP interviews, a deaf IP reported that staff do not conduct face-to-face notifications when unit announcements are made.

Post-inspection, the County produced an email dated 5/18/26 from the ADA Sergeant, addressed to Detention Supervisors, regarding when a deaf IP uses the cell intercom. The email states, "When an incarcerated person who is Deaf uses sign language to communication, or is mute, uses the cell intercom, staff must promptly respond in person at the cell. Staff shall document the response under ADAE Effective Communication in their history."

Recommendations:

- *Provide the Neutral Expert documentation for the cases

K. Assistive Devices, Health Care Appliances, and Durable Medical Equipment

99. The County shall ensure that incarcerated persons with a disability requiring an assistive device, health care appliance, or durable medical equipment (including prosthetics) (henceforth, "HCA/AD/DME") will have access to such a reasonable accommodation(s). Incarcerated persons with personal assistive devices shall be permitted to keep their devices during the booking process and throughout their time in custody unless the device poses a direct threat or safety and security risk, as determined based on an individualized assessment with supervisory review and approval. If such a risk is identified, an equivalent County device will be issued instead of the personal assistive device if there is an alternative that does not pose a direct threat or safety and security risk. Any HCA/AD/DME provided by the County to replace an individual's personal HCA/AD/DME shall be sufficient to provide the person with safe access to the jail facility's programs, services, and activities. The County will store the personal HCA/AD/DME and return it upon release from custody.

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Incarcerated Persons with Disabilities (May 29, 2024), DSB Policy Q.55 Property Received with Incarcerated Persons (July 16, 2025)

Training – Training Bulletins listed in Paragraph 14

Documents Produced/Reviewed – Releases, Cases where HCA/AD/DME were removed from IPs

Implementation

DSB Policy M.39 and DSB Policy Q.55 include detailed language that complies with the requirements for IPs with a disability who require an HCA/AD/DME to access devices during the booking process and throughout their time in custody, unless the device poses a direct threat to safety and security. The policy also requires staff to conduct an individualized assessment, with supervisory review and approval, consult with medical staff, and issue an alternative County device. The policy also requires the County to store personal HCA/AD/DME and return it to the IP upon release from custody.

During the inspection, it was reported that the sworn staff takes away devices due to expired medical instructions. The County reported that the current practice is to rely on the system's one ADA nurse to "check on expiring chronos." The County should implement a clear and uniform process to prevent the removal of assistive devices. A solution to consider is that only health care staff may remove assistive devices, except for safety and security reasons, and medical staff conduct an evaluation before any "expired" device is removed. The ADA DON indicated that the County is discussing putting a "5-day notification" in Techcare for upcoming assistive device expiration dates.

During the IP interviews, several IPs reported delays in the provision of assistive devices. The cases are listed below:

An IP reported/requested:

- Reported she was initially denied a wheelchair for three (3) weeks. Submitted an ADA request and never received a response. Reported she needs her personal custom wheelchair, "TiLite." Reported her wife can bring it to the jail. Reported she submitted a request to the ADA unit.
    - County response: MSD does not believe that she had one at home. Her wife can bring it in if she has one; it will require a safety review and approval from sworn.
- Requested a Roho cushion (waiting 3 months).
    - County response: She was given a blanket since no cushions are in stock and no order was placed for a cushion. MSD added this to an open sick call to get it ordered if it is determined to be needed.
- Active Medical Instruction for Medical shoes does not have them.
    - County response: She had special boots for both feet instead of shoes, and the shoe flag was used. MSD asked for this to be clarified at the next appointment.
- Active Medical Instruction for AFO (Ankle-Foot Orthosis) (for left foot drop), not provided. Reported it was ordered in February and never delivered despite multiple IP requests and 3/4/26 ADA grievance (which received no response).

    - County response: It appears that a CAM boot, rather than an AFO, was prescribed, and she has the CAM boot. MSD added this to the appointment to clarify.
- Reports staff took her wheelchair because the order had expired; however, no medical evaluation was performed before the wheelchair was removed.

An IP reported/requested:

- Requested an evaluation for shoes for support needed due to left knee and right ankle injuries. Submitted a request to the ADA Unit.
    - County response: No grievances or requests in the custody record. Note from provider on 5/5/26: not indicated for shoes. Scheduled for a pending appointment; medical added information to discuss.
- Reported that a wheelchair is provided for court visits but not for visits (which require her to ambulate long distances). This is Inconsistent with ADA instruction for her ("INTERMITTENT W-CHAIR (Long distances, court wheelchair transport").

An IP reported/requested:

- Requested a neck collar, a cane, a walker, compression socks, and wrist splints.
    - County response: She has been seen multiple times for her falls and devices. Providers have documented that devices are not medically indicated. See notes from February, March, and May in the documents.
- Requested accessible transportation vehicle/accommodations, including for her upcoming court date
    - County response: She has been seen multiple times related to her falls and devices. Providers have documented that accessible transportation is not medically indicated. See notes from February, March, and May in documents.

An IP reported/requested:

- Reported she uses a cane and a walker in the streets. Requesting an evaluation for mobility disability and a cane/walker, level terrain/access to a shower without a step.
    - County response: She alleged that she had a cane and walker upon arrest. There is no note that she or the arresting officer communicated this at intake for this or the last 2 bookings. See notes for evaluations during current booking; no mention of mobility devices. She was seen on 6.13.26 for a reported ankle complaint, during which they determined that braces/devices are not medically necessary. For shower request, the doctor noted that he referred it to the deputies.

An IP reported/requested:

- Requested sunglasses (he cannot go to the yard without sunglasses because it is too bright for him given his disability), accommodation, and a magnifier.
    - County response: He was released to DOC on 6/3/26. Pending optometry for sunglasses. Was provided a magnifier on 5/12/2026 by counseling staff at GBDF; note in JIMS under ADAE

An IP reported/requested:

- Reported that medical staff issued him a hinged brace, then took it and issued him a sleeve that does not provide adequate support.
- Requested a transfer bar to assist in transferring from wheelchair to bed.

- County response: He has refused previous appointments, though this request had not been mentioned. MSD scheduled him to be seen to review aid for bed-to-chair transfer.

An IP reported/requested:

- Reported his crutches are too small; he is 6'4", his wheelchair is too small (needs a larger wheelchair), his walker is too small (needs a bigger walker),
- Requested a commode to assist in transferring on and off the toilet.
- Requested a transfer bar or other accommodation to transfer from wheelchair to bed.
  - County response: Responding to all requests together: The chair was replaced when he got back from the hospital. The walker was the right height, but on one side he feels it is less stable. Crutches and walker will be exchanged. He is going to receive a slide board to further assist transfers where needed

An IP reported/requested:

- Requested a medical instruction for an intermittent wheelchair; he has TBI and other mobility issues. Requested evaluation for full-time wheelchair designation.
  - County response: He has placed sick call requests since inspection with no mention of this request but noted intermittent wheelchair; will have re-evaluated.

An IP reported/requested:

- Requested an evaluation for medical shoes; reported having had this accommodation in CDCR.
  - County response: Note is in documents. Shoes not ordered.

An IP reported/requested:

- Requested TED hose and a sweatshirt. TED hoses are not delivered reliably, and he often has to go without them.
  - County response: He has a TED hose flag and was scheduled for an evaluation for replacement and a sweatshirt.

An IP reported/requested:

- Reported he had advised medical that he had a cane during a past incarceration. Did not receive it until two (2) days after arrival.
- Reported he submitted a medical request for LB/LT 1 ½ months ago; no response and no active medical instruction for lower bunk or lower tier. Currently housed on the upper tier and having difficulty with stairs.
  - County response: He has had a Lower Bunk/Lower Tier flag since 1/1/25

- Requesting an evaluation for medical shoes, including for stability (reports having had a fall while wearing standard-issue slides).
  - County response: On 5/13, he was scheduled for evaluation. On 5.20.26, the provider determined he did not need medical shoes.

An IP reported/requested:

- Reported he was fitted for hearing aids 1 ½ months ago. What is the status?

- County response: Follow-up for adjusting was scheduled for 6.2.26, 6.11.26, and 6.25.26.

An IP reported/requested:

- Requested a brace open patella design and straps for appropriate support; the knee sleeve is not meeting his needs.
  - County response: He is pending evaluation for this type of brace.
- Reported he had an appointment with an audiologist for hearing aids in November/December. What is the status?
  - County response: He was seen on 5/27/26. He is pending ENT and did not get amplifiers. When the ADA nurse saw him, he said normal speech was fine. She will have him seen again in case he would now like amplifiers while he waits.

An IP reported/requested:

- Reported that he needed hearing aids and had to buy them from another IP. He also reported that his attorney had brought a new pair of hearing aids to the jail, but he has not received them.
  - County response: He was provided new batteries after the inspection. He had aids on him when the ADA nurse saw him on 6.4.26, and an ENT referral is pending to replace the hearing aids.
- Requested ADA shoes and an extra mattress.
  - County response: He was seen several times since inspections with no mention of mattress/shoes; MSD scheduled him to be seen for these.

An IP reported/requested:

- Reported he arrived with a hinged brace, and the deputy in dress-out took it. Reports that a medical provider advised him that devices containing metal are not allowed.

An IP reported/requested:

- Reported he has been waiting for his hearing aids since January/February. What is the status?
  - County response: Appointment shows pending scheduling. Managed care has sent follow-up emails on 4.3.26 and 5.15.26.

An IP reported/requested:

- Requested glasses.
  - County response: He was scheduled for a vision check.

An IP reported/requested:

- Reported it took 1 month to get a walker. He also reported he requested a rollator walker (uses one on the streets), and medical told him the county does not provide.
  - County response: Family can bring. MSD scheduled him. During his functional assessment the week of June 8-12, he did not mention issues with current walker. His family can bring the walker; it will require review and approval by sworn staff.
- Reported he was denied a wheelchair 2 times and was approved for a typofull-time wheelchair the third time.
  - County response: His wheelchair is intermittent.
- Requested the right footrest for the wheelchair.

    - County response: His wheelchair is intermittent. He should be transported in a transport wheelchair with footrests, or in a regular wheelchair with footrests.
- Requested reading glasses.
    - County response: Given 5.12.26.

An IP reported/requested:

- Requested glasses.
    - County response: He had a flag for glasses. He was scheduled for optometry. He was released on 5/24/26.
- Reported it took 2 weeks to get his tapping cane.

An IP reported:

- While in MOB, sworn staff came and said, "We're here for your wheelchair." Medical staff intervened before sworn staff completed the wheelchair removal.

An IP reported:

- Her wheelchair was taken by sworn staff, first for removal of the armrest and then because the medical instruction had "expired."

An IP with a tapping cane due to his vision disability reported:

- Sworn staff recently told him they will take it away "if you're not using it."

Per the CHP provider interview, the criteria for provision of supportive shoes are set by the Sheriff's Office (e.g., "foot drop," "diabetic ulcer," "stability" only if there is a "history of surgery"), not based on individualized medical judgment. There are times when he would provide shoe accommodations but does not because of "strict criteria" he is told they must meet. (They cannot provide shoe accommodation for bunions or flat feet, for example.)

The settlement agreement requires an "individualized assessment". Shoes are currently ordered individually rather than kept in inventory. To meet the IPs' needs in a timely manner, jails maintain shoes of all sizes and maintain supportive shoe inventories in order to facilitate the timely provision of these accommodations.

Documents produced by the County reflect the following cases where HCA/DME/AD were removed from IPs:

- 4/22/26 ISR (No ADA-3 completed) - IP broke Walker. The walker was replaced, and it will be placed inside the nursing station for use when required to be moved outside of his cell. Castillo was already provided a cane that he could utilize to walk, and he may utilize a wheelchair for long-distance travel.
- 2/15/26 ADA-3 - Cane was used to damage the module window, resulting in the cane being shattered. Health staff consulted. No alternate device provided. Scheduled to be evaluated by ADA RN.
- 2/21/26 ADA-3 – Cane used to assault staff or others. Does not reflect whether an alternate device was provided or whether the assistive device presents an immediate threat or risk of bodily harm. Health staff consulted. No indication reviewed and approved by watch commander.
- 2/3/26 ISR (No ADA-3 completed) – IP stood up from his jail-issued wheelchair and could be seen via CCTV footage running around the dayroom and assaulting multiple incarcerated persons. Once deputies arrived on scene, and IPs layed out

on the ground, XXXX walked towards IP XXXX and kicked him in the head. This assault knocked XXXX unconscious, resulting in transport to the hospital. Due to the severity of the assault, as well as being captured on CCTV, it is recommended XXXX's use of the medical wheelchair be reevaluated.

