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# County of Los Angeles CHIEF EXECUTIVE OFFICE

Kenneth Hahn Hall of Administration  
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SACHI A. HAMAI  
Chief Executive Officer

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Fifth District

May 2, 2019

To: Supervisor Janice Hahn, Chair  
Supervisor Hilda L. Solis  
Supervisor Mark Ridley-Thomas  
Supervisor Sheila Kuehl  
Supervisor Kathryn Barger

From: Sachi A. Hamai  
Chief Executive Officer

## **GENDER RESPONSIVE JUSTICE SYSTEM: STATUS UPDATE ON RE-ESTABLISHING THE GENDER RESPONSIVE ADVISORY COMMITTEE (ITEM NO. 9, AGENDA OF FEBRUARY 12, 2019)**

On February 12, 2019, a motion by Supervisors Kuehl and Ridley-Thomas instructed the Chief Executive Officer (CEO), Sheriff, and County Counsel to reconstitute the Gender Responsive Advisory Committee (GRAC) to include County departments, community advocates, and service providers whose services could assist women impacted by the criminal justice system. The Board motion also directed the CEO to engage a consultant(s) to assist with the development and implementation of gender responsive programming within the Sheriff's existing Century Regional Detention Facility (CRDF) and for the design of a new women's detention facility.

This is the first quarterly status report on the re-establishment of the GRAC.

### **Gender Executive Steering Committee**

The CEO, Sheriff, and County Counsel have established an Executive Steering Committee (ESC) for the GRAC with representatives from the Women and Girls Initiative, Sheriff's Custody Division, CEO Public Safety, CEO Capital Projects, and County Counsel. This initial ESC team has been convening to develop a roadmap that is responsive to the Board's current directives. The ESC roadmap is comprised of four objectives:

- 1) Define the GRAC's role within the criminal justice system in accordance with the Board's direction;

- 2) Reconstitute the GRAC membership to effect its new role;
- 3) Work with the Sheriff to appoint a Director of Gender Responsive Services within the Sheriff's Department; and
- 4) Hire an expert consultant(s) to oversee, advise and assist with the design, placement, programming and implementation of a new gender-responsive system in the new women's detention facility, and to oversee design and implementation of gender responsive programming within CRDF including an assessment of required maintenance, upgrades and/or modifications.

We envision the role and composition of the ESC will evolve over time. Once the Director of Gender Responsive Services has been hired and the GRAC has been reconstituted and is operational, the ESC will transition from organizational development to the role of providing guidance and establishing the GRAC priorities. Upon such time, the ESC would include members elected from among the GRAC.

#### The GRAC's Role in the Criminal Justice System

In 2015, the Board established the GRAC to focus on the proposed new women's jail at Mira Loma. Specifically, the design of evidence-based in-custody programming, mitigating obstacles to family visitation due to travel distance and incorporating national best practices for family reunification.

On February 12, 2019, the Board made the decision to cancel the women's jail project at Mira Loma, consider housing development options (affordable housing, permanent supportive housing, interim housing, etc.) for that location, and to reevaluate the location(s) and scope of a new women's jail(s). In addition to the responsibility of providing input to the program design of a new women's jail, the Board expanded the GRAC's responsibility to the development/expansion and implementation of evidence-based gender responsive programs in CRDF.

The ESC understands the Board's intent is to transform the custody environment with resources and services that facilitate the effective rehabilitation and reentry of women from jail back to their communities and family. However, in-custody programs at CRDF and the new jail are just one component within the criminal justice system. Within this context, the ESC is evaluating how the GRAC can take a holistic approach to implementing gender responsive and trauma-informed services that encompasses law enforcement point-of-contact, arrest, booking, alternatives to custody, in-custody programming, discharge planning, criminal court proceedings, and the rehabilitative, legal, and treatment service coordination while in custody and post-release. These various touch points within the criminal justice system are interrelated and effective change cannot happen in isolation. The ESC's objective is to define the GRAC's scope of responsibility. The ESC will also assist in the development of a mechanism for

communication with the Sheriff's Department both prior to and after the appointment of the Director of Gender Responsive Services.

#### Reconstituting the GRAC

In addition to the Sheriff, District Attorney, Public Defender, Alternate Public Defender, Probation Department, Department of Mental Health, and the Office of Diversion and Reentry, the Board motion identified County departments not traditionally associated with the criminal justice system, but whose services should be incorporated into jail discharge planning such as the Departments of Public Health, Children and Family Services, Public Social Services, and Workforce Development, Aging and Community Services. The re-established GRAC will also include representatives from the Board, community advocates and service providers. The ESC is developing an organizational structure that aligns with the GRAC's scope of responsibility and provides a decision-making process to ensure a balance between County departments and input from community advocates and service providers. We anticipate completing this task by the next quarterly report.

Meanwhile, the ESC is working to identify executives to represent the County departments at the GRAC and provide the authority to effect change.

#### Hiring of a Director of Gender Responsive Services

The Sheriff has submitted a budget proposal for the Director of Gender Responsive Services and staff, to be located within the Sheriff's Custody Division. CEO is currently reviewing the budget proposal and anticipates submitting a recommendation to the Board during the Final Changes Budget.

The Sheriff will be working with the Department of Human Resources to conduct a national search for the Director of Gender Responsive Services. This process will be comparable to the executive search conducted for the Sheriff's Prisoner Rape Elimination Act Director, which took approximately six months to complete.

#### Hiring a Consultant for Gender Responsive Program Analysis and Implementation

The ESC is developing a scope of work for the gender responsive consultant(s) and is exploring with County Counsel contracting options for hiring the consultant(s), including but not limited to, using the CEO's Delegated Authority. We anticipate that a scope of work and contracting mechanism will be identified by the next quarterly report that will be submitted on July 12, 2019.

Each Supervisor  
May 2, 2019  
Page 4

If you have any questions, please contact David Turla of my office at (213) 974-1178 or Abbe Land, Executive Director, Women and Girls Initiative at (213) 974-4532.

SAH:JJ:MM  
SW:RP:DT:cg

c: Executive Office, Board of Supervisors  
County Counsel  
District Attorney  
Sheriff  
Alternate Public Defender  
Health Agency  
Health Services (Office of Diversion and Re-Entry)  
Mental Health  
Probation  
Public Defender  
Public Health  
Public Social Services  
Workforce Development, Aging and Community Services



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Fifth District

July 17, 2019

To: Supervisor Janice Hahn, Chair  
Supervisor Hilda L. Solis  
Supervisor Mark Ridley-Thomas  
Supervisor Sheila Kuehl  
Supervisor Kathryn Barger

From: Sachi A. Hamai  
Chief Executive Officer

**GENDER RESPONSIVE JUSTICE SYSTEM: SECOND STATUS UPDATE ON RE-ESTABLISHING THE GENDER RESPONSIVE ADVISORY COMMITTEE (GRAC) (ITEM NO. 9, AGENDA OF FEBRUARY 12, 2019)**

On February 12, 2019, the Board of Supervisors (Board) directed the Chief Executive Officer (CEO), in consultation with the Sheriff, and County Counsel, to reconstitute the GRAC to include County departments whose services could assist women impacted by the criminal justice system, community advocates, and service providers. The Board motion also directed the CEO to engage a consultant(s) to assist with the development and implementation of gender responsive programming within the Sheriff's existing Century Regional Detention Facility and for the design of a new women's detention facility(ies).

The attached second quarterly status report is focused on the re-establishment of the GRAC.

The next quarterly Gender Responsive Justice System report will be submitted on October 18, 2019.

Each Supervisor  
July 16, 2019  
Page 2

If you have any questions, please contact David Turla at (213) 974-1178 or at [dturla@ceo.lacounty.gov](mailto:dturla@ceo.lacounty.gov), or Abbe Land at (213) 974-4532 or at [aland@ceo.lacounty.gov](mailto:aland@ceo.lacounty.gov).

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Attachment

c: Executive Office, Board of Supervisors  
County Counsel  
Sheriff  
Alternate Public Defender  
Children and Family Services  
Health Agency  
Health Services  
Mental Health  
Office of Diversion and Re-entry  
Public Health  
Public Social Services  
Workforce Development, Aging and Community Services

**GENDER RESPONSIVE JUSTICE SYSTEM  
SECOND STATUS REPORT ON RE-ESTABLISHING THE  
GENDER RESPONSIVE ADVISORY COMMITTEE  
(JULY 17, 2019)**

**From Roadmap to an Implementation Plan**

The GRAC Executive Steering Committee (ESC), comprised of representatives from the Women's and Girls Initiative, Sheriff Custody, CEO Public Safety, CEO Capital Projects, and County Counsel, have continued to meet to transform the previously reported roadmap into an actual implementation plan. Unless otherwise directed by the Board, the ESC recommends the following GRAC organizational structure and next steps.

GRAC Organizational Structure and Community Stakeholder Representation

The ESC recommends the GRAC's organizational structure be reconstituted as follows:

- The GRAC will continue to serve an advisory role within the County's criminal justice system to facilitate public meetings, initiate research, identify best practices, and make recommendations to the Board to improve gender responsiveness and affirming programming within the County's jail system. In addition to topic-specific reports, the GRAC will be required to provide the Board with biannual reports of its activities.
- The GRAC will be comprised of eleven voting members: five Board-appointed community stakeholder representatives and six County departments consisting of the Sheriff, District Attorney, Public Defender, Health Services (including Correctional Health and the Office of Diversion & Reentry), Mental Health, and Public Health who will each appoint a representative. In addition, the Board and departments will each appoint an alternate member to ensure their respective representation at meetings.
- The Sheriff's Director of Gender Responsive Services (Director) and the Executive Director of the Women's and Girls Initiative (WGI) will be non-voting GRAC Co-Chairs responsible for facilitating meetings and providing insight and input to GRAC discussions but neither will not have the authority to reject any proposals; whereby, only the aforementioned voting members can take action on GRAC matters.
- The Director will also provide administrative staff support to the GRAC, such as preparing the agenda, minutes, meeting logistics, GRAC reports, etc. In addition, the Director will be responsible for implementing Board-Sheriff approved recommendations. Given the administrative support provided by the Director, the GRAC requires no additional officers.
- Finally, the GRAC will be supported by representatives from the various County departments that impact the lives of incarcerated women, as needed.



The ESC has drafted proposed bylaws consistent with the above to provide the GRAC added support to help commence its responsibilities immediately. These proposed bylaws will require adoption by the GRAC.

### GRAC Knowledgebase

The ESC identified establishing a foundational knowledgebase and an operational framework for GRAC members as a critical factor in their success. GRAC members need to be cognizant of the complex ecosystem created within the criminal justice system, custody operations, correctional health systems, and gender responsive programs and services; whereupon, a change in one process may have unintended consequences in another seemingly unrelated area.

Upon appointment, each GRAC member will be given the bylaws and a GRAC Member Handbook which includes:

- A summary of current inmate programs and services.
- A summary of prior consultant reports, findings, recommendations, and implementation status.
- A sample inventory of gender-related issues within custody facilities, including programs, services, and facility physical design.
- An overview of the criminal justice system, from arrest, legal proceedings, custody, through to reentry; and
- An overview of Sheriff Custody operations and population statistics. GRAC members will also be required to tour, at a minimum, the Century Regional Detention Facility (CRDF), Men's Central Jail, and Twin Towers within the first 90 days following appointment so they have a practical appreciation of custody operations and inmate conditions.

The first two GRAC meetings will be educational sessions focused on the aforementioned areas. During the third meeting, the Co-Chairs will facilitate the adoption of the bylaws and commence regular business, including identifying and setting priorities. The purpose of conducting the first two kick-off meetings as educational sessions is to ensure all GRAC members have the necessary 1) foundational knowledgebase of gender issues in a custody setting, 2) understanding of their scope of responsibility in order to make an informed decision when adopting the governing bylaws, and 3) background on current custody programs and services and prior reform efforts/consultant recommendations to assist in formulating the GRAC's priorities.

Going forward, we envision the Director will be responsible for providing newly appointed GRAC members with an up-to-date handbook and educational sessions to establish the core knowledge base and to bring them up-to-speed with current GRAC efforts. Finally, the ESC recommends the GRAC include an educational topic as a set item on its regular public meeting agenda and an annual one-day retreat to identify priorities for the year.

### **Hiring of a Director of Gender Responsive Services**

As part of the Fiscal Year 2019-20 Adopted Budget, the Board approved \$516,000 to fund the Director of Gender Responsive Services and staff. The Sheriff and the Department

of Human Resources have commenced the process to conduct a national search for the Director.

### **Hiring a Consultant for Gender Responsive Program Analysis and Implementation**

The ESC is developing the scope of work for the CEO-contracted gender responsive consultant(s) and is exploring with County Counsel contracting options for hiring the consultant(s).

A consultant will be hired to conduct an assessment of current custody gender operations identify best practices, and review recommendations from prior consultant studies. The consultant's first deliverable will be to provide the GRAC with a prioritized framework of gender responsive issues within CRDF, such as in-custody gender program and service models, staff training, intake/discharge needs assessments, etc. For the duration of the contract, the consultant will provide the GRAC and the Director with technical assistance.

A consultant(s) will also be hired to work with CEO Capital Projects and the GRAC on gender issues requiring facility/infrastructure improvements, upgrades, modifications at CRDF, and the design of the new women's detention facility(ies).

#### **Implementation Milestones**

The following outlines the tentative target implementation milestones to reconstitute the GRAC, subject to hiring of the consultant:

- August 2019:
  - The Board formally appoints the community stakeholders who will be their GRAC Member and GRAC Alternate Member.
  - CEO hire a consultant to conduct an operations assessment and provide recommendations for a GRAC operational framework. The consultant will provide their findings as part of the second GRAC educational meeting.
- October 10, 2019: Co-Chairs will facilitate the first of two educational sessions. This meeting will be focused on the GRAC's roles and responsibilities (bylaws) and the intersection between criminal justice and gender issues.
- November 14, 2019: Co-Chairs will facilitate the second GRAC educational meeting focused on recommendations and outcomes of prior consultant reports, prior reform efforts, and current programs, services, and facility conditions.
- December 12, 2019: Co-Chairs will facilitate the adoption of the GRAC bylaws, begin identifying priorities, and commence regular business.



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KATHRYN BARGER  
Fifth District

October 23, 2019

To: Supervisor Janice Hahn, Chair  
Supervisor Hilda L. Solis  
Supervisor Mark Ridley-Thomas  
Supervisor Sheila Kuehl  
Supervisor Kathryn Barger

From: Sachi A. Hamai  
Chief Executive Officer

**GENDER RESPONSIVE JUSTICE SYSTEM: THIRD STATUS UPDATE ON RE-ESTABLISHING THE GENDER RESPONSIVE ADVISORY COMMITTEE (GRAC) (ITEM NO. 9, AGENDA OF FEBRUARY 12, 2019)**

On February 12, 2019, the Board of Supervisors (Board) directed the Chief Executive Officer (CEO), in consultation with the Sheriff, and County Counsel, to reconstitute the GRAC to include County departments whose services could assist women impacted by the criminal justice system, community advocates, and service providers. The Board motion also directed the CEO to engage consultants to assist with the development and implementation of gender responsive programming within the Sheriff's existing Century Regional Detention Facility and for the design of a new women's detention facility.

The attached third quarterly status report provides our progress in re-establishing the GRAC.

The next quarterly Gender Responsive Justice System report will be submitted on January 17, 2020.

Each Supervisor  
October 23, 2019  
Page 2

If you have any questions, please contact David Turla at (213) 974-1178 or at [dturla@ceo.lacounty.gov](mailto:dturla@ceo.lacounty.gov), or Abbe Land at (213) 974-4532 or at [aland@ceo.lacounty.gov](mailto:aland@ceo.lacounty.gov).

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#### Attachment

c: Executive Office, Board of Supervisors  
County Counsel  
Sheriff  
Alternate Public Defender  
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Civilian Oversight Commission  
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Health Services  
Mental Health  
Office of Diversion and Re-entry  
Office of Inspector General  
Public Health  
Public Social Services  
Workforce Development, Aging and Community Services

**GENDER RESPONSIVE JUSTICE SYSTEM  
THIRD STATUS REPORT ON RE-ESTABLISHING THE  
GENDER RESPONSIVE ADVISORY COMMITTEE  
(OCTOBER 18, 2019)**

The GRAC Executive Steering Committee (ESC), comprised of representatives from the Women's and Girls Initiative, Sheriff Custody, CEO Public Safety, CEO Capital Projects, and County Counsel have continued to meet and prepare for the introductory meetings of the newly re-established GRAC.

Ramping-Up for Rollout

On October 15, 2019, the Board formally appointed their respective representatives to the GRAC:

- Ivette Alé and Ricca Prasad (Alternate), by Supervisor Solis
- Eunisses Hernandez and Ingrid Archie (Alternate), by Supervisor Ridley-Thomas
- Norma Cumpian and Heidi De Leon (Alternate), by Supervisor Kuehl
- Kelly Logan, by Supervisor Hahn
- Margarita Thorpe and Kevin Kuykendall (Alternate), by Supervisor Barger

The Sheriff, District Attorney, Public Defender, Department of Health Services (including Correctional Health and the Office of Diversion & Reentry), Department of Mental Health, and Department of Public Health have also appointed their representatives. The Sheriff has also hired a Director of Gender Services (Director) who will provide administrative support to the GRAC.

As previously reported, the first two monthly meetings of the GRAC will be educational forums to provide them with a foundational knowledge base of the criminal justice system, custody operations, correctional health systems, and an understanding of gender responsive concepts, programs, and services. To facilitate the educational process, the GRAC members will receive a comprehensive Resource Guide that will include the draft by-laws, an overview of the criminal justice system and custody operations, population statistics, previous consultant reports and recommendations, an inventory of current programs and services, and gender and justice literature and research. In addition, the GRAC will take tours of the Century Regional Detention Facility (CRDF), Men's Central Jail, and Twin Towers so they have a practical appreciation of custody operations and inmate conditions.

The CEO has hired The Moss Group (Moss) as the gender responsive consultant for CRDF. Moss will begin reviewing prior consultant studies, assessing current custody operations, policies, procedures, and training, inmate programs and services, facility capacity and design, and identify best practices. They will also conduct stakeholder interviews and meetings, including a brainstorming session during the GRAC's public meeting in December. Moss will be responsible for providing a prioritized framework of gender responsive issues (due March 2020) and a corresponding strategic

implementation plan (due July 2020) for the GRAC's consideration, discussion, and adoption. The GRAC would then submit their reform recommendations to the Board that will also require consent from the Sheriff prior to implementation. Building upon the CRDF consultant's work, the CEO will engage a consultant in a similar process to assist in the design of the new women's detention facility(ies).

Finally, the ESC recommends the GRAC to elect their Chair and Vice-Chair from among the appointed GRAC members and the draft bylaws have been revised accordingly.

#### **Implementation Milestones (updated)**

The following outlines the tentative target implementation milestones to reconstitute the GRAC:

- ✓ October 2019:
  - ✓ The Board formally appoints the community stakeholders who will be their GRAC Member and GRAC Alternate Member. Departments appoint their representatives.
  - ✓ CEO hired a consultant to conduct an operations assessment and provide recommendations for a GRAC operational framework and strategic implementation plan.
- November 14, 2019: First of two educational sessions. This meeting will be focused on the GRAC's roles and responsibilities (bylaws) and the intersection between criminal justice and gender issues.
- December 16, 2019: Second GRAC educational meeting focused on recommendations and outcomes of prior consultant reports, prior reform efforts, and current programs, services, and facility conditions. Moss will conduct a brainstorming session.
- January 9, 2020: GRAC will consider adoption of the proposed bylaws, conduct elections for Chair and Vice-Chair, and commence regular business.
- March 2020: Consultant to present a proposed Priorities Framework for GRAC consideration and adoption.
- July 2020: Consultant to present a proposed Strategic Implementation Plan for GRAC consideration and adoption.



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Fifth District

January 22, 2020

To: Supervisor Kathryn Barger, Chair  
Supervisor Hilda L. Solis  
Supervisor Mark Ridley-Thomas  
Supervisor Sheila Kuehl  
Supervisor Janice Hahn

From: Sachi A. Hamai   
Chief Executive Officer

## **GENDER RESPONSIVE JUSTICE SYSTEM: FOURTH STATUS UPDATE ON RE-ESTABLISHING THE GENDER RESPONSIVE ADVISORY COMMITTEE (GRAC) (ITEM NO. 9, AGENDA OF FEBRUARY 12, 2019)**

On February 12, 2019, the Board of Supervisors (Board) directed the Chief Executive Officer (CEO), in consultation with the Sheriff and County Counsel, to reconstitute the GRAC to include affected County departments, community advocates, and service providers. The Board motion also directed the CEO, to engage a consultant(s) to assist with the development and implementation of gender responsive programming within the Sheriff's existing Century Regional Detention Facility (CRDF) and for the design of a new women's detention facility(ies).

The CEO's final quarterly status report reflecting the re-establishment of the GRAC is attached. The GRAC's next monthly meeting is scheduled for February 13, 2020. The agenda will be dedicated to the discussion and adoption of the GRAC's bylaws and election of a Chair and Vice-Chair. Thereafter, the GRAC will have the responsibility for reporting its findings and recommendations directly to the Board.

The consultant is currently developing the CRDF priorities framework for the GRAC that involves onsite stakeholder interviews and facility assessments. The priorities framework will be discussed for adoption during the GRAC's March 2020 meeting. The consultant's strategic implementation plan report will be submitted to the GRAC in July 2020.

Each Supervisor  
January 22, 2020  
Page 2

If you have any questions, please let me know or your staff may contact David Turla at (213) 974-1178 or at [dturla@ceo.lacounty.gov](mailto:dturla@ceo.lacounty.gov), or Abbe Land at (213) 974-4532 or at [aland@ceo.lacounty.gov](mailto:aland@ceo.lacounty.gov).

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Health Services  
Mental Health  
Office of Diversion and Re-entry  
Office of Inspector General  
Public Health  
Public Social Services  
Workforce Development, Aging and Community Services



**GENDER RESPONSIVE JUSTICE SYSTEM  
FOURTH STATUS REPORT ON RE-ESTABLISHING THE  
GENDER RESPONSIVE ADVISORY COMMITTEE (GRAC)  
(JANUARY 17, 2020)**

The GRAC Executive Steering Committee, comprised of representatives from the Women's and Girls Initiative (WGI), Sheriff Custody, CEO Public Safety, CEO Capital Projects, and County Counsel have continued to meet and prepare for the introductory meetings of the newly re-established GRAC.

Rollout

On November 14, 2019, the GRAC convened its inaugural meeting at the Workforce Development, Aging and Community Services' (WDACS), East Los Angeles Service Center. Abbe Land, Executive Director of the WGI, and Melissa Kelley, the newly appointed Sheriff's Director of Gender Services, facilitated the meeting. Assistant Sheriff, Robert Olmsted provided introductory welcome remarks. The agenda was focused on providing the GRAC with an overview of their role and responsibilities and the intersection between criminal justice and gender issues. County Counsel also provided Brown Act training.

The second GRAC meeting was held on December 16, 2019, at the same location. Directors Land and Kelley facilitated the meeting. The Moss Group (Moss) provided a presentation and conducted a brainstorming session on gender issues, needs, concerns, and ideas to inform their development of a Priorities Framework that will be presented and discussed at the GRAC's March meeting.

The next GRAC meeting is scheduled for February 13, 2020. Directors Land and Kelley will facilitate the discussion and adoption of the GRAC bylaws and the election of the GRAC Chair and Vice-Chair from among the appointed GRAC members. Since the GRAC will have then become fully functional with elected leaders, the GRAC Executive Steering Committee will have concluded its work and disband.

In addition, Director Kelley is scheduling the tours of the Century Regional Detention Facility (CRDF), Men's Central Jail, and Twin Towers so the GRAC Members and Alternate Members have a practical appreciation of custody operations and inmate conditions.

With regard to the CRDF consultant study, Moss has reviewed prior consultant studies and is currently assessing custody operations, policies, procedures, and training, inmate programs and services, facility capacity and design, and identifying best practices. Onsite interviews, focus groups, and facility walk-throughs were conducted in December 2019 and additional sessions will be conducted in January and February 2020. As previously reported, Moss will be responsible for providing a prioritized framework of gender responsive issues (due March 2020) and a corresponding strategic implementation plan (due July 2020) for the GRAC's consideration, discussion, and adoption. The GRAC

would then submit their reform recommendations to the Board. The Sheriff's consent will be required prior to implementation of any reforms. Building upon the CRDF consultant work, the CEO will engage a consultant in a similar process to assist in the design of the new women's detention facility(ies).

