

**ADULT TYPE I, II, III and IV FACILITIES
Local Detention Facility Health Inspection Report
Health and Safety Code Section 101045
Glenn E. Dyer Detention Facility**

BOC #:

FACILITY NAME: GLENN E. DYER DETENTION FACILITY		COUNTY: ALAMEDA COUNTY		
FACILITY ADDRESS (STREET, CITY, ZIP CODE, TELEPHONE): 550 6TH STREET OAKLAND, CA 94607 (510) 268-7760 or (510) 268-7777				
CHECK THE FACILITY TYPE AS DEFINED IN TITLE 15, SECTION 1006:	TYPE I:	TYPE II: X	TYPE III:	TYPE IV:
ENVIRONMENTAL HEALTH EVALUATION		DATE INSPECTED: MARCH 18, 2015		
ENVIRONMENTAL HEALTH EVALUATORS (NAME, TITLE, TELEPHONE): Amir K Gholami, REHS (510) 567-6735				
FACILITY STAFF INTERVIEWED (NAME, TITLE, TELEPHONE): CAPTAIN TUCKER (510) 268-7777 R.J. WHITE, DEPUTY (510) 268-7719				
NUTRITIONAL EVALUATION		DATE INSPECTED:		
NUTRITIONAL EVALUATORS (NAME, TITLE, TELEPHONE):				
FACILITY STAFF INTERVIEWED (NAME, TITLE, TELEPHONE):				
MEDICAL/MENTAL HEALTH EVALUATION		DATE INSPECTED:		
MEDICAL/MENTAL HEALTH EVALUATORS (NAME, TITLE, TELEPHONE):				
FACILITY STAFF INTERVIEWED (NAME, TITLE, TELEPHONE):				

This checklist is to be completed pursuant to the attached instructions.



I. ENVIRONMENTAL HEALTH EVALUATION

Adult Type I, II, III and IV Facilities

Glenn E. Dyer Detention Facility

March 18, 2015

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
Article 11. Food				
<p>Approach for Providing Food Service</p> <p><i>CALCODE, the California Retail Food Code (HSC Division 104, Part 7, Chapter 4, Articles 1-8, Section 11370 et seq.) has been incorporated into Title 15 for local detention facilities through the rulemaking process.</i></p> <p>Food served in the facility is prepared in the facility. If "No," respond to items 1 and 2 below prior to continuing with the checklist.</p>				Meals are prepared at Santa Rita jail and then are transported inside a refrigerated vehicle to Glenn Dyer Jail on a daily basis. Meals are kept refrigerated and then reheated prior to being served.
1. Food is prepared at another city or county detention facility.	X			Meals are prepared at Santa Rita jail and then transported, under refrigeration, to Glenn Dyer Jail daily. Meals are refrigerated prior to being served.
2. Food is contracted through a private vendor who had been inspected and complies with provisions of CALCODE.	X			Aramark provides the food services.
<p>1230 Food Handlers</p> <p><i>(Note: Title 15, § 1230 is in Article 10, MMH, but inspected under Environmental Health due to CALCODE reference.)</i></p> <p>Policy and procedures have been developed and implemented for medical screening of (inmate) food handlers prior to working in the facility.</p>	X			This is done under Alameda County Sheriff's Office Detention and Corrections Policy and Procedures, Number 14.01 III (6)
There are procedures for education, supervision and cleanliness of food handlers in accordance with HSC § 114020	X			This is done under Alameda County Sheriff's Office Detention and Corrections Policy and Procedures, Number 14.01 III (4)
<p>1245 Kitchen Facilities, Sanitation and Food Service</p> <p>Kitchen facilities, sanitation, and food preparation, service and storage comply with standards set forth in CALCODE.</p>	X			This is done under Alameda County Sheriff's Office Detention and Corrections Policy and Procedures, Number 14.01 III (4)
In facilities where inmates prepare meals for self-consumption, or where frozen meals or prepared food from other facilities permitted pursuant to HSC § 113920 (a) through (d) is (re)heated and served, the following CALCODE standards may be waived by the local health officer. <i>(Note: while the regulation uses the word "waived," the intent is that the inspector exercises professional latitude to approve alternative methods that provide for food safety and sanitation in these situations.)</i>			X	
HSC § 114056, Hazard Analysis Critical Control Point (HACCP) plans, review, approval, suspension, revocation; hearing;			X	
HSC § 114065, New or replacement equipment;	X			
HSC § 114090 Utensil and equipment cleaning and sanitation;	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
HSC § 114140 Ventilation;	X			
HSC § 114150 (a) Floors; and.	X			
HSC § 114165 (b) Storage area for cleaning equipment and supplies; disposal of mop bucket and wastes and other liquid wastes.	X			
1246 Food Serving Food is prepared and served only under the immediate supervision of a staff member.	X			This is done under Alameda County Sheriff's Office Detention and Corrections Policy and Procedures, Number 14.02 A (6b) A deputy always observing the food reheating, etc <u>Potentially Hazardous Foods are kept under refrigeration at or below 41 degree F as required</u>
Article 12. Inmate Clothing and Personal Hygiene				
1260 Standard Institutional Clothing Issue <i>Personal undergarments and footwear may be substituted for the institutional undergarments and footwear specified in this regulation; however, the facility has the primary responsibility to provide these items.</i> There is a standard issue of climatically suitable clothing for inmates held after arraignment in Type I, II and III facilities, which includes, but is not limited to:	X			This is done under Alameda County Sheriff's Office Detention and Corrections Policy and Procedures, Number 15.04 II
Clean socks and footwear;	X			
Clean outer garments; and,	X			
Clean undergarments, including shorts and tee shirt for males; or, bra and two pairs of panties for females.	X			
Clothing is reasonably fitted, durable, easily laundered and repaired.	X			
1261 Special Clothing Provision is made to issue suitable additional clothing essential for inmates to perform special work assignments (e.g., food service, medical, farm, sanitation, mechanical and other specified work).	X			This is done under Alameda County Sheriff's Office Detention and Corrections Policy and Procedures, Number 15.04 III (B)
1262 Clothing Exchange There are policies and procedures for the scheduled exchange of clean clothing.	X			This is done under Alameda County Sheriff's Office Detention and Corrections Policy and Procedures, Number 15.04 III (E)
Unless work, climatic conditions, illness, or the CALCODE necessitates more frequent exchange, outer garments, except footwear, are exchanged at least once each week. Undergarments and socks are exchanged twice each week.	X			
1263 Clothing Supply There is a quantity of clothing, bedding, and linen available for actual use and replacement needs of the inmate population.	X			
There are policies and procedures for the special handling of laundry that is known or suspected to be contaminated with infectious material.	X			This is done according to Alameda County Sheriff's Office Detention and Corrections Policy and Procedures, Number 15.05
1264 Control of Vermin in Inmates Personal Clothing There are policies and procedures to control the contamination and/or spread of vermin in all inmate personal clothing.	X			This is done according to Alameda County Sheriff's Office Detention and Corrections Policy and Procedures, Number 15.05.