- 3/8/26 ADA-3 – XXXX has been seen multiple times running up and down stairs as well as assaulting other individuals in 8D. 80 is a housing module designed for individuals with medical needs making this a vulnerable population. Does not reflect whether an alternate device was provided. Health staff consulted.
- 3/8/26 ISR (No ADA-3 completed) – Corporal XXXX, Deputy XXXX and I were continuing the Booking Process for Incarcerated Person (IP) XXXX. While I was collecting IP XXXX prints, CPL. XXXX noticed that XXXX's wheelchair had been tampered with. Corporal XXXX found multiple pieces of metal that had been broken off the wheelchair concealed inside the wheelchair. The pieces of metal were commonly used to manufacture jail-made weapons.
- 3/8/26 ISR (No ADA-3 completed) - During my normal floor duties, I was processing an incarcerated person (IP) that needed a wheelchair for permanent use. I was informed by medical staff that the facility was currently out of wheelchairs. I took it upon myself to search the facility for IPs with "INTERMITTENT WHEELCHAIR" tags in their JIMS KRONOS profile. Per SDCJ Medical Staff (XXXX), "Intermittent Wheelchair" tags indicate that the respective IP is allowed a wheelchair for any activity outside of their housing module (Court, Clinic, Etc.). Often IPs will keep possession of their wheelchairs after such instances, leading to a facility shortage. I located several IPs with "Intermittent Wheelchair" tags, with the intention to retrieve any wheelchairs in their possession. I confirmed the status of their "Intermittent Wheelchair" tags with SDCJ Medical Staff ([redacted]), who informed me that it would be appropriate to confiscate said wheelchairs. In Module "D" on the 8th Floor, I confiscated a wheelchair from IP XXXX. His KRONOS tags included "Intermittent Wheelchair" and "Walker". XXXX did not have a walker, so I provided him one when I confiscated said wheelchair.
- 12/20/25 ISR (No ADA-3 completed) – I contacted IP XXXX in Cell #07, "E" Module. I seized his cane as evidence in the case. As his cane was being temporarily taken as evidence, I notified SDCJ Health Staff Nurse XXXX. Nurse XXXX would schedule XXXX to see a doctor concerning the temporary removal of his cane. XXXX did not have an active order for a cane; therefore, no replacement was given at that time.
- 1/5/26 ISR (No ADA-3 completed) - When I reviewed CCTV Footage, I observed XXXX being one of the main suspects in an assault. CCTV Footage shows XXXX walking around the module and walking up the stairs with no issues. Once XXXX is on the top tier, he's seen kneeling and pulling an unknown object out of his ankle brace. XXXX then begins to attack another incarcerated person (IP). XXXX is observed using the unknown object to attempt to stab the other IP. After the assault occurred, XXXX began to limp when he observed deputies enter the module and claim he needed his wheelchair. An unscheduled search was conducted in B Module, and multiple shanks were recovered. One of the shanks was found in XXXX assigned cell on his assigned bed. The shank was found inside the sling XXXX has been provided with. On 01/06/2026, I was informed that XXXX's wheelchair was never searched. I searched XXXX's assigned wheelchair inside his assigned Cell where I found hoarded suboxone. I observed the wheelchair had been tampered with.

The County has implemented the San Diego County Sheriff's Office Safety and Security Assessment Form (ADA-3). The ADA-3 requires staff to consult with health care staff regarding an alternative device and to obtain supervisory approval. The County has also developed a Training Bulletin for staff. The Assignment Completion AD Hoc View Report – Safety and Security Form Training reflects that of 4372 staff; 4282 staff completed the training (90 have not).

The Neutral Expert notes that of the nine (9) cases, the ADA-3 was not completed in six (6).

Detention Services Technicians interviewed reported that the following process is in place to ensure IPs are released with their personal and/or County-issued HCA/AD/DME. The DPT staff reviews the release queue in JIMS to identify IPs being released with either a personal or County-issued HCA/AD/DME. If the IP has a personal HCA/AD/DME in the property, the device is obtained from the property room and placed in the final release area. If the IP has a County-issued device, it is exchanged for the personal device. If the IP does not have a personal device, he or she may retain the County device. The DPT documents the release in JIMS.

The Detentions Processing Division Training Bulletin Durable Medical Equipment includes the following requirements for staff. "If the IP's personal equipment is stored in the property room, the stock clerk will place the equipment in the final release area prior to release. The Final Release DPT will communicate to the Release Deputy that the IP has DME. The Release Deputy will ensure the IP is provided with their personal DME in exchange for the jail-issued equipment."

A review of the Copy of Releases found that when the DPD staff documents the release of an IP with an HCA/AD/DME, the documents produced by the County do not include a notation if the HCA/AD/DME is a personal device or a County-issued HCA/AD/DME.

Post-inspection, the County produced an email dated 5/18/26 from the ADA Sergeant, addressed to Detention Supervisors, regarding durable medical equipment. The email states, "Individuals with Durable Medical Equipment (canes, crutches, walkers, wheelchairs, etc.) must be permitted to retain those items at all times and in all housing areas unless they are actively being used for self-harm. If DME must be removed, complete the ADA 3 Safety and Security Form (with medical and Watch Commander approval) and document the action in an ISR."

The County also produced an email dated June 3, 2026, regarding Wheelchair Leg Supports. The email states, "Effective immediately, health care staff will begin issuing wheelchairs with leg supports to all IPs who use wheelchairs. All wheelchairs will be issued with leg supports unless health care staff determines that the leg supports are not medically indicated for the IP. The wheelchair flag note will list if the wheelchair was issued with or without leg supports. At this time, the leg supports will not be welded. They are scheduled to be welded in the future, but until that work is completed, they will remain removable."

Recommendations:

- *Ensure that IPs with an HCA/AD/DME have access to County-issued devices and are permitted to keep their devices during the booking process and throughout their time in custody.
- In cases where staff remove HCA/AD/DME, ensure the Safety and Security Assessment Form is completed with all required information
- P
- *Document if the HCA/AD/DME the IP is being released with is a personal device

100. If an incarcerated person with a disability needs a reasonable accommodation in the form of an assistive device but does not have one, the County will provide it. An incarcerated person's insurance if applicable may be billed for personal devices; billing will not delay the provision of the assistive device. The County shall maintain a sufficient supply, as determined by the County health staff, of all HCA/AD/DME that is regularly used to assist persons with disabilities at each jail facility, in working order, to ensure timely provision of such items to incarcerated persons with disabilities.

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Incarcerated Persons with Disabilities (May 29, 2024)

Training – Trainings listed in Paragraph 14

Documents Produced/Reviewed – Wheelchairs, Walkers and Canes Orders

Implementation

DSB Policy M.39 states, "Assistive Devices and Durable Medical Equipment (DME) shall be furnished to incarcerated persons with disabilities that have been identified by health staff to require such accommodations."

See details of IP information in Paragraph 99

The County produced Wheelchair, Walkers and Canes Orders; however, the Neutral Expert notes that the documents only report on the HCA/AD/DME the County ordered and do not include an inventory of the HCA/AD/DME in stock and available for issuance to IPs. The County has implemented a system to track and log the devices in the supply areas, including the Periodic Automatic Replacement (PAR) level. However, during the inspection, the Neutral Expert noted that only RMDF and EMRF maintained detailed inventories of the HCA/AD/DME. The County must ensure that a sufficient number of HCAs/ADs/DMEs are available, especially in the intake facilities. The HCA/AD/DME supply area had canes, wheelchairs, walkers, braces, and shower chairs; however, the inventories were not current at all of the facilities.

Additionally, the Neutral Expert notes that rollator walkers are not kept in inventory. Rollator walkers should be available at each facility for provision when individually warranted.

Recommendations:

- *Ensure the County maintains a sufficient supply, as determined by the County health staff, of all HCA/AD/DME that is used to assist IPs with disabilities at each jail facility
- *Ensure all facilities maintain an inventory with PAR levels of all HCA/AD/DME that are regularly used to assist IPs with disabilities
- Maintain rollator walkers on the facility's assistive device inventory

101. If an assistive device is removed for safety or security reasons, after supervisory review, the decision and reasons for removal shall be documented, receive supervisory review, and be

reviewed with medical staff within 24 hours to determine an appropriate alternative device and/or accommodation. The ADA Unit will be promptly notified and shall assist as necessary to appropriately resolve the issue.

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Incarcerated Persons with Disabilities (May 29, 2024)

Training – Training Bulletins listed in Paragraph 14

Documents Produced/Reviewed – Cases where HCA/AD/DME were removed from IPs

Implementation

DSB Policy M.39 includes detailed language that requires staff to conduct an individualized assessment with supervisory review and approval, consult with medical staff, and issue an alternative County device when HCA/AD/DME is removed for safety and security reasons.

Sworn staff interviewed reported that when an assistive device is removed for safety and security reasons, they would complete an ISR and ADA-3, and advise their supervisor, medical staff, and the ADA Unit.

The Natural Expert summarized the cases the County produced where HCA/DME/AD were removed from IPs in paragraph 99 above.

The Neutral Expert notes that the County has implemented the San Diego County Sheriff's Office Safety and Security Assessment Form (ADA-3), which is used to document cases in which staff remove an IP's HCS/AD/DME due to a safety and/or security issue. The ADA-3 also requires staff to consult with medical regarding an alternative device and to obtain supervisory approval. The County has also developed a Training Bulletin for staff. The Assignment Completion AD Hoc View Report – Safety and Security Form Training reflects that of 4372 staff; 4282 staff completed the training (90 have not).

Post-inspection, the County produced an email dated 5/18/26 from the ADA Sergeant, addressed to Detention Supervisors, regarding durable medical equipment. The email states, "Individuals with Durable Medical Equipment (canes, crutches, walkers, wheelchairs, etc.) must be permitted to retain those items at all times and in all housing areas unless they are actively being used for self-harm. If DME must be removed, complete the ADA 3 Safety and Security Form (with medical and Watch Commander approval) and document the action in an ISR."

Recommendations:

- Ensure the ADA-3 is completed along with the supervisor's review

102. If an individual's personal HCA/AD/DME becomes unusable, the County will provide the person with a replacement HCA/AD/DME. An incarcerated person's insurance if applicable may be billed for personal devices; billing will not delay the provision of the assistive device.

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Incarcerated Persons with Disabilities (May 29, 2024). No revisions to policies or new policies were implemented since the first review/inspection.

Training – Training Bulletins listed in Paragraph 14

Documents Produced/Reviewed – No cases were reported during the document review period

Implementation

DSB Policy M.39 states, "If an incarcerated person's personal assistive device or DME requires replacement due to maintenance issues or because the personal device or equipment is determined to be a safety or security risk for in-custody use, then an equally effective alternative shall be provided to the incarcerated person within one business day. The incarcerated person's personal device or equipment shall be placed into their secured property."

During the IP interviews, the following IPs reported delays in the replacement of HCA/AD/DME:

- IP reported that her wheelchair had a broken armrest for three (3) weeks. Her requests went without response until the issue was resolved when the ADA unit was on site.
- IP with a wheelchair with a broken left armrest had no footrest, and the brakes did not work. Staff replaced the wheelchair following the Neutral Expert's interview.
- IP had a knee brace, but it didn't fit. Has spoken with medical and is waiting for an exchange.

In the previous inspection, the Neutral Expert noted that the Training Bulletins did not include detailed guidance on the requirement to provide an IP with a replacement HCA/AD/DME if a personal HCA/AD/DME becomes unusable. The County developed a Medical Assistive Device Training Bulletin that addresses this requirement. The Assignment Completion AD Hoc View Report – Safety and Security Form Training reflects that of 4372 staff; 4282 staff completed the training (90 have not).

Based on the ADA Unit check-ins, which occur every 60 days, there must be steps to ensure that device checks are performed with sufficient frequency and that reported device maintenance concerns receive timely response/resolution.

Recommendations:

- P
- *In cases where an IP's personal HCA/AD/DME becomes unusable, ensure the IP is provided with a replacement HCA/AD/DME.