### **Implementation Milestones** (updated)

The following outlines the tentative target implementation milestones to reconstitute the GRAC:

- ✓ October 2019:
  - ✓ The Board formally appoints the community stakeholders who will be their GRAC Member and GRAC Alternate Member. Departments appoint their representatives.
  - ✓ CEO hires a consultant to conduct an operations assessment and provide recommendations for a GRAC operational framework and strategic implementation plan.
- ✓ November 14, 2019: First of two educational sessions. This meeting will be focused on the GRAC's roles and responsibilities (bylaws) and the intersection between criminal justice and gender issues.
- ✓ December 16, 2019: Second GRAC educational meeting focused on recommendations and outcomes of prior consultant reports, prior reform efforts, and current programs, services, and facility conditions. Moss will conduct a brainstorming session.
- ✓ January 9, 2020: Cancelled due to proximity to holidays.
- February 13, 2020: GRAC will consider adoption of the proposed bylaws, conduct elections for Chair and Vice-Chair, and commence regular business.
- March 2020: Consultant to present a proposed Priorities Framework for GRAC consideration and adoption.
- July 2020: Consultant to present a proposed Strategic Implementation Plan for GRAC consideration and adoption.



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August 28, 2020

To: Supervisor Kathryn Barger, Chair  
Supervisor Hilda L. Solis  
Supervisor Mark Ridley-Thomas  
Supervisor Sheila Kuehl  
Supervisor Janice Hahn

From: Sachi A. Hamai  
Chief Executive Officer

## **GENDER RESPONSIVE JUSTICE SYSTEM: CONSULTANT RECOMMENDATIONS FOR A PRIORITIES FRAMEWORK AND STRATEGIC IMPLEMENTATION PLAN AT THE CENTURY REGIONAL DETENTION FACILITY (ITEM NO. 9, AGENDA OF FEBRUARY 12, 2019)**

On February 12, 2019, the Board of Supervisors (Board) directed the Chief Executive Office (CEO) to engage a consultant to assist with the development and implementation of gender responsive programming within the Century Regional Detention Facility (CRDF).

The Moss Group (TMG) performed a gender responsive assessment of CRDF, including onsite assessments, interviews, and focus groups with women and LGBTQ+ people in custody, sworn and non-sworn staff, and community stakeholders and providers. In addition, TMG reviewed the Sheriff's Department (Sheriff) policies and practices, analyzed available data, assessed intersections with the Alternatives to Incarceration (ATI) recommendations, and researched national best practices. As TMG was preparing to conclude their assessment, the "Safer at Home" restrictions were implemented in response to the COVID-19 pandemic. Despite logistical challenges, TMG was able to engage the Gender Responsive Advisory Committee (GRAC) in a series of virtual meetings in June and July that were critical in framing their findings and recommendations. During these in-depth discussions it was acknowledged that although the assessment was conducted prior to COVID-19's impact on the jail system, TMG's gender responsive reform recommendations remains relevant and foundational to the operation of a custody facility that meets the needs of women and LGBTQ+ people.

TMG was tasked with developing two reports:

1. The Gender Responsive Priorities Framework (Framework) report reflects TMG's assessment of CRDF operations (pre-COVID-19), see Attachment I. The report identified nine focus areas and corresponding recommendations that have a direct impact on the physical, sexual, emotional, or relational safety of justice involved women and LGBTQ+ people.
2. The Strategic Implementation Plan (SIP) report provides a comprehensive multi-year roadmap of 24 actionable reform goals to effectuate the Framework and related ATI recommendations, see Attachment II. The SIP goals are contained between two categories. The Collaborative Case Management, Program Planning and Provision, and Continuum of Reentry Services goals rely heavily on collaboration between the Sheriff and GRAC. The CRDF operations, programs, and services goals address key operational practices, policies, training, staffing, and culture that are largely owned by Sheriff.

### Next Steps

The Sheriff's Director of Gender Services has identified some TMG recommendations that can be implemented within the short-term and within existing resources, including:

- Implementation of a gender-specific classification platform with case management capacity (Framework priority 7 and 8; SIP goal 1 and 24);
- Improvements to initial experiences and daily living with a focus on intake, orientation, and visitation (Framework priority 1 and 3; SIP goal 3, 11, 12, and 22);
- Enrichment to leadership, management and culture with the creation of mission/value statements reinforced through training (Framework priority 2; SIP goal 6 and 10); and
- Expansion of linkages and partnerships for reentry services (Framework priority 9; SIP goal 4 and 5).

In addition, the Board formally expanded the GRAC's responsibility beyond custody. The GRAC's enhanced purview is to provide recommendations to reform the justice system's treatment of women and LGBTQ+ people, including aligning efforts to implement the ATI recommendations, such as diversion, reentry, and community-based prevention programs. The GRAC Chair has begun convening subcommittees to develop their organizational priorities. With regards to CRDF, we anticipate the GRAC and the Sheriff will be creative in coalescing TMG SIP reform goals with the ATI recommendations and other ongoing justice reform efforts.

Each Supervisor  
August 28, 2020  
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We have advised the GRAC that their first annual report to the Board should contain their reform priorities, including CRDF implementation recommendations. Upon further direction from the Board at that time, CEO will work with the GRAC, Sheriff, and other stakeholders to begin reform implementation.

If you have any questions, please let me know or your staff may contact David Turla at (213) 974-1178 or at [dturla@ceo.lacounty.gov](mailto:dturla@ceo.lacounty.gov), or for questions regarding the GRAC please contact Melissa Kelley, Sheriff Director of Gender Responsive Services, at (323) 526-5350 or at [mmkelley@lasd.org](mailto:mmkelley@lasd.org).

SAH:FAD:MM  
SW:RCP:DT:cc

#### Attachments

c: Executive Office, Board of Supervisors  
County Counsel  
Sheriff  
Alternate Public Defender  
Children and Family Services  
Civilian Oversight Commission  
Health Services  
Mental Health  
Office of Diversion and Re-entry  
Office of Inspector General  
Public Health  
Public Social Services  
Workforce Development, Aging and Community Services



THE MOSS GROUP, INC.

*Experienced Practitioners Committed to Excellence in Correctional Practice*

# Gender-responsive Priorities Framework

*Los Angeles County Sheriff's Department*

*Final Submission: July 24, 2020*



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## Introduction

In 2019, the County of Los Angeles' Chief Executive Office (the CEO) retained The Moss Group, Inc. (TMG) to provide gender-responsive justice consulting services to the Gender Responsive Advisory Committee (GRAC) and the Los Angeles County Sheriff's Department (LASD). TMG's charge was to evaluate and provide recommendations for expanding, initiating, and maintaining gender-responsive and trauma-informed programming and services at the Century Regional Detention Facility (CRDF). The outcomes of this work include developing a Priorities Framework and a Strategic Implementation Plan (SIP) with actionable solutions and recommendations to strengthen systems that justice involved women<sup>1</sup> interact with in Los Angeles (LA) county.

## Methodology

In addition to being a research-based tool, the protocol is based on years of The Moss Group (TMG) practitioner experience in conducting sexual safety and cultural assessments as well as supporting agency and facility management teams in implementing and sustaining gender-responsive operational practice, resolving systemic challenges to safety, and navigating legal settlements. This combination of research, practice, and implementation experience is a robust combination of factors that when matched with the commitment of Los Angeles County to creating a system responsive to the needs of women.

The six guiding principles of gender-responsive practice<sup>2</sup> and the ten truths that matter when working with women<sup>3</sup> provide a solid underpinning of research for the assessment protocol as does best practice and professional standards<sup>4</sup> for women's facilities. See **Attachment A** for a glossary of key terms for reference when reviewing these documents.

The assessment was accomplished through the following process:

- Review of select agency and facility documents, policies, and procedures (See **Attachment D** and **E** for a listing of policies and documents requested)
- A structured onsite assessment protocol that includes the following:
  - Structured observations of operations and programs
  - Interviews with agency and facility leadership and management staff members
  - Focus groups with sworn and non-sworn staff members
  - Individual and group discussions with a justice involved women
  - Individual and group discussions with community stakeholders and providers to include GRAC members and alternates (See **Attachment B** for a list of community stakeholders interviewed and **Attachment C** for a summary of themes based on these interviews)
- Architectural review of CRDF to identify strategies to improve existing space

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<sup>1</sup> Consistent with GRAC by-laws, "women" is to be read broadly and includes people who are non-binary or who identify as gender nonconforming.

<sup>2</sup> Bloom, B., Owen, B., and Covington, S. (2005). *Gender Responsive Strategies A Summary of Research, Practice, and Guiding Principles for Women Offenders*. Washington, DC: National Institute of Corrections.

<sup>3</sup> Ney, B, Ramirez, R., & Van Dieten, M. (2012). *Ten Truths That Matter When Working with Justice Involved Women*.

<sup>4</sup> These three sets of standards were selected based on their relevance and broad applicability across facilities.



TMG selects members of an assessment team from a cadre of subject matter experts who have relevant experience for each project. Further, team members are selected because of their commitment to serving the field in building solutions as partners to the client, their skills in critical thinking and analysis, and their resourcefulness in contributing to pragmatic, realistic recommendations.

The team included the following members:

- Andie Moss, TMG project advisor
- Tina Waldron, TMG project director
- Carolina Montoya, TMG consultant
- Jane Parnell, TMG consultant
- Maggie Black, TMG project manager

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*The assessment team consisted of subject matter experts with significant experience accepted gender-responsive best practice, enhancing safety, PREA compliance, organizational culture change, leadership development, staff development, policy and legal issues related to physical and sexual safety in confinement, mental health and medical services, investigations, and violence prevention.*

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See **Attachment F** for biographical sketches.

The first step toward development of a detailed gender-responsive SIP was conducting a broad facility and system assessment to inform the path forward in working effectively with women. The assessment provided TMG with an opportunity to document strengths, challenges, and observations related to the current state of practice in work with justice involved women at CRDF. The domains listed below reflect the areas of focus during the assessment process.

### TMG Assessment Domains

Leadership, Management, and Culture	Facility Design and Physical Plant	Human Resources	Staffing	Staff, Contractor, and Volunteer Training
Gender-responsive Policy	Intake and Orientation	Property, Clothing, and Storage	Visitation	Food Service and Dietary Requirements
Trauma-informed Searches and Use of Force	Cross-gender Supervision	Use of Force	After-action Reviews	Grievance and Reporting
Investigations	Discipline and Sanctions	Healthcare Services	Mental Health Services	Classification, Programming, and Case Planning

This report informs a guiding structure, referred to as the “Framework.” This Framework is offered to provide a vision towards a system of services, programs, and operational practices that is responsive to women and engages the considerable talent and perspectives of the LASD, community stakeholders, and women with lived experience.

The Framework provides a set of strategic priority goals to support ongoing enhancement and sustainability of gender-responsive practice. Due to the significant *interconnection* of these goals, prioritization at this high level is complex. For example, a major need identified by the community and LASD assessment activities is the expansion of programming. This process is more complex than simply identifying and conducting programming. While the right programs do need to be identified, so too must we

- ensure that classification and assessment processes are designed around women’s specific needs to get the right people to the right programs,
- identify creative ways to enhance program space,
- ensure programs are adequately supervised, and
- ensure data is captured to inform metrics.

These specific actions crossover strategic goals indicating that while there is an order or priority for the implementation, each of these broad goals is equally important to providing program experiences with the potential to support the transformation of women’s lives. See *Figure 1* for one example of how a prioritized solution and implementation plan may be presented.

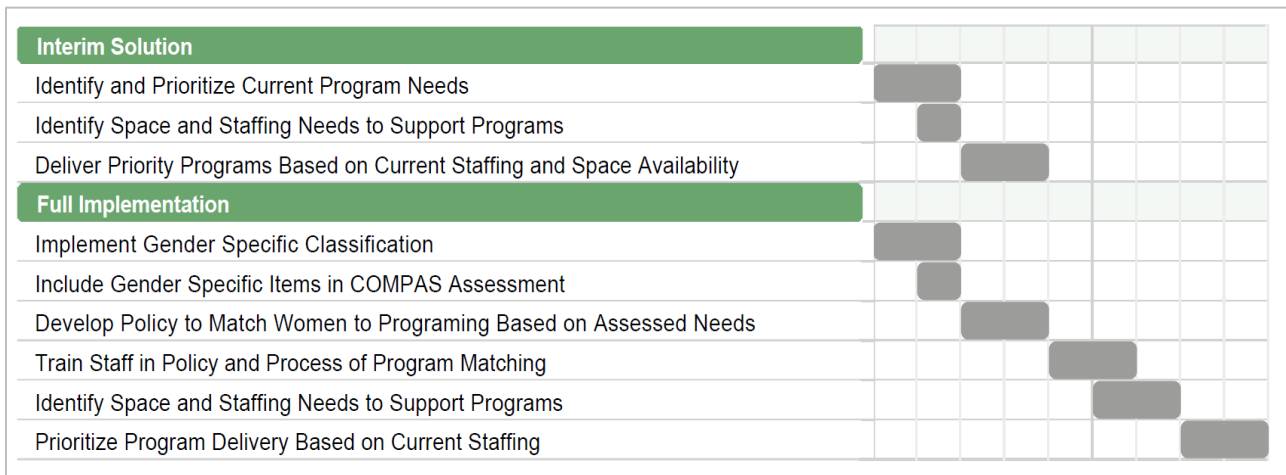


Figure 1

## CRDF Gender-responsive Priorities Framework

The following Framework outlines nine major areas that must be addressed to develop a gender-responsive system to adhere to the needs of women in the custody of the LASD. Efforts in each of these focus areas have a direct impact on the physical, sexual, emotional, or relational safety of justice involved women. This Framework (depicted in *Figure 2*) outlines best practice for operating women's facilities and provides a model to guide daily correctional practice and cross-discipline collaboration.

It is clear there are very committed staff within the LASD and stakeholders in the community, all working to improve the system to be gender responsive and trauma informed. This guiding Framework and ultimately the SIP will support the community of dedicated and committed individuals and organizations in answering the question: *"We know we are doing a lot, but are we doing the right things?"*

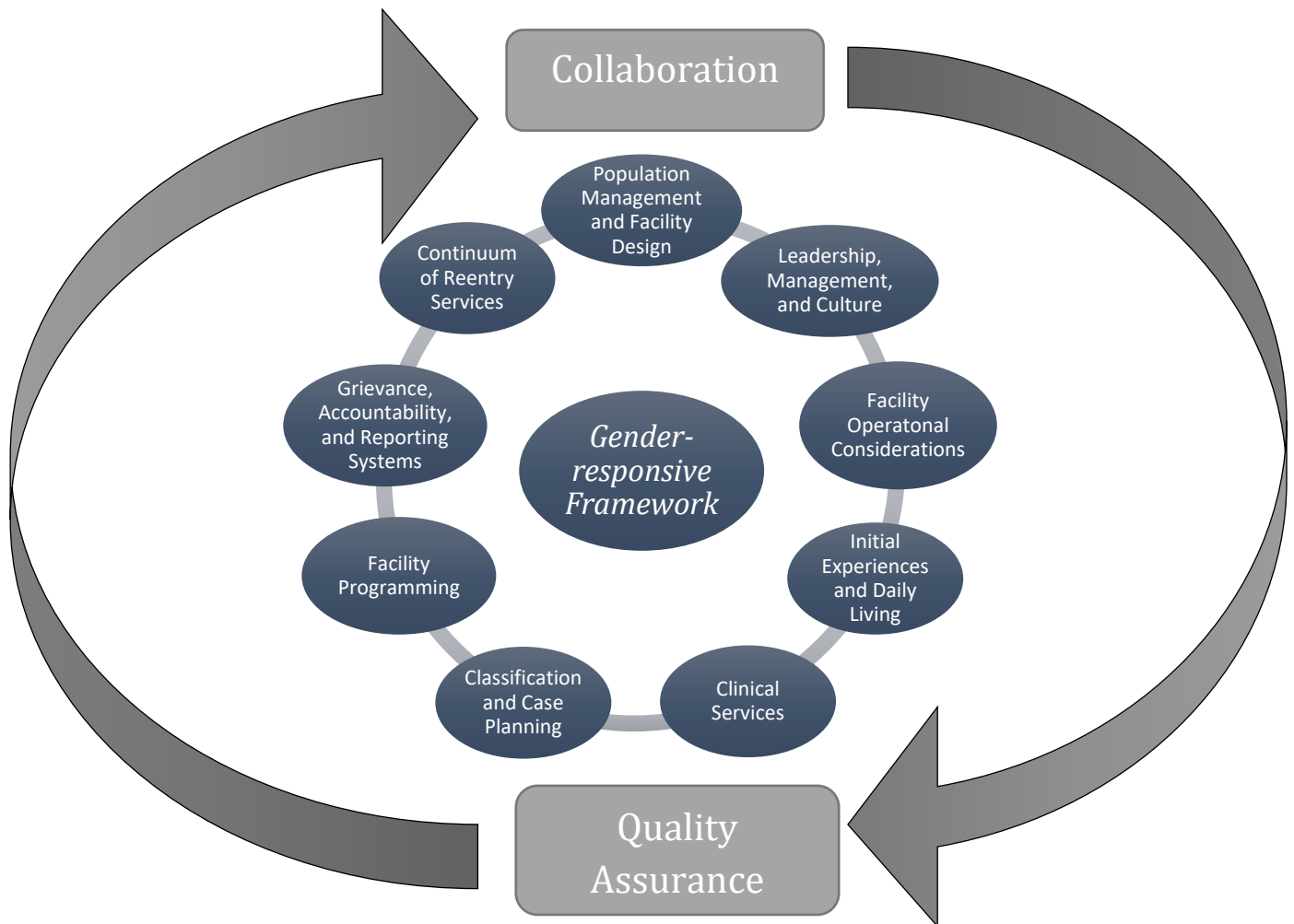


Figure 2

This report is organized around the nine major components of the Framework. For each component the report provides:

- A brief summary of gender-responsive best practice
- Assessment observations
- Strategic goals designed to outline the subsequent SIP
- Key implementation considerations which include factors will influence solution development

Information presented in the report represents the convergence of assessment activities to include community stakeholder interviews; CRDF onsite interviews, discussion groups, and observations; and early document review. Pertinent attachments related to these activities include:

- Attachment A: Glossary of Key Terms
- Attachment B: List of Community Stakeholder Interviewees
- Attachment C: Community Stakeholder Interview Themes
- Attachment D: Document Request
- Attachment E: Reports Reviewed
- Attachment F: Biographical Sketches

It is important to note that as of the writing of this report, policy review has been limited. During the development of the SIP, detailed policy review is a key priority as the implementation of sustainable and consistent change will require formal change to policy, procedure, and process.

## Priority 1 – Population Management and Facility Design<sup>5</sup>

### *Population Management and Crowding*

Gender-responsive Best Practice: Implement strategies to ensure that the population of women in confinement are housed in the most appropriate facility given current space availability and population needs.

### *Facility Design, Physical Plant, and Environmental Factors<sup>i</sup>*

Gender-responsive Best Practice:

- Utilize physical space in a way that matches the unique security interaction, de-escalation, safety, programming, and service needs of women and create an environment that provides adequate physical comfort, empowers women, and supports privacy within appropriate security parameters.
- Create a treatment-focused, trauma-informed and visitor-friendly environment through the selection of normative furniture, colors, natural light, and multi-use approach to large spaces.

### Observations at the time of assessment:

- In addition to the physical plant of the facility being designed for a male population, the intake space was not designed well for this purpose, compromising efficiency, privacy. Housing options for women in the intake process are limited often causing overflow into mental health housing.
- Program, mental health, and social service consultation space were limited. Space conversions or space additions for programming and private space for clinician/client meetings are needed.
- Visitation space was limited. The facility was built originally for men with all non-contact visitation. Except for a small room that has been repurposed for the ABC visitation program, the current facility design does not allow for contact visits with children<sup>6</sup>. Additionally, the number of visitors per inmate was capped at two. For women with children who needed a caregiver to bring the children to visit or more than two children, this resulted in only one child being able to visit at a time.
- Units had varying housing and furnishing deficiencies, including dayroom space, furniture, bed space, murals, shower privacy, and recreational areas.

### Strategic Goals

1. Consider recommendations from Steve Carter's forthcoming assessment summary<sup>7</sup> regarding improving the conditions of confinement at CRDF. Recommendations will address

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<sup>5</sup> Short-term strategies outlined in the Implementation Plan will address minor modifications to CRDF, understanding the physical space challenges and vulnerabilities, supporting leadership in mitigating them through technology and staff supervision, and opportunities to utilize other space for portions of the population. Long-term strategies will focus on gender responsive considerations and needs specific to construction of a new women's facility.

<sup>6</sup> It is important to note that there are plans to bring in an external trailer to support expansion of the ABC program.

<sup>7</sup> Steve Carter is a subject matter expert in architectural design and TMG consultant who was tasked with developing a findings summary following onsite review of physical plant needs specific to gender-responsive programs and visitation efforts.

repurposing areas to improve the flow, privacy, and usefulness of the current intake, visitation, and program and unit areas to better meet the needs of the women in residence.

#### *Key Implementation Planning Considerations*

- The LASD's space restrictions will make programming, services, recreation, housing for special populations, and visitation options challenging to implement in the absence of some space modifications. Reconfiguration may help; however, any modifications will be limited by the physical limitations of the building.
- Staff supervision during recreation, programs, and visitation, as well as staff availability to move the population to these areas appears to be limited by staffing levels and deployment. Modification of physical space in these areas will not improve services without enough staff to provide safe supervision. Phased enhancements will allow for the implementation of all measures necessary to improve services in these areas.

Of note, specific to **facility planning**, there is a separate CEO contract and phased effort underway that is not part of TMG's work and scope. This Framework and subsequent SIP is focused on aesthetic solutions and options within the current facility design. More substantive capital project remedies will be addressed with the facility planning team at LASD in collaboration with the CEO and Kitchell.

## Priority 2 – Leadership, Management, and Culture

### *Department and Facility Culture<sup>ii,iii</sup>*

Gender-responsive Best Practice: Create a facility culture characterized by physical, sexual, emotional, and relational safety; respectful communication, management of boundaries, and relationships; and consistent efforts to support the dignity and well-being of staff and inmates.

### *Human Resources*

Gender-responsive Best Practice: Implement a system in which job descriptions, hiring processes, and performance management clearly outline expectations specific to working with women, support staff development, and hold staff accountable to expectations.

### *Staffing*

Gender-responsive Best Practice: Reach and maintain staffing levels and implement deployment strategies that consider the needs of women and support an environment characterized by safety, dignity, and respect, allowing for effective supervision; productive interaction with staff; and consistent access to programs, services, and recreation.

### *Training (department and facility leadership, staff, contractors, and volunteers)*

Gender-responsive Best Practice: Implement and maintain a system of training in which department and facility leadership, staff, contractors, and volunteers receive training, customized to their roles, to support consistent consideration of the gender of the population; promote an environment of safety, dignity, and respect; develop policies, practices, and programs to strengthen healthy connections; provide integrated programs and services; support women in improving their socioeconomic conditions; and facilitate successful reentry.

### Observations at the time of assessment:

- No guiding statements such as mission, vision, values, or principles were in place to emphasize creating and sustaining a gender-responsive facility as a vital specialized mission.
- The facility had experienced a significant amount of leadership change from the ranks of sheriff and assistant sheriff to commander and captain. The frequency of transition at this level appears to contribute to uncertainty of direction among staff and stakeholders and inconsistency of practices throughout the facility. Despite evident continued transition, leaders and staff at all levels reported being excited about the new Captain and her team due to her leadership style and experience.
- All levels of leadership and staff emphasized significant challenges in staffing adequacy. TMG did not conduct an in-depth staffing analysis as we are poised to review the forthcoming staffing analysis report completed by Rod Miller. Our review and analysis of this report will overlay gender-responsive staffing factors as needed.
- The greater transportation needs of women<sup>8</sup> and challenges of meeting these enhanced needs within current staffing resources was repeatedly emphasized.
- Despite significant amounts of overtime and reported exhaustion, the leadership and most staff interviewed by consultants overall were committed to their work and interested in ways to continue to improve practice.

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<sup>8</sup> For example, women utilize more general and specialized medical services and have more court-related transportation needs for commitments such as dependency court than men.

- Reported staffing adequacy challenges were noted as a key contributing factor to staff being less available to interact with the population at CRDF in ways that support collaborative problem solving and challenge mitigation.
- No training was formally in place for leadership, staff, or volunteers regarding gender-responsive and trauma-informed approaches for women's jails.

### Strategic Goals

1. Develop mission, vision, and values statements that support women's services as a vital specialized mission within the LASD.
2. Reach and maintain staffing levels and deployment strategies that consider the needs of women and support an environment characterized by safety, dignity, and respect, allowing for effective supervision, productive interaction with staff, and consistent access to programs, services, and recreation.
3. Evaluate the appropriateness of a dedicated transportation unit for CRDF to avoid pulling staff from posts to meet transportation needs, shutting down programming, and limiting out of cell time.
4. Implement a system in which job descriptions, hiring processes, and performance management clearly outline expectations specific to working with women, support staff development, and hold staff accountable to expectations.
5. Implement and maintain a system of training in which department and facility leadership, staff, contractors, and volunteers receive training customized to their roles to support consistent consideration of the gender of the population and that promotes an environment of safety, dignity, and respect.

### *Key Implementation Planning Considerations*

- Supplemental assessment will provide information that is vital to comprehensive and realistic strategic planning.
  - Review training structures and curricula, as well as materials such as job descriptions and the performance evaluation system.
  - Review the staffing analysis conducted in late 2019 by Rod Miller with an overlay of staffing considerations that are gender responsive if such lenses have not already been applied.
- Prioritizing human resources structures and practical operational training will support success in reaching and maintaining adequate staffing by promoting positive performance and enhancing retention.
- Ensuring that during transition, the goal of formal policy change and integration of updated expectations into performance management is a key strategy for enhancing clarity and consistency among staff and inmates.