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
Infested clothing is cleaned, disinfected, or stored in a closed container so as to eradicate or stop the spread of the vermin.	X			
1265 Issue of Personal Care Items	X			This is done according to Alameda County Sheriff's Office Detention and Corrections Policy and Procedures, Number 15.03
There are policies and procedures for issuing personal hygiene items.				
Each female inmate is issued sanitary napkins and/or tampons as needed.			X	No female inmates at this facility. Any female inmate is taken to Santa Rita facility
Each inmate to be held over 24 hours who is unable to supply himself/herself with personal care items, is issued the following personal care items:	X			
Toothbrush;				
Dentifrice;	X			
Soap;	X			
Comb; and,	X			
Shaving implements.	X			
With the possible exception of shaving implements, inmates are not required to share any personal care items listed above.	X			
Inmates do not share disposable razors. Double-edged safety razors, electric razors, and other shaving instruments capable of breaking the skin, when shared among inmates are disinfected between individual uses by the method prescribed by the State Board of Barbering and Cosmetology in § 979 and 980, Chapter 9, Title 16, CCR.	X			
1266 Personal Hygiene	X			This is done according to Alameda County Sheriff's Office Detention and Corrections Policy and Procedures, Number 15.03 III (B)
There are policies and procedures for showering-bathing.				
Inmates are permitted to shower-bathe upon assignment to a housing unit and, thereafter, at least every other day and more often if possible.	X			
1267 Hair Care Services	X			This is done according to Alameda County Sheriff's Office Detention and Corrections Policy and Procedures, Number 15.03 III (D)
Hair care services are available.				
Except for those who may not shave for court identification reasons, inmates are allowed to shave daily and receive hair care services at least once a month.	X			
Equipment is disinfected before use, by a method approved by the State Board of Barbering and Cosmetology to meet the requirements of Title 16, Chapter 9, § 979 and 980, CCR.	X			
Article 13. Bedding and Linens				
1270 Standard Bedding and Linen Issue	X			This is done according to Alameda County Sheriff's Office Detention and Corrections Policy and Procedures, Number 15.04
For each inmate entering a living unit and expected to remain overnight, the standard issue of clean suitable bedding and linens includes, but is not limited to:				
One serviceable mattress which meets the requirements of § 1272 of these regulations;	X			
One mattress cover or one sheet;	X			
One towel; and,	X			
One freshly laundered or dry-cleaned blanket, depending upon climatic conditions.	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
1271 Bedding and Linen Exchange There are policies and procedures for the scheduled exchange of freshly laundered bedding and linen issued to each inmate housed.	X			This is done according to Alameda County Sheriff's Office Detention and Corrections Policy and Procedures, Number 15.04 III (E)
Washable items such as sheets, mattress covers, and towels are exchanged for clean replacement, at least once each week.	X			
Where a top sheet is not issued, blankets are laundered or dry cleaned at least once a month. When a top sheet is issued, blankets are laundered or dry cleaned at least once every three months.	X			
1272 Mattresses Mattresses are enclosed in an easily cleaned, non-absorbent ticking and conform to the size of the bunk as referenced in Title 24, Section 470A.3.5 Beds (at least 30" wide X 76" long).	X			
Any mattress purchased for issue to an inmate in a facility which is locked to prevent unimpeded access to the outdoors, is certified by the manufacturer as meeting all requirements of the State Fire Marshal and Bureau of Home Furnishings test standard for penal mattresses (Technical Information Bulletin Number 121, dated April 1980).	X			
Article 12. Facility Sanitation and Safety				
1280 Facility Sanitation, Safety and Maintenance There are policies and procedures for the maintenance of an acceptable level of cleanliness, repair and safety throughout the facility.	X			This is done according to Alameda County Sheriff's Office Detention and Corrections Policy and Procedures, Number 15.01
The plan provides for a regular schedule of housekeeping tasks and inspections to identify and correct unsanitary or unsafe conditions or work practices.	X			
Medical care housing as described in Title 24, Part 2, § 470A.2.14 is cleaned and sanitized according to policies and procedures established by the health authority.	X			
Other Applicable Codes				
Title 24, Uniform Building Code – Plumbing Toilet bowls, wash basins, drinking fountains, and showers are clean and in good repair.	X			Couple of the water fountain was adjusted to flow high enough for drinking. Backflow prevention cover missing on one of the sinks. However, it was ordered and later repaired.
Title 24, Uniform Building Code – Cleanliness and Repair Floors, walls, windows, grillwork and ceilings are clean and in good repair.	X			Third and sixth floor are closed to inmates due to maintenance.
Title 24, Part 1, 13-102(c)6 – Heating and Cooling There is provision for a comfortable living environment in accordance with the heating, ventilating, and air conditioning requirements of Parts 2 and 4 and energy conservation requirements of Part 6, Title 24, CCR.	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
Title 24, Uniform Plumbing Code – Floor Drains	X			
Floor drains are flushed at least weekly.				
Traps contain water to prevent escape of sewer gas.	X			
Grids and grates are present.	X			
Title 24, Part 2, 470A.3.6 – Lighting	X			
Lighting in housing units, dayrooms and activity areas is sufficient to permit easy reading by a person with normal vision.				
20 foot candles light are provided at desk level and in the grooming area. <i>(Applicable to facilities constructed after 1980.)</i>	X			
Lighting is centrally controlled or occupant controlled in housing cells or rooms.	X			
Night lighting provides good vision for supervision. <i>(Applicable to facilities constructed after 1980.)</i>	X			
CA Safe Drinking Water Act	X			
Potable water is supplied from an approved source in satisfactory compliance with this Act.				
Local Ordinances	X			
Solid, toxic and infectious wastes are disposed of in accordance with state and local laws and regulations.				
HSC § 1803	X			
The facility is free of vermin (or vermin signs), and general housekeeping is satisfactory.				
General Industry Safety Order, Title 8-3362	X			
The facility is free of structural and other safety hazards.				

Summary of environmental health evaluation:

The facility was found in a generally satisfactory condition with couple of minor issues, which were repaired while on site with the exception of floor grates in kitchen by oven. However, a service man was called in to correct at the time of inspection. The facility has a contract with Big Valley Pest Control to maintain vector issues. Female inmates are taken to Santa Rita facility. All potentially hazardous food are delivered from Santa Rita, kept refrigerated, pre-heated prior to being served. Holding, and preheat temperature requirements are properly met prior to being served. Leftovers, if any, are discarded.



ENVIRONMENTAL HEALTH INSPECTION ATTACHMENT
(Reference: California Retail Food Code)
(Health and Safety Code (HSC) Division 104, Part 7, Chapter 4, Articles 1-8)
Glenn E. Dyer Detention Facility
Routine Inspection
March 18, 2015

This attachment is optional, but may be useful when determining the responses to the Environmental Health Evaluation.

HSC AREAS	YES	NO	N/A	COMMENTS
Food Bourne Illness – Critical Risk Factors				
Cooling, Holding & Preparation Ahead of Service				
113995 (HSC) Potentially hazardous foods; temperature for holding, keeping or displaying; thermometers.	X			
114002 (HSC) Cooling of potentially hazardous food			X	This facility doesn't prepare food on site and therefore no cooling is done.
Personal Hygiene/Food Handling				
114020 (HSC) Hygiene standards for employees	X			
114085 (HSC) Storage of frozen food; refreezing thawed food; thawing potentially hazardous food			X	Frozen food items are not prepared at this facility.
114095 (HSC) Water supply; minimum temperature for hot water	X			Hot water at 121 degrees F.
114105 (HSC) Toilet facilities	X			
114115 (HSC) Hand washing facilities	X			
Cooking Temperatures				
113996 (HSC) Cooking temperatures (AKA Lauren Beth Rudolph Safety Act of 1997)	X			Prepackage foods received from Santa Rita are reheated to at least 165 degrees F
Cross Contamination				
114050 (HSC) Facilities and equipment are in clean and in good repair	X			
114060 (HSC) Requirements for manual sanitation	X			All dishes used are rinsed and then sent back to Santa Rita Jail for proper washing and sanitizing
114080 (HSC) Storage of food and non-food items	X			Proper storage observed at the facility
114090 (HSC) Cleanliness of utensils and equipment; three compartment stainless steel sink required; methods of cleaning utensils	X			All trays are washed and then sent to Santa Rita Facility for final washing and sanitizing
Reheating Left Over Food				
114015 (HSC) Prohibition against reserving unpackaged foods or serving food prepared in private homes; bakery products	X			There are no leftovers, if any left, they are discarded.
Contaminated Raw Food				
114003 (HSC) Inspection upon receipt	X			
114010 (HSC) Protection from contamination	X			