103. The County shall not automatically remove HCA/AD/DME when incarcerated persons are placed in temporary holding, sobering, or observation cells, and shall remove HCA/AD/DME only based on individualized security factors and for the minimum time necessary.

Compliance Rating: Substantial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Incarcerated Persons with Disabilities (May 29, 2024). No revisions to policies or new policies were implemented since the first review/inspection.

Training – Training Bulletins listed in Paragraph 14

Implementation

DSB Policy M.39 includes detailed language that complies with the requirements for staff to conduct an individualized assessment with supervisory review and approval, in addition to consultation with medical staff, and the issuance of an alternative County device when HCA/AD/DME is removed for safety and security reasons. The Medical Assistive Device Training Bulletin includes detailed language that provides guidance to staff not to automatically remove HCA/AD/DME when IPs are placed in temporary holding, sobering, or observation cells, and only remove HCA/AD/DME based on individualized security factors and for the minimum time necessary.

The Natural Expert summarized the cases the County produced where HCA/DME/AD were removed from IPs in paragraph 99 above.

In the previous inspection, the Neutral Expert noted that the Training Bulletins did not include detailed guidance that staff shall not automatically remove assistive devices when incarcerated persons are placed in temporary holding, sobering, or observation cells, and shall remove assistive devices only based on individualized security factors and for the minimum time necessary is not included. The County developed a Medical Assistive Device Training Bulletin that addresses this requirement. The County also implemented the ADA-3 (San Diego County Sheriff's Office Safety and Security Assessment Form). Staff are required to complete an ADA-3 (San Diego County Sheriff's Office Safety and Security Assessment Form). Sworn staff interviewed reported that IPs are allowed to retain their assistive device unless there is a safety and security concern. If they remove an assistive device, they will complete an ISR and ADA-3 and advise their supervisor, medical staff, and the ADA Unit. No completed ADA-3 forms were produced by the County.

Post-inspection, the County provided the Neutral Expert with the following ADA-related training for staff:

- Assignment Completion AD Hoc View Report – Safety and Security Form Training of 4372 staff, 4282 staff completed the training (90 have not)

Recommendations:

- None

104. Upon release, if an incarcerated person does not have personal HCA/AD/DME or came to the jail with HCA/AD/DME that is not adequate for the person's needs, the County shall permit the person to retain any HCA/AD/DME provided to the person while in custody, or the County shall provide a comparable device. An incarcerated person's insurance if applicable may be billed for personal devices; billing will not delay the provision of the assistive device upon release from the jail. The County may alternatively coordinate with the incarcerated person, the person's family or friends, and/or other County agencies to secure HCA/AD/DME for the person prior to release so long as the incarcerated person has the device at the time of release. The provision of HCA/AD/DME, return of personal devices, and/or coordination with external parties shall be documented in a manner that can be audited for quality assurance.

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy Q.55 Property Received with Incarcerated Persons (July 16, 2025). No revisions to policies or new policies were implemented since the first inspection.

Training – Training Bulletins listed in Paragraph 14

Documents Produced/Reviewed – Copy of Releases OCT_DEC 2025, January 2026 Releases, February 2026 Releases, March 2026 Releases.

Implementation

DSB Policy Q.55 states, "Incarcerated persons requiring DME or assistive devices (i.e., wheelchairs, walkers, and canes) shall be released with jail-issued DME unless they are being released with personal DME that meets their needs. This includes incarcerated persons assigned intermittent wheelchairs." The policy also states, "If an incarcerated person did not arrive at the jail with a personal device, medical staff can coordinate with the incarcerated person, the person's family or friends, and/or other County agencies to secure DME for the person prior to release so long as the incarcerated person has the device at the time of release."

Detention Services Technicians interviewed reported that the following process is in place to ensure IPs are released with their personal and/or County-issued HCA/AD/DME. The DPT staff reviews the release queue in JIMS to identify IPs being released with either a personal or County-issued HCA/AD/DME. If the IP has a personal HCA/AD/DME in the property, the device is obtained from the property room and placed in the final release area. If the IP has a County-issued device, it is exchanged for the personal device. If the IP does not have a personal device, he or she may retain the County device. The DPT documents the release in JIMS.

The Detentions Processing Division Training Bulletin Durable Medical Equipment includes the process for DPTs to follow when releasing IPs with County issues and personal HCA/AD/DME. will communicate to the Release Deputy that the IP has DME. The County has also created a tracking mechanism for the DPTs to document when IPs are released with HCA/AD/DME. The Training Bulletin states, "When the Final Release DPT visually confirms that the IP is being released with DME, they will go into the Related Addresses

screen and double-click on the DME Verified notification. The DPT will click on the 'Contact Detail' tab and enter the following information.

Action: 1 ST
Resolution: CONT - Contacted
Notes: IP is being released with (equipment description). If it is jail-issued, ensure it is notated.

Once the contact is resolved, proceed with the release.
If the IP is released with jail-issued DME, the Final Release DPT will document this in the Property Notes section of the JIMS to ensure there is a record of the issuance."

However, a review of the Copy of Releases found that when the DPD staff document the release of an IP with a HCA/AD/DME, the documents produced by the County do not include a notation if the HCA/AD/DME is a personal device or a County-issued HCA/AD/DME.

The process for providing devices at release is working across multiple facilities. The LCDRF DPT staff person continues to impress. The April 2026 release log (SD_1694264) lists everyone who was released but does not indicate what action occurred at release, e.g., whether the IP kept their County-issued device or received their personal device from property.

The County developed a Medical Assistive Device Training Bulletin that addresses this requirement. However, the County did not provide training records for DSB staff reflecting that DSB staff have been trained.

Recommendations:

- *Document if the HCA/AD/DME the IP is being released with is a personal device or a County-issued device
- Provide the Neutral Expert verification that DSB staff have been trained

L. Emergency Situations and Use of Force

105. The County shall develop and implement policies, procedures, and training to ensure that incarcerated persons with disabilities are accommodated during evacuations and other emergencies at the jail. The Sheriff's Office's "green sheets" (facility-specific policies and procedures) for each facility shall include specific information about evacuation procedures for incarcerated persons with disabilities to be accommodated during an emergency, identifying the devices on hand to carry people with mobility disabilities downstairs when necessary, and identifying the specific ways that staff at that facility must accommodate people with disabilities in a facility emergency, given the unique characteristics of each jail facility. The County shall revise these green sheets by no later than six months from the date of the signing of this ADA Settlement Agreement and Order by all counsel. The County shall provide drafts of the green sheets to the neutral expert for review and prompt comment. The County shall ensure that they have sufficient devices to carry people with mobility disabilities downstairs for emergencies when elevators do not work or cannot be used.

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies – DSB Policy H.3 Evacuation Plans (May 29, 2024), LCVDRF Green Sheet I.35.L Housing Unit Special Equipment, SDCJ Green Sheet H.3.C.1 Evacuation Plans, GBDF Green Sheet H.3.C.1 Evacuation Plans, LCDRF Green Sheet H3.I Evacuation Plans, EMRF Green Sheet H.3.M Evacuation Plans, RMDF Green Sheet H.3.R Evacuation Plans, SBDF Green Sheet H.3.S Evacuation Plans, VDF Green Sheet H.3.V Evacuation Plans.). No revisions to policies or new policies were implemented since the first inspection.

Training - Training Bulletins listed in Paragraph 14

Documents Produced/Reviewed – NA

Implementation

The Neutral Expert notes that DSB Policy H.3 Evacuation Plans was revised on May 29, 2024. The policy requires each detention facility to develop evacuation procedures that meet the individual needs of the facility (green sheets). The Neutral Expert also notes that the County revised the green sheets by the date required by the ADA Settlement Agreement and Order (no later than six months from the date of the signing of this ADA Settlement Agreement and Order by all counsel), June 11, 2025. The County also provided the green sheets to the Neutral Expert for comment and review as required by this paragraph.

The green sheets include detailed guidance/requirements for staff to evacuate disabled IPs, including the method of communication. The green sheets also identify the devices (wheelchairs and “Evac Chairs”) on hand (including the location) for staff to carry IPs with mobility disabilities downstairs when necessary. The green sheets identify the specific ways that staff at the facilities must accommodate IPs with disabilities in a facility emergency. The Neutral Expert notes that, for facilities with a large population of wheelchair users (SDCJ and GBDF), there may not be a sufficient number of “Evac Chairs” to serve the population in the event of an emergency. SDCJ and GBDF currently have two (2) Evac Chairs, and RMDF and VDF have one (1). During the previous inspection, the Neutral Expert recommended that the County ensure sufficient Evac Chairs are added to the inventories at SDCJ, GBDF, and VDF. The County did not provide any information regarding this recommendation.

Additionally, a review of the training bulletins produced by the County found that the trainings only reference that, “Each detention facility shall maintain an Emergency Operations Manual (EOM) as required by DSB P&P Section H.2. Staff shall provide assistance to incarcerated persons with disabilities during the evacuation process, based on the incarcerated person's reasonable accommodation needs and disability according to updated DSB P&P Section H.3 – Evacuation Plans.” The training does not include detailed guidance on staff’s responsibilities to ensure that IPs with disabilities are accommodated during evacuations and other emergencies at the jail. The County did not provide any information that the training was revised as recommended.

Recommendations:

- *Ensure sufficient Evac Chairs are added to the inventories at SDCJ, GBDF, and VDF

- *Develop training that includes detailed guidance on staff's responsibilities to ensure that IPs with disabilities are accommodated during evacuations and other emergencies at the jail
- *Ensure staff assigned to the emergency response teams are trained on the use of the Evac Chairs

106. *The County shall conduct training on disability awareness and de-escalation related to use of force on incarcerated persons with identified disabilities. The County shall comply with its use of force policies and take into account an incarcerated person's documented physical disability, mental health disability, or intellectual disability (including relevant accommodation and adaptive support needs), before pre-planned cell extractions and coordinated tactical responses to incidents involving multiple incarcerated persons and incarcerated persons not participating in the incident.*

Compliance Rating: Non-Compliance

Previous Compliance Rating: Non-Compliance

Policies – DSB I.83 Extraction Procedures (December 29, 2023). No revisions to policies or new policies were implemented since the first inspection.

Training – NA

Documents Produced/Reviewed – NA

Implementation

The County reported that this paragraph is not ready for review. The County is working on training related to this provision. The County produced the San Diego Sheriff's Office – Use of Force Guidelines. The Guidelines state, "Deputies must consider the totality of the circumstances when selecting a force option for a given situation. Factors to consider include but are not limited to: Physical or developmental disabilities." In addition, in Section 11.6. Vulnerable Populations, the guidelines state, " Vulnerable populations include, but are not limited to, children, elderly persons, people who are pregnant, and people with physical, mental, and developmental disabilities. Characteristics of individuals who are part of a vulnerable population may or may not be readily apparent. These individuals may exhibit behaviors or actions that are significantly different from those persons who are not a member of a vulnerable population. Additionally, actions of vulnerable populations may sometimes appear as willful or intentional misconduct if it were done by someone who is not considered part of a vulnerable population. Deputies should understand that these individuals may require additional time and/or assistance to comply with, or understand, a deputy's commands or directions.

Recommendations:

- *Develop training on disability awareness and de-escalation related to the use of force on IPs with identified disabilities
- *Ensure all sworn staff are trained once training is developed

M. People with Learning, Intellectual, and Developmental Disabilities

107. *The County shall ensure that health care staff who have received the training specified in Paragraph 22 conduct a screening of incarcerated persons for intellectual, learning, and developmental disabilities. For any person suspected of having a learning, intellectual, or developmental disability, the County shall provide a secondary screening by a qualified mental health professional ("QMHP") within seven (7) business days. The QMHP shall be responsible for documenting any identified learning, intellectual, or developmental disabilities and necessary accommodations in the person's health record. This includes identifying and documenting 1) adaptive support needs, 2) safety, vulnerability, and victimization concerns; and 3) programming, housing, and accommodation needs.*

Compliance Rating: Non-Compliance

Previous Compliance Rating: Non-Compliance

Policies - San Diego Sheriff's Office Medical Services Division Receiving Screening E.2.1, DSB Policy P.11 Effective Communication (December 19, 2025), San Diego Sheriff's Office Medical Services Division Housing Recommendations for Regional Center Clients (RCC) H.13.