## Priority 3 – Initial Experiences and Daily Living

### *Intake and Orientation<sup>iv</sup>*

Gender-responsive Best Practice: Provide intake and orientation processes designed to develop understanding of needs and safety considerations; support safety, dignity, and respect; outline expectations; and include discussion of available resources. Ensure these experiences are characterized by leadership presence, information, and images tailored to women, respectful communication, and a relational approach, including opportunities for interaction.

### *Property, Clothing, and Storage*

Gender-responsive Best Practice: Provide clothing that fits appropriately, is suitable to temperature conditions, and promotes safety and dignity. Provide opportunities for hygiene maintenance, adequate storage of personal items such as tampons or letters from home, and availability of relevant hygiene items for women of all cultures<sup>v</sup>.

### *Visitation<sup>9</sup>*

Gender-responsive Best Practice: Provide varied opportunities, including contact visitation, for women to develop and maintain supportive relationships with family, especially children, friends, significant others, and the community to promote success in the facility and upon reentry.

### Observations at the time of assessment:

- Intake space was limited and poorly designed for the purpose of reception. For this reason, private conversations (i.e., clinical and PREA screening), the provision of important information, and explanations of search and other key processes were challenging.
- Intake processes were not integrated into the Population Management Bureau (PMB) and are not conducted by PMB staff as is the case at the Intake and Reception Center (IRC) for men. This system difference may contribute to inconsistencies in processes and staff who are not appropriately trained in conducting processes such as non-clinical screening and information provision.
- Inmate orientation processes appear inconsistent. Staff and inmates reported that recent changes to the process have compromised its effectiveness and current policy may not be consistent with current expectations - leading to fragmentation.
- Clothing sizes did not appear to meet the needs of all women and indigent supplies did not appear to be sufficient for women's needs (e.g., often more shampoo is needed for women with long hair, etc.).
- Women in residence for longer periods of time have little storage space for accumulated belongings.

Contact visitation was prohibited outside of the ABC Program and eligibility for visitation, opportunities for visitation, and space and staffing for expansion of visitation were limited. Women with children and those attempting to maintain vital familial relationships are challenged by a lack of personal contact.

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<sup>9</sup> The previous GRAC created a Visitation Workgroup with 17 members, including community groups that work with currently and formerly incarcerated women, county agencies, and the Sheriff's Department. The workgroup met throughout 2019 and adopted the following mission: "To assist people incarcerated in Los Angeles County's women's jail(s) in maintaining regular and meaningful contact with their external support network and children by improving the culture, environment, and policies affecting visitation and other forms of contact in order to improve family reunification and family support."

## Strategic Goals

1. Revise the design of the intake area to allow for more private space for discussion of intake processes.
2. Provide a clear, specific, and consistent orientation process designed to develop an understanding of needs and safety considerations; support safety, dignity, and respect; and outline expectations. Discuss resources specific to the needs of women and allow time for questions and dialogue.
3. Implement a review process for women's uniforms, nightgowns, indigent kits, and other personal care items to ensure needs are being met specific to size and quantity.
4. Evaluate storage adequacy based on duration of incarceration to ensure that property items are being stored and managed to maximize usable space.
5. Review and reconsider the visitation space, schedule, eligibility, duration, and date options. Visitation for women can relieve stress and improve their ties to the family and community. Contact visitation, lengthening timeframes, increasing slots and days of the week, increasing access to the ABC Program, improving options for visits from a distance (such as Skype or Zoom), and other creative solutions can improve not only the quantity but also quality of visits for women housed at CRDF.

## *Key Implementation Planning Considerations*

- All current and past procedural orders and policies around intake and orientation will have to be reviewed and reconciled into one consistent order/guidance document. Subsequently, orientation content and processes will need revision, staff training, and relaunch.
- Orientation should include participation by leadership, trained staff, and incarcerated women with lived experience.
- Women with children, and those attempting to maintain vital familial relationships, are challenged by a lack of personal contact. Women often reported not wanting their children to visit them in the jail setting. In addition to finding ways to expand contact visitation, significantly expanding video visitation options should be explored. The latter challenge may necessitate consideration of a phased improvement plan beginning with technological solutions and building toward increased space and staffing to manage expanded contact visitation.
- Due to the current design, storage may have to be re-imagined in reconfigured areas.
- One way to immediately improve the experience of visitation would be to evaluate the effectiveness of the current website sign-up process to ensure that the technology works appropriately and that people with limited internet resources have options for sign-up.

## Priority 4 – Facility Operational Considerations

### *Trauma Informed Searches<sup>vi vii viii</sup>*

Gender-responsive Best Practice: Searches, while designed to promote safety, are often powerful reminders of trauma. Trauma-informed search processes are necessary and should be conducted in line with three key standards: professionalism, consistency, and being trauma informed to maximize feelings of physical, sexual, emotional, and relational safety for women<sup>ix</sup>.

### *Cross-gender Supervision<sup>x</sup>*

Gender-responsive Best Practice: Promote safety, dignity, and respect during searches; when women are showering, performing bodily functions, or changing clothes; when women are being monitored in restrictive housing or other high security areas; and during transportation<sup>10</sup>.

### *Use of Force*

Gender-responsive Best Practice: Promote safety, dignity, respect, de-escalation, and the minimum use of force necessary, as well as best practices in recording and reviewing incidents when use of force is necessary. Ensure that use of force, cell extraction, and use of restraints include careful consideration of the physical capabilities of women when compared to men, mental health history, relational orientation, and creation of safety, dignity, and respect in the context of these procedures.

### Observations at the time of assessment:

- Training and policy did not support trauma-informed search procedures nor did unit orders address communication or professionalism.
- Written policy may necessitate updates to align with observed practices around cross-gender announcements and cross-gender transportation practices.
- Certain showers with open cuff ports created issues around privacy while showering.
- Use of force training did not address de-escalation strategies for women nor trauma-informed practices.

### Strategic Goals

1. Create a trauma-informed searches policy, and associated training, that aligns with contemporary best practices in women's jails, to include staff professionalism, communication of search process, physical and emotional safety, and trauma-informed inmate instruction.
2. Review current practices and update all cross-gender-related searches, supervision, and announcement policies to be consistent in theme, messaging, and instruction to staff.
3. Consider a gender-specific section within the use of force policy and training to discuss differences in women's communication styles, physical strength, prior trauma, reactions, staff de-escalation measures, team composition, relationships, and mental health factors.

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<sup>10</sup> In addition to ensuring that there are female supervisors and security staff on each shift, practitioners recommend that the male to female staff ratio in women's facilities be approximately 40 percent male and 60 percent female. It is important to note that having both professional and respectful male and female staff in the facility is vitally important to provide appropriate role models and replicate the experience women will have in the community. The recommended ratio does not diminish the role of male staff, rather accounts for same gender staff availability to address sensitive issues and provide supervision during sensitive times.

### *Key Implementation Planning Considerations*

- Staff's access to easy-to-review information in policy manuals will be important to support training that is provided and to be available as a quick reference reminder and guide. Current custody manuals are challenging to navigate.

## Priority 5 – Grievance, Accountability, and Reporting Systems

### *Grievances and Reporting*<sup>xi xii</sup>

Gender-responsive Best Practice: Provide clear avenues for resolution of grievances; reporting of incidents that compromise physical, sexual, emotional, or relational safety; and requesting and receiving needed items. Processes must be accessible and safe and information should be routinely reviewed to identify themes or patterns that could be addressed to improve operations overall.

### *Investigations*<sup>xiii xiv xv</sup>

Gender-responsive Best Practice: Implement a system of investigations in women’s facilities that is responsive to the complexity of women due to the significant trauma histories that many bring and the relational nature of women. Provide investigators with resources and training to meet the unique needs of women considering these factors.

### *Discipline and Sanctions*<sup>xvi xvii xviii xix</sup>

Gender-responsive Best Practice: Implement a discipline and sanctioning process that is characterized by efforts to maximize safety, dignity, and respect; fundamental fairness; and a focus on learning and change rather than only punishment. Ensure that rules and policy on factors that are uniquely important in women’s facilities (e.g., touch and relationships) are clear and consistently implemented.

### *After Action Review and Data Use*

Gender-responsive Best Practice: Conduct after-action reviews of incidents and ongoing data monitoring which allow for the identification of strengths and challenges, ultimately providing a mechanism for continuous facility improvement. Within these reviews and data monitoring, consider important factors such as the promotion of safety, dignity, and respect; women’s relational nature; physical size and strength; the nature of violations or incidents; what led up to an incident; how well policy is working; the effectiveness of supervision strategies; and trends demonstrating areas in which the facility can proactively mitigate challenges.

### Observations at the time of assessment:

- Grievance report numbers were high, straining staff resources to investigate and respond to reports within policy time limits.
- Disciplinary and sanctioning practices appeared to be gender neutral and options for behavior change interventions appeared to be limited.
- Data usage to better understand why women engage in incidents, with an emphasis on women’s pathways to incarceration and prior trauma histories, did not yet appear to be in place.

### Strategic Goals

1. Consider a more in-depth review of the reasons for high grievance numbers, to include identifying other methods women can use to get questions answered and needs met. Review of staff ownership and helpfulness on units around low-level issues, access to other methods of reporting, access to supervisory staff, and effectiveness of current grievance policy are recommended.
2. Consider revision of current disciplinary processes to include preventive actions staff can assist with, alternative sanctions, learning opportunities (such as thinking reports, therapy

assignments, or apology letters), and collaboration with clinical staff in appropriate cases. Ensure staff training is aligned with their expectations.

3. Review how incident and other data are used to engage in problem-solving and preventative actions, with an emphasis on women's pathways, how they think and act, and the meaning and reasons behind their behaviors.

### *Key Implementation Planning Considerations*

- One key area of focus is supporting investigators in distinguishing between consensual sexual behavior and sexual abuse among inmates consistent with PREA standards. Due to power differential, however, inmates cannot consent to sexual behavior with a staff person.
- Supplemental assessment will provide information that is vital to comprehensive and realistic strategic planning.
  - In-depth policy review and multidisciplinary mapping of the system will inform potential solutions and may be an intervention in and of itself by clarifying processes and debunking myths and assumptions.
  - In-depth review and observation of the grievance system inclusive of policy, practice, inmate education, staff training, hearings, and resolution processes, as well as intense data analysis to understand strengths and gaps in grievance and reporting processes will inform solutions and opportunities for enhanced effectiveness and efficiency.
  - In-depth review of the system of discipline and sanctions to assess the degree to which policy and practice on discipline is preventative, focusing on creating safety, and motivating safe, healthy, and effective behavior. This review would not only include policy review but also review of a sample of disciplinary reports to identify themes and understand the use of sanctions.
- Implementation of enhancements with consistency for sustainability. The ability of staff to spend time on data and trends, as well as to analyze the grievance process, may necessitate outside technical assistance and support until processes are fully operationalized, trained on, and understood.

## Priority 6 – Clinical Services<sup>11</sup>

### *Medical<sup>xx</sup> <sup>xxi</sup>*

Gender-responsive Best Practice: Provide routine gynecological and reproductive healthcare to all women, including specialized care as needed, regardless of the amount of time women are incarcerated. The system should afford women safety, dignity, and respect in the context of provision of medical services, including pregnancy and post-partum care and care in response to incidents of sexual abuse.

### *Mental Health<sup>xxii</sup>*

Gender-responsive Best Practice: Employ a system characterized by cross-discipline collaboration to promote safety, dignity, and respect, and the availability of services to address mental health needs with a focus on support and techniques for coping with symptoms and trauma.

### Observations at the time of assessment:

- The medical team provided necessary somatic healthcare, to include gynecological services, to the women in residence per staff reports. All women were given a pregnancy test upon arrival at intake and pregnant women were provided with appropriate services.
- Mental health encounters were not provided in private settings, but instead were conducted in specialized units within open day rooms.
- Coordination of Care meetings and Complex Case Committee meetings were conducted to discuss particular inmates on the mental health caseload and to develop treatment and management plans.

### Strategic Goals

1. Improve the privacy options for mental health clinicians to be able to meet with inmate clients in a more appropriate and nonpublic setting.

### *Key Implementation Planning Considerations*

- At the time of assessment, information was gathered largely based on interviews and observations. Additional in-depth policy review, review of documentation, and observation of multidisciplinary team meetings will allow for specific implementation recommendations.
- LASD's space limitations will impact the ability to find space for private meetings. Review of space allocation should consider where the meeting between clinician and inmate client is best held for:
  - Security and safety considerations
  - Convenience and workability for both inmate and clinician
  - Privacy and confidentiality

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<sup>11</sup> It is important to note that the assessment completed was not an in-depth review of clinical services or quality of care; it was a management and operational review of the intersection of clinical and custody practice in women's facilities.

## Priority 7 – Classification and Case Planning<sup>xxiii</sup>

Gender Responsive Best Practice: Implement a classification process designed and validated for women and utilize a risk and need assessment that addresses women's unique needs. Information gathered from these tools will support a multi-disciplinary case management team and case plan. The case plan should be designed to match women with programs and resources based on assessed need, evolve through routine review, and be updated attending to the basic needs of women both in the facility and for reentry planning.

### Observations at the time of assessment:

- A classification system designed and validated for women had not been implemented.
- The Northpoint COMPAS was in use, and LASD was working collaboratively with the Board of Supervisors and other partners to navigate contractual challenges to utilizing the assessment items built into this risk/need tool that are specific to justice-involved women.
- Case planning and release planning occurred on a limited basis and largely based on program placement or special need.

### Strategic Goals

1. Implement a classification process designed and validated for women to include at minimum custody classification and risk need assessment.
2. Implement a process for collaborative case management that includes routine reviews and updates of case plans, attends to women's basic needs, and drives program placement.

### *Key Implementation Planning Considerations*

- At the time of assessment, the LASD did not have a counselor or case manager classification. While review of the staffing analysis report is pending, it is unlikely that a comprehensive case management system can be implemented with current staffing resources.
- Questions about the design of the system will have to be outlined and answered by a group of selected stakeholders and include, but not be limited to, the following:
  - How might risk (of recidivism) be incorporated into case planning and the prioritization of inmates for services? How do we ensure that the women in programs are those that most need to be in programs?
  - What is the purpose of the custody assessment (treatment, security, both)?
  - Does every inmate receive a full COMPAS assessment?
  - What length of time is required for program assignment and what length of time is more appropriate to immediate coping and planning to meet basic needs upon relief?
  - How can the assessment process be made more efficient (by reducing redundancy)?
  - How can we better integrate assessment and programs available to address substance abuse and mental health issues? Can the coordination of services between mental health, substance abuse, and case management be improved?
  - How will natural supports in the community be integrated into release planning?
  - What quality assurance measures are important to ensure fidelity for the key elements of assessment and case management?



## Priority 8 – Facility Programming<sup>xxiv xxv</sup>

Gender-responsive Best Practice: Implement a comprehensive offering of programs and services designed to address women’s specific needs (trauma, relationships, anxiety, depression, parenting, etc.) and reduce risk to reoffend. The system should be coordinated to promote inmate participation and support safety by structuring inmates’ time and reducing idleness, promoting success, teaching coping skills that support healthy responses to stress and issues related to incarceration, and enhancing positive interactions with staff members to build trust in facility systems (e.g., reporting and grievances).

### Observations at the time of assessment:

- Several program providers, including the LASD EBI, clinical services providers, and community organizations, were interviewed during the assessment. Anecdotal feedback on these programs was very positive; however, few if any had current program evaluations or consistent quality assurance monitoring.
- Program assignment was based on either 1) inmate interest or 2) inmates meeting a program criterion for a specific intervention and being recruited. Despite most program engagement being accomplished through inmate interest, women generally reported knowing little to nothing about the availability of programs.
- Risk/ need assessment was not used to match women to programs and did not include the items that research has indicated are key risk and need factors for women. Due to the latter, it is difficult to get a true picture of the program needs of the CRDF population. The number of entities internal and external to the LASD responsible for program delivery and management was fragmented making coordination of offerings difficult if not impossible.

### Strategic Goals

1. Consider developing one division responsible for management and oversight of women’s classification, programs, and case management to include case and release planning.
2. Enhance programming specific to women’s needs (trauma, relationships, family reunification, anxiety, depression, parenting, etc.). Develop a system designed to match women to programs based on assessed need via Northpoint COMPAS.

### Key Implementation Planning Considerations

- Adopting formal definitions of program and activity will help in targeting the use of resources for the right purpose and maximum benefit. For example, the following general definitions could be adapted for use at the LASD:
  - **Program:** Structured interventions that address the needs directly linked to criminal behavior with the goal of reducing risk.
  - **Pro-social Activity:** Classes, groups, services, or gatherings that while not designed to address the offender needs directly linked to criminal behavior, nevertheless provide benefit through offender enrichment and reduction of idleness.
  - **Service:** Intervention provided by a licensed medical, mental health, or substance abuse provider to separate out clinical interventions.
- Ensure that program implementation is phased, with priority programs being those that most directly address women’s needs, considering program and staffing limitations. Intentional enhancement in this way will help ensure that programming will not be cancelled due to space or security needs and support consistency and fidelity.

## Priority 9 – Continuum of Reentry Services<sup>xxvi xxvii xxviii xxix</sup>

Gender-responsive Best Practice: Develop a collaborative system to identify and mitigate barriers to successful reentry for women in Los Angeles County through ongoing modification of a multi-disciplinary case management team. The system should include partnership with community-based programs that can provide services both inside the facility and upon release. Processes should focus on key factors for women in transition (e.g., family reunification; social supports; and survival needs such as food, clothing, childcare, employment, treatment, or aftercare), and reentry needs specific to Los Angeles County such as safe and affordable housing and transportation.

### Observations at the time of assessment:

- LASD and many community partners saw the value of linking women directly to support services prior to leaving the facility. Similar to facility programming, reentry preparation seemed to be related to interest and program specific recruitment leading to fragmentation.
- A specific opportunity to enhance services upon release is determining a strategy to provide reentry service windows with access to various resources outside of CRDF, like the ones outside of release for men's jails.

### Strategic Goals

1. Conduct a thorough analysis and mapping of community reentry resource providers, including their services, capacity of women they can serve, when they make contact with the women, and data collection tools and tracking, in order to identify strengths, gaps and partnership opportunities in serving the women.
2. Develop a collaborative system to identify and mitigate barriers to reentry for women in Los Angeles County through ongoing partnership efforts and an inside out multi-disciplinary case management approach.

### *Key Implementation Planning Considerations*

- Similar to questions about the design of the classification system, collaborative discussion of questions such as the following will be useful in informing priority reentry efforts:
  - How might risk (of recidivism) be incorporated into reentry case planning and the prioritization of inmates for services? How do we ensure that the women in programs are those that most need to be in programs?
  - What length of time is required for program assignment and what length of time is appropriate to immediate coping and planning to meet basic needs upon release?
  - What do we know about reasons women return to the system?
  - What is LASD best situated to provide to support reentry?
  - What are community providers best situated to provide to support reentry?
    - It is notable here that while risk need assessment is not yet available, the Analytics Center of Excellence (ACE) in the office of the LA County CIO, has done remarkable work on recidivism rates and contributors to recidivism. The ACE has information that can help prioritize reentry efforts, and while not specific to women, does provide a data driven place to start; further risk and need information can refine this knowledge, but both sources of information will be important in prioritization.

## Next Steps: Priorities Framework to Strategic Implementation Plan (SIP)

To adequately inform strategic goals and implementation plans, it is imperative to have a comprehensive understanding of the overall system. This understanding will lend to clear strategies to build on agency strengths and overcome gaps and barriers. While significant strategic goals have been documented throughout this Framework, additional or expanded goals or edits to current goals may arise through the recommended supplemental assessment activities and ongoing document review.

Subsequent to the adoption of the Framework, TMG will begin collaborative work with the LASD and GRAC to develop the CRDF gender-responsive draft SIP. As previously stated, reaching full implementation of the Framework will be a multi-year process requiring sequenced phases. TMG will work collaboratively to identify quick wins, short-term and long-term action plans, and suggested measures of implementation and outcomes.

## Recommendations for Additional Assessment

TMG appreciates the complexity of the systems that justice involved women encounter in LA county. Given that the focus of this assessment is CRDF, and the space occupied by the facility in the overall LASD, the following supplemental assessment activities are recommended to ensure accurate implementation planning in these key areas<sup>12</sup>.

- **Multi-disciplinary Mapping.** Conduct a multidisciplinary mapping in the following areas, to identify strengths and gaps in current policy and practice. These activities will allow for a more in-depth understanding of some of the most complex processes staff and justice involved women encounter.
  - **Classification:** This system is especially complex because CRDF was not constructed to be an intake and reception center. For this reason, the processes of intake and release at this facility appear to be disconnected from formal systems and supports employed at the men’s intake and reception center (i.e., PMB staffing, internal records storage, accessible reentry resources, etc.). While onsite, facility leadership were meticulous in explaining and educating us on the processes of intake and discharge, the process of data and information sharing, and communication strategies within these processes. Classification, however, must be further understood to inform implementation planning specific to CRDF and the fit of this facility into the larger agency.
  - **Investigations:** The system of investigation at the LASD is complex for a variety of reasons, including utilization of investigators within the facilities as well as in other areas of the LASD, ongoing changes being made to reach PREA compliance, and the movement of clinical services outside of the LASD. While interviewees could describe their role in the investigations process during our onsite assessment, there was less clarity on what happens once an investigation leaves their area of influence. The complete system must be understood well to inform change recommendations and effective implementation. The mapping has the potential to be an intervention in and of itself by clarifying processes and debunking myths and assumptions.

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<sup>12</sup> Recommendations for additional assessment are included in the Phase 2 proposal.

- **Grievance System Review.** In-depth review and observation of the grievance system inclusive of policy, practice, offender education, staff training, hearings, and resolution processes, as well as intense data analysis will provide a full understanding of the strengths and gaps in grievance and reporting processes. At the time of assessment, facility leadership reported that in an average month, excluding medical and mental health grievances, more than 3,000 grievances are filed. This system includes a mechanism to report a variety of challenges. Recommendations for change have been made, some of which have been reported to be accepted, others which remain under review. Having a full understanding of the system, to include how data are used to inform supervision and problem solving, is essential to developing a realistic, efficient, and useful Implementation Plan.
- **Staffing Analysis Review.** Review the staffing analysis conducted in late 2019 by Rod Miller. TMG looks forward to reviewing this work and conducting an overlay of staffing considerations that are gender responsive if such lenses have not already been applied. Gender specific considerations are:
  - Physical Plant
  - Facility Schedule
  - Custody Staff Complement
  - Staff Gender
  - Program Needs
  - PREA
  - Medical Services
  - Mental Health Services
- **Training Academy Review.** Conduct an in-depth review of staff training at the academy, for operations and in-service, to include observation of live training at all levels and material review. This process will inform recommendations for integration of practical gender-responsive training to all staff. The assessment team received reports of engaging and innovative training techniques such as dynamic scenario-based training that are being used at the facility; and through a full review of the academy, TMG can better assure that the Implementation Plan builds on strengths and closes gaps.
- **Disciplinary System Review:** Conduct an in-depth review of the system of discipline and sanctions at CRDF to assess the degree to which policy and practice on discipline is preventative, focuses on creating safety, and is motivating safe, healthy, and effective behavior. This review would not only include policy review and interviews, but also analysis of a sample of disciplinary reports to identify themes and understand the use of sanctions.
- **Clinical Policy Review and Multi-Disciplinary Team Meeting Observations.** Conduct an in-depth review of medical and mental health policy, followed by targeted interviews to confirm practice expectations and observe the multi-disciplinary team meetings that include custody, medical, and mental health staff participation. These meetings have been identified as pivotal to improving services and professional relationships. In person observation will further inform Implementation Plan objectives to build on existing strengths to close observed gaps.
- **Clinical Services and Quality of Care.** Conduct an assessment of clinical services and quality of care with a focus on key stakeholder priorities such as co-occurring disorders, screening for sexually transmitted disease, screening for pregnancy, opportunities to increase telehealth services, and medication reconciliation with specific focus on care for persons who identify as transgender. Such an assessment could also review documentation

structures to ensure that they are up to date – for example, at the time of assessment it was reported that the electronic medical records system did not allow documentation of preferred pronouns.

## Assumptions

The following outlines key assumptions of actions that will occur to ensure the successful implementation of the Framework.

- All stakeholders commit to a change process that will span at least three to seven years and embrace that transition of systems takes time.
- Some changes will be relatively low cost and easy to implement; others will require funding and significant philosophical change.
- The GRAC will be a group geared toward mutual collaboration among partners to include the Board of Supervisors, LASD, community providers, and community advocates to identify and implement practical solutions for improvements to the system.
- All partners share a commitment to developing work with justice-involved women as a specialized area of expertise that requires training, experience, and reliance on research and best practice.
- Changes will be adopted via policy and procedure as applicable to include clarity in the purpose, process, and practice revisions<sup>xxx</sup>.
- Recommendations will align with the terms of all settlements, lawsuits, consent decrees, and other county and state legal requirements.
- New initiatives will include quality assurance measures to ensure fidelity and allow for course correction as appropriate.
- The implementation of various components of the Framework are inextricably linked to other components of the Framework, requiring a sequenced process of implementation that may include temporary solutions or systems as a means to full implementation.
- The SIP will recognize and work within existing system limitations while those limitations are addressed.