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HSC AREAS	YES	NO	N/A	COMMENTS
Safety, Housekeeping, Maintenance and Equipment				
114025 (HSC) Storage and use of poisonous or injurious substances	X			
114030 (HSC) Prevention or entrance and harborage of animals	X			There is a contract with a Pest Control company to address the issues
114035 (HSC) Storage and disposal of waste material	X			
114040 (HSC) Cleanliness of premises	X			
114045 (HSC) Prohibition against live animals; Exceptions; Liability for damages	X			
114050 (HSC) Facilities and equipment to be clean and in good repair	X			
114056 (HSC) The food facility may operate pursuant to a Hazard Analysis Critical Control Point plan (HACCP). Applicability is determined by food management techniques.			X	
114065 (HSC) New or replacement equipment	X			
114100 (HSC) Plumbing and plumbing fixtures; disposal of liquid waste; drains	X			
114140 (HSC) Ventilation; mechanical exhaust for cooking equipment	X			Submitted plan to replace the Ansul fire system of the exhaust hood
114150 (HSC) Floor surface material; floor drains	X			Floor grates by oven needs repair, service man was called in at the time of inspection
114155 (HSC) Wall and ceiling surfaces.	X			
114160 (HSC) Storage for clean linens; containers for soiled linens	X			
114165 (HSC) Storage area of cleaning equipment and supplies; disposal of mop bucket and wastes and other liquid wastes	X			
114170 (HSC) Lighting requirements	X			
114175 (HSC) Living and sleeping quarters to be separate from food preparation	X			

III. MEDICAL/MENTAL HEALTH EVALUATION
Adult Type I, II, III and IV Facilities

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
Article 11. Health Services				
1200 Responsibility For Health Care Services				J-A-02.00
The facility administrator has developed a plan to ensure provision of emergency and basic health care services to all inmates.	x			
Clinical judgments are the sole province of the responsible physician, dentist, and psychiatrist or psychologist, respectively.	X			
Security regulations are applicable to facility staff and health care personnel.	X			
At least one physician is available.	X			
In Type IV facilities where routine health services are provided by access to the community, there is a written plan for the treatment, transfer, or referral of emergencies. <i>(When Type IV facilities provide health services within the facility, they must meet applicable regulations, as do other facilities.)</i>	X			
1202 Health Service Audits <i>(Applicable to facilities with on-site health care staff)</i>				J-D-01.08
There is a written plan for annual statistical summaries of health care and pharmaceutical services that are provided.	X			
There is a mechanism to assure that the quality and adequacy of health care services are assessed annually.	X			
There is a process for correcting identified deficiencies in the health care and pharmaceutical services delivered.	X			
Based on information from these audits, the health authority provides the facility administrator with an annual written report on health care and pharmaceutical services delivered.	X			
1203 Health Care Staff Qualifications <i>(Applicable to facilities with on-site health care staff)</i>				J-C-01.00
There are policies and procedures to assure that state licensing, certification, or registration requirements and restrictions that apply in the community, also apply to health care personnel in the facility.	X			
Health care staff credentials are on file at the facility or another central location where they are available for review.	X			
1204 Health Care Procedures <i>(Applicable to facilities with on-site health care staff)</i>				
Medical care performed by personnel other than a physician, is performed pursuant to written protocol or order of the responsible physician.	X			
1205 Health Care Records <i>(Applicable to facilities with on-site health care staff)</i>				J-H-01.00
Individual, complete and dated health records are maintained and include, but are not limited to:	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
(1) Receiving screening form/history (<i>Note: The intake receiving screening form may also be included in the custody file. See Guidelines for discussion.</i>);	X			
(2) Medical/mental health evaluation reports;	X			
(3) Complaints of illness or injury;				
(4) Names of personnel who treat prescribe, and/or administer/deliver prescription medication;	X			
(5) Location where treatment is provided; and.	X			
(6) Medication records in conformance with Title 15 § 1216.	X			
Physician-patient confidentiality privilege is applied to the record; the health authority controls access; health record files are maintained separately from other inmate jail records.				J-H-02.00
The responsible physician or designee communicates information obtained in the course of medical-mental health screening and care to jail authorities when necessary for the protection of the welfare of the inmate or others, management of the jail, or maintenance of jail security and order.	X			
The inmate's written authorization is necessary for transfer of health record information unless otherwise provided by law or regulation.	X			
Inmates are not used for medical record keeping.				
1206 Health Care Procedures Manual (<i>Applicable to facilities with on-site health care staff</i>)				J-A-05.00
There is a health services manual, with policies and procedures that conform to applicable state and federal law. The manual is reviewed and updated at least annually.	X			
The health care manual includes, but is not limited to:				
a) Summoning and application of proper medical aid;	X			
b) Contact and consultation with private physicians;	X			
c) Emergency and non-emergency medical and dental services, including transportation;	X			
d) Provision for medically required dental and medical prostheses and eyeglasses;	X			
e) Notification of next of kin or legal guardian in case of serious illness which may result in death;	X			
f) Provision for screening and care of pregnant and lactating women, including prenatal and postpartum information and health care, including but not limited to access to necessary vitamins as recommended by a doctor, information pertaining to childbirth education and infant care, and other services mandated by statute;	X			J-G-07.00
g) Screening, referral and care of mentally disordered and developmentally disabled inmates;	X			J-G-02.00