Training – Medical Services Division Training Bulletin ADA Cognitive Assessment – Mental Health

Documents Produced/Reviewed – Emails and list of medical staff trained on Medical Services Division Training Bulletin, ADA Cognitive Assessment – Mental Health, Draft Cognitive Assessment Form, Mental Health Progress Notes (101)

Implementation

The County reported that this paragraph is not ready for review. The County is working on policies related to this provision. DSB Policy P.11 Effective Communication (December 19, 2025) was produced.

During the previous inspection, the County produced the Medical Services Division Training Bulletin, the ADA Cognitive Assessment – Mental Health, and emails directing medical staff to complete the training. The County also produced a list of staff who completed the training attestation. The list reflects that 434 medical staff have completed the training. However, as reflected in paragraph 22, the required training has been provided primarily through training bulletins delivered via briefings and the LMS. The Neutral Expert strongly recommended that the initial annual ADA training be delivered in an in-classroom setting, where class participants can engage with the presenter to clarify any questions or areas of the training.

As reported in paragraph 25, disabilities and the associated accommodations are identified during the intake medical receiving screening and the 2nd-stage medical screening, where medical staff and/or a QMHP conduct an ADA Functional Assessment. The San Diego Sheriff's Office Medical Services Division Receiving Screening E.2.1. includes the process for medical intake staff to identify IPs with physical, intellectual, cognitive learning, and psychiatric disabilities and associated accommodation needs; refer IPs to the 2nd-stage medical screening; and complete the ADA Functional Assessment. The policy also includes obtaining information from the arresting officer regarding disabilities and accommodation needs. Additionally, the policy requires that a priority QMHP evaluation be scheduled by the

intake RN prior to housing for IPs identified as clients of the regional center for developmentally disabled (RCC).

DSB Policy M.39 Disabled Incarcerated Persons states, “Incarcerated persons who are identified as having or suspected of having a cognitive, intellectual, or developmental disability shall be evaluated and screened by a Qualified Mental Health Professional (QMHP) within 7 days of booking. The QMHP shall determine if the ADA Cognitive/Learning JIMS Medical Instruction is added to the incarcerated person's record, document any necessary accommodations (e.g., adaptive supports), and schedule the incarcerated person for follow-up based on their individual needs.

The receiving screening questions and the ADA Functional Assessment questions include the following screening questions for self-care activities of daily living, cognitive/comprehension, and intellectual/learning disabilities:

Medical Clearance

- Mental Health History
  - Are you a regional center for the developmentally disabled, or have you been in special education classes in school?

ADA Functional Assessment

- Can you perform the following without assistance?
  - Eat/Drink
  - Shower/Groom
  - Dress
  - Keep Cell Clean
  - Read
  - Write (filling out a healthcare form)
  - Use of telephone
  - Understand Written Information
  - Express Their Needs
  - Complete Assigned Tasks
  - Follow Verbal Instructions
  - Get Along With Others

The ADA Functional Assessment also includes the following:

- Needs special reminders to take care of his/her personal needs and grooming
- Needs special reminders to keep cell clean

The San Diego Sheriff’s Office Medical Services Division Housing Recommendations for Regional Center Clients (RCC) H.13 includes the following assessment criteria for Regional Center Clients:

- The incarcerated person's level of Intellectual functioning.
- The incarcerated person's ability to comprehend current conversation and can state circumstances leading to arrest including charges and where they are located.

- The incarcerated person's ability to respond in a coherent manner and/or voice needs.
- The incarcerated person's current mood and behavior.
- The incarcerated person's ability to follow directions/impulse control (by direct observation or from other sources).
- The incarcerated person's level of education and from where, for example Special Education or Mainstream.
- The incarcerated person's residence before arrest and their level of independence in the community.
- The incarcerated person's knowledge of their diagnosis(es).
- The incarcerated person's history of employment.
- Collateral information regarding history, functioning, compliance, AOD use, IQ, diagnosis

The screening conducted at SDCJ did not include any victimization questions. During the Functional Performance Assessment observed at SDCJ, the IP reported needing reminders (for medication), and the RN checked those boxes. However, it is unclear whether this was recognized as a potential ID/DD indicator and whether he was then referred for ID/DD screening.

The Vista MH Chief reported that there is no IDD screening at Vista, saying “hopefully this will change.” The current questionnaire, with four basic questions (see SD 1682904), remains in use and continues to omit victimization, as observed during the SDCJ screening on 5/14. A QMHP interviewed at SBDF reported that the paper form used for the cognitive screening is “scanned” into TechCare but does not appear to feed into other data systems. When implemented, can the ADA Cognitive Assessment Form be a TechCare form to better integrate and track it? The Neutral Expert will need documentation indicating whether the County completes the screenings within 7 days.

During the previous inspection, the County reported that the Neutral Expert’s request for all completed screenings for persons referred for a secondary screening (Monthly) is not ready for review, as there is currently no way to track IPs referred for secondary screenings. The County also reported that MH is working with MSD regarding the use of one of the existing forms in TechCare. However, the County also reported that secondary screenings are scheduled at intake as 30-Day QMHP appointments (the appointment is conducted within 7 days), and the average wait time for these appointment types to be completed is within four (4) days.

The County further reported that the Neutral Expert’s request for all completed secondary screenings conducted by a QMHP, including the identified learning, intellectual, or developmental disabilities and necessary accommodations, inclusive of 1) adaptive support needs, 2) safety, vulnerability, and victimization concerns; and 3) programming, housing, and accommodation needs (Monthly) was not ready for review as MH is currently pulling each assessment manually and this is only for IPs with a current ADA cognitive accommodation. In the future, MH will develop a TechCare form that will take several months to build and implement. A review of the RCC Assessment & Housing Recommendations (Appendix A J200E) includes the following housing recommendations: Mainline, PC Admin Segregation, and OPSD. However, this form appears to only be used for Regional Center Clients and not all IPs with Cognitive disabilities.

During the previous inspection, the Neutral Expert also noted that the policies and Medical Services Division Training Bulletin ADA Cognitive Assessment – Mental Health did not include a process for the QMHP to document identified safety, vulnerability, victimization concerns, and programming needs, as the current process only identified deficits for comprehension, self-care, communication, and social skills. The Neutral Expert also noted that San Diego Sheriff's Office Medical Services Division Housing Recommendations for Regional Center Clients (RCC) H.13 states that, "Utilizing the J200E RCC Assessment & Housing Recommendation form, the QMHP will assess the incarcerated person and will collaborate with JPMU on housing recommendations." The policy also states, "Whenever it is possible, RCC assessments should be completed prior to any housing assignment or reassignment. While in intake, the QMHP will assess the RCC individual for appropriate mental health housing. However, the final decision is made by JPMU." The Neutral Expert noted that this process is used only for IPs who are RCC clients, not for all IPs with cognitive/intellectual disabilities.

The Neutral Expert notes that the County has drafted the ADA Cognitive Assessment Form, which includes all ADA Settlement Agreement requirements. This form is still in the development stage.

Recommendations:

- *Revise MSD policies to include the requirements for the QMHP to identify and document safety, vulnerability, victimization concerns, programming, and housing needs
- Finalize and implement the ADA Cognitive Assessment Form
- *Once the policies and form are revised, ensure staff are trained
- *Revise the cognitive/intellectual/learning disability evaluation process and screening tools that will ensure learning, intellectual, or developmental disabilities and necessary accommodations are identified, including adaptive support needs, safety, vulnerability, victimization concerns and programming, housing, and accommodation needs

108. If the person has been a client of a Regional Center through the California Office of Developmental Services, the County shall contact the Regional Center to obtain the person's Individualized Program Plan, subject to the person's authorization.

Compliance Rating: Substantial Compliance

Previous Compliance Rating: Substantial Compliance

Policies - San Diego Sheriff's Office Medical Services Division Housing Recommendations for Regional Center Clients (RCC) H.13 - No revisions to policies or new policies were implemented since the first inspection.

Training - NA

Documents Produced/Reviewed – Email correspondence between County staff and Regional Center Staff, including IPPs (15)

Implementation

San Diego Sheriff's Office Medical Services Division Housing Recommendations for Regional Center Clients (RCC) H.13 policy states that once an incarcerated person has been identified as RCC, the evaluating nurse will notify the On Duty Qualified Mental Health Professional (QMHP) by an automated gatekeeping evaluation indicating an incarcerated person is RCC and has been booked in the facility. The QMHP will notify the Regional Center. The QMHP will complete a release of information (ROI) for the incarcerated person to sign, enabling the QMHP to contact RCC, a social worker/case manager, or a caregiver. Mental Health staff interviewed stated that when there is information indicating that an IP is a Regional Center client, they request a Release of Information (ROI) from the IP; if he/she signs the ROI, they request the IP's Individualized Program Plan.

The email correspondence between County staff and Regional Center Staff, including IPPs, includes communication between County MH staff and the Regional Center requesting the IP's IPP and the receipt of IPPs.

Recommendations:

None

109. *The County shall ensure provision of adequate supports for any person with a learning, intellectual, or developmental disability as determined by medical and mental health care staff as appropriate. Incarcerated persons with a learning, intellectual, or developmental disability may not be housed in Administrative Separation or any similarly restrictive setting (which does not include protective custody) based on victimization or safety concerns arising from their disabilities.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

- **Policies** - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024). Revisions to J.03 Separation: Definition and Use 3/13/26

Training – NA

Documents Produced/Reviewed – Excel Spreadsheets for ADA Cognitive Learn with Flag Start Date (December 2025 to April 2026

Implementation

DSB Policy M.39 states, "Incarcerated persons who are identified as having or suspected of having a cognitive, intellectual, or developmental disability shall be evaluated and screened by a Qualified Mental Health Professional (QMHP) within 7 days of booking. The QMHP shall determine if the ADA Cognitive/Learning JIMS Medical Instruction is added to the incarcerated person's record, document any necessary accommodations (e.g., adaptive supports), and schedule the incarcerated person for follow-up based on their individual needs." The policy also states, "The shift charge nurse or designee will inform JPMU of the health instructions. They will also inform the Reentry Services Division (RSD) Manager or their designee via email with the names of those incarcerated persons who have an identified need for accommodations for adaptive or programming services" and

"Incarcerated persons requiring ADA accommodations will be assisted in receiving access to the following by either the Medical Services Division (MSD) or RSD staff: Adaptive services to assist in participation in programs or services."

Paragraph 107 details the County's process for identifying cognitive/intellectual and learning-disabled IPs, their adaptive deficits, and the adaptive supports they require. DSB Policy M.39 also states, "The JPMU classification system screens, assesses, and houses incarcerated persons in a manner that protects the safety of the community, staff, and other incarcerated persons. The classification interview of incarcerated persons with disabilities includes screening for unreported disabilities that require accommodations." San Diego Sheriff's Office Medical Services Division Housing Recommendations for Regional Center Clients (RCC) H.13 states that, "Utilizing the J200E RCC Assessment & Housing Recommendation form, the QMHP will assess the incarcerated person and will collaborate with JPMU on housing recommendations." The policy also states, "Whenever it is possible, RCC assessments should be completed prior to any housing assignment or reassignment. While in intake, the QMHP will assess the RCC individual for appropriate mental health housing. However, the final decision is made by JPMU." The Neutral Expert notes that the policies do not include the language that "IPs with a learning, intellectual, or developmental disability may not be housed in Ad-Sep or any similarly restrictive setting (which does not include protective custody) based on victimization or safety concerns arising from their disabilities."

When an ID/DD IP is identified as needing assistance with reading/writing, staff gave a variety of responses, such as: "They can ask deputies for help"; "Deputies can help them"; or "they can contact Reentry Programs, who will send someone." Program staff seem committed to helping if contacted; however, there is no defined process for this type of support/assistance.

Staff reported that people with ID/DD are placed in AD Sep "for safety" reasons. VDF staff reported that if an IP is "on conservatorship, we put them in Ad Sep. Staff reported that it is the "same" for IDD individuals – "if he can't maintain, we put him in Ad Sep." Staff also reported that the only clinical input they can provide regarding housing placement for ID/DD IPs is for OPSD housing. Staff at SDCJ stated that clinicians can verbalize housing needs, but it is unclear how this is documented and whether it is formalized.