## Attachment A: Glossary of Key Terms

**Best Practice<sup>xxxi</sup>:** Practice that is accepted as effective and endorsed by experts in the field. Such practices are often based upon research evidence but may also be based on collective expertise and experience.

**Criminogenic Needs:** Dynamic, gender-neutral needs that have been shown by research to be associated with criminal behavior. The following are frequently cited examples: antisocial associates, antisocial beliefs, antisocial attitudes, addictions, family conflict, challenges at school and work, conflictual family backgrounds, and unproductive or antisocial use of leisure time. These needs, when assessed, allow for targeting of program and intervention resources.

**Dynamic Risk Need Assessment:** Actuarial assessment tools that identify both static and dynamics needs associated with future criminal involvement. Dynamic risk/needs assessments are used in order to link offenders to programs and interventions needed to reduce their risk of re-offending.

**Emotional Safety<sup>xxxii</sup>:** The safeguarding against psychological abuse, humiliation, or other negative verbal or behavioral harassment.

**Evidence-based Practice<sup>xxxiii</sup>:** Practices based on conclusions drawn from rigorous studies of correctional approaches. Historically, such studies supported approaches that adhered to the risk, need, and responsivity principles and included cognitive behavioral and social learning approaches. An emerging body of research, however, is providing new empirical evidence supportive of gender-responsive approaches.

**Gender-responsive Needs<sup>xxxiv</sup>:** Dynamic factors unique to women that have been shown by research to be associated with criminal behavior. The following key needs have been identified for women: trauma and abuse, unhealthy relationships, parental stress, depression, self-efficacy, and current mental health problems. These needs, when assessed, allow for more appropriate targeting of program and intervention resources.

**Gender-responsive Practice<sup>xxxv</sup>:** Approaches guided by woman-centered research that are relational, strength based, trauma informed, culturally competent, and holistic; and account for the different characteristics and life experiences of women and men and respond to their own unique strengths and challenges.

**Operational Practice:** Policy, procedure, and practice supporting the routine administration of security practices, as well as clear contingency planning and emergency response, to create the highest possible level of safety within a facility.

**Physical Safety:** Protection against bodily harm.

**Promising Programs and Practices:** Programs or practices that have indicators of effectiveness based on observation or comparison with other interventions but have not been sufficiently evaluated to demonstrate replicable positive outcomes.

**Pro-social Activity:** Classes, groups, services, or gatherings that while not designed to address the offender needs directly linked to criminal behavior, nevertheless provide benefit through offender enrichment and reduction of idleness.

**Program:** Structured interventions that address the needs directly linked to criminal behavior with the goal of reducing risk and recidivism.

**Relational**<sup>xxxvi</sup>: Approaches that recognize the importance of relationships as a target of intervention for women (e.g., building healthy social networks and skills, healthy relationships, etc.).

**Relational Safety**<sup>xxxvii</sup>: Feeling respected and psychologically safe in interactions with other human beings, including those in a position of authority.

**Sexual Safety**: The protection against physical or emotional abuse or harassment that is sexual in nature. A “zero-tolerance” culture helps to protect the rights of offenders and detainees to be free of sexual harassment, abuse, and retaliation.

**Trauma**<sup>xxxviii</sup>: Direct or indirect exposure to an event or experience that threatens physical, emotional, or psychological safety.

**Trauma Informed**<sup>xxxix</sup>: Approaches that incorporate the research on violence against women and girls and the impact of trauma; and changing or avoiding practices that can cause further trauma to women.

**Quality Assurance**<sup>xl</sup>: Ongoing review of programs and practices that compares actual practices and service provision to the benchmarks of fidelity and quality established by the organization or established guidelines.



## Attachment B: List of Community Stakeholder Interviewees

- Rohini Khanna, 1st District
- Emily Williams, Michelle Newell, 2nd District
- Rourke Stacy Padilla, AJ Young, Shelby King, 3rd District
- Elisa Arcidiacono, 5th District
- Cheryl Gaines, Prosecutor
- Christina Behle, Public Defender's Office
- Eunisses Hernandez, Just Leadership USA
- Eve Sheedy, Domestic Violence Council/Office of the Domestic Violence Council, Los Angeles County Department of Public Health
- Five Keys
- Heidi DeLeon, Los Angeles Centers for Alcohol and Drug Abuse
- Ingrid Archie, A New Way of Life Reentry Project
- Ivette Ale, Dignity and Power Now
- James Bell, W. Hayward Burns Institute
- Juliana Perez, SD3 justice team
- Justine Esack, Clara Shortridge Foltz Criminal Justice Center
- Kevin Kuykendall, Retired, LASD
- Lieutenant Tad Rhodes, PPOA
- Margarita "Maggie" Thorpe, California Department of Corrections and Rehabilitation
- Norma Cumpian, Anti-Recidivism Coalition
- Office of Inspector General
- Ricca Prasad, Betty Nordwind, Arlene Teuta, Holly Leonard, Harriett Buhai Center for Family Law
- Sarah Clifton, ACLU of Southern California
- Susie Baldwin, LA County Department of Mental Health
- Terrie Coady, Community Liaison, District Attorney's office
- Tskaha Barrows, James Bell, W. Hayward Burns Institute
- Derek Hsieh, ALADS

### Additional interviews recommended or rescheduled:

- Susan Burton, A New Way of Life
- PPOA focus group
- Patti Giggans (rescheduled)
- Kelly Logan, 4<sup>th</sup> District
- Greta Ronningen, LA Diocese
- Michele Infante, Dignity and Power Now
- Joe Paul, Inmate Welfare Commissioner
- Lynne Lyman and Troy Vaughn, L.A. Regional Reentry Partnership

*Note, this list is reflective of interviews that have occurred by March 31<sup>st</sup>. Additional interviews will continue as part of the supplemental assessment.*

## Attachment C: Community Stakeholder Interview Themes

As previously described, there were two broad categories of individuals interviewed in the context of assessment – individuals working within the LASD system and community stakeholders<sup>13</sup>.

Interviews conducted with those working internal to the LASD system were analyzed in conjunction with onsite assessment information. This summary addresses the major themes that emerged from the community stakeholder interviews specific to the scope of this project which is defined as improvement of gender responsive practice at CRDF. Despite the wide variety of perspectives and interests represented in the pool of stakeholders interviewed by TMG, there was a great deal of consistency in identifying general areas of concern and opportunity.

### ***Gender Responsive Advisory Committee***

A great deal of optimism is placed in the work being conducted by this GRAC. There is a consensus that one of the challenges of previous gender responsive efforts was the absence of a unified leadership voice. Due to the fact that GRAC has the support of the LA Board of Supervisors, many stakeholders are hopeful that this current effort will lay the groundwork to successfully implement positive change at CRDF. It was frequently noted that one of the vital roles GRAC can play is to evaluate successful programs throughout the country and help implement those that can be carried out within the physical and financial constraints at CRDF. More importantly, if the voices of various advocacy groups and service providers can be coalesced under the GRAC umbrella, it has the potential to be transformative.

### ***Working Together***

The importance of collaboration and coordination was a key theme throughout our interviews. Many comments were made about the variety of important work being done on behalf of incarcerated women and their families but there is a perception that this work is often done within silos and lacks integration. A need for fresh and innovative approaches is seen as a key to transforming CRDF. A component of this will be to review the “why” that underlies many existing processes and procedures to identify more efficient ways to accomplish important goals.

### ***Alternatives to Incarceration***

Overwhelmingly, stakeholders recognize the inherent challenges posed by the sheer number of inmates at CRDF versus the number of inmates for which the facility was designed. While there is a need for design modifications to increase space, many expressed hopes that additional avenues of alternatives to incarceration could be explored to keep women from coming into the system at the outset. Alternatives to incarceration are seen as having a great deal of political and community support not only for the benefits that accrue to the facility itself but for the potentially life-changing benefits for those women who can be redirected to programs and services that increase their potential for restitution rather than going into the justice system. It was often noted that there is a high percentage (estimated 80%) of women in jails who are mothers and often the primary caregivers of their children. In these cases, the “ripple effect” on children multiplies the disruption of incarceration and increases the value of diversion.

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<sup>13</sup> See attachment B for stakeholder interview list. Please note interviews are ongoing as of the writing of this report.

Stakeholders recognize that there will always be a portion of the CRDF inmate population that requires a secure facility for incarceration and will not desire to, or be eligible for, participating in diversion programs. However, there is a strong belief that focusing on the catalysts that prompted involvement in the justice system and providing meaningful alternatives to the appropriate population, could lead to a reduction in both the number of women incarcerated and recidivism.

### ***Systemic Considerations***

Many of those interviewed observed the value of adopting a shared definition of what a “threat to the community” means in order to develop a shared understanding of who should, and should not, be incarcerated. There are many groups/agencies/organizations involved in the justice system pipeline and all components must consult and cooperate with one another to achieve the best outcomes.

Some existing efficiencies in the judicial system were specifically noted as being of value to justice involved women. Specifically, dependency court was acknowledged as having heightened impact for women due to the likelihood that they are the primary caregiver prior to incarceration, and it is perceived as providing great value in assisting with family reunification. Opportunities, while out of scope of the current contract, were also identified and included fostering better communication and coordination between criminal and dependency cases and developing human trafficking and mental health courts to offer the opportunity for enhanced services.

### ***Continuum of Reentry Services***

The vitality and impact of reentry services are seen as being directly related to those services and programs provided while incarcerated. This again goes back to the importance of ensuring the presence and active involvement of children and their caregivers throughout incarceration and to provide programming designed to address the unique needs of the women. Case management is a critical component for providing targeted services both during incarceration and after release. The need for family unification and support services is seen as an integral part of a holistic system of wrap-around services that are inextricably linked in assisting incarcerated women back into society. Most every stakeholder noted at least one or more components of these services as being critical in ensuring an inmate’s successful reentry into society. A need for more domestic violence support for women when they are leaving incarceration is vital as is the need for assistance in obtaining housing. Stakeholders and providers continually stressed that ensuring staff have gender-responsive and trauma-informed practice training at all points in the system is a crucial component to supporting women in successful reintegration.

### ***Data Collection***

A common thread running through all our interviews was a frustration and concern about the lack of an infrastructure for data measurement and the need for data collection. This is a foundational void that is necessary for a greater understanding of the array of issues relating to justice-involved women. Collecting relevant data would provide inmate profiles to better evaluate the factors leading to incarceration and the reasons underlying their interface with the justice system.

Moreover, data can be an important driver in determining the best use of resources to keep women from returning to jail. A consistent theme from stakeholders revolved around the observation that alternatives to incarceration can be highly successful in decreasing recidivism. Analyzing existing

research and data would provide valuable assistance in developing a women's system that includes aspects of diversion and support. Data would also help evaluate the efficacy and efficiency of existing programs and determine what programs are successful in reducing recidivism, increasing family reunification, and predicting future success. The prevailing sentiment among stakeholders was that there can be little progress towards change without the benefit of objective data.

## Attachment D: Document Request

### **LEADERSHIP, MANAGEMENT, AND CULTURAL INDICATORS**

- Facility organizational charts
- Facility schedule (meals, showers, programs, volunteer programs, services such as clinics, etc.)
- Facility vision, mission, or values statements
- Facility strategic or action plans specific to gender-responsive practice
- Documentation of expectations regarding boundaries between staff and the population to include the following:
  - Policy
  - Staff training on maintaining professional boundaries
  - Inmate education on appropriate boundaries
- Any recent audits, assessments, or evaluations, including those related to audits of standards as outlined in the section addressing facility certifications and accreditation below
- Population demographics, including at minimum the number of women in the facility, custody level, and projected length of stay

### **FACILITY DESIGN, PHYSICAL PLANT, AND ENVIRONMENTAL FACTORS**

- Facility schematic
- Camera plans
- Policy related to key control
- Policy related to camera management

### **HUMAN RESOURCES**

- Example job description for custody staff
- Example job description for case manager
- Policy on performance management

### **STAFFING**

- Policy addressing staffing plan development
- Master roster
- Shift rosters including exceptions
- Staffing plans and staff to inmate or detainee ratios

### **LEADERSHIP, STAFF, CONTRACTOR, AND VOLUNTEER TRAINING**

- Orientation materials for anyone who works with woman inmates or detainees
- Policy related to training for anyone who works with woman inmates or detainees
- Facility training plans for all classifications of staff, including both custody and non-custody
- Relevant training curriculum addressing key topics including the following:
  - PREA
  - Professional boundaries
  - Gender responsive
  - Trauma informed

## **INMATE OR DETAINEE INTAKE AND ORIENTATION**

- Policy on intake with accompanying forms
- Policy on orientation
- Orientation materials
- Inmate or detainee handbook

## **PROPERTY, CLOTHING, AND STORAGE**

- Property list
- List of items available at commissary
- Policy on allowable and excessive property, and property storage
- Policy on bartering and trading

## **VISITATION**

- Policy on visitation for general population, as well as restrictive housing
- Rules or guidelines for visitors
- Visiting list procedures

## **FOOD SERVICE AND DIETARY REQUIREMENTS**

- Policy on menu development
- Policy on meeting specialized diets

## **TRAUMA-INFORMED SEARCHES**

- Policy on searches, including clothed searches, unclothed searches, and room searches
- Staff training related to conducting searches

## **CROSS-GENDER SUPERVISION**

- Policy on cross-gender supervision
- Policy on searches
- Policy on opposite gender staff in living areas
- Staff training related to cross-gender supervision

## **USE OF FORCE**

- Policy on use of force
- Use of force training

## **AFTER-ACTION REVIEWS**

- Policy on incident reporting
- Policy on after-action reviews or incident reviews

## **GRIEVANCES AND REPORTING**

- Policy on inmate grievances
- Policy on reporting PREA incidents

## **INVESTIGATIONS**

- Policy on investigations
- Investigations training

## **DISCIPLINE AND SANCTIONS**

- Policy on the disciplinary process, including sanction grids (as applicable)

## **HEALTHCARE SERVICES**

- Policy on intake exams and screenings
- Policy on pregnancy and post-partum care
- Policy on use of restraints
- Policy on healthcare response to sexual abuse

## **MENTAL HEALTH SERVICES**

- Policy on access to mental healthcare
- Policy on screening and identification of trauma-associated symptoms during intake or admission
- Policy on the management of self-harm behaviors
- Mental health program list and schedule

## **CLASSIFICATION, PROGRAMMING, AND CASE PLANNING**

- Policy on classification and accompanying tools
- Policy on risk need assessment and accompanying tools
- Policy on PREA screening and accompanying tools
- Policy on case management
- List of programs delivered by facility staff and volunteers to include indication of programming available in restricted housing

## Attachment E: Reports Reviewed

- Sheriff Recruitment, Hiring, and Retention Process Improvement Report – October 2019
- Inventory of Countywide Diversion Programs – 2016 CEO Report
- Alternatives to Incarceration (ATI) – 2019 Interim Report
- Prop 57 Impact – 2016 CEO Report
- Prop 47 Impact – 2017 RAND Report
- Citizens Commission on Jail Violence (CCJV) - 2012 Report
- Office of Diversion & Reentry (OD&R) – 2019 Mental Health Safe Release Estimate
- LASD Inmate Release Process – 2019 LASD Memo to CEO
- Custody Population – Daily Stats to CEO and BOS (3 files – 12/16/19 snapshot)
- Prisoner Maintenance Rates – 2018 and 2019 Auditor-Controller Memos to LASD (3 files)
- Rosas Settlement Agreement – September 2014
- Rosas Implementation Plan – December 2014
- Custody Division Population 2015 Year End Report
- Custody Division Population 2016 Year End Report
- Custody Division Population 2017 Year End Report
- Custody Division Population 2018 Year End Report
- Evaluation of Current and Future Los Angeles Jail Populations – April 2012
- Bookings into the L.A County Jail (2010 – 2016) – June 2019 (Million Dollar Hoods White Paper)
- Evaluation of EBI Programs 2013
- EBI Master Program List 2018
- National Institute of Corrections Technical Assistance Report -
- LA County Jail Population Overcrowding Reduction Project – 2011 Vera
- Evaluation of Education Based Incarceration Programs at LASD – 2013 Jail Systems Institute
- Assessment, Gap Analysis, and Recommendations Report for Inmate Services Bureau – 2017 Fidelis Professional Services
- Lynwood to Lancaster: Opportunities and Challenges for the Los Angeles County Women’s Jail Relocation – November 2018, Harriett Buhai Center for Family Law
- Jail Visitation Innovation: Visitation and Family Support Services at Century Regional Detention Facility, Promote Public Safety – Feb 2020, Harriett Buhai Center for Family Law
- Lives and Circumstances of Women Held at the LA County Jail - 2008



## Attachment F: Biographical Sketches

**Andie Moss** is founder and president of The Moss Group. Through her organization, Ms. Moss manages multiple strategies to assist the field, including implementing the Prison Rape Elimination Act, working effectively with woman offenders, providing executive leadership training, assessing and supporting mission change and transition strategies, developing and leading culture change initiatives, delivering investigative trainings, and facilitating strategic planning. In 2003, TMG was awarded a multi-year cooperative agreement with NIC to manage its PREA initiative by providing training and technical assistance to the field, as well as present at professional conferences. Ms. Moss managed this cooperative agreement for seven years, providing technical assistance to nearly all 50 states, developing video toolkits for adult and juvenile corrections, developing an online e-learning training program, and publishing brochures and articles to assist the field with operational and policy issues related to PREA. Additionally, Ms. Moss served as subject matter expert to the National Prison Rape Elimination Commission and the PREA Review Panel. Ms. Moss is published in professional periodicals and authored a chapter in a correctional administrator's textbook on staff sexual misconduct. She is active in professional organizations, is the former chair for the ACA Women Working in Corrections Committee and is past president of the Association of Women Executives in Corrections. Additionally, Ms. Moss serves on the U.S. Immigration and Customs Enforcement Advisory Committee on Family Residential Centers. She also chaired the NIC Institute initiative on women offenders for five years. Ms. Moss has received numerous honors for her work, including the NIC Executive Director's Award and the Association of Women Executive's in Correction's Susan M. Hunter Award.

**Tina Waldron** joined The Moss Group in 2012. In her role as a project director, Ms. Waldron provides leadership and expertise in areas such as evidence-based correctional practice, leadership development, gender-responsive practice, reentry, mental health, agency and facility assessments, and strategic planning. Prior to her work with TMG, Ms. Waldron served as the reentry and women's services manager for the Missouri Department of Corrections (MDOC). In this role, she worked closely with representatives from MDOC, partnering state agencies, and community partners to research, plan, and evaluate Missouri's Reentry Process (MRP). MRP strategies were designed to advance the ability of the system to assist offenders leaving prison in preparing to reenter and successfully reintegrate into the community with the ultimate goal of enhancing public safety throughout the state. She has also served as a program consultant with the Kansas Department of Corrections (KDOC) where she acted in a leadership role in implementing evidence-based practice in community corrections and provided oversight, technical guidance, and training to Community Corrections Act agencies across the state. Ms. Waldron has served as a research analyst at KDOC, is an advanced communication and motivational strategies master trainer, has published articles on state specific risk reduction and reentry, and has taught as an adjunct professor of psychology at Washburn University in Topeka, Kansas. She received her bachelor's degree in Psychology and master's degree in Clinical Psychology from Washburn University.

**Dr. Carolina Montoya** is a licensed clinical psychologist practicing in Miami, Florida since 1988.

For 30 years, she has held administrative positions with Miami-Dade County, in the social services and criminal justice areas. For 15 years, she directed a comprehensive continuum of substance abuse treatment programs. Dr. Montoya also had the opportunity to direct the County's largest human services department with over 1,200 employees and a budget of over \$150 million. In 2007, she became the County's Mental Health Services Manager, responsible for advocacy and representation of mental health issues in all relevant County endeavors. Since 2010, Dr. Montoya has been with the Miami-Dade Corrections & Rehabilitation Department. In this role, she's involved in several critical operations including being the principle liaison with the inmate medical provider, development of specialized detention for the mentally ill, and the operation of the department's "Employee Psychological Services" unit. Since 2012, Dr. Montoya has served as a Trainer/Consultant to the National Institute of Corrections. In this role, she has taught Crisis Intervention Team (CIT) Training for Corrections at state departments of correction and local jails across-the-country and courses on executive leadership. Dr. Montoya has also provided Technical Assistance to agencies in the areas of mental health service delivery and suicide prevention.

Dr. Montoya has a doctorate in Clinical Psychology from Yeshiva University and a post-doctoral Masters in Psychopharmacology from Nova Southeastern University. Dr. Montoya has taught at the university and graduate-school levels, and is an experienced presenter at local, national, and international workshops and conferences.

**Jane Parnell** is a consultant with The Moss Group, providing expertise in the areas of woman offenders, operations, policy development, leadership, and culture. In her consultant capacity with TMG, she provides training in gender-specific treatment of female offenders, strategic planning, and leadership development.

In 2015, she retired from the Washington State Department of Corrections, where she concluded her career as superintendent at the Washington Corrections Center for Women (WCCW), the first women's facility in the United States to successfully meet all PREA requirements. Ms. Parnell has an extensive background in corrections dating back to 1974. Positions she has held include counselor, probation and parole officer, supervisor of various probation and parole offices, assistant director for community corrections, quality administrator, associate superintendent, superintendent of a prison for elderly and geriatric offenders, and superintendent of the WCCW.

Ms. Parnell has provided training and consulting services to a variety of public and private organizations since 1986. She has taught management classes for newly appointed first-level, mid-management, and executive managers in the field of law enforcement and corrections, as well as instructor development.

Ms. Parnell received her bachelor's in Sociology from Central Washington University. She is certified in the application of the Myers-Briggs Typology as well as Situation Leadership II through the Ken Blanchard Institute. She is also certified in EQ-I (Emotional Intelligence) and TESI 2.0 (Team Emotional and Social Intelligence), and Reality Therapy.

**Maggie Black** joined The Moss Group in 2014 as a project coordinator, providing logistical assistance and supporting the execution of multiple projects. In 2015, Ms. Black was promoted to associate project manager and in 2017 to project manager, where she continues to manage and coordinate projects with both adult and juvenile agencies focused on PREA standards implementation and compliance, culture enhancement, staff training, audit readiness, gender-responsive strategies, and strategic planning. She also serves on the TMG Volunteer Team. Notably, Ms. Black worked on gender-specific inmate orientation videos, provided support in leadership development trainings, provided on-site support during facility assessments, and assisted in curriculum development in the subjects of LGBTI, PREA, and gender responsiveness. Ms. Black formerly worked at the National Association of State Mental Health Program Directors and the National Center for Trauma Informed Care, working on a variety of projects to include mental health awareness and the reduction of seclusion and restraint. Ms. Black has a bachelor's degree in Sociology from Manhattanville College.