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
h) Implementation of special medical programs;	X			
i) Management of inmates suspected of or confirmed to have communicable diseases;	X			
j) The procurement, storage, repackaging, labeling, dispensing, administration-delivery to inmates, and disposal of pharmaceuticals;	X			
k) Use of non-physician personnel in providing medical care;	X			
l) Provision of medical diets;	X			
m) Patient confidentiality and its exceptions;	X			
n) Transfer of pertinent individualized health care information (or documentation that no health care information is available), to the health authority of another correctional system, medical facility or mental health facility at the time each inmate is transferred and prior to notification to HSC Sections 121361 and 121362 for inmates with known or suspected active tuberculosis disease;	X			
Procedures for notifying facility health care staff of a pending transfer allow sufficient time to prepare the summary.	X			
The summary information identifies the sending facility, is in a consistent format that includes the need for follow-up care, diagnostic tests performed, medications prescribed, pending appointments, significant health problems and other information that is necessary to provide for continuity of health care.	X			
Necessary inmate medication and health care information are provided to the transporting staff, together with precautions necessary to protect staff and inmate passengers from disease transmission during transport.	X			
o) Forensic medical services, including drawing of blood alcohol samples, body cavity searches, and other functions for the purpose of prosecution are not be performed by medical personnel responsible for providing ongoing health care to the inmates.	X			
1206.5 Management of Communicable Diseases				
There is a written plan that addresses the identification, treatment, control and follow-up management of communicable diseases. The plan reflects the current local incidence of communicable diseases which threaten the health of inmates and staff and includes:	X			
Intake health screening procedures;	X			
Identification of relevant symptoms;	X			
Referral for medical evaluation;	X			
Treatment responsibilities during incarceration; and,	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
Coordination with public and private community-based resources for follow-up treatment.	X			
Consistent with the plan, there are policies and procedures that conform with applicable state and federal law, which include but are not limited to:	X			
The types of communicable diseases to be reported;	X			
The persons who must receive the medical reports;	X			
Sharing of medical information with inmates and custody staff;	X			
Medical procedures required to identify the presence of disease(s) and lessen the risk of exposure to others;	X			
Medical confidentiality requirements;	X			
Housing considerations based upon behavior, medical needs, and safety of the affected inmates;	X			
Provision for inmates consent that address the limits of confidentiality; and,	X			
Reporting and appropriate action upon the possible exposure of custody staff to a communicable disease.	X			
1207 Medical Receiving Screening				J-E-02.00
A receiving screening is performed on all inmates at the time of intake. <i>(See regulation for exception.)</i>	X			
This screening is completed in accordance with procedures established by the responsible physician in cooperation with the facility administrator.	X			
The screening includes, but is not limited to, medical, mental health, developmental disabilities, and communicable diseases, including, TB and other airborne diseases.	X			
The screening is performed by licensed health care staff or by trained facility staff.	X			
There is a written plan for compliance with PC§ 2656, which allows prisoners to keep prescribed orthopedic or prosthetic appliances unless an immediate risk to security has been determined.	X			
There is a written plan to provide medical care for any inmate who appears in the need of or requests medical, mental health or developmental disability treatment.	X			
1207.5 Special Mental Disorder Assessment <i>(Not applicable Type I & IV. Type I facilities are expected to transfer these women to an appropriate facility where the assessment can occur.)</i>				J-G-09.00
There are written procedures for the mental health screening of women who have given birth within the past year and are charged with murder or attempted murder of their infant. Screening occurs at intake and, if postpartum psychosis is indicated, a referral for further evaluation is made.	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
1208 Access to Treatment				
A written plan has been developed and implemented for identifying, assessing, treating and/or referring any inmate who appears to be in need of medical, mental health or developmental disability treatment at any time during incarceration.	X			
Health care personnel perform the evaluation.	X			
1209 Transfer to a Treatment Facility <i>(Not applicable Type I and IV.)</i>				
a) There are policies and procedures to provide mental health services that include but are not limited to:	X			
1) Screening for mental health problems;	X			
2) Crisis intervention and management of acute psychiatric episodes;	X			
3) Stabilization and treatment of mental disorders; and.	X			
4) Medication support services.	X			
b) Provision is made to evaluate or transfer mentally disordered inmates to a Lanterman Petris Short treatment facility for further evaluation as provided in PC § 4011.6 or 4011.8, unless the jail contains a designated treatment facility, or has implemented PC § 1369.1.	X			
c) The facility provides onsite treatment of incompetent inmate/patients pursuant to Penal Code Section 1369.1. <i>(If yes, please complete the following)</i>	X			
Written policies and procedures for the involuntary administration of medications are developed by the health authority, in cooperation with the facility administrator and include, but are not limited to:	X			
Designation of licensed personnel authorized to order and administer involuntary medication.	X			
Designation of appropriate setting for involuntary administration of medication.	X			
Designation of restraint procedures and/or devices that may be used to maintain safety of the inmate and facility staff.	X			
Development of a written plan to monitor the inmate's medical condition following the initial involuntary administration of a medication, until the inmate is cleared as a result of an evaluation by, or consultation with, a psychiatrist.	X			
Development of a written plan to provide a minimum level of ongoing monitoring of the inmate following return to facility housing.	X			
If monitoring is performed by custody staff, they must be trained to recognize signs of possible medical problems and alert medical staff when indicated.	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
Documentation of the administration of involuntary medication in the inmate's medical record.	X			
1210 Individualized Treatment Plans				
Treatment staff develops a written individualized plan for each inmate treated by the medical and/or mental health staff.	X			
Custody staff is informed of the treatment plan when necessary to ensure coordination and cooperation in the ongoing care of the inmate.	X			
Where recommended by treatment staff, the plan includes referral to treatment after release from the facility.	X			
1211 Sick Call				J-E-07.00
There are policies and procedures for daily sick call for all inmates.	X			
Any inmate requesting health care is provided that attention.	X			
1212 Vermin Control				
There is a written plan for the control and treatment of vermin infested inmates, including medical protocols, for treating persons suspected of being infested or having contact with vermin-infested inmates.	X			
1213 Detoxification Treatment <i>(Not applicable Type IV.)</i>				
Medical policies on detoxification which a statement as to whether detoxification will be provided within the facility or require transfer to a licensed medical facility, and, procedures and symptoms necessitating immediate transfer to a hospital or other medical facility.	X			
When medically licensed personnel are not in attendance, inmates undergoing withdrawal reactions, judged or defined as not readily controllable with available medical treatment, are transferred to an appropriate medical facility.	X			
1214 Informed Consent				J-I-05.00
There is a written plan to assure informed consent of inmates in a language understood by the inmate.	X			
Except in emergencies, as defined in Business and Professional Code § 2397 and Title 15 § 1217, all examination, treatments and procedures affected by informed consent standards in the community are likewise observed for inmate care.				
For minors and conservatees, the informed consent of parent, guardian, or legal custodian applies when the law requires it. Absent informed consent in non-emergency situations, a court order is required before involuntary treatment is done.				N/A
Any inmate who has not been adjudicated to be incompetent may refuse non-emergency health care.	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
1215 Dental Care				
Policies and procedures ensure that emergency and medically required dental care is provided to inmates, upon request.	X			
1216 Pharmaceutical Management				
Pharmaceutical policies, procedures, space and accessories include, but are not limited to:	X			
Securely lockable cabinets, closets and refrigeration units;	X			
A means for the positive identification of the recipient of the prescribed medication;	X			
Administration/delivery of medicines to minors as prescribed;	X			
Confirmation that the recipient has ingested the medication or accounting for medication under self-administration procedures outlined in Title 15, § 1216;	X			
Documenting that prescribed medications have or have not been administered, by whom, and if not, for what reason;	X			
Prohibiting delivery of drugs by inmates;	X			
Limitation to the length of time medication may be administered without further medical evaluation;	X			
Limitation to the length of time allowable for a physician's signature on verbal orders, and,	X			
An annual written report is prepared by a pharmacist on the status of pharmacy services, and provided to the health authority and facility administrator.	X			
There are written protocols that are consistent with pharmacy laws and regulations, and limit the following functions to being performed by the identified personnel:	X			
Procurement is done only by a physician, dentist, pharmacist, or other person authorized by law.	X			
Medication storage assures that stock supplies of legend medications are accessed only by licensed health care personnel. Supplies of legend medications that have been properly dispensed and supplies of over-the-counter medications may be accessed by both licensed and non-licensed staff.	X			
Repackaging is done only by a physician, dentist, pharmacist, or other persons authorized by law.	X			
Labels are prepared by either licensed or non-licensed personnel, provided the label is checked and affixed to the container by the physician, dentist, or pharmacist before administration or delivery to the inmate. Labels are prepared in accordance with Business and Professions Code § 4076.	X			
Dispensing is only done by a physician, dentist, pharmacist, or persons authorized by law.	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
Administration of medication is only done by authorized and licensed health care personnel acting on the order of a prescriber.	X			
Licensed and non-licensed personnel may deliver medication acting on the order of a prescriber.	X			
Disposal of legend medication is done accordance with pharmacy laws and regulations and requires any combination of two of the following classifications: physician, dentist, pharmacist, or reregistered nurse. Controlled substances are disposed of in accordance with Drug Enforcement Administration disposal procedures.	X			
There are written procedures for managing and providing over-the-counter medications, which include but are not limited to how they are made available, documentation when delivered by staff and precautions against hoarding large quantities.	X			
Policy and procedures may allow inmate self-administration of prescribed medication under limited circumstances (<i>see regulation text</i>). If self-administration of prescription drugs is not allowed, this subsection is "not applicable." When allowed, policies and procedures must include but are not limited to:	X			
Medications permitted for self-administration are limited to those with no recognized abuse potential. Medication for treating tuberculosis, psychotropic medication, controlled substances, injectables and any medications for which documentation of ingestion is essential, are excluded from self-administration.	X			
Inmates with histories of frequent rule violations of any type, or those who are found to be in violation of rules regarding self-administration, cannot participate.	X			
Prescribing health care staff must document that each inmate participating in self-administration is capable of understanding and following the rules of the program and instructions for medication use.	X			
Provisions are made for the secure storage of the prescribed medication when it is not on the inmate's person.	X			
Provisions are made for consistent enforcement of self-medication rules by both custody and health care staff, with systems of communication among them when either one finds that an inmate is in violation of rules regarding the program.	X			
Health care staff performs documented assessments of inmate compliance with self-administration medication regimens. Compliance evaluations are done with sufficient frequency to guard against hoarding medication and deterioration of the inmate's health.	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
1217 Psychotropic Medications <i>(Not applicable Type IV.)</i>				J-1-02.00
There are policies and procedures governing the use of psychotropic medications.	X			
Involuntary administration of psychotropic medication is limited to emergencies. <i>(See Business and Professional Code § 2397 and the text of Title 15 § 1217 for definition of an emergency.)</i>	X			
If psychotropic medication is administered in an emergency, such medication is only that which is required to treat the emergency condition.	X			
Medication is prescribed by a physician in written form in the inmate's record following a clinical evaluation in person or by telephone. Verbal orders are entered in the inmate's record and signed by a physician within 72 hours.	X			
There is a protocol for supervising and monitoring inmates who are involuntarily receiving psychotropic medication.	X			
Psychotropic medication is not administered to an inmate absent an emergency unless: (1) the inmate has given his or her informed consent in accordance with WIC § 5326.2; or, (2) has been found to lack the capacity to give consent pursuant to the county's hearing procedures under the Lanterman-Petris-Short (LPS) Act for handling capacity determinations and subsequent reviews. <i>(Note: Inspectors need to be aware of differing consent requirements for juveniles held in adult facilities.)</i>	X			
Policies limit the length of time both voluntary and involuntary psychotropic medications may be administered.	X			
There is a plan for monitoring and re-evaluating all inmates receiving psychotropic medications, including a review of all emergency situations.	X			
The administration of psychotropic medication is not allowed for disciplinary reasons.	X			
1219 Suicide Prevention Program				
There is a written suicide prevention plan designed to identify, monitor and provide treatment for those inmates who present a suicide risk.	X			
1220 First Aid Kits				
One or more first aid kits are available in the facility.	X			
The responsible physician has approved the contents, number, location and procedure for periodic inspection of the kit(s).	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
ARTICLE 4, RECORDS AND PUBLIC INFORMATION				
1046 Death in Custody				
Written policy and procedures assure that there is a review of each in-custody death. The review team includes the facility administrator and/or manager; the health administrator; the responsible physician; and other health care and supervision staff who are relevant to the incident.	X			
When a <u>minor</u> dies in a facility, the administrator of the facility provides the Corrections Standards Authority with a copy of the death in custody report that is submitted to the Attorney General under Government Code Section 12525. within 10 days of the death.	X			
ARTICLE 5, CLASSIFICATION AND SEGREGATION				
1051 Communicable Diseases				J-B-01.00
Upon identification, all inmates with suspected communicable diseases are segregated until a medical evaluation can be completed.	X			
In absence of medically trained personnel at the time of intake into the facility, an inquiry is made to determine if the inmate has or has had any communicable diseases, or has observable symptoms of communicable diseases, including but not limited to tuberculosis or other airborne diseases, or other special medical problems identified by the health authority.	X			
The inmate's response is noted on the booking form and/or screening device.	X			
1052 Mentally Disordered Inmates				
There are policies and procedures to identify and evaluate all mentally disordered inmates, with segregation provided, if necessary to protect the safety of the inmate of others.	X			
A physician's opinion is secured within 24 hours of identification or at the next daily sick call, whichever is earliest.	X			
1055 Use of Safety Cell				
A safety cell, specified in Title 24, Part II, Section 1231.2.5, is used only to hold inmates who display behavior that results in the destruction of property or reveals an intent to cause physical harm to self or others.	X			
There are policies and procedures, written by the facility administrator in cooperation with the responsible physician, governing safety cell use.	X			
Safety cells are not used for punishment or as a substitute for treatment.	X			
Placement requires the approval of the facility manager or watch commander, or a physician delegated by the facility manager.	X			
There are procedures that assure necessary nutrition and fluids are administered.	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
Continued retention of the inmate is reviewed a minimum of every eight hours.	X			
Inmates are allowed to retain sufficient clothing, or are provided with a "safety garment" to provide for personal privacy unless risks to the inmate's safety or facility security are documented.	X			
Direct visual observation is conducted at least twice every 30 minutes and is documented.	X			
Continued retention of inmate is reviewed a minimum of every eight hours.	X			
A medical assessment is secured within 12 hours of placement in this cell or at the next daily sick call, whichever is earliest, and medical clearance for continued retention is secured every 24 hours thereafter.	X			
A mental health opinion on placement and retention is secured within 24 hours of placement.	X			
1056 Use of Sobering Cell				
Pursuant to policies and procedures, a sobering cell, specified in Title 24, Part II, Section 1231.2.4, is used only for housing inmates who are a threat to their own safety or the safety of others due to their state of intoxication. Policies and procedures for managing the sobering cell, include handling both males and females.	X			
Intermittent direct visual observation of inmates in sobering cells conducted no less than every half hour.	X			
An evaluation by a medical staff person or by custody staff, pursuant to written medical procedures in accordance with Section 1213 of these regulations, occurs whenever any inmate is retained in a sobering cell for more than six hours.	X			
Such inmates are removed from the sobering cell when they are able to continue with processing.	X			
1057 Developmentally Disabled Inmates				
There are procedures to identify and evaluate all developmentally disabled inmates. <i>(Note: Appropriate housing is based on T-15 § 1050, Classification.)</i>	X			
A contact to the regional center occurs within 24 hours when an inmate is suspected or confirmed to be developmentally disabled. <i>(Applicable only in facilities holding inmates in excess of 24 hours.)</i>	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
<p>1058 Use of Restraint Devices</p> <p><i>(Note: The regulation distinguishes "use of force" from use of restraints. The provisions of this regulation do not apply to the use of handcuffs, shackles or other restraint devices when used to restrain minors for movement or transportation. Health inspectors should familiarize themselves with this discussion in the Medical-Mental Health Guidelines and contact their CSA Field Representative if there are questions regarding applicability to a particular facility.)</i></p> <p>Restraints are used only to hold inmates who display behavior that results in the destruction of property or reveals an intent to cause physical harm to self or others.</p>	X			
Restraints are not used as a discipline or as a substitute for treatment.	X			
There are policies and procedures for the use of restraint devices including acceptable restraint devices; signs or symptoms which should result in immediate medical/mental health referral; availability of CPR equipment; protective housing of restrained persons; provisions for hydration and sanitation needs; and exercising of extremities.	X			
Inmates are placed in restraints only with approval of the facility manager, watch commander, or if delegated, a physician.	X			
All inmates in restraints are housed alone or in a specified area for restrained inmates.	X			
Direct visual observation is conducted and logged at least twice every 30 minutes.	X			
Continued retention in such restraints is reviewed every two hours.	X			
A medical opinion on placement and retention is secured as soon as possible but no later than <u>four</u> hours from the time of placement.	X			
Medical review for continued retention in restraint devices occurs at a minimum of every six hours.	X			
A mental health consultation is secured as soon as possible, but no later than <u>eight</u> hours from the time of placement.	X			
ARTICLE 8. MINORS IN JAILS				
<p>1121 HEALTH EDUCATION FOR MINORS IN JAILS</p> <p>Written policy and procedures assure that age- and sex-appropriate health education and disease prevention programs are offered to minors.</p>	N/A			This section only applies to Type II facilities that held adjudicated minors during the 12 months prior to the date of this inspection.
The health education programs are updated as necessary to reflect current health priorities and meet the needs of the confined population.	S/A			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
<p>1122 REPRODUCTIVE INFORMATION AND SERVICES FOR MINORS IN JAILS</p> <p>Written policy and procedures assure that reproductive health services are available to both male and female minors.</p>	N/A			This section only applies to Type II facilities that held adjudicated minors during the 12 months prior to the date of this inspection.
<p>Reproductive services shall include but not be limited to those prescribed in WIC § 220, 221 and 222, and HSC § 123450.</p>				
<p>1123 HEALTH APPRAISALS/MEDICAL EXAMINATIONS FOR MINORS IN JAILS</p> <p>For minors who are transferred to jails, policy and procedures assure that the health appraisal/medical examination:</p>	N/A			This section only applies to Type II facilities that held adjudicated minors during the 12 months prior to the date of this inspection.
<p>is received from the sending facility;</p>	N/A			
<p>is reviewed by designated health care staff at the receiving facility; and,</p>	N/A			
<p>absent a previous appraisal/examination or receipt of the record, a health appraisal/medical examination, as outlined in Minimum Standards for Juvenile Facilities, Section 1432, is completed on the minor within 96 hours of admission.</p>	X			
<p>1124 PROSTHESES AND ORTHOPEDIC DEVICES</p> <p>There are written policy and procedures regarding the provision, retention and removal of medical and dental prostheses, including eyeglasses and hearing aids.</p>	X			This section only applies to Type II facilities that held adjudicated minors during the 12 months prior to the date of this inspection.
<p>Prostheses are provided when the health of the minor would otherwise be adversely affected, as determined by the responsible physician.</p>	X			
<p>Procedures for the retention and removal of prostheses shall comply with the requirements of Penal Code § 2656.</p>	X			
<p>1125 PSYCHOTROPIC MEDICATIONS</p> <p><i>The impact for Type II facilities is that, in addition to being in compliance with Title 15, Section 1214 (Consent) and Section 1217 (Psychotropic Medications). The following additional policies and procedures must be implemented for juveniles held in custody:</i></p> <p>(a; 4) provision that minors who are on psychotropic medications prescribed in the community are continued on their medications pending re-evaluation and further determination by a physician;</p>	N/A			This section only applies to Type II facilities that held adjudicated minors during the 12 months prior to the date of this inspection.