The County has a process in place to document certain adaptive deficits and adaptive supports for IPs with a learning, intellectual, or developmental disability. The identified supports are reflected in the ADA Tracking System, which staff can access. The supports include:

- IP needs assistance with reading and writing
- Assistance with form completion
- Support with comprehension and understanding
- Social skills
- Would benefit from prompting pro-social behavior
- Speak slow
- Prompts for ADLs
- Simple language
- Instructions explained in a step-by-step manner
- Has a hard time with communication/social skills

Most staff were aware of the terms used in the ADA Tracking List for supports required for IPs with a learning, intellectual, or developmental disability, such as ADLs. Additionally, the Neutral Expert notes that staff reported they would provide assistance in reading and writing for IPs that require this accommodation. However, documentation of staff (sworn, programs, and medical) providing the identified supports was not provided to the Neutral Expert.

The County reported that it does not plan to implement or use an Adaptive Support log to document the provision of adaptive supports as proof of practice, and that it plans to use body-worn cameras. However, the County reported that staff do not document the timing of BWC events in relation to the provision of adaptive supports. The County must have a process in place to provide proof-of-practice to the Neutral Expert that the County is providing adequate supports.

During the IP interviews, one (1) IP with cognitive/intellectual/learning disabilities reported that staff does not prompt them for ADLs, and five (5) reported that staff does not offer assistance with reading, writing, or completing forms, and that they must rely on other IPs for reading and writing assistance.

Post-inspection, the County produced an email dated 5/18/26 from the ADA Sergeant, addressed to Detention Supervisors, regarding prompting IPs identified as cognitive disabled for ADLs. The email states, “When the ADA List indicates “ADA Cognitive Learn (Prompt ADLs),” please remind individuals of basic daily activities such as brushing teeth, showering, and eating. ADLs are activities of daily living.”

Recommendations:

- *Revise DSB policy to include language that IPs with a learning, intellectual, or developmental disability may not be housed in Ad-Sep or any similarly restrictive setting (which does not include protective custody) based on victimization or safety concerns arising from their disabilities
- *Once policy is revised, ensure detailed guidance for staff is included in training, on the requirements for staff to ensure that IPs with a learning, intellectual, or developmental disability may not be housed in Ad-Sep or any similarly restrictive setting (which does not include protective custody) based on victimization, safety concerns, or other factors arising from their disabilities
- *Ensure staff are trained
- *Develop a process for the County to demonstrate proof-of-practice for the provision of adaptive supports by staff

110. *The County shall provide identified accommodations and adaptive supports to people with learning, intellectual, or developmental disabilities, including but not limited to effective communication, such as providing more time to respond to and act in accordance with directions (except when there is an immediate safety and security issue), assistance completing forms, and supports as necessary with activities of daily living.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), DSB Policy P.11 Effective Communication (December 19, 2025).

Training - Incarcerated Persons ADA Accommodation Information Training Bulletin, P.11 Effective Communication, P & P Update Training Bulletin

Documents Produced/Reviewed – Excel Spreadsheets for ADA Cognitive Learn with Flag Start Date (December 2025 to April 2026

Implementation

DSB Policy M.39 states, "Sheriff's Correctional Counselors shall meet with incarcerated persons with newly assigned JIMS Medical Instructions for ADA Vision, ADA Hearing, and/or ADA Cognitive/Learning, in order to provide information on how to access or request accommodations for in-custody personal recreation and structured programming managed by DSB's Re-Entry Services Division. Accommodations are available in compliance with DSB P&P Section P.11." DSB Policy P.11 includes requirements for staff to provide effective communication, reading assistance, and writing assistance. Policy P.11 states, "Reading assistance shall be provided by staff for all visually presented information (e.g., forms, reports, documents, etc.) in cases where the incarcerated person requires such accommodation to understand written materials. Scribes or writing assistance shall be provided by staff to complete necessary forms or written complaints, grievances, etc. in cases where the incarcerated person requires such accommodation to access such jail procedures."

The Neutral Expert notes that Training Bulletins, Incarcerated Persons ADA Accommodation Information, and P.11 Effective Communication P & P Update provide staff with guidance on identifying IPs who require effective communication, as well as reading and writing assistance. Although the County provided documentation staff provide assistance in completing forms, the County did not provide documents indicating that staff provided IPs with more time to respond and act in accordance with directions, and support (prompts and reminders) for activities of daily living.

The lead QMHP at SDCJ confirmed that information on the frequency of adaptive supports staff are required to provide is not included in the IPs' plans.

See paragraph 109 for detailed staff and IP information.

Recommendations:

- *Develop a process for the County to demonstrate proof-of-practice for the provision of adaptive supports by staff

111. *Mental Health Services will take appropriate steps to ensure implementation of each person's individualized plan, in coordination with the ADA Unit as appropriate.*

Compliance Rating: Non-Compliance

Previous Compliance Rating: Non-Compliance

Policies - San Diego Sheriff's Office Medical Services Division Receiving Screening E.2.1, San Diego Sheriff's Office Medical Services Division Housing Recommendations for Regional Center Clients (RCC) H.1.

Training – Medical Services Division Training Bulletin ADA Cognitive Assessment – Mental Health

Documents Produced/Reviewed – ADA Cognitive Assessment – Mental Health, Draft Cognitive Assessment Form

Implementation

Paragraphs 107-110 and 112-114 include the County's requirements for identifying cognitive/intellectual/developmental and learning disabilities, as well as the associated adaptive deficits and supports (individualized plan). MH staff reported they meet with some ID/DD IPs periodically, though there is no guidance or process for the frequency of these meetings. The County reported that it does not plan on conducting a multidisciplinary adaptive support review/planning. The lead QMHP at SDCJ reported that this is not happening now. ID/DD adaptive support plans (including review and implementation) will require a meaningful interdisciplinary review process. In addition, defined MH staff check-ins will be needed to implement Paragraphs 109, 110, and 111. The County must have a process for regular contact with the ID/DD IPs. Once the County implements all components of the SA paragraphs 107-114, the Neutral Expert will evaluate the County's compliance with this paragraph.

Recommendations:

- *Implement the recommendations listed in paragraphs 107-110 and 112-114
- *Once implemented, ensure Mental Health Services takes appropriate steps to ensure implementation of each cognitive/intellectual/developmental and learning-disabled IPs' individualized plan, in coordination with the ADA Unit as appropriate
- Include a multidisciplinary review/planning for the ID/DD adaptive support plans

112. The County shall implement training for staff, including contractors, on learning, intellectual, and developmental disabilities, including on the needs of incarcerated persons with such disabilities and staff's responsibilities to provide for such needs and to monitor for and address any safety, vulnerability, or victimization concerns.

Compliance Rating: Non-Compliance

Previous Compliance Rating: Non-Compliance

Policies - San Diego Sheriff's Office Medical Services Division Receiving Screening E.2.1, DSB Policy P.11 Effective Communication (December 19, 2025), San Diego Sheriff's Office Medical Services Division Housing Recommendations for Regional Center Clients (RCC) H.13.

Training - Medical Services Division Training Unit (DSB.P.11: Effective Communication), San Diego County Sheriff Training Bulletin (P.11 Effective Communication P&P Update)

Documents Produced/Reviewed – NA

Implementation

The County reported that this paragraph is not ready for review. The County is working on training related to this provision. No training or training records were produced.

Recommendations:

- *Develop the training required by this paragraph
- *Ensure staff are trained

113. *People with learning, intellectual, and developmental disabilities shall have equal access to books, magazines, and any future electronic tablet programs, consistent with their reading and cognitive abilities.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Non-Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), DSB Policy P.11 Effective Communication (December 19, 2025).

Training - P.11 Effective Communication P & P Update

Documents Produced/Reviewed – NA

Implementation

DSB Policy M.39 includes language that the County Staff shall provide reasonable modifications to jail rules, policies, and practices based on the incarcerated person's documented ADA instructions to provide equal opportunity to incarcerated persons with disabilities to participate in the services, programs, and activities offered to other incarcerated persons of the same classification level. However, the County has not included language in its policies or training regarding the requirement that staff ensure IPs with learning, intellectual, and developmental disabilities have equal access to books and magazines. The County reported that books are received through donations. During the previous inspection, the Neutral Expert toured the libraries at the LCRDF and EMRF and noted that there was currently no section for easy-reading books.

During the IP interviews, IPs with learning, intellectual, and developmental disabilities reported that they are not provided with easy-reading books. An IP requested audiobooks and easy-reading books and reported that deputies don't help with reading/writing forms. He has experience as a DD1 (someone with identified intellectual/developmental disability needs) in CDCR and recounts receiving much more assistance there than at the SD Jail. He reported, "they don't do that here as they did in CDCR," and he relies on other IPs for help with forms and logging on to the kiosk to purchase commissary. An IP with TBI/ID/DD requested audiobooks (including a Bible). An ID/DD with minimal reading skills requested easy-reading books that had not been offered or provided to him.

The County reported:

- Counselor met with IP XXXX on 6/11/26 and offered her a book that seemed fairly easy to read, along with an activity packet. Note in JIMS was placed under ADAE.
- Audiobook request noted for evaluation when distributed.

Recommendations:

- *Revise policy and training to include the SA requirement that "People with learning, intellectual, and developmental disabilities shall have equal access to books, magazines, and any future electronic tablet programs, consistent with their reading and cognitive abilities
- *Once policy is revised, ensure detailed guidance for staff is included in training on the requirements for staff to ensure that IPs with learning, intellectual, and developmental disabilities have equal access to books
- *Ensure staff are trained
- *If the donation of books does not include easy reading books, purchase easy reading books so they can be placed in the libraries and provided to IPs

114. The County shall provide discharge planning tailored to the needs of people with learning, intellectual, or developmental disabilities, including appropriate and effective linkages to housing assistance and community-based service providers.

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - NA

Training - NA

Documents Produced/Reviewed – NA

Implementation

The County reported that this paragraph is not ready for review. The County is working on policies related to this provision. No documents were produced.

In the previous inspection, the County also reported that available discharge notes from MH were produced; however, more information is pending from Reentry, which completes discharge planning for RCC IPs. The Neutral Expert noted that the documents produced were for IPs identified as RCC clients. However, this paragraph requires that the County provide discharge planning, including appropriate and effective linkages to housing assistance and community-based services tailored to the needs of IPs with learning, intellectual, or developmental disabilities, not only RCC-identified clients. The County did not provide additional documents/information for this paragraph.

Recommendations:

- *Revise the San Diego County Sheriff's Detention Services Bureau policies to include the requirements for staff to provide discharge planning tailored to the needs of IPs with learning, intellectual, or developmental disabilities, including

appropriate and effective linkages to housing assistance and community-based service providers
- *Once policy is revised, ensure detailed guidance for staff is included in training, on paragraph requirements
- *Ensure staff are trained
- *Produce the completed discharge plans for IPs with learning, intellectual, or developmental disabilities

N. Searches and Restraints

115. *The County shall ensure that incarcerated persons with disabilities receive reasonable accommodations with respect to searches and during counts. (For example, search procedures may require modification for a person with a mobility disability affecting their ability to stand or maintain a certain body position.)*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Non-Compliance

Policies – DSB Policy I.52 (December 30, 2025), DSB Sheriff Transportation Unit (STU) Green Sheet I.39.T.1., DSB I.50 Body Scanner and X-Rays 3/13/26

Training - NA

Documents Produced/Reviewed – NA

Implementation

DSB Policy I.52 (December 30, 2025) states, “Incarcerated persons with disabilities that prevent the use of standard strip search methods shall be provided reasonable accommodations during the strip search process. Any assistive device shall be available to the incarcerated person at all times, absent an individualized safety and security concern in accordance with M.39 Section IV.F.3. Incarcerated persons with severe mobility disabilities may not be able to stand or may be limited in the amount of time that they can stand. Searches that include removal or disassembly of an assistive device or health care appliance that is connected to the body shall be conducted in a clean setting. The incarcerated person shall be allowed to remove the device and provide it to staff; consult health care staff if the incarcerated person is noncompliant and forcible removal is considered.” The policy also states that incarcerated persons with disabilities that prevent the use of standard pat-down search methods shall be provided reasonable accommodations during the pat-down search process. This includes modifying the search for incarcerated persons with disabilities that affect their ability to stand or maintain a certain body position. Any assistive device shall be available to the incarcerated person at all times, absent an individualized safety and security concern, in accordance with M.39 Section IV.F.3. The Neutral Expert notes that the policy was reviewed outside the rating period and will therefore review this paragraph during the next inspection.