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- <sup>i</sup> ACA Standards for Adult Correctional Institutions, Standard 4-4137  
ACA Standards for Adult Correctional Institutions, Standard 4-4139  
ACA Standards for Adult Correctional Institutions, Standard 4-4153  
ACA Standards for Adult Correctional Institutions, Standard 4-4151, 4-4152  
ACA Standards for Adult Correctional Institutions, Standard 4-4145  
ACA Standards for Adult Correctional Institutions, Standard 4-4150  
ACA Standards for Adult Correctional Institutions, Standard 4-4218, 4-4132, 4-4333  
ACA Standards for Adult Correctional Institutions, Standard 4-4136
- <sup>ii</sup> Moss, A. (2007). The Prison Rape Elimination Act: Implications for Women and Girls. CT Feature. Available at: <https://www.wcl.american.edu/endsilence/documents/PREImplicationsforwomenandgirls.pdf>.
- <sup>iii</sup> Moss, A (2016). *Jail Tip #1: Being Gender Responsive and Trauma Informed is Just Good Correctional Practice*. Silver Spring, MD: National Resource Center on Justice-Involved Women.
- <sup>iv</sup> PREA Standard for Adult Prisons and Jails §115.33(a)  
ACA Standards for Adult Correctional Institutions, Standard 4-4291
- <sup>v</sup> ACA Standards for Adult Correctional Institutions, Standard 4-4324
- <sup>vi</sup> Guidance in Cross-Gender and Transgender Pat Searches was developed in 2015 by The National PREA Resource Center in collaboration with The Moss Group.
- <sup>vii</sup> Benedict, A. (2014). *Using Trauma-informed Practices to Enhance Safety and Security in Women’s Correctional Facilities*. Silver Spring, MD: National Resource Center on Justice Involved Women.
- <sup>viii</sup> PREA Standard for Adult Prisons and Jails §115.15 (a), (b), (c), and (f).
- <sup>ix</sup> Guidance in Cross-Gender and Transgender Pat Searches was developed in 2015 by The National PREA Resource Center in collaboration with The Moss Group.
- <sup>x</sup> PREA Standard for Adult Prisons and Jails §115.15(d)
- <sup>xi</sup> PREA Standard for Adult Prisons and Jails §115.51
- <sup>xii</sup> PREA Standard for Adult Prisons and Jails §115.52
- <sup>xiii</sup> PREA Standard for Adult Prisons and Jails §115.67(a)
- <sup>xiv</sup> PREA Standard for Adult Prisons and Jails §115.67(a), (c)
- <sup>xv</sup> PREA Standard for Adult Prisons and Jails §115.67(b)
- <sup>xvi</sup> Benedict, A., Ney, B. & Ramirez, R. (2015). *Gender Responsive Discipline and Sanctions Policy Guide for Women’s Facilities*. Silver Spring, MD: National Resource Center on Justice-Involved Women.
- <sup>xvii</sup> ACA Standards for Adult Correctional Institutions, 4-4229  
PREA Standard for Adult Prisons and Jails §115.78(e) and (g), respectively.
- <sup>xix</sup> ACA Standards for Adult Correctional Institutions, 4-4226
- <sup>xx</sup> The National Taskforce on the Use of Restraints with Pregnant Women under Correctional Custody (2014). *Best Practices in the Use of Restraints with Pregnant Women under Correctional Custody*. Available at: [http://nasmhpd.org/sites/default/files/Best\\_Practices\\_Use\\_of\\_Restraints\\_Pregnant\(2\).pdf](http://nasmhpd.org/sites/default/files/Best_Practices_Use_of_Restraints_Pregnant(2).pdf).
- <sup>xxi</sup> ACA Standards for Adult Correctional Institutions, 4-4403  
ACA Standards for Adult Correctional Institutions, 4-362 and NCCHC Standard P-E-02  
NCCHC Standards for Health Services in Prison, P-E-04  
NCCHC Standards for Health Services in Prison, P-E-12  
ACA Standards for Adult Correctional Institutions, 4-4353, NCCHC Standards for Health Services in Prison, P-G-09  
ACA Standards for Adult Correctional Institutions, 4-4353, NCCHC Standard P-G-09  
NCCHC Standards for Health Services in Prison, P-G-10  
NCCHC Standards for Health Services in Prison, P-G-09 discussion is clear that restraints should only be used when necessary due to serious threat of harm. The American Association of Correctional Administrators supports this noting that restraints should only be used when absolutely necessary to protect a woman from harming herself or others.

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NCCHC Standards for Health Services in Prison, P-G-09 discussion indicates that if deemed necessary abdominal, leg and ankle, and wrist restraints behind the back should not be used.

PREA Standard for Adult Prisons and Jails §115.83(d)

PREA Standard for Adult Prisons and Jails §115.83(e)

<sup>xxii</sup> ACA Standards for Adult Correctional Institutions, 4-4371; NCCHC Standards for Mental Health Services in Correctional Facilities MH-E-02

ACA Standards for Adult Correctional Institutions, 4-4403

Benedict, A., Ney, B. & Ramirez, R. (2015). *Gender Responsive Discipline and Sanctions Policy Guide for Women’s Facilities*. Silver Spring, MD: National Resource Center on Justice-Involved Women.

NCCHC Standards for Health Services in Prison, P-G-04 and MH-G-01

<sup>xxiii</sup> VanVoorhis, P. (2016) *Gender Responsive Interventions in the Era of Evidence Based Practice: A Consumer’s Guide to Understanding Research*. Silver Spring, MD: National Resource Center on Justice Involved Women.

<sup>xxiv</sup> Van Voorhis, P., Wright, E. M., Salisbury, E., & Bauman, A. (2010). Women’s risk factors and their contributions to existing risk/needs assessment: The current status of a gender-responsive supplement. *Criminal Justice and Behavior*, 37, 261–288. <http://dx.doi.org/10.1177/0093854809357442>

<sup>xxv</sup> Bloom, B (2015). *Meeting the Needs of Women in California’s County Justice Systems*. Californians for Safety and Justice. Local Safety Solutions Project (Oakland, CA).

<sup>xxvi</sup> Lerner, G. (n.d). *Building Effective Correctional Facility-Community Provider Partnerships for the Benefit of Justice Involved Women*. Silver Spring, MD: National Resource Center on Justice Involved Women.

<sup>xxvii</sup> Bumby, K (2016). *Jail Tip #7: Develop Community Partnerships*. Silver Spring, MD: National Resource Center on Justice-Involved Women.

<sup>xxviii</sup> Bumby, K & Ramirez, R. (2016). *Jail Tip #8: Support Women’s Successful Transition and Reentry from Jails..* Silver Spring, MD: National Resource Center on Justice-Involved Women.

<sup>xxix</sup> Ramirez, R. (2010). *Reentry Considerations for Justice Involved Women*. Silver Spring, MD: National Resource Center on Justice-Involved Women.

<sup>xxx</sup> King, E., & Foley, J.E. (2014): *Gender Responsive Policy Development in Corrections: What We Know and Roadmaps for Change*. Washington, DC: National Institute of Corrections.

<sup>xxxi</sup> Adapted from: Crime and Justice Institute at Community Resources for Justice (2009). *Implementing Evidence-Based Policy and Practice in Community Corrections*, 2nd ed. Washington, DC: National Institute of Corrections.

<sup>xxxii</sup> World Health Organization (2002). *World Report on Violence and Health*. Geneva, Switzerland.

<sup>xxxiii</sup> Adapted from: Benedict, A., Ney, B. & Ramirez, R. (2015). *Gender Responsive Discipline and Sanctions Policy Guide for Women’s Facilities*. Silver Spring, MD: National Resource Center on Justice-Involved Women.

<sup>xxxiv</sup> Adapted from: <https://www.uc.edu/womenoffenders.html>

<sup>xxxv</sup> Benedict, A., Ney, B. & Ramirez, R. (2015). *Gender Responsive Discipline and Sanctions Policy Guide for Women’s Facilities*. Silver Spring, MD: National Resource Center on Justice-Involved Women.

<sup>xxxvi</sup> Adapted Benedict, A., Ney, B. & Ramirez, R. (2015). *Gender Responsive Discipline and Sanctions Policy Guide for Women’s Facilities*. Silver Spring, MD: National Resource Center on Justice-Involved Women.

<sup>xxxvii</sup> Benedict, A., Ney, B. & Ramirez, R. (2015). *Gender Responsive Discipline and Sanctions Policy Guide for Women’s Facilities*. Silver Spring, MD: National Resource Center on Justice-Involved Women.

<sup>xxxviii</sup> Adapted from: Benedict, A. (2014). *Using Trauma-informed Practices to Enhance Safety and Security in Women’s Correctional Facilities*. Silver Spring, MD: National Resource Center on Justice Involved Women.

<sup>xxxix</sup> Benedict, A., Ney, B. & Ramirez, R. (2015). *Gender Responsive Discipline and Sanctions Policy Guide for Women’s Facilities*. Silver Spring, MD: National Resource Center on Justice-Involved Women.

<sup>xl</sup> Adapted from: Crime and Justice Institute at Community Resources for Justice (2005). *Implementing Evidence Based Practice in Community Corrections: Quality Assurance Manual*. Washington, DC: National Institute of Corrections.



THE MOSS GROUP, INC.

*Experienced Practitioners Committed to Excellence in Correctional Practice*

# Strategic Implementation Plan: Gender Responsive Justice

*Los Angeles County Sheriff's Department*

*Final Submission: July 24, 2020*



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## Project Context

In 2019, the County of Los Angeles' Chief Executive Office (the CEO) of the Board of Supervisors (BOS) contracted with The Moss Group, Inc. (TMG) to provide gender responsive reform recommendations, through expanding, initiating and maintaining gender-responsive and trauma-informed programming and services at the Century Regional Detention Facility (CRDF). The outcomes of this work include two deliverables: (1) a Priorities Framework (submitted in March 2020) that provides a vision towards of system of services, programs, and operational practices that are gender-responsive, and (2) a Strategic Implementation Plan (SIP) that supports the Framework recommendations.

The following draft SIP provides detailed goals and actions that align with the priority areas outlined in the Framework. It is designed as a collaborative implementation plan to support the Gender Responsive Advisory Committee (GRAC) and CRDF and LASD leadership in creating a CRDF gender responsive model.

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*TMG believes that our language in the justice system matters and impacts the level of inclusivity and respect inherent in the justice system. The scope of work for this project was focused on enhancing gender-responsive practices and programs to meet the needs of justice involved women at the Century Regional Detention Facility (CRDF). In the context of this plan, when the word "woman" or "women" is to be read broadly and includes people who are non-binary or who identify as gender nonconforming.*

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## Influencing Factors

### *COVID-19*

The global COVID 19 pandemic has disrupted justice system policies, procedures, and practices in jails and confinement settings across the country. The impact of the pandemic calls for a slight shift in the lens with which the Strategic Implementation Plan should be reviewed. The long-term impact of the pandemic is unknown; however, the focus and goal of this initiative remains to strengthen and implement a gender responsive trauma informed justice system for individuals in County custody and those re-integrating back into the community.

Evaluation and assessment activities were conducted from October 2019 through February 2020, and the Priorities Framework was provided to the CEO and GRAC in March 2020. As such, both the Framework and the draft SIP address a pre-COVID point in time snapshot of practice at CRDF and stakeholder perspectives. While the presence of the pandemic has led to changes that are more significant than are generally seen (i.e., increased depopulation, decreased intake, space utilization changes, and reduced availability of reentry resources), TMG believes that the work represented in this plan is still relevant and important to enhancing both jail operations and community collaboration and connections for reentry.

### *ATI Initiative*

TMG has identified opportunities for collaboration on a number of recommendations within the draft SIP and the Alternatives to Incarceration (ATI) *Care First, Jail Last, Health and Racial Justice Strategies for Safer Communities* report. This synergy between the Gender Responsive Justice and ATI initiatives has the potential to create opportunities for cost-effective solutions to benefit LA County. Additional detail on the intersection of recommendations between this report and the ATI report is described further below.

### *Community Stakeholder Interview Themes*

Interviews were conducted with a broad range of individuals and organizations committed to reform and gender responsive justice in LA County. While a wide range of perspectives and interests were shared, the major, consistent themes that emerged included the following:

- Alternatives to incarceration
- Continuum of reentry services
- Data collection
- Systemic considerations
- Collaboration and coordination between County groups and initiatives
- GRAC

#### **Alternatives to Incarceration**

Overwhelmingly, stakeholders recognize the inherent challenges posed by the number of people confined at CRDF versus the population size for which the facility was designed. While there is a need for design modifications to increase space, many expressed hopes that additional avenues of alternatives to incarceration could be explored to keep women from coming into the system at the outset. Alternatives to incarceration are seen as having a great deal of political and community support not only for the benefits that accrue to the facility itself but for the potentially life-changing benefits for those people who can be redirected to programs and services that increase their potential for restitution rather than going into the justice system. It was often noted that there is a high percentage (estimated 80%) of women in jails who are mothers and often the primary caregivers of their children. In these cases, the “ripple effect” on children multiplies the disruption of incarceration and increases the value of diversion.

Stakeholders recognize that there will always be a portion of the CRDF population that requires a secure facility for incarceration and will not desire to participate, or be eligible for participating in, diversion programs. However, there is a strong belief that focusing on the catalysts that prompted involvement in the justice system and providing meaningful alternatives to the appropriate population, could lead to a reduction in both the number of women incarcerated and recidivism.

#### **Continuum of Reentry Services**

The vitality and impact of reentry services are seen as being directly related to those services and programs provided while incarcerated. This again goes back to the importance of ensuring the presence and active involvement of children and their caregivers throughout incarceration and providing programming designed to address the unique needs of the women. Case management is a critical component for providing targeted services both during confinement and after release. The need for family unification and support services is seen as an integral part of a holistic system of wrap-around services that are inextricably linked in assisting incarcerated women back into society. Most every stakeholder noted at least one or more components of these services as being critical in ensuring justice involved women’s successful reentry into the community. A need for more domestic violence support for people when they are leaving a custodial facility is vital as is the need for assistance in obtaining housing. Stakeholders and providers continually stressed that ensuring staff have gender-responsive and trauma-informed practice training at all points in the system is a crucial component to supporting women in successful reintegration.

#### **Data Collection**

A common thread running through the interviews was a frustration and concern about the lack of an infrastructure for data measurement and the need for data collection. This is a foundational void as accurate

and available data is necessary for a greater understanding of the array of issues relating to justice-involved people. Collecting relevant data would provide profiles of those persons at CRDF to better evaluate the factors leading to incarceration and the reasons underlying their interface with the justice system.

Moreover, data can be an important driver in determining the best use of resources to keep women from returning to jail. A consistent theme from stakeholders revolved around the observation that alternatives to incarceration can be highly successful in decreasing recidivism. Analyzing existing research and data would provide valuable assistance in developing a women's system that includes aspects of diversion and support. Data would also help evaluate the efficacy and efficiency of existing programs and determine what programs are successful in reducing recidivism, increasing family reunification, and predicting future success. The prevailing sentiment among stakeholders was that there can be little progress towards change without the benefit of objective data.

### **Collaboration and Coordination among County Organizations and Initiatives**

The importance of collaboration and coordination of County reform efforts and initiatives was identified consistently by stakeholders. There is a perception that important work is being done on behalf of justice involved women and their families; however, the work is often done in silos and lacks integration or coordination of ideas and efforts. The need for fresh and innovative approaches is seen as a key to transforming CRDF. A component of this will be to review the "why" that underlies many existing processes and procedures to identify more efficient ways to accomplish important goals. Aligning efforts and fostering intentional, ongoing collaboration and communication are steps that may be felt could support and result in a timelier and more effective implementation of positive change.

### **Systemic Considerations**

Many of those interviewed observed the value of adopting a shared definition of what a "threat to the community" means to develop a shared understanding of who should, and should not, be incarcerated. There are many groups/agencies/organizations involved in the justice system pipeline and all components must consult and cooperate with one another to achieve the best outcomes.

Some existing efficiencies in the judicial system were specifically noted as being of value to justice involved women. Specifically, dependency court was acknowledged as having heightened impact for women due to the likelihood that they are the primary caregiver prior to incarceration, and it is perceived as providing great value in assisting with family reunification. Identified opportunities included fostering better communication and coordination between criminal and dependency cases and developing human trafficking and mental health courts to offer the opportunity for enhanced services.

### **Gender Responsive Advisory Committee (GRAC)**

A great deal of optimism is placed in the work being conducted by the re-constituted GRAC. There is a consensus that one of the challenges of previous gender responsive efforts was the absence of a unified leadership voice. Many stakeholders are hopeful that with the strong support from the BOS, the GRAC's current effort will lay the groundwork to successfully implement positive change at CRDF. It was frequently noted that one of the vital roles GRAC can play is to evaluate successful programs throughout the country and help implement those that can be carried out within the physical and financial constraints at CRDF. More importantly, if the voices of various advocacy groups and service providers can be coalesced under the GRAC umbrella, it has the potential to be transformative.

## Introduction

Women involved in the criminal justice system have distinct pathways into justice involvement that are different than men. When correctional programs and environments are designed to respond to their needs, positive outcomes for the population are met more frequently. **Attachment C** provides a summary of key research for partners in gender-responsive reforms to keep in mind when developing strategies to improve practice. The discussion is excerpted from a larger literature review by Owen, Wells, and Pollack for the National Institute of Corrections (NIC) Safety Matters Project<sup>1</sup>.

The summary literature review of justice involved women has shown that they are different from male offenders in family background, criminal history, drug and alcohol use, and prior victimization. Their current lives and behavior while incarcerated often reflect their history. Prior histories of family and intimate partner dysfunction and violence may influence women's interactions with each other and staff. This is often seen in the escalation of minor interactions or incidents that may appear more emotionally charged than the actual situation. These dynamics speak to the importance of staff training and creating a model of practice that is very specific to a trauma informed approach.

In addition to being research-based, the SIP is based on years of TMG's practitioner experience in conducting sexual safety and cultural assessments as well as supporting agency and facility management teams in implementing and sustaining gender-responsive operational practice, resolving systemic challenges to safety, navigating legal settlements, and addressing strategies resulting in positive outcomes for women.

The six guiding principles of gender-responsive practice<sup>2</sup> and the ten truths that matter when working with women<sup>3</sup> provide a solid underpinning of research for the SIP as does best practice and professional standards for women's facilities. TMG has been a partner with numerous agencies and organizations that advocate for the development and implementation of safety and best practice to respond to transgender, non-binary, and gender non-conforming individuals – both staff and the population in custody. TMG is committed to integrating this information into protocols and statements of best practices in any initiative to implement the strategies recommended in this work with the LASD, as well as the GRAC, County agencies and stakeholders, and community service

## Principles of Gender-responsive

- Acknowledge that **gender** makes a difference.
- Create an **environment** based on safety, dignity, and respect.
- Develop policies, practices, and programs that are **relational** and promote healthy connections to children, family, significant others, and the community.
- Address substance abuse, trauma, and mental health issues through comprehensive, **integrated, and culturally relevant services and appropriate supervision.**
- **Provide women with opportunities to improve their socioeconomic conditions.**
- Establish a system of **community supervision** and reentry with comprehensive, collaborative, services.

<sup>1</sup> Review conducted under Cooperative Agreement 13CS10GKQ5 between The National Institute of Corrections and The Moss Group. The bibliography for this review can be found in Attachment A, Literature Review References.

<sup>2</sup> Bloom, B., Owen, B., and Covington, S. (2005). *Gender Responsive Strategies A Summary of Research, Practice, and Guiding Principles for Women Offenders*. Washington, DC: National Institute of Corrections.

<sup>3</sup> Ney, B, Ramirez, R., & Van Dieten, M. (2012). *Ten Truths That Matter When Working with Justice Involved Women*.

providers. There continues to be emerging resources and guidance to the field of corrections that suggest best practice and operational guidance.

Based on the current state of the art of literature addressing gender-responsive practice, the following key resources were used to support development of the SIP:

#### Relevant professional standards

- American Correctional Association (ACA)
- National Commission on Correctional Healthcare (NCCHC)
- Prison Rape Elimination Act (PREA)

#### Relevant TMG protocols

- Gender-responsive Operational Assessment
- Mission Change Physical Plant and Operations Matrix

#### Relevant training curricula

- Gender-responsive Approaches for Women
- Guidance in Cross-gender and Transgender Pat Searches<sup>4</sup>
- New York City Department of Corrections Special Populations training curriculum

#### Relevant resources and articles

- Gender-responsive Discipline and Sanctions Policy Guide for Women's Facilities<sup>5</sup>
- Using Trauma-informed Practices to Enhance Safety and Security in Women's Correctional Facilities<sup>6</sup>
- Developing Correctional Policy, Practice, and Clinical Care Considerations for Incarcerated Transgender Patients through Collaborative Stakeholder Engagement<sup>7</sup>

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<sup>4</sup> Guidance in Cross-Gender and Transgender Pat Searches was developed in 2015 by The National PREA Resource Center in collaboration with The Moss Group.

<sup>5</sup> Benedict, A., Ney, B. & Ramirez, R. (2015). *Gender Responsive Discipline and Sanctions Policy Guide for Women's Facilities*. Silver Spring, MD: National Resource Center on Justice-Involved Women.

<sup>6</sup> Benedict, A. (2014). *Using Trauma-informed Practices to Enhance Safety and Security in Women's Correctional Facilities*. Silver Spring, MD: National Resource Center on Justice Involved Women.

<sup>7</sup> Benedict, A. (2014). *Using Trauma-informed Practices to Enhance Safety and Security in Women's Correctional Facilities*. Silver Spring, MD: National Resource Center on Justice Involved Women.

## Strategic Implementation Plan (SIP) Purpose and Structure

This SIP was developed by addressing the goals that comprised the Framework Priorities report presented in March 2020. The goals, actions, and strategies identified were designed to meet the specific needs of the LASD and CRDF as the department and community strive to enhance services and treatment with justice involved women. **As noted on page four, throughout the plan when the word “woman” or “women” is used, sit is to be read broadly and includes people who are non-binary or who identify as gender nonconforming.**

The SIP provides information and tools based on research, best practice, and practitioner experience to support addressing factors related to the facility, the environment, professional relationships between staff and justice involved women and resources for the population to optimize safety.

The purpose of the SIP is to serve as a roadmap to enhance gender-responsive practices at CRDF. This roadmap outlines a multi-year approach to align LASD and CRDF policy, procedure, practice, and culture with the most current research, practitioner expertise, stakeholder input and the voices of women with lived experience. This includes approaches to operational practices, programs, and services that respond to the strengths and challenges of justice involved women. It also includes approaches to developing staff knowledge, tools, and abilities; running facilities to promote safety, dignity, and respect; treating assessed risk factors; partnering with stakeholders; bringing the philosophy of Care First into the confinement setting; and preparing justice involved women<sup>8</sup> for release. See **Attachment A** and **Attachment B** for additional details on implementation considerations and timeline visual. This work has the potential to disrupt the cycle of family justice involvement, positively impact the lives of children, and make communities safer through recidivism reduction.

The SIP provides a comprehensive set of goals, structured in two categories:

- 1) *Collaborative Case Management, Program Planning and Provision, and Continuum of Reentry Services*
- 2) *CRDF Operations, Programs, and Services*

These goals correlate to the Priorities Framework nine domains as follows:

Priorities Framework		Strategic Implementation Plan Goal(s)
Priority 1	Population Management and Design	Included in Steve Carter report (Attachment F)
Priority 2	Leadership, Management, and Culture	Goals 6, 7, 8, 9, and 10 <i>ATI related goals: 97, 100, 106</i>
Priority 3	Initial Experiences and Daily Living	Goals 3, 11, 12, 13, and 14 <i>ATI related goals: 57</i>

<sup>8</sup>It is recognized that the goals, objectives, and strategies presented in this plan may encourage future attention to needs that may be “gender-responsive” for men. In the present strategic plan however, “gender-responsive” focuses on justice involved women. Attribution of the term to women is consistent with common usage in the literature prevailing at the time of this writing. Additionally, there are historical reasons for focusing this plan exclusively on women in custody. Current correctional models were designed for men and applied to women with minimal supporting research. Until recently, even practices termed “gender-neutral” were based upon research conducted either exclusively on male offenders or upon samples that were not disaggregated by gender.


<b>Priority 4</b>	Facility Operational Considerations	Goals 15, 16, and 17 <i>ATI related goals: 46</i>
<b>Priority 5</b>	Grievance, Accountability, and Reporting	Goals 18, 19, and 20 <i>ATI related goals: 78, 110, 111</i>
<b>Priority 6</b>	Clinical Services	Goals 21 and 22 <i>ATI related goals: 13, 58, 68, 82,</i>
<b>Priority 7</b>	Classification and Case Planning	Goals 1 and 24 <i>ATI related goals: 3, 6, 82</i>
<b>Priority 8</b>	Facility Programming	Goals 2 and 23 <i>ATI related goals: 7, 72, 73, 74</i>
<b>Priority 9</b>	Continuum of Reentry Services	Goals 4 and 5 <i>ATI related goals: 20, 21, 32, 34, 58, 73, 74</i>

The goals include broad timelines; however, these recommendations must consider local priorities and opportunities to connect with other County initiatives before moving the work forward. TMG provides these goals and recommendations to the GRAC as a framework to building a gender responsive facility. The GRAC makes the final determination of the prioritized reform recommendations to be made to the BOS. The BOS will in turn work with LASD on taking the next steps toward implementing reforms.

Attachments to the plan provide additional detail of the SIP goals and action steps, as well as relevant resources and research, and include the following:

- *Attachment A: Goals-in-detail*
- *Attachment B: Goals Timeline Chart*
- *Attachment C: Literature Review*
- *Attachment D: Alternatives to Incarceration (ATI) Report Convergence*
- *Attachment E: Visitation Workgroup Report*
- *Attachment F: Steve Carter Physical Plant Report*
- *Attachment G: Gender-responsive Staffing Considerations*
- *Attachment H: Training Matrix*
- *Attachment I: Key Questions for Staff Conducting Intake and/or Orientation*

### Short Term Wins

Throughout the plan this symbol  is used to denote those actions that TMG recommends can be completed quickly with significant impact. The following assumptions were made in selecting these actions:

- Strategies could be completed within 90 days, provided staff are made available and committed to accomplishing them.
- Actions could be completed within 90 days, provided financial resources, if needed, are available.
- Actions to be taken need to be guided by the vision, mission, and values of the GRAC, LASD, and County stakeholders.

- Selected actions will be recognizable to both staff and the population in order to build trust in the department's commitment to reform.

### **Alternatives to Incarceration (ATI) Report Convergence**

As noted in the Influencing Factors section above, alternatives to incarceration is a priority area of focus for the BOS and many others in LA County. Specifically, the County-commissioned ATI workgroup recently published a report *Care First, Jails Last: Health and Racial Justice Strategies for Safer Communities* that summarized a vision of health services and solutions in the County so that jail is the last option. Within the ATI report, several themes and recommendations highlight the synergy between the Gender Responsive Justice and the ATI initiatives and reflect the potential to create opportunities for cost-effective solutions to benefit LA County. To that end, where there is convergence in recommendations between the two reports, the corresponding ATI recommendation numbers are denoted in **red**. The ATI report is included as **Attachment D**, for reference.