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
(a; 5) provision that the necessity for continuation on psychotropic medications is addressed in pre-release planning and prior to transfer to another facility or program; and.	X			
(b; 1) minors are informed of the expected benefits, potential side effects and alternatives to psychotropic medications.	X			
Other Applicable Codes	X			
Title 24 Part 2 § 470.2.12 – Medical Exam Room Availability				
In facilities constructed after 2-1-99, a medical examination room is available in every facility that provides on-site health care. Prior to 2-1-99, every Type II and III facility designed to house 25 or more inmates must have a medical exam room. The examination room must:	X			
Be suitably equipped;	X			
Be located within the security area and provide for inmate privacy;	X			
Have at least 100 square feet of floor space with no single dimension less than 7 feet;	X			
Provide hot and cold running water (<i>Note: For facilities constructed after 2-1-99, any rooms where medical procedures are provided must be equipped with hot and cold running water, even though this area may not technically be an "examination room"</i>); and,	X			
Have lockable storage for medical supplies (<i>Applicable to facilities constructed after 2-1-99</i>).	X			
Title 24 Part 2, § 470A.2.13 – Pharmaceutical Storage Space				
There is lockable storage space for medical supplies and pharmaceutical preparation as referenced in Title 15, § 1216.	X			
Title 24 Part 2 § 470A.2.14 – Medical Care Housing				
There is a means to provide medical care and housing to ill and/or infirm inmates. If this housing is located in the jail, it must:	X			
Provide lockable storage space for medical instruments; and,	X			
Be located within the security area of the facility, accessible to both female and male inmates, but not in the living area of either.	X			
If negative pressure isolation rooms are being planned, they are designed to the community standard (<i>Applicable to facilities constructed after 2-1-99</i>).	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
Title 24 Part 2 § 470.2.25- Confidential Interview Rooms				
In facilities constructed after 2-1-99, there must be a minimum of one suitably furnished interview room for confidential interviews in every facility that provides on-site health care. For facilities constructed prior to 2-1-99, every Type II and III facility designed to house 25 or more inmates must have a confidential interview room. The interview room must:	X			
Be suitably equipped;	X			
Be located within the security area accessible to both female and male inmates; and,	X			
Provide no less than 70 square feet of floor space with no single dimension less than 6 feet.	X			
HSC 11222 and 11877 Addicted Arrestee Care				
Where there is reasonable cause to believe an arrestee is addicted to a controlled substance, there is provision for medical aid to relieve symptoms.	X			
In accordance with statute, persons on methadone maintenance are allowed to continue until conviction, at the direction of the licensed methadone program director.	X			
PC 4023.6 Female Inmates' Physician				
Reasonable procedures are established to allow a female prisoner to summon and receive the services of any physician of choice to determine pregnancy.	X			
Procedures allow female inmates to receive needed medical services.	X			
These procedures are posted in at least one conspicuous place in which all female inmates have access.	X			
PC 4023.5 Female Inmate – Personal Care				
At their request, female inmates are allowed to continue use of materials for:	X			
Personal hygiene regarding menstrual cycle; and,	X			
Birth control measures as prescribed by their physician.	X			
The county furnishes females who are confined in the facility with information and education regarding the availability of family planning services.	X			
Family planning services are offered to each female inmate at least 60 days prior to a scheduled release date and services of a licensed physician are available to meet her family planning needs at the time of release.	X			
PC 4028 Abortions				
Pregnant inmates, if eligible, are permitted to obtain an abortion pursuant to law. Such rights are posted in at least one conspicuous place accessed by all female inmates.	X			