Recommendations:

- *Ensure staff are trained

116. *The County shall ensure that incarcerated persons with disabilities receive appropriate reasonable accommodations with respect to application of restraint equipment.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Non-Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), DSB Policy I.51 Movement of Incarcerated Persons (January 30, 2026)

Training – Trainings listed in paragraph 14

Documents Produced/Reviewed – Safety and Security Assessment Form (ADA-3)

Implementation

Policy M.39 includes language that the County staff shall provide reasonable modifications to jail rules, policies, and practices based on the incarcerated person's documented ADA instructions to provide equal opportunity for incarcerated persons with disabilities to participate in the services, programs, and activities offered to other incarcerated persons of the same classification level, including transportation. The County revised DSB Policy I.51 Movement of Incarcerated Persons to include the requirement for staff to provide reasonable accommodations to incarcerated persons with disabilities during movement, including in compliance with DSB Policy M.39, DSB Policy I.52, DSB Policy I.97, and DSB Policy I.93, during the application of restraints, search, or transport. During the previous inspection, the ADA Lieutenant stated that the newly drafted Transportation Policy states “one hand free” as an accommodation for applying restraints to IPs who use a cane. The revised policy has not been provided to the Neutral Expert. Additionally, in a review of the County's Training Bulletins, the Neutral Expert notes that the trainings do not include detailed guidance for staff on the requirements to ensure that IPs with disabilities receive appropriate reasonable accommodations when using restraint equipment. Housing unit staff interviewed reported they would accommodate IPs by leaving one hand loose so the IP could use their assistive device.

During the incarcerated person interviews, the following was reported:

- An IP reported she was restrained by both hands during transport, including when she had a cane.
    - County response: She has been seen multiple times for her falls and devices. Providers have documented that accessible transportation is not medically indicated. See notes from February, March, and May in the documents.
- An IP with a vision disability reported he was restrained to another IP during transport; he was pulled by the other IP and tripped on vehicle steps and fell with near-serious injury.
- An IP who uses a cane reported that he was fully restrained each time (3-4x), and it was hard for him to use his cane while restrained.
- An IP with a vision disability reported that both of his hands were restrained and he was handcuffed to another IP, which felt very dangerous.

- An IP who uses a cane, has arthritis, and has an ADA flag for “fall precautions” reported he was placed in full restraints when moving outside the unit – most recently 2 weeks prior to the interview.
- An IP who uses a cane and is also an intermittent WC user reported that both hands are restrained every time he goes to transport. He has to move very slowly and carefully with his cane, and he feels unsafe.

Recommendations:

- *
- *Ensure staff are trained
- Ensure disabled IPs are provided accommodations with respect to the application of restraint equipment

O. Transportation

117. The County shall ensure that incarcerated persons with disabilities are reasonably accommodated when in transit, such as between facilities, out to court, or to and from outside health care services. The County shall ensure that they maintain an adequate fleet of functional wheelchair accessible vehicles and shall ensure appropriate compliance for safe transport of wheelchair riders.

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024) and DSB Sheriff Transportation Unit (STU) Green Sheet I.39.T.1 Transportation Vehicle Assignment and Use (April 2025). DSB I.51 Movement of Incarcerated Persons 1/30/26 was revised since the first inspection.

Training – Training Bulletin M.39 Incarcerated Persons with Disabilities

Documents Produced/Reviewed – ADA Accessible Vehicle List, San Diego Sheriff’s Office Transportation Duty Logs VEH-9, San Diego Sheriff’s Office Transportation Trip Log VEH-11

Implementation

DSB Policy M.39 includes language that staff shall provide modifications to jail rules, policies, and practices based on the incarcerated person's documented ADA instructions to provide equal opportunity to incarcerated persons with disabilities to participate in the services, programs, and activities offered to other incarcerated persons of the same classification level, including transportation.

The Neutral Expert interviewed the San Diego County Sheriff’s Office Transportation Unit staff, and they reported that they are alerted to an IP’s need for accommodations during the transportation process by reviewing the ADA Tracking List. However, the Neutral Expert notes that currently, all IPs with a full-time wheelchair flag require accessible transportation, and if an IP does not have a full-time wheelchair flag and requires accessible transportation,

they have a WCT (Wheelchair Transport) special condition flag in the notes section of the ADA roster. Paragraph 33 states, "The disability tracking system shall identify any other accommodations a person needs, including but not limited to housing, classification, transportation, health care appliances, durable medical equipment, and assistive devices. Staff shall utilize the disability tracking system as necessary to ensure timely provision of accommodations. Examples of Transportation-related Accommodations include:

- Alternate restraint application (waist chains/leg irons)
- Hand(s)-free to utilize assistive device (may be one or both hands, depending on use of cane vs. walker)
- Staff assistance navigating the bus steps

The Functional Assessment Performance includes the following questions:

- Can you perform the following without assistance?
    - Climb Stairs
    - Are there any issues with transportation accommodations (vehicle/restraints)?

If there are no flags for these accommodations, flags will need to be added so these accommodations can be tracked in the ADA Tracking system.

Staff also reported that if the IP uses an assistive device, transportation staff will ask the IP if they need the assistive device, and if they say yes, the IPs are accommodated by leaving one hand free and are allowed to use the assistive device until they are seated and are provided the assistive device when they disembark the vehicle. However, during the IP interviews, four (4) IPs stated that transportation staff remove the assistive device when they board the vehicle and provide it to them when they disembark, and that they do not have access to the device while walking on the bus. In these cases, the IP should be allowed to use their assistive device (if needed) until they are seated, at which point staff can remove it. Additionally, the device should be provided to the IP so they can deboard the bus/vehicle.

The County produced 40 San Diego Sheriff's Office Transportation Duty Logs VEH-9, in which an accessible vehicle was used for the IPs' transport to court, to and from outside medical appointments, and for transfers between SDCSO jail facilities.

During the previous inspection, the County also produced the San Diego Sheriff's Transportation Unit ADA Vehicle List. The ADA Vehicle List indicates that there are eight (8) ADA-accessible wheelchair vans with one (1) wheelchair lift and five (5) wheelchair trucks with one (1) wheelchair lift. The Transportation staff reported that there are eight (8) ADA accessible vans and three (3) or four (4) trucks with accessible wheelchair lifts. No changes were made to the number of accessible vehicles in the transportation fleet.

Transportation staff reported that if the facility needed an additional accessible vehicle and none was available for medical transport, facility staff would call 911 (ambulance).

During the incarcerated person interviews, the following was reported:

- Two (2) IPs reported that staff do not always accommodate them during the transportation process.

- An IP reported that his cane was taken when he got to the bus, and he then had to walk to his seat without the device/assistance.
- An IP reported that his cane was taken when he got on the bus, and he then had to walk to his seat without the device/assistance.
- An IP reported that she was taken to the hospital in February or March of 2026 and was not restrained during transport. On the return trip, she was put in leg restraints by deputies. She could not get into the vehicle with the restraints on, so staff lifted her in. She reported that she fell and was injured. She reported that she was not put in leg restraints during a subsequent hospital transport.
    - County response: There is nothing documented in JIMS. See documents for note from 2.24.26, not documented as a fall in transport.
- An IP reported she was transported in a WC-accessible van and, because she was not secured, fell to the floor and remained there for the entire ride.
    - County response: There is nothing in JIMS. Per medical, this was not immediately reported. See documents for notes from when she did report and was seen regarding the concern.
        - The County must ensure transportation staff are trained on the procedures for securing IPs in the accessible vehicles for transport.
- An IP who is an intermittent wheelchair user and also uses a walker reported that, a few weeks ago, he was being taken to physical therapy to an outside appointment and was made to walk up the steps of the bus without assistance, which was very hard to do given his hip injury and mobility disability.
    - County response: There is nothing in JIMS related to this allegation.

Recommendations:

- *Ensure IPs are provided accommodations when in transit, between facilities, out to court, and to and from outside health care appointments

118. *The County shall ensure that whether a person requires accessible transportation is documented in the disability tracking system, and that staff have access to this information as necessary to ensure provision of appropriate accommodations during transportation.*

Compliance Rating: Substantial Compliance

Previous Compliance Rating: Substantial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024). No revisions to policies or new policies were implemented since the first inspection.

Training – NA

Documents Produced/Reviewed – JIMS Live ADA Medical Instructions Reports (VDF, LCDRF, GBDF, RMDF, SDCJ, SBDF, EMRF), ADA Accessible Vehicle List, San Diego Sheriff's Office Transportation Duty Logs VEH-9, San Diego Sheriff's Office TRANSPORTATION TRIP LOG VEH-11

Implementation

Paragraphs 26 and 29 detail the process medical staff use to assess IPs for health- or disability-related housing requirements during and after the medical intake screening. The assessments are conducted by medical staff and are individualized. The County tracks all IPs who have disabilities and their associated accommodations (Active Wheelchair Transport Special Cond) in the JIMS ADA Tracking System. When ADA Flags are entered in TechCare by medical staff, the flags are populated in JIMS. The information is available by transportation staff accessing JIMS and viewing the information on the screen or printing the information as a housing report, facility report or jail system report (all facilities). In review of the "Active ADA Medical Instruction (with notes) column, the Neutral Expert notes that this column includes information about whether an IP requires accessible transportation. All IPs with a full-time wheelchair flag require accessible transportation, and if an IP does not have a full-time wheelchair flag and requires accessible transportation, they have a WCT (Wheelchair Transport) special condition flag in the notes section of the ADA roster.

Recommendations:

- None

119. *The County shall ensure that prescribed assistive devices for people with disabilities are available to them at all times during the transport process, when the incarcerated person is moving, boarding on and off the vehicle and moving to their seat within the vehicle, absent a safety concern. If this occurs, staff will document the specific individualized safety and security concern which will be reviewed by a supervisor to ensure it meets criteria for the action. This includes in temporary holding cells.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Non-Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), I.51 Movement of Incarcerated Persons (January 30, 2026)

Training – Trainings listed in paragraph 14

Documents Produced/Reviewed – Safety and Security Assessment Form (ADA-3)

Implementation

DSB Policy M.39 includes language that the County Staff shall provide reasonable modifications to jail rules, policies, and practices based on the incarcerated person's documented ADA instructions to provide equal opportunity for incarcerated persons with disabilities to participate in the services, programs, and activities offered to other incarcerated persons of the same classification level, including transportation. The policy also states, "Staff shall not confiscate an incarcerated person's authorized assistive device or DME unless the device or DME presents a direct threat to the safety and security of the person or others." The revised DSB Policy I.51 Movement of Incarcerated Persons to include the requirement for Staff to provide reasonable accommodations to incarcerated persons with disabilities during movement, including in compliance with DSB Policy M.39, DSB Policy I.52, DSB Policy I.97, and DSB Policy I.93, during the application of restraints, search, or transport. The County has implemented the Safety and Security Assessment Form (ADA-3) for staff and supervisors to document safety concerns, including consultation

with sworn staff and the provision of alternative accommodations. The County also developed a Training Bulletin for staff on the use of the Safety and Security Assessment Form and staff requirements. In review of the Training Bulletins previously produced by the County, the Neutral Expert noted that the trainings do not include detailed guidance for staff on the requirements to ensure that prescribed assistive devices for IPs with disabilities are available to them at all times during the transport process, when the IP is moving, boarding on and off the vehicle and moving to their seat within the vehicle, absent a safety concern.

During the incarcerated person interviews, two (2) IPs reported that staff do not always accommodate them during the transportation process. One (1) IP reported that his cane was taken when he got to the bus, and he then had to walk to his seat without the device/assistance, and one (1) IP reported his cane was taken when he got to the bus, then has to walk to his seat without the device/assistance.

Post-inspection, the County produced an email dated May 21, 2026, from the Transportation Sergeant to the Transportation staff regarding the transport of IPs who use a cane. The email states, "At our last meeting, we discussed the transporting requirements of IPs that use a cane. If you are not already doing so, allow the IP to utilize their cane with a free hand to board the vehicle and until they are seated. Once seated, the cane can be collected, and the IP's free hand shall be secured with the waist chain. Prior to offloading, the IP shall be provided a free hand, so they can use their cane safely."