## Goals at-a-Glance

The graphic represented in *Figure 1* depicts the comprehensive set of goals that provide a roadmap to enhancement of gender-responsive practices centering on the work occurring with justice involved women entering and releasing from CRDF. For ease of use, these goals are separated into two distinct categories.

The first set of goals, titled *Collaborative Case Management, Program Planning and Provision, and Continuum of Reentry Services*, relies heavily on collaboration between the LASD and GRAC. These goals are focused on:

- Development of an inside out system of collaborative case management
- Program planning, provision, and evaluation
- Mapping and coordination of community reentry provider services, access, and capacity
- Development of a reentry continuum of services that is partnership driven and constantly evolving

The second set of goals, titled *CRDF Operations, Programs, and Services*, addresses key components of facility-based gender-responsive practice from programming and services to operational practice and staffing. They also are embedded in the importance of creating a culture of safety and are largely owned by LASD with targeted collaboration.

**SECTION 1: Collaborative Case Management, Program Planning and Provision, and Continuum of Reentry Services**

Implement a collaborative case management process.	Enhance programming specific to women's needs.	Review and reconsider visitation space.
	Conduct a mapping of reentry resource providers.	Develop a collaborative community partners and services system.

**SECTION 2: CRDF Operations, Programs, and Services**

Develop mission, vision, and values statements.	Maintain staffing levels that consider the needs of women.	Evaluate a dedicated transportation unit for CRDF.
Implement an HR system specific to working with women.	Implement gender responsive training.	Redesign the intake area for more privacy.
Provide an orientation process specific to the needs of women.	Implement a review process for women's clothing and personal care items.	Evaluate storage adequacy for property items.
Create a trauma-informed policy and training.	Review and update cross-gender search and supervision policies and practice.	Consider a gender-specific section in the use of force policy and training.
Conduct an in-depth review of grievance numbers.	Consider revision of current disciplinary processes.	Review how incident reports and other data are used in problem-solving.
Improve clinical and custody collaboration.	Improve privacy options for mental health clinician and client meetings.	Consider developing women's classification, programs, and case management division.
	Explore the implementation of a classification process for women.	

Figure 1

## SECTION 1: Collaborative Case Management, Program Planning and Provision, and Continuum of Reentry Services

**Goal 1: Implement a collaborative case management process. Implement a process, such as Women Offender Case Management Model (WOCMM)<sup>9</sup>, for collaborative case management that includes routine reviews and updates of case plans, attends to women's basic needs, and drives program placement.**

**Related ATI Goals: 3, 6, 82**

1. **Action:** *Identify and appoint a steering committee, chaired by the Director of Gender Responsive Services, and comprised of selected stakeholders, to include current internal and external program providers and security representation, to develop a collaborative case management process.*
  - a. Agency and Facility Strategies:
    - i. Task the steering committee to determine implementation considerations to include, at a minimum, the following:
      1. How does this case management process address needs at intake, through incarceration, and at discharge?
      2. How do we integrate substance abuse and mental health issues into the program assessment process?
      3. How will community support and resources be integrated into case planning?
      4. How might risk of recidivism be incorporated into the case planning process, and how should prioritization services be determined?
      5. How do we ensure that the women in programs are those most in need?
      6. What type of review process should be part of the case management plan?
      7. What quality assurance measures are important to ensure fidelity in the case management process?
2. **Action:** *Develop and implement a process for collaborative case planning that begins at intake, includes routine reviews and updates, and attends to women's basic needs throughout incarceration in preparation for release.*
  - a. Agency Strategies:
    - i. Identify, approve, and allocate resources needed to implement a viable case planning process.
  - b. Agency and Facility Strategies:
    - i. Recruit, interview, and hire Population Management Bureau (PMB) staff positions<sup>10</sup> as needed to assess treatment need with program availability.

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<sup>9</sup> Women Offender Case Management Model information can be found here:

<https://s3.amazonaws.com/static.nicic.gov/Library/021814.pdf>

<sup>10</sup> Note the focus on PMB positions to be utilized at intake is based on current LASD structure. It is being recommended, specific to CRDF, that facility-based case management staff be integrated into the jail teams. These positions could serve the intake, assessment function as well as case management functions with appropriate training.



- ii. Orient and train staff in their job responsibilities, and ensure they meet the knowledge and skill requirements of their respective positions specific to case management for justice involved women.
  - iii. Identify and provide space, resource, and equipment needs for case management staff.
  - iv. Create and implement a gender-responsive case management protocol. Develop policy to memorialize processes and procedures.
  - v. Develop and implement a communication plan to ensure all staff (custody and non-custody), volunteers, and contractors understand the collaborative case planning process.
3. **Action:** *Begin conducting comprehensive case management plans that address the complex and multiple needs of justice involved women.*
- a. Agency Strategies:
    - i. Allocate resources for comprehensive, integrated services that focus on the economic, social, and treatment needs of women.
  - b. Facility Strategies:
    - i. Ensure that justice involved women are provided with needed medical, mental health, and substance abuse services.
    - ii. Promote intrinsic motivation by involving women in identifying their individual treatment needs and developing goals and action plans.
    - iii. Ensure case planning is designed to match justice involved women treatment needs with available programs and resources and is consistent with assessed needs and facility safety.
    - iv. Develop formal, documented case plans for justice involved women and share them, as appropriate, with appropriate community service providers upon release.
    - v. Once established, assist justice involved women in achieving the goals outlined in their case plans to increase self-efficacy and promote successful reintegration into the community upon release.
    - vi. Develop and incorporate as part of the case planning process, a program adjustment/review process to monitor progress or the need to update goals.
  - c. Agency and Facility Strategies:
    - i. Use the assessment of risk, needs, and strengths, as the foundation for a gender-specific case management plan.
4. **Action:** *Use outcome data to demonstrate and evaluate the impact of the assessment process.*
- a. Agency and Facility Strategies:
    - i. Identify performance measures and develop tracking systems specific to the effectiveness of the case management plans.
    - ii. Train supervisors to conduct quality assurance checks on justice involved women's case management plans to ensure program integrity.
    - iii. Monitor the progress of treatment plans and evaluate the plans' success in meeting the unique needs of women.
    - iv. Review and revise, as needed, the gender-responsive case management protocol, based upon lessons learned and resources available.

**Goal 2: Enhance programming specific to women’s needs. Enhance programming specific to women’s needs (trauma, relationships, family reunification, anxiety, depression, and parenting). Develop a system designed to match women to programs based on assessed need via Northpoint COMPAS.**

**Related ATI Goal: 7**

1. **Action:** *Through the guidance of Classification, Programs, and Case Management Steering Committees, evaluate evidence based and research-based programs and practices which address gender-responsive needs and can be delivered at CRDF.*

a. Agency and Facility Strategies:

-  i. Adopt formal definitions of programs and activities. Examples could include:
  - 1. Program: Structured interventions that address the needs linked to criminal behavior with the goal of reducing risk (e.g., Beyond Trauma, Moving On, Seeking Safety, and anger management).
  - 2. Pro-Social Activity: Classes, groups, services, or gatherings that while not designed to address specific, individual women’s needs nor are directly linked to criminal behavior, nevertheless provide benefit through justice involved women enrichment and reduction of idleness (e.g., parenting, 12-step groups, relationships, resume writing, budgeting, health and wellness, and yoga behind bars).
  - 3. Service: Interventions provided by a licensed medical, mental health, or substance abuse professional to address critical/relevant clinical treatment needs (e.g., chemical dependency treatment, co-occurring disorders, sex offender treatment, trauma, and depression).
-  ii. Identify and categorize the programs, classes, activities, and services that are currently being offered at CRDF.
- iii. Ensure that services provided by internal and external stakeholders are gender responsive.
- iv. Ensure that all staff, as well as internal and external stakeholders, understand the differences between programs, pro-social activities, and services, and understand the principles of risk, need and responsivity and how these guide service provision.

2. **Action:** *Through the guidance of the Classification, Programs, and Case Management Steering Committees, implement evidence based and research-based programs to address gender-responsive needs on a priority basis.*

a. Agency and Facility Strategies:

- i. Implement research-based programs to address gender-responsive needs.
- ii. Identify space and staffing needs to support each program.
- iii. Prioritize program delivery based upon staffing and space availability.
- iv. When selecting programs for implementation, give priority to programs that target risk factors.
- v. Train staff on the knowledge, skills, and protocols necessary to deliver those programs.
- vi. Monitor and evaluate all programs on an-going basis to ensure quality assurance and fidelity.

3. **Action:** *Through the guidance of the Classification, Programs, and Case Management Steering Committees, implement pro-social activities and services to address gender-responsive needs on a priority basis.*
  - a. Agency and Facility Strategies:
    - i. Identify space, staffing, and training needs to support each program.
    - ii. Prioritize delivery based on staffing, space availability, and justice involved women needs.
    - iii. Provide pro-social activities that involve, support, and enhance connections with family and children.
    - iv. Secure the services of community volunteers to assist with gender-responsive, pro-social activities and provide necessary training.
    - v. Provide, or advocate for, enough gender-responsive mental health services for justice involved women.
    - vi. Provide, or advocate for, enough gender-responsive health services for justice involved women.
    - vii. Provide, or advocate for, treatment that addresses the co-occurrence of mental health, addictions, and trauma.
    - viii. Provide chaplaincy services that are inclusive of the faith traditions of all justice involved women.
  
4. **Action:** *Develop a system designed to match women to programs based on assessed need via Northpoint COMPAS.*
  - a. Agency and Facility Strategies:
    - i. Assign justice involved women to programs based on their assessed or identified treatment needs.
    - ii. Develop policy to match women to programming based on assessed needs.
  
5. **Action:** *Develop criteria to match women to pro-social activities and services.*
  - a. Agency and Facility Strategies:
    - i. Develop a pro-social activities and services matrix matched to gender-responsive needs.
    - ii. Establish pro-social activities and services for restrictive housing.
    - iii. Develop a communication process to ensure all justice involved women are aware of and have reasonable access to available pro-social activities and services.
    - iv. Develop a process to ensure a current list of all pro-social activities and services is maintained and kept up to date.
  
6. **Action:** *Use outcome data to evaluate and demonstrate the impact of gender-responsive programs and services.*
  - a. Agency and Facility Strategies:
    - i. Identify performance measures and develop tracking systems specific to the effectiveness of the gender-responsive programs and services.
    - ii. Analyze data collected to ensure gender-responsive programs and services are meeting performance expectations.
    - iii. Provide ongoing modifications of gender-responsive programs and services, as needed.

**Goal 3: Review and reconsider visitation space. Review and reconsider the visitation space, schedule, eligibility, duration, and date options. Visitation for women can relieve stress and improve their ties to the family and community. Contact visitation, lengthening timeframes, increasing slots and days of the week, increasing access to the ABC Program, improving options for visits from a distance (such as Skype or Zoom), and other creative solutions can improve not only the quantity but also quality of visits for women housed at CRDF.**

1. **Action:** *Increase visiting opportunities for justice involved women and their families to provide as normal a family experience as possible:*
  - a. Agency and Facility Strategies:
    - i. Consider adding staff, who are committed to the success of the visiting program, to enable visiting 7 days a week and increase the time allocated for each visit.
    - ii. Develop a schedule to allow justice involved women the maximum number of visitors possible, unless there are substantial reasons to justify visit limitations.
    - iii. Allow an exception for the number of visit participants when a child is accompanied by an adult escort.
    - iv. Review visitation eligibility criteria to identify opportunities to safely expand visitation access.
    - v. Develop a process for “special visits” if the family resides a significant distance from the facility and as special considerations warrant.
    - vi. Develop options for women in restrictive housing to have visits, unless there is a safety concern that justifies excluding visitation.
    - vii. Consider allowing extended family visiting (for justice involved women to spend the night with children who meet qualifications) when space and staffing allows.
  
2. **Action:** *Maintain visiting programs that help justice involved women preserve positive ties with family, friends, and the community.*
  - a. Agency and Facility Strategies:
    - i. Develop policies and procedures to ensure the visiting experience is comfortable, pleasant, and permits information communication and limited, appropriate physical contact.
    - ii. Carefully select staff to work in visitation to ensure that all visitors and justice involved women will be treated courteously and who will enforce the rules in a polite and professional manner.
    - iii. Provide staff who work in visitation with specialized training regarding customer service (treating justice involved women’ and their families with dignity and respect) and that emphasizes the important role visits play in the reentry process.
    - iv. Explore options (such as Jpay, GTL, etc.) for electronic letters to and from family to justice involved women. Emails should not go through the internet directly to the recipient but should be subject to the screening and delivery rules that apply to traditional mail.
    - v. Consider and prioritize the recommendations made by the GRAC Visitation Workgroup<sup>11</sup>.

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<sup>11</sup> See Attachment E

3. **Action:** *Ensure visitors are provided with information on expectations, policies, and processes<sup>12</sup>.*

a. Agency and Facility Strategies:

- ★ i. Evaluate the effectiveness of the current website sign-up process to ensure that the technology works appropriately and that people with limited internet resources have options for sign-up.
- ii. Consider strategies to provide visitation information for those who do not have internet access.
- iii. Develop a brief video of expectations, policy, and procedure to embed in the current website.
- ★ iv. Revise the current website to be more “user friendly.” Include information such as:
  - 1. Phone number for visiting center
  - 2. Policies/unit orders specific to visiting, including eligibility criteria
  - 3. Visiting guidelines specific for professional visits
  - 4. Visiting guidelines specific for family and friends' visits
  - 5. Link to visiting application
  - 6. Visiting days and hours
  - 7. Frequently asked questions (how to send money, allowable packages, how to notify justice involved women of an emergency, etc.)
  - 8. Alerts and notices
- ★ v. Consider using social media (Facebook page, Twitter, Instagram, etc.) to keep visitors informed of unplanned events which may affect visiting.
- vi. Create a process to gather feedback from visitors on common barriers such as parking, appropriate clothing, transportation, etc. and provide resources to assist with common challenges.

4. **Action:** *Create adequate visiting space to allow for contact visiting, including a parent and child visitation area, that provides a visitor-friendly environment.*

a. Agency Strategies:

- i. Approve and allocate resources needed to revision visitation, from both an operational and spatial perspective.

b. Agency and Facility Strategies:

- i. Consider and adopt one of three options from Steve Carter’s report<sup>13</sup> specific to creating more visiting space. These options include the following:
  - 1. Repurpose existing visitor processing and waiting space. The large lower level waiting/processing space could be converted to a new contact visiting area through a reversal of the flow where justice involved women move unescorted through the dedicated elevators to the new Visiting Center at the lower level. This space could be re-designed to include a separate children’s visiting room, open contact seating, and non-contact cubicles. Visitor waiting could be accommodated at the plaza entry lobby.
  - 2. Repurpose courtroom space originally dedicated to the Superior Court. Two fully equipped courtrooms, with thousands of square feet, have not been used for some time. This wing already has a children’s visiting area and a portion of

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<sup>12</sup> Ensure that information is provided in formats that are accessible to those who are limited in English proficiency, deaf, hard of hearing, or visually impaired.

<sup>13</sup> See Attachment F, Developed February 2020



a courtroom could be converted to overnight apartments for women with children who qualify for extended family visits.

3. Create a new visitation center. Enclose the existing plaza to create a new visiting center. To some extent, the option is a hybrid that incorporates the repurposing of the existing lower level visitation space and the conversion of the courtrooms to visitation in conjunction with developing a new entrance for CRDF.
  - ii. Create a child friendly environment with toys, games, and cards suitable for interaction by family members of all ages.
  - iii. Identify further contact visitation options that do not require space use at CRDF. (For example, the NYC DOC has created a partnership with the NYC Children's Museum that allows incarcerated mothers to spend structured time with their children at the museum.)

5. **Action:** *Explore expanding video visitation options to maintain family and community contact.*

a. Agency and Facility Strategies:

- i. Add visitation options that allow family members to engage/communicate with a justice involved woman from their home residence (Skype, Zoom, Jpay, Securus Technologies, etc.) rather than traveling to the jail.
  1. Consider how indigent justice involved women will be able to access these services.
  2. Consider options for justice involved, or formerly justice involved, family members to access visitation with loved ones incarcerated at CRDF.
  3. Ensure video visits do not replace in-person visits.
- ii. Ensure all justice involved women have access to visiting technology to improve their personal outcomes during incarceration.
- iii. Add increased space and staffing to manage expanded contact visitation.

#### Goal 4: Conduct a mapping of reentry resource providers and diversion opportunities.

Conduct a thorough analysis and mapping of community reentry resource providers and diversion opportunities, including their services, capacity of women they can serve, when they make contact with the women, and data collection tools and tracking, in order to identify strengths, gaps and partnership opportunities in serving the women.

#### **Related ATI Goals: 34, 58**

1. **Action:** Conduct a thorough analysis of all existing community reentry resources and diversion opportunities.

a. Agency Strategies:

- i. Engage the GRAC, with additional stakeholders and members as needed, to conduct a mapping of each step of the process of transitioning from the jail to the community.
- ii. Ensure the committee distinguishes the difference in process(es) if the justice involved woman releases with or without housing.
- iii. Ensure the committee considers all services needed within each identified service area (e.g. the “housing service area” should include types of housing: short term, transitional, or permanent, as well as specific housing needs: domestic violence housing, mental health, addiction treatment and recovery, and disability and illness housing; the “employment/training service area” should include resume writing classes, interview training, job search support, and other related services).
- iv. Ensure the committee gathers the following information for each existing community program/service:
  1. Name of program
  2. Service(s) provided
  3. Target population
  4. Number of current participants
  5. When/how they contact/recruit justice involved women
  6. Point of contact for the program/service
  7. Performance measures
- v. Compare the list of current community program/service providers to the list of identified services needed. Identify gaps and make recommendations for needed services.

2. **Action:** Design and implement an integrated process of data collection, evaluation, and oversight to monitor and improve system-wide services.

a. Agency Strategies:

- i. Formulate data tracking and protocols for each program.
- ii. Identify or develop information systems to track and store data.
- iii. Evaluate existing reentry programs and services for their effectiveness specific to meeting reentry needs for women.
- iv. Considering ‘sunsetting’ or finding ways to improve programs that do not meet documented criteria and/or do not deliver desired outcomes.
- v. Consider partnership with agencies that provide like or duplicate reentry services to women releasing from CRDF.
- vi. Periodically survey community service providers regarding their experiences in working with women and review recommendations for process improvement.

**Goal 5: Develop a collaborative community partners and services system. Develop a collaborative system to identify and mitigate barriers to reentry for women in Los Angeles County through ongoing partnership efforts and an inside out multi-disciplinary case management approach.**

**Related ATI Goals: 20, 21, 32, 34, 73, 74**

1. **Action:** Enhance *community partners' and service providers' services by identifying and addressing reentry barriers specific to women.*
  - a. Agency Strategies:
    - i. Consider creating a GRAC sub-committee representing community service providers, LASD administrators, and women released from CRDF and empower them with the task of identifying barriers to successful reentry that are specific to women.
    - ii. Ensure the GRAC sub-committee considers all services provided after release from jail in addition to services provided both in and out of jail to include:
      1. Short term, transitional, and permanent housing
      2. Substance Abuse
      3. Legal
      4. Mental and Medical Services
      5. Employment/Training
      6. Education
      7. Family Services (reunification with children, daycare, family services, etc.)
      8. Victim Services
      9. Clothing
      10. Transportation
      11. Food
      12. Mentoring
2. **Action:** *Establish and define roles, identify coordinating efforts and services, combine, or eliminate duplicate efforts, and develop a system to ensure consistent, ongoing communication between CRDF and community partners.*
  - a. Agency Strategies:
    - i. Using the committee noted above, identify the number and the extent of utilization of stakeholder partnerships that support gender-responsive practices.
    - ii. Develop a directory of available community services for women being released from CRDF, update annually and make directory available in multiple formats and mediums to maximize accessibility.
    - iii. Explore and enhance development of opportunities for a formal mentoring program with community partners to provide broad access and availability to interested women.
    - iv. Link jail, neighborhoods, and community services; collaborate and 'connect the dots' to coordinate preparation for successful reentry for women returning to the community.
    - v. Collaborate with community partners to expand programs and services.

3. **Action:** *Conduct wrap-around planning sessions with each justice involved woman prior to leaving CRDF.*
  - a. Facility Strategies:
    - i. Ensure CRDF has hired and trained case management staff.
    - ii. Integrate reentry planning with community-based programs to promote continuity upon release.
    - iii. Create an individually tailored discharge and reentry support plan and wrap the necessary resources around the woman and her children. Ensure the plan includes:
      1. Housing
      2. Employment, job training or financial assistance
      3. Transportation
      4. Identification card
      5. Cell phone or access to landline phone
      6. Health concerns to include primary care and existing illnesses identification
      7. Mental health referral
      8. Substance abuse treatment plan, if needed
      9. Childcare and other children's services
      10. Legal and victim services
    - iv. Include family and friends involved in incarcerated women's lives (providing housing, transportation, childcare, etc.) in their reentry plans.
    - v. Link community services and stakeholders to justice involved women's needs prior to release.
    - vi. Include a process of aftercare services for women leaving with no required, ongoing supervision.
  
4. **Action:** *Create marketing and communication strategies for CRDF stakeholders to increase their awareness and ability to support reentry.*
  - a. Agency Strategies:
    - i. Create a greater resource knowledge base for all staff regarding referrals to community-based services.
    - ii. Ensure the committee's purpose and work is shared with and understood by all community partners and service providers.
    - iii. Develop methods to increase the women's exposure to, and knowledge of, community-based reentry services. (Strategies could include creation of a reentry resources center at CRDF, community providers conducting in-person visits in the housing units, a publication of community-based resources, participation at County and community public events, etc.)
    - iv. Develop and implement a process for ongoing communication with all community partners and service providers regarding reentry for women releasing from CRDF.
    - v. Regularly update the directory of available community services for justice involved women in LA.

## SECTION 2: CRDF Operations, Programs, and Services

**Goal 6: Develop mission, vision, and values statements. Develop mission, vision, and values statements that support women’s services (gender- responsive, trauma informed) as a vital specialized mission within the LASD.**

1. **Action:** Consider creating a multi-disciplinary, facility-wide committee of 10 – 12 persons representative of all levels and job classes, led by a Captain or designee.
  - a. Agency Strategies:
    - i. Authorize development and implementation, to include fiscal impact, of said committee.
  - b. Facility Strategies:
    - i. Communicate to all staff the purpose, structure, and desired outcome of the committee and invite staff participation.
    - ii. Identify and appoint representative leadership from key program areas/divisions to the committee.
    - iii. Appoint representative members of the facility to the committee and schedule first meeting.
  
2. **Action:** Hold facility committee meeting(s).
  - a. Agency Strategies:
    - i. Ensure the Sheriff or designee attends the first meeting to demonstrate support.
  - b. Facility Strategies:
    - i. Identify roles and expectations, to include timeframes and level of commitment, for the committee.
    - ii. Develop draft vision, mission, and values statements.
    - iii. Develop list of internal and external stakeholders who would provide meaningful feedback on the statements.
  
3. **Action:** Finalize vision, mission, and values statements that will guide and support implementation.
  - a. Facility Strategies:
    - i. Submit and solicit feedback from the stakeholders regarding the draft vision, mission, and values statements.
    - ii. Ensure CRDF statements support LASD’s vision, mission, and value statements.
    - iii. Approve the suggested vision, mission, and values statements.
  - b. Agency Strategies:
    - i. Revise statements as needed.
    - ii. Finalize vision, mission, and values statements for CRDF.
  
4. **Action:** Communicate the vision, mission, and values statements.
  - a. Agency Strategies:
    - i. Send letter of support to all CRDF employees thanking them for their participation and input.
    - ii. Refer to CRDF the vision, mission, and values statements in all communication modes.
    - iii. Support CRDF leadership in communicating and implementing the vision, mission, and values.
  - b. Facility Strategies:

- i. Publicize the vision, mission, and value statements (posters, letterhead, business cards, recruitment material, etc.) to ensure all staff know and understand the importance and impact of each statement.
  - ii. Prominently display vision, mission, and value statements throughout CRDF.
  - iii. Ensure all supervisors meet one-on-one with staff to review and explain the vision, mission, and values and explore the impact of implementation.
- c. Agency and Facility Strategies:
  - i. Tie job performance, expectations, and personnel evaluations to the vision, mission, and value statements.
  - ii. Ensure frequent discussion on the meaning, implementation, and impact of the statements (during staff meetings, meetings with justice involved women, supervisor's meetings with line staff, and meetings specifically to discuss vision, mission, values).