Summary of medical/mental health evaluation:

I. "Sick Call" Rooms and Observation Towers in Housing Units

temp.dat

ADULT TYPES MED-MH;2/22/165

MEDICAL/MH PAGE 15

TYPE I, II, III & IV BSCC FORM 358 (Rev. 2008)

Note: Housing Units 1, 2, 4, and 5 were inspected.

- A. All of the First Aid/Blood borne Pathogens Kits were fully stocked according to contents list, properly stored, and checked regularly by staff per inspection log.
- B. "First Responder" bag kits were present and readily accessible in each sick call room. Inspection log had been check and signed by staff monthly. Contents list and checklist is within the bag.
- C. All fire extinguishers were in compliance and checked regularly by GSA staff. Date of last annual OSFM inspection on all fire extinguishers is April 23, 2014.
- D. All of the Emergency Medication Boxes (Red/Orange) on the noted units were appropriately stocked; checklists had been checked monthly and signed by staff. Contents lists and inspection logs, easily found, located outside of boxes, tagged to the handles.
- E. All AEDs were operable and checked daily. Checklist located on the wall next to AEDs; checklist is consistent with regular inspections. All AED pads were within expiration dates.
- F. Ambu-bags were readily accessible. All oxygen tanks were regularly checked per check log and full. Oxygen masks were available in Small, Medium, and Large; located in a bag on the oxygen tank.
- G. All used medications/multi-use vials were clearly labeled with date of opening and were all within 30 days of initial use.
- H. An Escape Breathing Apparatus (EBA) and First Aid Kit are located in each observation tower; on HU 1, 2, and 4 both items are checked at every shift and logged on the Housing Control Equipment Inventory log. On HU 5, the inventory log did not have a place to sign off for the First Aid Kit; also, this same log does not state if EBA was full or not, when checked. All of the housing towers did not have the same Housing Control Equipment Inventory list; there were three different versions of the list.
- I. 2015 Recommendation (First Aid Kits): Make all Housing Control Equipment Inventory checklists the same in all of towers; the list should include First Aid Kit, EBA and if EBA was full (pressure checked at least monthly).

II. Med Floor

- A. Sign above door stated 'Infirmary' but there was no infirmary at this location per staff interview. Also, door to hallway that leads to the RN room and Supply room is labeled Criminal Justice/Mental Health.
- B. 2015 Recommendation: Use proper signage for quick access to supplies in an emergency.

III. Pharmacy

Pharmacist is present during the day, Monday-Friday, and was available for this inspection. Inspection team appreciates pharmacist's time in explaining how the pharmacy is run. Pharmacy has stock medication as well as patient specific meds. Per interview with pharmacist, patient specific meds are ordered from Tennessee and typically arrive by overnight delivery. There is rarely a time when an inmate will go more than 48 hours without prescribed medication; typically will receive dose within 24 hours upon arrival at GDDF. All used supplies/multi-use bottles were clearly labeled with date of opening and were all within 30 days of initial use.

IV. Lab

- A. All used supplies/multi-use bottles were clearly labeled with date of opening and were all within 30 days of initial use.
- B. Contents of drawers and cabinets were clearly labeled on the outside for easy access of items.
- C. Compact refrigerator for medication storage: temperature inspection log is located on top of the refrigerator and consistent with daily temperature checks. Current reading was within recommended parameters.
- D. 2014 Recommendation Implemented (refrigerator unit): Completed. Refrigerator thermometer was moved from refrigerator door to middle shelf of the unit, near the medications.