Recommendations:

- *
- *Include detailed guidance for staff in training, on the requirements for staff to ensure that prescribed assistive devices for IPs with disabilities are available to them at all times during the transport process, when the IP is moving, boarding on and off the vehicle, and moving to their seat within the vehicle, absent a safety concern, including in temporary holding cells
- *Ensure staff are trained

120. *The County shall ensure that staff provide assistance to people with mobility or other disabilities where necessary to ensure safe access on and off of transport vehicles. The County shall provide restraint-related accommodations to ensure that people with mobility disabilities are restrained in ways that maintain their safety during transport.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), DSB Policy I.51 Movement of Incarcerated Persons (January 30, 2026).

Training – Trainings listed in paragraph 14

Documents Produced/Reviewed – Safety and Security Assessment Form (ADA-3)

Implementation

DSB Policy M.39 includes language that the County staff shall provide reasonable modifications to jail rules, policies, and practices based on the incarcerated person's documented ADA instructions to provide equal opportunity to incarcerated persons with disabilities to participate in the services, programs, and activities offered to other incarcerated persons of the same classification level, including transportation. During the previous inspection, the County was in the process of revising DSB Policy I.51 Movement of Incarcerated Persons to include the requirement for staff to provide reasonable accommodations to incarcerated persons with disabilities during movement, including in compliance with DSB Policy M.39, DSB Policy I.52, DSB Policy I.97, and DSB Policy I.93, during the application of restraints, search, or transport. The County has revised and implemented the policy. The Neutral Expert also reviewed the Training Bulletins produced by the County, and noted that the trainings did not include detailed guidance for staff on the requirements for staff to provide assistance to IPs with mobility or other disabilities where necessary to ensure safe access on and off of transport vehicles and to provide restraint-related accommodations to ensure that IPs with mobility disabilities are restrained in ways that maintain their safety during transport. The County has not provided the Neutral Expert with a revised training bulletin.

During the incarcerated person interviews, an IP reported she was taken to the hospital in February or March of 2026 and was not restrained on the way to the hospital. On the return trip, she was put in leg restraints by deputies. She could not get into the vehicle with the restraints on, so staff lifted her in. She reported that she fell and was injured. She reported that she was not put in leg restraints during a subsequent hospital transport. The County's response: "There is nothing documented in JIMS. See documents for note from 2.24.26, not documented as a fall in transport." Another IP reported she was transported in a WC-accessible van and, because she was not secured, fell to the floor and remained there for the entire ride. The County's response: "There is nothing in JIMS. Per medical, this was not immediately reported. See documents for notes from when she did report and was seen regarding the concern."

Recommendations:

- *
- *Include detailed guidance for staff in training on the requirements for staff to provide assistance to IPs with mobility or other disabilities, when necessary to ensure safe access on and off of transport vehicles and to provide restraint-related accommodations to ensure that IPs with mobility disabilities are restrained in ways that maintain their safety during transport
- *Ensure staff are trained

121. *The County shall develop and implement processes to inspect the accessible transportation vehicles on a regular basis to ensure that they are in safe working condition, and take prompt steps to address vehicle maintenance issues.*

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies – DSB Sheriff Transportation Unit (STU) Green Sheet I.39.T.1 Transportation Vehicle Assignment and Use (April 2025). No revisions to policies or new policies were implemented since the first inspection.

Training - NA

Documents Produced/Reviewed – San Diego Sheriff's Office Transportation Duty Logs VEH-9 (January 2025 to September 2025), San Diego Sheriff's Office Transportation Trip Log VEH-11

Implementation

DSB Policy I.39 T.1 Transportation Vehicle Assignment and Use includes the requirement for transportation staff to conduct a pre-trip inspection of the transportation vehicles. Additionally, the completed San Diego Sheriff's Office Transportation Duty Logs produced by the County include an inspection of the engine compartment (coolant level, oil level, belts/hoses/leaks, power steering, start engine (instrument panel, steering wheel, defroster and windshield wipers), Brakes (shifting mechanism, hydraulic brakes, applied test, emergency brake test), safety equipment (fire extinguisher, first aid kit, trauma kit, naloxone kit, AED, biohazard waste, clean-up kit, 2-way radio/MDC, reflective triangles, jumper cables, accident forms), vehicle exterior and interior equipment (headlights, tail lights, brake lights, turn signals, back-up lights, emergency flashers, reflector, interior lights, tires, jack and spare tire, hardware, horn, seats/seat belts, windows/mirrors, wheelchair lift). The Transportation Duty Log also includes check boxes for the following:

- Condition of the vehicle is satisfactory
- Above defects corrected
- Above defects need not be corrected for safe operation

The County previously reported that there is one accessible vehicle used by facility staff; however, the County has not produced any San Diego Sheriff's Office Transportation Duty Logs VEH-9 completed by facility staff for this vehicle.

Recommendations:

- *Ensure a process is developed for facility transportation to inspect the accessible transportation vehicles on a regular basis to ensure that they are in safe working condition, and take prompt steps to address vehicle maintenance issues
- *Provide proof-of-practice to the Neutral Expert

P. Accommodations for People with Substance Use Disorder

122. The County shall ensure that people with substance use disorders are not subject to discrimination on the basis of disability.

Compliance Rating: Non-Compliance

Previous Compliance Rating: Non-Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024). No revisions to policies or new policies were implemented since the first inspection.

Training - NA

Documents Produced/Reviewed – NA

Implementation

DSB Policy M.39 includes language that the County does not discriminate on the basis of disability. Incarcerated persons with disabilities are entitled to the same rights, privileges, and services as other incarcerated persons of the same classification level. Although the County has not included language in policy or training regarding the requirement for staff to ensure that IPs with substance use disorders are not subject to discrimination on the basis of disability, DSB M.39 includes language that "drug addiction and alcoholism" are qualified disabilities and there is a reference to non-discrimination covering all disabilities.

Currently, IPs with substance use disorder who are prescribed a wheelchair full-time cannot be housed in the MAT unit at VDF due to no accessible housing. See Paragraph 77 for detailed information regarding access to the MAT services.

During the IP interviews, an IP reported that he submitted a written request to get on MOUD/MAT. He reported the response stated: "You need to see provider." But he hasn't seen the provider, and he has no idea what to do next.

During the next round, the Neutral Expert will assess whether IPs who receive MAT are being appropriately screened for MAT and offered other program opportunities.

The County must ensure mobility disabled IPs, including those who are full-time wheelchair users, have equal access to MAT services and programming as those available in the VDF MAT module.

Recommendations:

- *Revise policy and training to include the ADA Settlement Agreement and Order requirements
- *Ensure detailed guidance for staff is included in training on the requirements for staff to ensure that people with substance use disorders are not subject to discrimination on the basis of disability
- *Ensure staff are trained
- *Ensure mobility disabled IPs who are full-time wheelchair users have equal access to MAT services and programming.

Q. People with Mental Health Disabilities

124. The Sheriff's Office shall ensure that people with mental health disabilities are not subject to discrimination on the basis of disability and have equal and meaningful access to programs, services, and activities while incarcerated, unless there is a specific clinical or valid safety reason based on individualized assessment. This provision covers access to, for example, worker opportunities, classes, vocations and rehabilitation programs, and religious programs.

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024). No revisions to policies or new policies were implemented since the first inspection.

Training - NA

Documents Produced/Reviewed – NA

Implementation

No revised policies or documents were produced by the County for the document production period for this provision.

DSB Policy M.39 includes language that the County does not discriminate on the basis of disability. Incarcerated persons with disabilities are entitled to the same rights, privileges, and services as other incarcerated persons of the same classification level. Additionally, the policy states, "the Sheriff's [Office] shall provide the reasonable accommodations needed for qualified incarcerated persons with a disability to have an equal opportunity to participate in and benefit from in custody programs, services, or activities unless the accommodation would result in a fundamental alteration, direct threat or safety and security risk, undue financial or administrative burden, or during an emergency situation."

However, during the IP interviews, most IPs housed at GBDF, SDCJ, VDF and SBDF stated they do not have access to worker opportunities, educational classes, vocational and rehabilitation programs, and religious programs. There must be equivalent worker opportunities, educational self-help, vocational, rehabilitation, and religious programs. IPs housed in OPSD reported there are no religious programs in OPSD and Insufficient worker opportunities within the OPSD modules. An IP housed at RMDF reported that, while in OPSD, he did not have groups. The County reported that IPs will be provided MAT services (medication and counseling) while housed in OPSD units. Participation in MAT must be based on individualized assessment, not a systemwide mental health exclusion. (NCCHC Jail guidelines for the Medical Treatment of Substance Use Disorders 2025: "Individuals should be assessed by a qualified treatment provider to determine whether MAT is clinically indicated. If indicated, medication for addiction treatment, and the specific medication chosen, should be based on a medical recommendation and an individual's decision, not imposed by facility policy.")

Recommendations:

- *Ensure IPs with mental health disabilities are provided equal and meaningful access to worker opportunities (within the unit based on clinical determination), classes, vocations and rehabilitation programs, and religious programs

125. The County shall ensure that incarcerated persons with (a) mental health disabilities or (b) intellectual disabilities (as identified through the process set forth in Section III.M) will not face discrimination in the use of disciplinary procedures or sanctions. The procedures set forth in Paragraph 126 will apply in cases where:

(1) the incarcerated person:

(a) has been identified as having an intellectual disability through the process set forth in Section III.M; or

(b) meets clinical criteria for placement in PSU, OPSD, EASS, or JBCT; or
(c) is housed in OPSD, PSU, JBCT, EASS, or is PC 1368/1370, or is conserved; and
(2) the incarcerated person faces placement in restrictive housing or lockdown or a denial of property or privileges as a potential disciplinary sanction.

Compliance Rating: Non-Compliance

Previous Compliance Rating: Non-Compliance

Policies – DSB J.03 Separation Definition and Use 3/13/26

Training - NA

Documents Produced/Reviewed – NA

Implementation

The County reported that this paragraph is not ready for review. The County is working on policies related to this provision. No documents were produced.

During the staff interviews, the LCRDF staff member responsible for disciplinary hearings reported: "Sometimes we keep [people with MH or IDD] on disciplinary ISO for safety of selves/others." In addition, VDF staff stated that they will never single-cell someone with MH/IDD disability needs, including pursuant to a mental health recommendation. The VDF classification deputy said there are no housing accommodations available for IPs with IDD (the only option is to place them in Ad Sep). This practice violates this section and housing requirements in the ADA Settlement (Paragraphs 34, 36) and in these cases an alternative to placing the IPs in ISO/Ad Sep must be implemented.

Recommendations:

- *Revise and implement policies that ensure that incarcerated persons with mental health or intellectual disabilities do not face discrimination in the use of disciplinary procedures or sanctions.
- *Once the policy is revised, ensure detailed guidance for staff is included in training on the requirements for staff to ensure IPs with mental health or intellectual disabilities do not face discrimination in the use of disciplinary procedures or sanctions.
- *Ensure staff are trained

126. A Qualified Mental Health Professional shall assess the person and provide written findings as to (a) whether or not the reported behavior was related to mental illness, adaptive functioning deficits, or other mental health or intellectual disability; and (b) whether certain sanctions should be avoided in light of the person's mental health or intellectual disability, treatment plan, or adaptive support needs. Custody staff shall meaningfully consider the Qualified Mental Health Professional's findings when deciding what, if any, disciplinary action should be imposed. If custody staff do not follow the mental health input, staff shall document why it was not followed.

Compliance Rating: Non-Compliance

Previous Compliance Rating: Non-Compliance

Policies – DSB J.03 Separation Definition and Use 3/13/26

Training - NA

Documents Produced/Reviewed – NA

Implementation

The County reported that this paragraph is not ready for review. The County is working on policies related to this provision. No documents were produced.