**Goal 7: Maintain staffing levels that consider the needs of women. Reach and maintain staffing levels and deployment strategies that consider the needs of women and support an environment characterized by safety, dignity, and respect, allowing for effective supervision, productive interaction with staff, and consistent access to programs, services, and recreation.**

**Related ATI Goal: 106**

1. **Action:** *Ensure the staffing pattern supports the operational requirements of working with women and is sufficient to accommodate the supervision and programming needs of all justice involved women, and that the staffing pattern provides for the requirements for ‘same sex’ supervision when needed.*

a. Agency Strategies:

- i. Prioritize and implement recommendations from the staffing analysis report completed by Rod Miller. Ensure that the recommendations support basic management and security procedures to provide the safety of both staff and justice involved women.
- ii. Ensure the staffing analysis report completed by Rod Miller identifies and accommodates the appropriate number of ‘same sex’ positions and location of custody posts that must be filled by female staff.
- iii. Review the staffing analysis report completed by Rod Miller with an overlay of staffing considerations that are gender responsive, specific to the staffing needs driven by justice involved women. Gender specific considerations include<sup>14</sup>:
  1. Physical plant
  2. Facility schedule
  3. Custody staff complement
  4. Staff gender
  5. Program needs
  6. PREA considerations
  7. Medical Services
  8. Mental Health Services
- iv. Once developed, make best efforts to comply with the staffing plan that provides for adequate levels of staffing. Document whenever the facility is not able to comply with the established staffing plan.
- v. Ensure staff interact professionally and respectfully with justice involved women and maintain appropriate boundaries (using respectful language, addressing negative behaviors, and encouraging positive interactions), as well as staff-to-staff boundaries (creating a respectful workplace, preventing sexual harassment and workplace bullying, and giving feedback).

2. **Action:** *Implement retention strategies specific to CRDF (understanding that it is easier to “keep” current staff than “recruit” new staff).*


a. Agency and Facility Strategies:



- i. Provide an enriching experience for staff to include:

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<sup>14</sup> See Attachment G for details

1. Have supervisors set regular (e.g., biweekly, monthly, quarterly) one-on-ones with subordinate staff to discuss organizational direction, individual performance, and professional development.
  2. Manage by walking around—leadership schedule regular times during a week or month to visit with staff and check-in.
  3. Ensure supervisors approach staff who are displaying signs of stress or physical or emotional fragility and ask how they can help.
  -  ii. Empower employees to realize a sense of accomplishment.
    1. When possible involve line staff in decision making and projects.
    2. Put out a “suggestions” board or box to get feedback from staff.
    3. Equip employees with the necessary tools, training, and support.
    4. Ensure staff know how their work connects with CRDF’s vision and mission.
    5. Develop an internal certificate program for staff who have gained new skills in working with justice involved women.
    6. Acknowledge staff that use respectful language, model effective problem solving and conflict resolution, and exhibit consistent practice across shifts.
  - iii. Conduct and respond to employee job satisfaction survey on an annual basis. Include items specific to gender-responsive practice on the employee job satisfaction survey.
3. **Action:** *Implement recruitment efforts specific to CRDF.*
- a. Agency Strategies:
    - i. Review pay scale, hiring practices, and other issues that demand higher-level intention and problem solving to address recruitment efforts.
    - ii. Adopt a customer service approach to recruitment and selection, guiding applicants through the process and providing several touch points.
    - iii. Review marketing materials and messages for recruiting to widen candidate pool and use language and visuals that are designed to intentionally attract female staff.
      1. Strengthen ties to the community and the reputation of officers/staff within the community.
      2. Promote an employee referral program.
      3. Create more digital marketing materials, including videos, which share staff testimonials and demonstrate diversity.
    - iv. Communicate the job expectations to potential applicants. Highlight not only what a corrections employee does but also what that means for the community. Highlight opportunities for both custody and non-custody positions.



**Goal 8: Evaluate a dedicated transportation unit for CRDF. Evaluate the appropriateness of a dedicated transportation unit for CRDF to avoid pulling staff from posts, shutting down programming, and limiting out of cell time to meet transportation needs.**

1. **Action:** *Research the need for a dedicated transportation unit for CRDF.*

a. Facility Strategies:



i. For ninety days, track the following:

1. Number of transportations made.
2. Number of staff required for each transport and rationale for selection.
3. Security level of justice involved woman.
4. Reason for transport (emergency, scheduled medical, scheduled dental, etc.).
5. Transportation hours to include overtime costs.
6. Programs shut down or affected as result of transport.
7. Amount of time that justice involved women were denied access to programming due to transportation demands.

b. Agency and Facility Strategies:

- i. Compare financial costs of emergency transportations to actual cost of salary/benefits of dedicated transportation staff. (Include cost of defending/settling legal proceedings for lack of programs and out of cell time.)

2. **Action:** *If deemed prudent, develop positions at CRDF for the sole purpose of transporting justice involved women to medical appointments and/or emergencies.*

a. Agency Strategies:

- i. Establish and fund necessary transportation positions at CRDF when and if deemed appropriate for the sole purpose of transporting justice involved women to medical appointments and/or emergencies.

b. Facility Strategies:

- i. When appropriate, recruit, interview, and hire transportation positions.
- ii. Identify and attend to transportation unit space and equipment needs.
- iii. Orient and train staff in their respective job responsibilities.

c. Agency and Facility Strategies:

- i. Develop a proposed work schedule for transportation positions that maximizes attendance and availability on days/times when most transportations occur.
- ii. Revise all applicable policy to reflect the requirement that the transport team include one female staff member and ensure that staffing relief factor accounts for this requirement.

3. **Action:** *Track the effectiveness of the transportation unit and adjust scheduling requirements as needed.*

a. Facility Strategies:

- i. Continue to track data associated with the transportation unit (e.g., number of transportations, number of staff required for each transport, reason for transport, overtime costs, programs shut down, and in cell time).
- ii. Submit monthly data/status reports to the Captain.
- iii. Adjust as needed, to include adjusting schedules and/adding or re-defining positions.

**Goal 9: Implement an HR system specific to working with women. Implement a system in which job descriptions, hiring processes, and performance management clearly outline expectations specific to working with women, support staff development, and hold staff accountable to expectations.**

1. **Action:** *Modify human resource practices for CRDF to be gender responsive in job descriptions, hiring, and promotions.*
  - a. Agency Strategies:
    - i. Identify strategies, consistent with county requirements, to tailor the hiring or assignment process for CRDF to the skills and characteristics needed to work effectively with justice involved women. Hiring process questions could include:
      1. Interest in working with justice involved women.
      2. Experience working with justice involved women.
      3. Understanding the pathways that bring justice involved women to jail.
      4. Awareness of how to communicate with justice involved women.
    - ii. Ensure that job descriptions for staff working at CRDF reflect expectations specific to working effectively with justice involved women.
    - iii. Conduct initial and ongoing background checks on all staff and volunteers to include consideration of incidents of domestic violence or other violence against women as exclusionary criteria.
    - iv. Review the practice and impact of rotating staff between patrol deputies and corrections staff.
  
2. **Action:** *Ensure the performance management process, to include setting clear objectives, providing balanced feedback, establishing regular progress reviews, and developing individual treatment plans, is specific to working with women.*
  - a. Agency Strategies:
    - i. Adjust the Department's Personal Performance Index (P.P.I.) to recognize staff working at CRDF.
    - ii. Ensure the CRDF vision, mission, and values statements are tied to the objectives and job description for each staff person working at CRDF.
    - iii. Develop a tracking system for staff working at CRDF that tracks staff's effective interaction with justice involved women. Tracking items could include, but not be limited to:
      1. Number of grievances.
      2. De-escalation opportunities.
      3. Use of force incidents.
      4. PREA complaints.
      5. Professional and respectful behavior.
    - iv. Develop mechanisms to reinforce and reward staff (e.g., preferential parking, acknowledgment of employee of the month, or priority posts or special projects) who demonstrate effective gender-responsive practice(s).
    - v. Re-train all supervisory staff at CRDF to ensure consistent application of revised performance management processes specific to working with women.
    - vi. Provide custody staff with formal and informal coaching opportunities specific to working effectively with justice involved women.

- vii. Develop strategies to ensure that non-uniform and contract staff receive ongoing coaching and support specific to working effectively with justice involved women.

**Goal 10: Implement gender responsive training. Implement and maintain a system of training in which department and facility leadership, staff, contractors, and volunteers receive training customized to their roles to support consistent consideration of the gender of the population and that promotes an environment of safety, dignity, and respect.**

**Related ATI Goals: 97, 100**

1. **Action:** *Provide support for leadership development specific to gender-responsive, trauma-informed, and culturally competent practices.*
  - ★ a. Agency Strategies:
    - i. Develop gender-responsive training for all executive team members of LASD and LASD Captains.
    - ii. Develop gender-responsive training for identified external stakeholders.
    - iii. Identify opportunities to communicate and educate LASD Captains at male facilities in gender-responsive practices to ensure leadership consistency across the agency in understanding effective work with women.
  - b. Agency and Facility Strategies:
    - i. Provide CRDF leadership and supervisors training specific to leading and supervising staff who work in a women’s facility/jail. This training should include, at a minimum, the following:
      1. Core components and the importance of a gender-responsive approach.
      2. Leadership and implementation strategies for enhancing gender-responsive practice.
      3. Operational and programming implications of a gender-responsive approach.
    - ii. Support leadership participation in annual NIC training, National Resource Center on Justice Involved Women training, executive leadership training, justice involved women conferences, and other related learning opportunities, as available.
    - iii. Network with other agencies/jails across the country in topics related to providing services, management, and treatment of incarcerated women.
    - iv. Apply for technical assistance grants to support gender-responsive practices and leadership development
    - v. Develop formal opportunities to coach and support CRDF executive team members.
  
2. **Action:** *Ensure staff have the knowledge and skills necessary to consistently provide gender-responsive, trauma-informed, and culturally competent women’s services.*
  - a. Agency Strategies:
    - i. Revise agency policy on training to ensure all staff working at CDRF, including any overtime staff, receive gender training specific for working with justice involved women. The policy should include the expectation that any training delivered to staff working at CDRF should be gender informed and ensure that the physical, sexual, emotional, and relational safety needs of justice involved women are addressed.
    - ii. Include gender-responsive and trauma-informed training in the academy.
    - iii. Review any training related to PREA to ensure that women’s specific issues are addressed.
  - b. Facility Strategies:
    - i. Develop a system to track and ensure the training of all staff, volunteers, and contractors working at CRDF.

c. Agency and Facility Strategies:

- i. Develop a training matrix/plan specific to each job classification and the amount of time the staff spends at CDRF working directly with justice involved women. See **Attachment H** for an example matrix highlighting key training initiatives. The plan should include, at a minimum, the following trainings:
  1. Gender Responsive Practices
  2. Trauma Informed Correctional Practice
  3. Motivational Interviewing (for case management staff)
  4. Respectful Communication to include de-escalation techniques
  5. Management of lesbian, gay, bisexual, transgender, and intersex (LGBTI) justice involved women
  6. Setting Professional Boundaries
  7. PREA
- ii. Designate a formal staff position as a Field Training Officer, competent in gender responsiveness, to ensure that custody staff receive ongoing coaching and support as they implement newly trained skills related to gender-responsive practice.
- iii. Develop strategies to ensure that non-custody staff receive ongoing coaching and support as they apply newly trained skills related to gender-responsive practice.
- iv. Ensure training is kept up to date by continuing to identify gender-responsive training needs and integrating topics into ongoing training.

3. **Action:** *Ensure volunteers and contractors have the knowledge and skills necessary to consistently provide gender-responsive, trauma-informed, and culturally competent women's services.*

a. Agency and Facility Strategies:

- i. Ensure that the facility orientation for volunteers and contractors is specific to working with women and includes key topics such as relational orientation, cross gender supervision, and trauma informed practices.
- ii. Develop a training matrix/plan for volunteers and contractors, inclusive of and specific to the amount of time the volunteer or contractor spends at CDRF working directly with justice involved women. The plan should include key topics such as:
  1. Gender Responsive Practices
  2. Trauma Informed Correctional Practice
  3. Respectful Communication to include de-escalation techniques
  4. Cross Gender Supervision
  5. Setting Professional Boundaries
  6. PREA
- iii. Incorporate information on cultural competency, trauma, and gender-responsiveness into all training and written materials for volunteers and contractors.

**Goal 11: Redesign the intake area for more privacy. Revise the design of the intake area to allow for more private space for discussion of intake processes.**

1. **Action:** Transform the intake space into a more welcoming and humane environment within existing building parameters.

a. Agency Strategies:

i. Approve and allocate resources needed to remodel the current intake area.

b. Agency and Facility Strategies:

i. Adopt recommendations from Steve Carter's report<sup>15</sup> specific to the Intake and Assessment area, to include:


1. Conversion of an additional bus bay for intake processing and the removal of part, or all, of the division between two bus bays to create one "continuous flow" space.
2. Through creative interior design, transform the two bus bays into a more welcoming environment. Consider changes of the floor/wall and ceiling materials, introduction of sound absorbent materials and furnishings, use of soothing color schemes, and possible introduction of natural light.
3. Convert the existing intake space into open seating with carrels for conducting classification interviews, medical screening, and mental health evaluations.

2. **Action:** Enhance focus and attention to gender responsivity during the intake/orientation process.


(Note: This action step needs to be conducted in conjunction with Goal #11.)

a. Agency and Facility Strategies:

i. Ensure staff understand the importance of respectful and sensitive communication throughout all facets of the intake/orientation process. For example, reinforce the importance of talking women through the respective intake processes, such as pat and strip searches. (See **Attachment I** for key questions to ask staff to reinforce this effort.)

 ii. Provide staff involved in the intake/orientation process with key talking points to be covered at each stage of the process, to ensure key points related to sexual safety, as well as physical, emotional, and relational safety are covered. For example:

1. Provide language appropriate for staff to use when introducing topics concerning rape and molestation.
2. Provide language for staff to use to introduce PREA at each stage of the orientation process (e.g., priority of safety, zero tolerance of sexual abuse or harassment by staff, volunteers, or other justice involved women).
3. Provide language for staff to use in explaining follow-up to a trauma disclosure (e.g., "I will file a confidential referral. Then follow-up (as an individual meeting and not a group) will be conducted by a mental health professional within 14 days.)

 iii. Provide staff involved in the intake/orientation process with key talking points regarding the progression of the incarceration process and consider developing a one-page handout explaining the steps of intake and orientation that justice involved women can keep with them.

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<sup>15</sup> See Attachment F, developed February 2020

- ✿ iv. Provide staff with examples of open-ended questions that can be used at various stages of the orientation to both gauge understanding as well as allow time for follow-up questions and discussion.
- ✿ v. Capitalize on opportunities in the current orientation process to address, or reinforce, consideration of factors contributing to sexual, emotional, and relational safety. For example:
  1. When discussing indigent packs, consider reinforcing safe ways for women to get their needs met rather than by reverting to past possibly asocial, survival skills.
  2. Consider selecting two or three current rules specific to providing relational or sexual safety, to discuss in more depth. These discussions could be in response to current trends in disciplinary reports/incidents. Include in the discussions, rationale for the rule and how it promotes safety practices, awareness of consequences, and discussion of resources, should there be challenges voiced in any of these areas.

**Goal 12: Provide an orientation process specific to the needs of women. Provide a clear, specific, and consistent orientation process designed to develop an understanding of needs and safety considerations; support safety, dignity, and respect; and outline expectations. Discuss resources specific to the needs of women and allow time for questions and dialogue.**

**Related ATI Goal: 57**

1. **Action:** Consider creating an LASD orientation video and supportive handout material for justice involved women. This video should pair with the PREA video<sup>16</sup>.
  - a. Agency Strategies:
    - i. Authorize production of and expenses/resources related to developing an orientation video.
  - b. Facility Strategies:
    - i. Research best practices (Just Detention International, PREA Resource Center, NIC, TMG, etc.) in production of the video to ensure the design facilitates and supports attention to and implementation of safety considerations and practices specific to women.
    - ii. Develop the orientation video, incorporating both staff and justice involved women's input into the content and production of the video.
    - iii. Ensure the video includes and clarifies information explaining the zero-tolerance policy for sexual abuse and sexual harassment, retaliation, and how to report incidents or suspicions.
    - iv. Ensure the video addresses the needs of women and depicts visual images of diverse women.
    - v. Develop accompanying written script for staff to use to supplement video during the orientation process. Be sure to include topics such as PREA, visitation, telephones, property, discipline, and indigent packs.
  - c. Agency and Facility Strategies:
    - i. Review all current and past procedural orders and policies regarding intake and orientation practices. Reconcile their intent and impact with the revised vision, mission, and values statements.
    - ii. Formulate and implement orders/guidance policies consistent with the vision, mission, and values statements.
    - iii. Ensure all staff working in CRDF receive updated orders and guidance policies and understand the impact they have in terms of performing their job duties.
    - iv. Develop and distribute to all staff and justice involved women, a comprehensive handbook providing information on orientation policies and procedures.
      1. Until this new handbook is created, ensure all women coming into the facility receive "A Guide Through Custody Los Angeles County Jail."
    - v. Ensure the handbook is translated into different languages as needed.
2. **Action:** Designate space and develop a schedule and tracking system to ensure all incoming justice involved women receive the revised orientation.
  - a. Agency Strategies:
    - i. Identify space in a setting free from distractions that allows justice involved women the opportunity to view and hear the orientation video as well as participate in a facilitated discussion with staff and other justice involved women.

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<sup>16</sup> Example: [NY State Video & materials](#)



- ii. Develop a presentation format that ensures sufficient time for justice involved women to ask questions and provides staff the opportunity to facilitate further understanding/discussion as needed.
  - iii. Develop a tracking system to ensure all incoming justice involved women receive the revised orientation.
- 3. **Action:** *Develop a presentation and delivery schedule/process that involves key leadership staff as well as select justice involved women who have experience with the facility. Involve them in presenting and discussing the video with incoming justice involved women.*
  - a. Agency Strategies:
    - i. Designate a leadership staff person to be responsible for ensuring all incoming justice involved women receive the revised orientation.
    - ii. Develop a schedule to rotate key leadership staff to be involved in delivering the orientation.
    - iii. Develop a process that identifies appropriate justice involved women who have experience with the facility and provides them the opportunity to participate in presentation of the orientation, to include supplementing the discussion with their experiences regarding actual practice opportunities.
    - iv. Provide training and a script to key leadership staff on how to deliver the orientation.
- 4. **Action:** *Ensure consistency throughout intake/orientation process for justice involved women and staff.*
  - i. Update Unit Order #5-23-040 and all policy to include revised intake/orientation process and procedures and adopted recommendations made in goal #12 specific to intake/orientation.
  - ii. Train all staff involved in the intake/orientation process on the critical importance of setting the tone of safety, dignity, and respect during the entire intake/orientation process.
  - iii. Ensure information given during intake/orientation is driven by, and specific to, justice involved women.

### Goal 13: Implement a review process for women's clothing and personal care items.



#### Implement a review process for women's uniforms, nightgowns, indigent kits, and other personal care items to ensure needs are being met specific to size and quantity.

1. **Action:** Provide clothing that fits appropriately, is suitable to temperature conditions, and promotes safety and dignity.

a. Agency Strategies:



- i. Ensure clothing items are gender specific and meet the needs of women.
- ii. Provide financial resources to CRDF for gender specific clothing/uniforms.

b. Facility Strategies:

-  i. Create a committee, comprised of line staff as well as long and short-term justice involved women, and task them to develop recommendations for appropriate clothing for justice involved women.
-  ii. Ensure the committee includes gender specific recommendations such as:
  1. Issuing pajamas (with tops and bottoms) rather than nightgowns.
  2. Issuing an appropriate number of undergarments for women.
  3. Issuing uniforms that are made specifically for women and that fit appropriately.
  4. Eliminating the practice of using jumpsuits for women.
  5. Issuing an appropriate number of blankets consistent with weather/seasonal conditions and women's sensitivity to temperature fluctuations.
  6. Ensuring that there are provisions for women to obtain permission to wear appropriate religious clothing.
- iii. Assuming approval of the committee's recommendations, develop and/or revise policies reflecting the changes. Ensure all staff are aware of, and adhere to, the policy changes.
- iv. Order and maintain adequate supplies of clothing and bedding.
- v. Develop a process to gather and review feedback, on a regular basis, from justice involved women regarding the administration of uniforms, nightgowns, and undergarments.

2. **Action:** Provide undergarments for women that fit appropriately and promote dignity and respect.

a. Facility Strategies:



-  i. Immediately begin issuing bras at intake that fit appropriately.
-  ii. Develop a process to ensure that when justice involved women send out their laundry for cleaning, their specific laundry items are returned to them.
- iii. Develop a process that allows for justice involved women to order undergarments from outside sources, that consider the appropriateness of the garment, and address all safety and security concerns of the facility.

3. **Action:** Ensure items for personal hygiene are gender specific, available to all women, and are provided to those who are indigent.

a. Agency Strategies:

- i. Identify which items constitute personal care and ensure provision of supplies to indigent justice involved women are specific to the needs of women.



b. Facility Strategies:

-  i. Create a committee, including line staff as well as long and short-term justice involved women, to evaluate the quality of the products available from the commissary and the adequacy of the supplies that are included in personal care kits.
- ii. Ensure the commissary and personal care kits include items relevant to women of all racial and ethnic groups.
- iii. Presuming approval of the committee's recommendations, develop and/or revise policies to reflect the changes. Ensure all staff as well as justice involved women are aware of, and adhere to, the policy changes.
-  iv. Develop a process to ensure all personal care kits continually include all required items and that they are never "split up" in order to maximize facility supplies.
- v. Develop a process to gather and review feedback on a regular basis, from justice involved women, regarding provision of personal hygiene items and indigent personal care kits.

**Goal 14: Evaluate storage adequacy for property items. Evaluate storage adequacy based on duration of incarceration to ensure that property items are being stored and managed to maximize usable space.**

1. **Action:** Review and revise property allowances, to include policy statements, considering the vastly different lengths of stay in the women's facility.

a. Facility Strategies:

-  i. Create a committee, including line staff as well as long and short-term justice involved women, and task them to develop recommendations to ensure adequate storage for women. Ensure the committee considers the space limitations specific to storage.
- ii. After approval of the committee's recommendations, develop and/or revise policy reflecting the proposed changes. Ensure all staff are aware of and adhere to the policy changes.
-  iii. Develop a matrix to match justice involved women's length of stay with the amount of allowable property.
- iv. Order sufficient storage containers (different sizes) to accommodate current and future needs.
- v. Develop a process to gather and review feedback, on a regular basis, from justice involved women regarding personal hygiene items, indigent personal care kits, and other personal items.

**Goal 15: Create a trauma-informed policy and training. Create a trauma-informed search policy, and associated training, that aligns with contemporary best practices in women’s jails, to include staff professionalism, communication of search process, physical and emotional safety, and trauma-informed instruction.**





1. **Action:** *Evaluate the effectiveness of clothed, unclothed, room, and property searches consistent with maintaining the safety and security of the facility as well as being attentive to the physical, sexual, emotional, and relational safety needs of the justice involved women.*
  - a. Agency and Facility Strategies:
    - i. Conduct a comprehensive review of the present search policies and practices. Address questions such as:
      1. When are the four (4) types of searches (clothed, unclothed, room, and property) conducted?
      2. What types of concerns/conditions promote these types of searches?
      3. How does each search contribute to the safety and security of facility?
      4. How do you determine/evaluate the effectiveness of the searches that are conducted?
      5. Are there duplicate search processes at the facility (such as body scanners and unclothed searches)?
      6. Are the current number of body scanners adequate based on the times and areas used? How do you determine the adequacy of the number of body scanners?
      7. Which searches are more/less labor/resource intensive?
      8. Which searches are more “cost effective” in terms of labor/resources?
      9. How do you determine the cost effectiveness of the searches you conduct?
      10. What changes in facility search practices should/could be made that would minimize staff workload while still supporting safety and security of the facility?
    - ii. Research best practices for information on how to most effectively conduct searches (clothed, unclothed, room, and property) while maintaining professionalism, consistency, and being trauma informed, yet maximize justice involved women and staff feelings of physical, sexual, emotional, and relational safety. Best practices could include the PREA Resource Center training “*Guidance in Cross-gender and Transgender Pat Searches*”; article by A. Benedict “*Using Trauma Informed Practices to Enhance Safety and Security in Women’s Correctional Facilities*”; and the National Resource Center on Justice-Involved Women resources.
    - iii. All activity should be consistent with the Amador v. Baca class action settlement agreement and any legal or binding agreements.
2. **Action:** *Create a trauma-informed search policy to include clothed, unclothed, room, and property searches.*
  - a. Agency and Facility Strategies:
    - i. Expand Unit Order #6-01-000 to address the PREA standards on cross gender searches, issues of communication, professionalism, consistency, and being trauma informed.

- ii. Revise all policies related to clothed, unclothed, room, and property searches to include an address of PREA standards on cross gender searches, issues of PREA communication, professionalism, consistency, and being trauma informed. Make recommendations for change based upon the review of current practices in comparison with accumulated 'best practices' data. (Example: Article by A. Benedict, "[\*Using Trauma-informed Practices to enhance Safety and Security in Women's Correctional Facilities\*](#)").
  - iii. Ensure policy includes guidance on conducting cross-gender and transgender pat Searches consistent with "best practices" information (Example: PREA Resource Center Training, "[\*Guidance in Cross-gender and Transgender Pat Searches\*](#)").
3. **Action:** Train all custody staff to ensure searches are done in a professional, consistent, and trauma-informed manner.
- a. Agency and Facility Strategies:
    - i. Develop and deliver training for all staff incorporating 'best practices' data on conducting clothed, unclothed, room, and property searches on justice involved women.
    - ii. Ensure training includes information on trauma-informed searches such as:
      - 1. Briefly describing what activity or procedure needs to take place and why.
      - 2. Use trauma informed language (example: "bend slightly at the waist" or "widen your stance" rather than "bend over" or "spread your legs").
      - 3. Explain the search procedure while you are conducting it.
      - 4. Thank women for their cooperation.
    - iii. Develop and deliver supervisory training on observing staff conducting clothed, unclothed, room, and property searches to ensure it is consistent with the revised policy and includes how to provide meaningful feedback.
    - iv. Review the effectiveness of the training to include feedback from staff and justice involved women on the impact of the training.
    - v. Have supervisors conduct periodic observations of staff performing searches to ensure they are following the new policies/procedures.