IV. Supply Room

- A. Well stocked and organized. All supplies were within expiration dates.

**II. ADULT TYPE I, II, III and IV FACILITIES
Local Detention Facility Health Inspection Report
Health and Safety Code Section 101045**

CSA #: _____

FACILITY NAME: Glen E. Dyer Detention Facility		COUNTY: Alameda			
FACILITY ADDRESS (STREET, CITY, ZIP CODE, TELEPHONE): 550 – 6 th Street, Oakland, CA 94607 510-268-7777					
CHECK THE FACILITY TYPE AS DEFINED IN TITLE 15, SECTION 1006:		TYPE I:	TYPE II: XX	TYPE III:	TYPE IV:
ENVIRONMENTAL HEALTH EVALUATION			DATE INSPECTED:		
ENVIRONMENTAL HEALTH EVALUATORS (NAME, TITLE, TELEPHONE):					
FACILITY STAFF INTERVIEWED (NAME, TITLE, TELEPHONE):					
NUTRITIONAL EVALUATION			DATE INSPECTED: March 19, 2015		
NUTRITIONAL EVALUATORS (NAME, TITLE, TELEPHONE): Annette Lavery, MPH, RD Program Specialist 510-595-6446					
FACILITY STAFF INTERVIEWED (NAME, TITLE, TELEPHONE): R.J. White, Deputy Sheriff 510-268-7719 Ian Willis, Sergeant 510-268-7764 Emilia Norris, Glen Dyer Nurse Manager 510-267-7792 Brian Savannah, ARAMARK Manager					
MEDICAL/MENTAL HEALTH EVALUATION			DATE INSPECTED:		
MEDICAL/MENTAL HEALTH EVALUATORS (NAME, TITLE, TELEPHONE):					
FACILITY STAFF INTERVIEWED (NAME, TITLE, TELEPHONE):					

This checklist is to be completed pursuant to the attached instructions.

II. NUTRITIONAL HEALTH EVALUATION
Adult Type I, II, III and IV Facilities

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
Article 12. Food				
1230 Food Handlers <i>(Note: Title 15, § 1230 is in Article 11, MMH, but inspected under Environmental Health due to CalCode reference.)</i> Policy and procedures have been developed and implemented for medical screening of (inmate) food handlers prior to working in the facility. There are procedures for education, supervision and cleanliness of food handlers in accordance with standards set forth in California Retail Food Code (CalCode).				The Environmental Health Inspector retains primary responsibility to determine compliance with Section 1230. Compliance should be assessed in consultation with the Nutrition Inspector so that the findings on the Environmental Health Evaluation reflect the observations, expertise and consensus of both parties. The text of the regulation is provided here for reference only.
1240 Frequency of Serving Food is served three times in any 24-hour period. At least one meal includes hot food.	X			Breakfast is served at approximately 4:15am; "Dinner" is served around 2:30pm; a Lunch bag is provided around 7:30pm.
If more than 14 hours passes between these meals, supplemental food is served.	X			Hot meals are served at the Breakfast and "Dinner" meal times.
Supplemental food is served in less than the 14-hour period for inmates on medical diets, if prescribed by the responsible physician.	X			Inmates on Diabetic Diets and those prescribed High-Calorie Diets continue to receive a snack bag in the mornings, so that it may be consumed in between breakfast (4:15am) and "dinner" (2:30pm) meals.
A minimum of fifteen minutes is allowed for the actual consumption of each meal except for those inmates on therapeutic diets where the responsible physician has prescribed additional time.	X			15 minutes is provided to the inmates for consuming their meals.
Inmates who miss or may miss a regularly scheduled facility meal, are provided with a beverage and a sandwich or a substitute meal.	X			
Inmates on therapeutic diets who miss a regularly scheduled meal, are provided with their prescribed meal.	X			
1241 Minimum Diet <i>(See regulation and guidelines for equivalencies and serving requirements.)</i> The minimum diet in every 24-hour period consists of the full number of servings specified from each of the food groups below. Facilities electing to provide vegetarian diets for any reason also conform to the dietary guidelines.	X			
<u>Protein Group.</u> One serving equals 14 grams or more of protein. The daily requirement is equal to three servings.	X			
There is an additional, fourth serving of legumes three days per week.	X			
<u>Dairy Group.</u> The daily requirement for milk or milk equivalents is three servings, each of which is equivalent to 8 oz. of fluid milk and providing at least 250 mg. of calcium. The requirement for persons who are 15-17 years of age and for pregnant and lactating women is four servings.	X			1 % milk is served.

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
A serving is equivalent to 8 fluid ounces of milk and provides at least 250 mg. of calcium.	X			
All milk is fortified with Vitamin A and D.	X			
Vegetable-Fruit Group. The daily requirement is at least five servings. At least one serving is from each of the following categories.	X			
One serving of a fresh fruit or vegetable.	X			A variety of fruits are now served
One serving of a Vitamin C source containing 30 mg. or more.	X			
One serving of a Vitamin A source containing 200 micrograms Retinol Equivalents (RE) or more.	X			
Grain Group. The daily requirement is at least six servings. At least three servings from this group are made with some whole grain products.	X			
Additional servings from the dairy, vegetable-fruit, and grain groups are provided in amounts to assure caloric supply is at the required levels. (See RDA for recommended caloric intakes.)	X			
Fat is added only in minimum amounts necessary to make the diet palatable. Total dietary fat does not exceed 30 percent of total calories on a weekly basis.	X			
1242 Menus (Applicable in Type II and III facilities and in those Type IV facilities where food is served.)	X			
Menus are planned at least one month in advance of their use. Menus are planned to provide a variety of foods, thus preventing repetitive meals.	X			
A registered dietitian approves menus before they are used.	X			Menus are planned by the offsite ARAMARK food company dietitian, contracted by the Santa Rita jail facility.
If any meal served varies from the planned menu, the change is noted in writing on the menu and/or production sheet.	X			
A registered dietitian evaluates menus, as planned and including changes, at least annually.	X			The ARAMARK diet manual was updated and signed by facility staff.
1243 Food Service Plan				
There is a food services plan that complies with applicable CalCode. Facilities with an average daily population of 100 or more have a trained and experienced food service manager to prepare and implement a food services plan that includes:	X			The Nutrition Health Inspector retains primary responsibility to determine compliance with Section 1243. Compliance should be assessed in consultation with the Environmental Health Inspector so that the findings on the Nutritional Health Evaluation reflect the observations, expertise and consensus of both parties.
Planning menus;	X			ARAMARK food service plans the menus.
Purchasing food;	X			ARAMARK food service purchases foods for this facility.
Storage and inventory control;	X			
Food preparation;	X			ARAMARK food service prepares food at an offsite facility.
Food serving;	X			
Transporting food;	X			
Orientation and ongoing training;	X			Facility inmate staff is trained using a "Do/Don't" checklist. Inmate workers participating in trainings are required to sign a form acknowledging their understanding of the checklist.
Personnel supervision;	X			
Budgets and food cost accounting;	X			
Documentation and record keeping;	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
Emergency feeding plan;	X			An emergency feeding plan is in place and readily available should it be needed. Emergency food and water for staff and inmates is stored on site to sustain a minimum of three days, should an emergency arise.
Waste management; and, Maintenance and repair.	X			GSA repairs and maintains records of equipment and repair.
In facilities of less than 100 average daily population that do not employ or have access to a food services manager, the facility administrator has prepared a food services plan that addresses the applicable elements listed above.			X	
1245 Kitchen Facilities, Sanitation and Food Service Kitchen facilities, sanitation, and food preparation, service and storage comply with standards set forth in CalCode. In facilities where inmates prepare meals for self-consumption, or where frozen meals or prepared food from other facilities permitted pursuant to CalCode is (re)heated and served, the following CalCode standards may be waived by the local health officer. <i>(Note: while the regulation uses the word "waived," the intent is that the inspector exercises professional latitude to approve alternative methods that that provide for food safety and sanitation in these situations.)</i> CalCode requirements for new or replacement equipment. CalCode requirements for cleaning and sanitizing consumer utensils. CalCode§ 114149-114149.3, except that, regardless of such a waiver, the facility shall provide mechanical ventilation sufficient to remove gases, odors, steam, heat, grease, vapors and smoke from the kitchen. CalCode requirements for floors. CalCode requirements for storage area(s) for cleaning equipment and supplies.	Do not identify compliance with this regulation here. See comments.			The Environmental Health Inspector retains primary responsibility to determine compliance with Section 1245. Compliance should be assessed in consultation with the Nutrition Inspector so that the findings on the Environmental Health Evaluation reflect the observations, expertise and consensus of both parties. The text of the regulation is provided here for reference only.
1246 Food Serving and Supervision Policies and procedures ensure that work assignments are appropriate and food handlers are adequately supervised. Food is prepared and served only under the immediate supervision of a staff member.	Do not identify compliance with this regulation here. See comments.			The Environmental Health Inspector retains primary responsibility to determine compliance with Section 1230. Compliance should be assessed in consultation with the Nutrition Inspector so that the findings on the Environmental Health Evaluation reflect the observations, expertise and consensus of both parties. The text of the regulation is provided here for reference only.
1247 Disciplinary Isolation Diet No inmate receiving a prescribed medical diet is placed on a disciplinary isolation diet without review by the responsible physician or pursuant to a plan approved by the physician.	X			