Recommendations:

- *Revise and implement policies that require a QMHP to assess IPs with mental health disabilities who receive rule violation reports and provide written findings as to (a) whether or not the reported behavior was related to mental illness, adaptive functioning deficits, or other mental health or intellectual disability; and (b) whether certain sanctions should be avoided in light of the person's mental health or intellectual disability, treatment plan, or adaptive support needs.
- *Ensure sworn staff meaningfully consider the QMHP's findings when deciding what, if any, disciplinary action should be imposed.
- *In cases where sworn staff do not follow the QMHP's input, staff document why it was not followed
- *Once the policy is revised, ensure detailed guidance for staff is included in training, on the paragraph requirements
- *Ensure staff are trained

127. *Incarcerated persons shall not be subjected to discipline in any manner that prevents the delivery of mental health treatment or adaptive support needs.*

Compliance Rating: Non-Compliance

Previous Compliance Rating: Non-Compliance

Policies – San Diego Sheriff's Office Medical Services Division, Healthcare Services A.1.3 (6/6/24), DSP Policy M.1 Access to Care (July 16, 2025), DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024). No revisions to policies or new policies were implemented since the first inspection.

Training - NA

Documents Produced/Reviewed – NA

Implementation

The San Diego Sheriff's Office Medical Services Division, Healthcare Services A.1.3 (6/6/24) states, "Health staff will not participate in disciplinary decisions, beyond advocating for mitigating circumstances in cases of medical and mental health disorders. Health staff do

not participate in disciplinary action. Health staff are not compelled to provide clinical information solely for the purposes of discipline." In addition, DSB Policy M.1 Access to Care (July 16, 2025) states, "Incarcerated populations must have access to health care services free from unreasonable barriers that deter them from seeking care for their health needs." The policies do not include language stating that IPs are not to be subjected to discipline in any manner that prevents the delivery of mental health treatment or adaptive support.

Recommendations:

- *Revise the DSB Policies to include the requirements for staff not to subject IPs to discipline in any manner that prevents the delivery of mental health treatment or adaptive support needs
- *Once policy is revised, ensure detailed guidance for staff is included in training on the requirements for staff to ensure IPs are not subjected to discipline in any manner that prevents the delivery of mental health treatment or adaptive support needs
- *Ensure staff are trained

128. Incarcerated persons shall not be subject to discipline for refusing treatment or medications, or for engaging in self-injurious behavior or threats of self-injurious behavior.

Compliance Rating: Non-Compliance

Previous Compliance Rating: Non-Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024)

Training - NA

Documents Produced/Reviewed – NA

Implementation

Since the last inspection, the County has not revised policies and/or procedures to ensure staff do not subject IPs to discipline for refusing treatment or medications, or for engaging in self-injurious behavior or threats of self-injurious behavior.

Recommendations:

- *Revise the San Diego County Sheriff's Detention Services Bureau policies to include the requirements for staff to not subject IPs to discipline for refusing treatment or medications, or for engaging in self-injurious behavior or threats of self-injurious behavior
- *Once the policy is revised, ensure detailed guidance for staff is included in training, on the requirements for staff to ensure IPs are not subjected to discipline for refusing treatment or medications, or for engaging in self-injurious behavior or threats of self-injurious behavior
- *Ensure staff are trained

129. The County shall provide the individual's reasonable accommodations during the disciplinary process.

Compliance Rating: Non-Compliance

Previous Compliance Rating: Non-Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), DSB O.1 Disciplinary Action (November 20, 2020). No revisions to policies or new policies were implemented since the first inspection.

Training - NA

Documents Produced/Reviewed – NA

Implementation

With the exception of Policy M.39 Disabled Incarcerated Persons, which states, "Staff shall use the incarcerated person's documented preferred method of communication for all due process", the County has not revised policies and/or procedures for staff to provide reasonable accommodations to IPs during the disciplinary process. The accommodations that staff must provide include the provision of effective communication and staff assistance for IPs with cognitive/intellectually/learning disabilities to ensure they understand the disciplinary process. For future reviews, the County will need to provide rule violations for IPs with these disabilities so that the Neutral Expert can assess the County's compliance with this paragraph.

Upon staff's observation or determination of a rule violation, staff write the Rule Violation Report (Jail Incident Report) and issue a copy of the rule violation, along with a J-72 (Segregated Housing Order) for major rule violations and a J-72B (Disciplinary Hearing Rights Waiver). If the IP waives the 72-hour hearing timeline, the disciplinary hearing officers conduct the hearing. If the IP does not waive the 72-hour hearing timeline, the hearing is not held until 72 hours after issuance of the charges and the rights form. If the charge is a major rule violation, the IP is placed in segregated housing pending the hearing and final disposition of the rule violation. DSB O.1 Disciplinary Action states, "All decisions regarding minor discipline rendered by the DHO shall be final. The discipline, if minor, shall be effective immediately after the inmate has been given written notice of the decision. If a rule violation is sustained by the DHO and major discipline is recommended, the incident report shall be reviewed by the DRO within 72 hours of the inmate's notification of the discipline. Disciplinary sanctions shall not be imposed prior to this review."

The County did not provide any adjudicated rules violations issued and adjudicated for disabled IPs who require accommodations (effective communication or staff assistance). Therefore, the Neutral Expert could not select cases for the County to produce BWC video that would provide proof-of-practice for the paragraph's requirements. This includes the issuance of the initial incident report (rule violation, J-72, J-72B), the hearing, and the issuance of the final disposition.

Recommendations:

- *Revise the DSB policies to include the requirements for staff to provide reasonable accommodations to disabled IPs during the disciplinary process
- *Once the policy is revised, ensure detailed guidance for staff is included in training on the requirements for staff to for staff to provide reasonable accommodations to disabled IPs during the disciplinary process
- *Ensure staff are trained
- *Produce the adjudicated rules violations for disabled IPs who require effective communication accommodations and adjudicated rules violations for IPs with cognitive/intellectually/learning disabilities so the Neutral Expert can select cases requesting BWC video for the issuance of the initial incident report (rule violation, J-72, J-72B, hearing, and issuance of final disposition.

R. Quality Assurance and Auditing

130. The Sheriff's Office's ADA Unit shall develop a quality assurance and auditing program to ensure ADA compliance within one year of all counsel signing this ADA Settlement Agreement and Order.

Compliance Rating: Partial Compliance

Previous Compliance Rating: Un-Ratable

Policies - NA

Training - NA

Documents Produced/Reviewed – 2026 ADA Unit Quality Assurance Audit**,** ADA Unit emails regarding IP Bed Placement Discrepancies, DME Audits, VRI JIMS Logs.

Implementation

The Neutral Expert notes that the County is required to develop a quality assurance and auditing program to ensure ADA compliance within one year of all counsel signing the ADA Settlement Agreement and Order. The order was signed by all counsel on December 11, 2024. The 2026 ADA Unit Quality Assurance Audit includes the following components:

- Inaccessible Placement
- Preferred Method of Comm (JIMS/Techcare/BWC)
- Mobility Housing Quality Assurance
- ADA Cognitive/ADA Vision/ADA Hearing/ADA Speech
- Inaccessible ADA Housing
- Quality Assurance
- Track Released DME's and IP Personal Stored DME

The Neutral Expert wants to acknowledge the work the ADA Unit is performing in conducting bed discrepancies and documentation in JIMS for DME assigned to an IP who is in custody and/or has been released from custody, using VRI when required, and the audits listed in the 2026 ADA Unit Quality Assurance Audit. However, during the previous inspection, the Neutral Expert reported that the quality assurance program must also include the methodologies the ADA Unit uses to audit the ADA Settlement Agreement and Order

paragraph requirements. The County has not provided the Neutral Expert with the methodologies for each audit component.

Recommendations:

- Formalize the Quality Assurance and Audit process to include the methodology, reports for each audit (details of cases reviewed), and any steps taken in response.
- Provide the Neutral Expert with the methodologies for each audit component. Develop a quality assurance and auditing program to ensure staff's compliance with the ADA Settlement Agreement and Order

S. Non-Retaliation and Non-Interference

131. The County shall not retaliate, discriminate against, coerce, intimidate, threaten, or interfere with any incarcerated person in the exercise or enjoyment of, or an account of his or her having exercised or enjoyed, or on account of his or her having aided or encouraged any other incarcerated person in the exercise or enjoyment of any ADA right while incarcerated.

Compliance Rating: Partial Compliance

Previous Compliance Rating: Partial Compliance

Policies - DSB Policy M.39 Disabled Incarcerated Persons (May 29, 2024), San Diego County Sheriff's Office – Procedure Section 2.1 Rules of Conduct For Members of the San Diego County Sheriff's Office. No revisions to policies or new policies were implemented since the first inspection.

Training - NA

Documents Produced/Reviewed – NA

Implementation

San Diego County Sheriff's Office – Procedure Section 2.1 Rules of Conduct For Members of the San Diego County Sheriff's Office states,

"2.48 Treatment of Persons in Custody

Employees shall not mistreat, nor abuse physically or verbally, persons who are in their custody. Employees shall handle such persons in accordance with law and established Office procedures. (Reviewed 1-16-2011)

2.53 Discrimination

Employees shall not express any prejudice or harassment concerning race, religious creed, color, national origin, ancestry, physical or mental disability, medical condition, pregnancy, marital status, gender, age, political beliefs, sexual orientation, sexual or gender identity, lifestyle, or similar personal characteristics. Examples of discriminatory acts which will not be tolerated include the use of verbal derogatory comments, slurs, or jokes, derogatory

pictures, cartoons, or posters, social media postings, and actions which result in a person being treated unequally. (Revised 11-01-2024)"

In addition, DSB Policy M.39 includes language that the County does not discriminate on the basis of disability. Incarcerated persons with disabilities are entitled to the same rights, privileges, and services as other incarcerated persons of the same classification level. However, the County has not included language into policy or training regarding staff not retaliating, coercing, intimidating, threatening, or interfering with any incarcerated person in the exercise or enjoyment of, or an account of his or her having exercised or enjoyed, or on account of his or her having aided or encouraged any other incarcerated person in the exercise or enjoyment of any ADA right while incarcerated.

Although the policies include language regarding staff not discriminating against people with physical and mental disabilities, the policies do not include language that staff shall not retaliate, coerce, intimidate, threaten, or interfere with any incarcerated person in the exercise or enjoyment of, or an account of his or her having exercised or enjoyed, or on account of his or her having aided or encouraged any other incarcerated person in the exercise or enjoyment of any ADA right while incarcerated.

During the incarcerated person interviews, an incarcerated person reported that in response to requests for a brace and for an extra mattress for his disability, a doctor implied that if he wanted more accommodations or care, he could go to SDCJ or GBDF. He reported that he perceived this as a threat to transfer him if he complained. An incarcerated person also reported that a deputy shone a flashlight in his eyes for weeks after requesting disability accommodations for his vision disability.

The County reported, "It is possible that IP XXXX could have requested certain accommodations, and the doctor may have explained IP XXXX would have to go to one of those other facilities (SDCJ or GB), should he need such an accommodation. South Bay does not have a medical observation unit and has more limited medical criteria and staffing. This information could have been misperceived as a threat."

The County also reported that "SDCJ conducted a follow-up with IP XXXX. During the interaction, IP XXXX stated that he felt he was being harassed by certain deputies and intended to file complaints with the Citizen Law Enforcement Review Board (CLERB) and Internal Affairs (IA). He explained that his father had the necessary paperwork and was awaiting additional details before submitting the complaint packet. A Sgt. informed IP XXXX that IA, grievance, and IP request forms were available if needed and advised him that he could request assistance at any time. IP XXXX opted to continue working with his father on the CLERB and IA complaints, and the paperwork was provided to him. To support any future communication, the Sgt. wrote his name at the top of an IP Request form to ensure routing. The Sgt.'s encounter was recorded on BWC."

Recommendations:

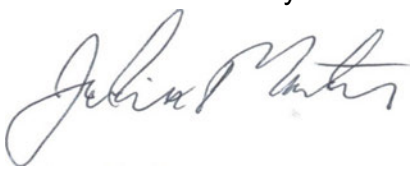
- *Revise policy and training to include the ADA Settlement Agreement and Order requirements
- *Once policy is revised, ensure detailed guidance for staff is included in training, for staff not to retaliate, discriminate against, coerce, intimidate, threaten, or interfere with any IP in the exercise or enjoyment of, or an account of his or her having exercised or enjoyed, or on account of his or her having aided or

encouraged any other IP in the exercise or enjoyment of any ADA right while incarcerated

- * Ensure staff are trained

Signature

Submitted to the County of San Diego and the San Diego County Sheriff's Office



June 8, 2026

Julian Martinez
Nuetral Expert

Date