ARTICLE/SECTION	YES	NO	N/A	COMMENTS
The disciplinary isolation diet is an exception to the three-meal-a-day standard and is served twice in each 24-hour period.				
Each serving consists of one-half of the loaf (or a minimum of 19 ounces cooked loaf) described in the regulation or, if approved by the Corrections Standards Authority, another equally nutritious diet. Additionally the inmate receives two slices of whole wheat bread and at least one quart of drinking water, if the cell does not have a water supply.	X			
1248 Medical Diets				100% of audited charts had an MD diet order.
Policies identify who is authorized to prescribe medical diets.	X			
Therapeutic diets utilized by a facility are planned, prepared and served with consultation from a registered dietitian.	X			
The facility manager complies with providing any medical diet prescribed for an inmate.	X			Based on a sample of audited charts, 100% of inmates on special diets are provided with their prescribed diet.
There is a medical diet manual that includes sample menus. It is available to in-facility medical personnel and food service staff for reference and information.	X			
A registered dietitian reviews, and the responsible physician approves, the diet manual on an annual basis.	X			A current credential was observed. Responsible staff signed off on the diet manual within the past year.
Pregnant women are provided a balanced, nutritious diet approved by a doctor.			X	Women are not incarcerated at this facility.

Summary of nutritional evaluation:

2014 Recommendations: (3)

- I. Insure each meal contains the minimum amount of protein (14 grams), according to Title 15 Section 1241 Minimum Diet (*now in compliance*)
- II. Increase variety of fruits and vegetables offered at meal times and snacks (*now in compliance*)
- III. Provide more healthy vending items in food vending machines and provide water in beverage vending machines (*partial compliance*)

2015 Inspection:

This inspection reviewed the nutritional health of inmates at Glen Dyer jail, which houses County and U.S. Marshall inmates. There is capacity for housing approximately 820 inmates on the six floors at this facility. Approximately 400 inmates were housed at the time of inspection. Average stay varies between several days to several years.

Food Service

ARAMARK continues to manage the food service operations off-site, ordering food, performing administrative duties, and documenting activities during food production at the Santa Rita Jail central kitchen. Alameda County staff supervises and develops policies and procedures. Deputies in the kitchen and inmate units were well versed on food service policies and procedures.

All deputies who work in the kitchen and inmate units were well informed of inmates on therapeutic diets, and there was a hard copy list hanging in each unit of all inmates housed in that unit who were on a therapeutic diet. These lists matched the computer diet orders. Most of the meals and carts were labeled, and there was evidence of rotation of food to prevent spoilage, reducing food safety issues.

Diabetic inmates continue to receive their snack bags in the morning along with their breakfast trays. This was an important and recommended policy change in 2013 and it continues to be in place.

A taste test of a sample lunch was conducted. The protein amount provided in the sample meal was sufficient for meeting Title 15 standards, unlike last year. This, along with observation of meal racks stored in the refrigerator, demonstrates an improvement in the consistency of the portion servings served on the Santa Rita Jail food service trayline.

Based on the taste test of a sample meal conducted by the inspection team, the inmate meal was generally acceptable. The foods tasted included: au gratin potatoes, mixed vegetables (green beans and carrots), shredded cabbage, corn bread and cake. The appearance and palatability was "OK". The au gratin potatoes were difficult to identify, starchy, and lacked seasoning. The cooked vegetables were soft (i.e. over cooked and dull in color); cabbage was crisp and appeared fresh. The texture and flavor of the corn bread and cake was described as "excellent".

The meal as a whole met standards for serving size and balance. It is suggested that the au gratin potato entrée be revised to improve its appearance and palatability, as this is the second year the entrée was tested and both years it was subpar. The hot tray itself looked dirty with old plastic wrap stuck to the top. This was not appealing to eat from, as burned food grime on the tray took one's appetite away. It is suggested that periodically the trays be scraped and stains cleaned.

A variety of fruit is now provided. Rather than just fresh oranges being served every single day there are now other fruits served during the week, based on seasonality and price.

Medical

Eighty-three (83) inmates were recorded as needing a special diet at the time of inspection. The majority of special diets prescribed are "lowfat/cholesterol/salt" (35), allergy/intolerance diets (19), vegetarian (14), and diabetic (9).

Twenty (20) inmate medical charts were reviewed. These charts were organized and in excellent order. Of the charts reviewed that required dietary restrictions:

- 100% of audited charts had a MD diet order matching the special needs of the inmate;
- 100% of audited charts had a diet slip indicating the correct prescribed diet was ordered by the nurse and submitted to food service;
- 100% of special diet orders indicated on the food service computerized list of diets matched the respective diets prescribed.

This finding is to be commended! It is extremely rare that special dietary prescription follow through is so accurate!

It was noted that snack vending machines were removed from the inmate units. Beverage machines were available; however, the content needs to change to comply with the Nutrition and Physical Activity Policy and Guidelines passed by the Board of Supervisors in October 2009. Currently, water is the only healthy option available from which to choose in some machines. According to policy, 50% of available beverages in vending machines serviced on County-owned and leased property need to meet the healthy criteria.

2015 Recommendation

No recommendations. The facility is in compliance with Title 15 standards.

2015 Suggestions: (1)

I. Provide more healthy vending beverages in beverage vending machines (2014, 2103, 2012)

Per Alameda County Nutrition and Physical Activity Policy and Guidelines passed by the Board of Supervisors in October 2009, at least 50% of vending items served in the vending machines (snack and beverage) need to meet the following nutrition standards:

Healthy Option Criteria for Snacks:

- a. Have no more than 35% of its calories from total fat (not including nuts & seeds);
- b. Have no more than 10% of its calories from saturated fat.
- c. Have no more than 35% sugar by weight (not including fruits or vegetables).

Healthy Option Criteria for beverages:

- a. No high fructose corn syrup
- b. No more than 12 fluid ounces or more than 200 total calories
- c. At least 40% of all beverages must be non-carbonated
- d. Water and other non-caloric beverages containing neither nutritive or non-nutritive sweeteners
- e. Carbonated or non-carbonated fruit juice beverages containing at least 50% fruit juice, neither nutritive or non-nutritive sweeteners
- f. Beverages with added nutritive sweeteners containing more than 50 calories per 8 ounces, 75 calories per 12 ounces, or 100 total calories per container.

Any questions regarding the Nutritional Health Evaluation can be directed to Annette Lavery, MPH, RD at Alameda County Public Health Department, 510-595-6446 or Annette.Lavery@acgov.org.