**Goal 16: Review and update cross-gender search and supervision policies and practice. Review current practices and update all cross-gender-related searches, supervision, and announcement policies to be consistent in theme, messaging, and instruction to staff.**

1. **Action:** *Expand Unit Order #3-09-050 "Personnel & Inmates of Opposite Gender" to ensure staff conduct searches using the maximum amount of safety, dignity, and respect for justice involved women possible.*

a. Facility Strategies:

-  i. Add the expectation that male staff must announce their presence when entering housing units or areas where women may be showering, performing bodily functions, or changing clothes.
-  ii. Move forward with implementing a solution (i.e., doorbell) to enhance consistency of cross-gender announcements.
-  iii. Immediately assess the appropriateness of all shower doors and bathroom areas to ensure that they provide for privacy. Shower areas should have barriers that comport with security requirements (specifically, they should allow for viewing of heads and feet) in any configuration.
-  iv. Immediately address the issue of any shower doors that have open cuff ports just below the waist with no doors to close the port. Options could include replacing the doors or covering the open cuff port.
- v. Ensure facility policy and practice is consistent with the PREA Standards.

**Goal 17: Consider gender-specific section in the use of force policy and training. Consider a gender-specific section within the use of force policy and training to discuss differences in women's communication styles, physical strength, prior trauma, reactions, staff de-escalation measures, team composition, relationships, and mental health factors.**

**Related ATI Goal: 46**

1. **Action:** Review and update all applicable use of force policies, manuals, and the use of force continuum, to ensure they are consistent with best practices specific to working with justice involved women.

a. Facility Strategies:

- i. Review facility data to determine the percentage of time trauma and/or mental illness situations contribute to use of force incidents at CRDF.
- ii. Identify staff or work dynamics at CRDF that may contribute to escalated or violent incidences.
- iii. Review the current staff response strategies for occurrences when justice involved women exhibit violent or aggressive behaviors.
- iv. Revise policy based upon research data and ensure that facility policy on use of force includes:
  1. Use of force as the last resort, used only after de-escalation attempts fail to be effective.
  2. That intervention teams are convened based on using the least amount of force necessary to gain control and ensure safety.
  3. The requirement that all extraction teams include, at a minimum, one female staff member.
  4. Documentation of the incident, including video where possible, and a review of the handling of the incident by the Captain.
- v. Consistent with compliance with Title 5 Minimum Standards for Local Detention Facilities in California, ensure that the following directives for the use of restraint devices on pregnant justice involved women are included in all written policies/manuals:
  1. A justice involved woman known to be pregnant or in recovery after delivery shall not be restrained using leg irons, waist chains, or handcuffs behind the body.
  2. A pregnant justice involved woman in labor, during delivery, or in recovery after delivery, shall not be restrained by the wrists, ankles, or both, unless deemed necessary for the safety and security of the justice involved woman, staff, or the public.
  3. Restraints shall be removed when a professional responsible for the medical care of a pregnant justice involved woman during a medical emergency, labor, delivery, or recovery after delivery, determines that the removal of restraints is medically necessary.
  4. Upon confirmation of a justice involved woman's pregnancy, she shall be advised, orally and in writing, of the standards and policies governing treatment of pregnant justice involved women.

2. **Action:** Provide staff training and coaching pertinent to implementing gender specific use of force, cell extraction, and use of restraints on justice involved women.



a. Facility Strategies:






- i. Ensure all staff have the skills necessary to successfully de-escalate situations involving justice involved women that are consistent with safety, trauma, and gender-responsive practice.
- ii. Ensure that de-escalation training includes:
  - 1. Recognizing trauma triggers.
  - 2. Recognizing signs of mental illness.
  - 3. Awareness of how our own behaviors can contribute to either escalating or de-escalating situations.
  - 4. Using basic motivation interviewing skills and communication techniques.
- iii. Ensure that training includes information on how, when, where, and why it is important to use trauma-informed practices in all situations involving use of force.
- iv. Ensure that all staff understand the requirements for the use and application of restraint devices on pregnant justice involved women.
- v. Ensure that in addition to lecture, use of force training includes significant dynamic scenario-based demonstrations and practice with feedback.
- vi. Record and review all use of force incidents/reports to ensure practice is consistent with revised policy and training.
- vii. After each review of use of force incident report and video (if available), provide individual coaching to each staff person regarding their use of gender-responsive practice and language, to include compliance with the revised policies/procedures.
- viii. Ensure CRDF executive team reviews and analyzes incident data to better understand the logistics and precipitating incident factors, including time, day, and location of incidents, justice involved women or staff involved, common themes, etc.

3. **Action:** *Develop strategies to support staff and justice involved women after a serious incident or violence in the facility.*

a. Facility Strategies:

- i. After a 'use of force' incident has occurred, ensure supervisors understand the strategies for and importance of restoring the environment back to 'normal' as quickly as possible.
-  ii. Identify support strategies for staff involved in a use of force incident (e.g., a temporary break from their assigned post, possibly with a supervisor filling in, colleagues checking in on the staff involved, an 'after-action' debrief of the incident, etc.).
-  iii. Identify strategies to provide support to justice involved women who may have witnessed the use of force incident (e.g., consultation with a mental health professional, staff checking to see if they are 'ok' or if they have any concerns or issues they would like to discuss, and offering peer support from another justice involved woman (Example: [Trauma Informed Peer Support Guidebook](#))).
- iv. Develop staff wellness strategies (exercise, meditation, spending quality time with friends/family, etc).

**Goal 18: Conduct an in-depth review of grievance numbers. Conduct a more in-depth review of the reasons for high grievance numbers, to include identifying other methods women can use to get questions answered and needs met. Review of staff ownership and helpfulness on units around low-level issues, access to other methods of reporting, access to supervisory staff, and effectiveness of current grievance policy are recommended.**

1. **Action:** *Conduct a multi-disciplinary mapping of the present grievance system to identify strengths and gaps in current policy and practice.*
  - a. Agency and Facility Strategies:
    - i. Allocate financial and human resources to conduct an in-depth review and mapping of the entire grievance system, to include policy, practice, justice involved women education, staff training, hearings, and resolution processes.
    - ii. Structure the mapping to include diagramming the policy requirements, documenting practice deviations, and determining the process for ongoing analysis of data and the approach to its use in practice improvement to include analysis of how grievance data is used to inform supervision and facilitate problem solving.
    - iii. Review all current and past procedural orders and policies regarding grievances. Reconcile their intent and impact with the revised vision, mission, and values statements.
  
2. **Action:** *Identify methods (other than grievance) available to justice involved women to get their questions answered, problems resolved, and needs met.*
  - a. Facility Strategies:
    -  i. Develop a supervisory monitoring process to track and ensure staff conduct regularly scheduled 'walk throughs' of each housing unit with the express purpose of answering justice involved women's questions and problem-solving low-level issues.
    - ii. Monitor and track justice involved women's concerns to identify potential "hot-spots," themes or patterns that may need to be addressed to improve overall operations, programming, housing concerns and/or justice involved women's conditions.
    - iii. Communicate problematic themes and issues to supervisory personnel and engage staff in developing solutions.
  - b. Agency and Facility Strategies:
    - i. Identify and commit staff and resources needed to ensure that supervisory staff conduct daily 'walk throughs' in all housing units. Monitor and ensure that the commitment of time is specifically for the purpose of being available to women to help resolve low level issues/concerns.
  
3. **Action:** *Review the process of reporting incidents to ensure separate tracks for reporting grievances and PREA are maintained. Ensure the reporting process does not require justice involved women to submit a report to a staff member who may be the 'subject' of said complaint.*
  - a. Facility Strategies:
    -  i. Develop a PREA reporting form and container box for alleged PREA incidents which is separate from the grievance form and container box.
    - ii. Develop a tracking system for PREA allegations separate from the tracking system for grievances.
    -  iii. Determine alternate strategies for women in High Observation Housing to access and submit grievance forms rather than having to request forms from the unit officers.

**Goal 19: Consider revision of current disciplinary processes. Consider revision of current disciplinary processes to include preventive actions staff can assist with, alternative sanctions, learning opportunities (such as completion of cognitive behavioral mapping or interventions, therapeutic assignments, etc.), and collaboration with clinical staff in appropriate cases. Ensure staff training is aligned with expectations.**

1. **Action:** *Research best practices for a gender-responsive discipline and sanctions process that is characterized by efforts to maximize safety, dignity, respect, fairness, and a focus on learning rather than punishment.*
  - a. Agency and Facility Strategies:
    - i. Conduct an analysis of CRDF's current discipline system. Evaluate data to identify behaviors that are consistently sanctioned and the degree to which the system promotes or discourages pro-social behavior change.
    - ii. Identify the most common categories of disciplinary actions and review the impact of applying the standard sanctions for key areas such as sexual contact with staff, consensual sexual behavior, program, or visitation related infractions.
    - iii. Determine if sanctions are consistent and commensurate with the behavior and sanctions assigned for other justice involved women committing the same infraction.
    - iv. Conduct a thorough review of the use of restrictive housing to include questions such as:
      1. What violations result in placement?
      2. What is the duration of placement?
      3. When/how does placement end?
      4. What impact does placement or removal have on behavior?
    - v. Consider the *Gender Responsive Discipline and Sanctions Policy Guide for Women's Facilities* (A. Benedict: National Resource Center on Justice-Involved Women) in defining and evaluating the elements of a gender-responsive discipline and sanctions process.
2. **Action:** *Develop a disciplinary structure and sanction process that is evidence-based, strength based, gender responsive, trauma-informed, and that reinforces a safe facility culture by motivating justice involved women's positive behavior and encouraging self-management.*
  - a. Agency and Facility Strategies:
    - i. Ensure the revised disciplinary structure and sanction process:
      1. Is objective, timely, fair, equitable, based on credible evidence, and incorporates due process.
      2. Uses rewards to recognize and encourage pro-social behavior and adherence to institutional rules.
      3. Holds justice involved women accountable for their behaviors and actions and uses cognitive behavioral interventions whenever possible
      4. Provides consistent sanctions and responses to justice involved women rule violations that promote safety, dignity, learning, rehabilitation, and respect for self and others.
    - ii. Ensure that rules and policy focus on factors that are uniquely important to women (e.g., touch and relationships) and are clearly understood and consistently implemented.

3. **Action:** *Revise all applicable policy, procedure, and processes specific to revised discipline and the sanction process.*

a. Agency and Facility Strategies:

- i. Ensure that the disciplinary system is not the only avenue available to shape behavior. Other options could include assignments of cognitive behavioral mapping, interventions, or other tools through collaboration among custody, non-custody, and clinical staff.
- ii. Ensure policy prohibits placement of women in restrictive housing who are pregnant, post-partum, recently had a miscarriage, or recently terminated a pregnancy, except in rare circumstances of risk to the safety and security of the facility.
- iii. Develop clear guidelines for safe, non-sexual, consensual touch between justice involved women.
- iv. Ensure that policy and procedures are proactive and that sanctions that restrict visitation or program attendance should be avoided unless there are clear risks to the safety or security of visitors and/or program attendees.

4. **Action:** *Implement the revised disciplinary and sanctions processes.*

a. Facility Strategies:

- i. Communicate the specifics and rationale for the revised discipline and sanction process to all staff.
- ii. Develop a list or examples of behavioral interventions (letters of apology, reading pre-determined articles on various topics, writing assignments, etc.) that staff could use when sanctioning justice involved women's behavior.
- iii. Develop and deliver training to all staff on the gender-responsive discipline and sanctioning practices.
- iv. Develop and deliver the training to custody staff with specialized responsibilities such as Disciplinary Hearing Officers and Investigators.
- v. Within the parameters of the revised discipline and sanctions process, provide guidance and coaching to custody staff on using discretion when taking disciplinary actions.
- vi. Ensure the revised discipline and sanctions process is included in orientation and the justice involved women handbook.

5. **Action:** *Use outcome-based data to evaluate the effectiveness of the revised discipline and sanctions process.*

a. Facility Strategies:

- i. Identify key progress indicators and develop tracking systems specific to the effectiveness of the revised disciplinary and sanctions process.
- ii. Ensure ongoing gathering and analysis of behavior and disciplinary data to provide staff and management an opportunity to review the effectiveness of operational practice, programming implications, employee training, and the behavioral impact of the incentives and sanctions.
- iii. Analyze grievance data to identify trends and patterns with the goal of eliminating recurring issues.
- iv. As the facility evolves practice in this area, efforts should be made to communicate with justice involved women how privileges that are lost due to sanctions can be regained through pro-social behavior.

**Goal 20: Review how incident and other data are used in problem-solving. Review how incident and other data are used to engage in problem-solving and preventative actions, with an emphasis on women’s pathways, how they think and act, and the meaning and reasons behind their behaviors.**

**Related ATI Goals: 78, 110, 111**

1. **Action:** *In reviewing actionable incidents with the CRDF population, consider how their pathways to incarceration, trauma history, and history of physical, sexual, and emotional abuse, may have affected or influenced their behavior during the incident.*
  - a. Agency and Facility Strategies:
    - i. Identify and implement data tracking and information gathering processes specific to investigating actionable incidents with justice involved women.
    - ii. Formulate data collection protocols/policy and incident reporting requirements.
    - iii. Develop, train, and enforce policy regarding data collection practices and procedures.
    - iv. Train supervisors on strategies to monitor and track staff performance in incident investigation and reporting.
  
2. **Action:** *Design and implement data collection protocols that promote the examination and identification of performance areas needing improvement and provide insight into lessons learned.*
  - a. Facility Strategies:
    - i. Develop a data collection process that enables identification and monitoring of common themes and trends specific to discipline, grievances, incident reports, and use of force reports.
    - ii. Involve supervisors, investigators, mental health practitioners, and appropriate line staff in developing a process to examine and analyze data after an ‘incident’ that may reveal what worked, opportunities for improvement, as well as ‘hot spots’ or performance challenges.
    - iii. Include in the process, systems for communicating recurring themes and engaging staff in developing solutions and problem solving.
    - iv. Provide for ongoing modifications of policies, procedures, and practices based on data collected and analyzed.
    - v. Establish incident process tracking recommendations to include considerations for policy development and implementation as well as the development of staff training.

**Goal 21: Improve clinical and custody collaboration. Improve clinical and custody collaboration at CRDF.**

**Related ATI Goals: 13, 58, 68, 82**

1. **Action:** *Establish the shared value of quality Mental Health (MH) services for justice involved women.*
  - a. LASD Strategies:
    - i. Benchmark current information regarding the impact of MH services to intra-facility violence reduction, “uses of force,” improved justice involved women compliance, reductions in self-harming behaviors, and mental health decompensation.
    - ii. Compile the MH services information, determine how best to disseminate the information, and provide the information to custody staff to encourage interagency support for MH services.
    - iii. Consider having LASD leadership and CHS develop and deliver trainings with custody staff regarding the purpose and access points for mental health services.
  - b. LASD, CHS, and CRDF Strategies:
    - i. LASD/CRDF, in partnership with CHS/CRDF staff, establish an ongoing opportunity, through quarterly meetings or an addition to existing interagency meeting agenda, for discussing how mental health services are being provided and issues related to services.
    - ii. CHS will provide LASD/CRDF with current accreditation standards for MH services (NCCHC, ACA) and engage in discussion about how these standards look in action and points for collaboration.
  
2. **Action:** *CHS and Custody should jointly consider the development of a proposed schedule for MH service delivery (which takes into account available areas – see Goal 22).*
  - a. Facility Strategies:
    - i. Jointly (CHS and CRDF) develop a mental health service delivery calendar detailing the type of services to be provided, designated space, service times, and CRDF justice involved women units identified to participate.
    - ii. Jointly (CHS and CRDF) should explore assessing whether modifying mental health and custody staff schedules to support service delivery in late afternoon and early evening hours and on weekends (when meeting areas are likely more available and when there is less conflict with other facility activities) would be advantageous.

**Goal 22: Improve privacy options for mental health clinician and client meetings. Improve the privacy options for mental health clinicians to be able to meet with clients in a more appropriate and nonpublic setting.**

1. **Action:** *Based on the MH services schedule developed in Goal 21, determine specific needs for physical space and accompanying privacy requirements.*
  - a. Facility Strategies
    - i. CHS will provide LASD/CRDF with the space and privacy requirements for the services to be provided at each scheduled service block at CRDF.
    - ii. CRDF will identify and develop a listing of available space for the mental health services as identified on the schedule (see Action 2) and review available spaces with CHS.
    - iii. CHS and LASD collaborate to solve gaps and build on opportunities in the physical plant.
  - b. Agency and Facility Strategies:
    - i. Incorporate MH service delivery needs in all intake area redesign plans.
  
2. **Action:** *Identify existing areas appropriate for the delivery of MH services that expand privacy options for mental health clinicians to be able to meet with justice involved clients in a more appropriate and nonpublic setting.*
  - a. Facility Strategies:
    - i. CRDF will benchmark other agencies on how the need for space has been addressed.
    - ii. CRDF will consider reasonable modifications to available space which will improve privacy, including the use of sound-masking machines and space dividers with privacy film; implement modifications if determined feasible.
    - iii. CRDF will identify underused facility areas for potential repurposing.
    - iv. CRDF will identify private areas that could be assigned, during certain hours, for MH services.
    - v. CHS will explore feasibility of utilizing medical clinic areas which are underused in late afternoon and evening hours and on weekends.

**Goal 23: Consider developing women's classification, programs, and case management division. Consider developing one division responsible for management and oversight of women's classification, programs, and case management to include case and release planning.**

**Related ATI Goals: 72, 73, 74**

1. **Action:** *Task the Director of Gender Responsive Services with the responsibility for management and oversight of women's classification, programs, and case management.*
  - a. Agency Strategies:
    - i. Conduct a job task analysis of the positions required to operate women's classification, programs and case management and ensure those are reflected in the respective LASD job descriptions.
    - ii. Establish and fund necessary job classifications, including department/program heads and line staff, at CRDF for the management, oversight, and operation of women's classification, programs, and case management.
    - iii. Create a sustaining culture and structure to ensure continuation of a division responsible for management and oversight of women's classification, programs, and case management.
  - b. Facility Strategies:
    - i. Identify and attend to space, program, and equipment needs.
    - ii. Develop and dedicate the space requirements necessary to implementing and sustaining the respective programs.
    - iii. Orient and train staff in their respective job responsibilities, and ensure they meet the knowledge and skill requirements of their respective positions specific to assessment and case management for women.
  - c. Agency and Facility Strategies:
    - i. Identify and appoint a steering committee, chaired by the Director of Gender Responsive Services, and comprised of selected stakeholders, to include current internal and external program providers and security representation, to oversee program implementation.
    - ii. Design, develop, and implement a women's classification system, justice involved women programs, and case management practices using a research-based, phased-in approach.
    - iii. Recruit, interview, and progressively hire PMB staff as classification, programs, and case management are developed and implemented at CRDF.
2. **Action:** *Establish a culture at CRDF that embraces a division of classification, programs, and case management.*
  - a. Agency Strategies:
    - i. Review, modify, and develop policies specific to CRDF women's services classification, programs, and case management that are consistent with the vision, mission, and values of the program.
    - ii. Demonstrate organizational support for women's services classification, programs, and case management fiscally, verbally, and through written communication and acknowledgement.
  - b. Facility Strategies:
    - i. Include the leadership and oversight positions of the women's classification system, programs, and case management in CRDF's executive leadership team.
    - ii. Create a system/process to ensure coordination of women's services, classification, programs, and case management with all other initiatives and activities at CRDF.



- iii. Ensure information regarding women's classification, programs, and case management initiative is shared frequently with all CRDF staff in a timely manner.

**Goal 24: Explore the implementation of a classification process for women. Explore the implementation of a classification process designed for women to include at minimum custody classification and risk need assessment. Consider a long term goal of validation of the gender-responsive classification system.**

1. **Action:** *Identify and appoint a steering committee, chaired by the Director of Gender Responsive Services, and comprised of selected stakeholders, current internal and external program providers, and security representation, to determine assessment implementation considerations.*
  - a. Agency and Facility Strategies:
    - i. Task the steering committee to determine implementation considerations to include, at a minimum, the following:
      1. Clarification of the purpose of the custody assessment (i.e., treatment, security, both?).
      2. How to use the assessment in making program assignments and case planning.
      3. How to use the assessment when making housing assignments.
      4. How to identify who receives a full COMPAS assessment.
      5. What length of time should be allocated to conducting a full COMPAS assessment to facilitate making program assignments and conducting case planning?
      6. What length of time should be made available to assess immediate coping skills and conduct release planning?
      7. Determine a reassessment schedule. Should rescheduling be based on time, change of circumstances, event driven, or a combination of all the above?
      8. How to involve the community with release planning or make referrals for justice involved women who do not receive a full COMPAS assessment.
      9. What quality assurance measures are important to ensure fidelity to the assessment process?
2. **Action:** *Develop and implement gender-responsive assessment and classification procedures.*
  - a. Agency Strategies
    - i. Identify, approve, and allocate resources to implement a gender-responsive custody classification tool.
    - ii. Determine the degree to which custody classification is gender neutral rather than addressing the needs of both male and justice involved women.
    - iii. Implement a gender-responsive custody classification tool with attention to the impact of key factors such as program access, visitation access, etc.
3. **Action:** *Ensure assigned PMB<sup>17</sup> staff are available to carry out and are trained on classification procedures specific to justice involved women at CRDF.*
  - a. Agency Strategies:
    - i. Identify, approve, and allocate resources needed to implement the classification process.
  - b. Agency and Facility Strategies:
    - i. Recruit, interview, and hire staff positions as needed and as funding is made available.
    - ii. Orient and train staff in their respective job responsibilities and ensure they meet the knowledge and skill requirements of their respective positions.


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<sup>17</sup> If PMB staff are not available for this function, consider hiring new, specialized staff.

- iii. Identify and provide space and resource needs for additional PMB staff.
- iv. Develop policy to memorialize processes and procedures for classification.
- v. Develop and implement a communication plan to ensure all staff (custody and non-custody), volunteers, and contractors understand the purpose of the classification and assessment tool and how it will be used at CRDF.

4. **Action:** *Begin conducting evidence-based risk and needs assessments normed for women.*

a. Agency Strategies:

-  i. Complete the collaborative process with the appropriate stakeholders (BOS, LASD) to “turn on” the women’s items of the COMPAS.
- ii. Ensure that the risk and need assessment addresses women’s unique needs to include:
  - 1. Trauma and abuse
  - 2. Health of relationships
  - 3. Parenting issues/concerns
  - 4. Gender mental health and depression issues
  - 5. Poverty
  - 6. Anger management
  - 7. Family support
  - 8. Community housing safety
  - 9. Education/employment/financial concerns/challenges
- iii. Ensure the assessment process is appropriate for the justice involved woman’s language, culture, literacy level, and cognitive functioning.
- iv. Ensure the assessment minimizes the risk of over-classification which may subsequently limit access to programs and resources.
- v. Develop a triaged or layered approach to assessment that recognizes the unpredictable and short-term nature of custody for justice involved women. This approach should seek to:
  - 1. Ensure quick and accurate assessments of health, mental health, substance abuse, and personal safety factors.
  - 2. Direct referrals to community services and survival/safety options.
  - 3. Inform more detailed assessments and services for medium and longer-term custody women.

5. **Action:** *Use outcome data to evaluate and demonstrate the impact of the assessment process.*

a. Agency and Facility Strategies:

- i. Identify performance measures and develop tracking systems specific to evaluating the effectiveness of the assessment and classification systems.
- ii. Review classification trends regularly and revise the protocol, and program offerings as needed, based upon lessons learned and resources needed.
- iii. Validate the COMPAS risk needs assessment and custody classification systems

## *Attachments*

Attachment A: Goals-in-detail

Attachment B: Goals Timeline Chart

Attachment C: Literature Review

Attachment D: Alternatives to Incarceration (ATI) Report Convergence

Attachment E: Visitation Workgroup Report

Attachment F: Steve Carter Physical Plant Report

Attachment G: Gender-responsive Staffing Considerations

Attachment H: Training Matrix

Attachment I: Key Questions for Staff Conducting Intake and/or Orientation

## Attachment A: Goals-in-Detail

<i>Goal 1: Implement a process, such as Women Offender Case Management Model (WOCMM) <sup>5</sup>, for collaborative case management that includes routine reviews and updates of case plans, attends to women’s basic needs, and drives program placement.</i>		
<b>Priority</b> Year 1	<b>Outcome Measures</b> <ul style="list-style-type: none"> <li>• Cost benefit analysis and return on investment</li> <li>• Improvement in clinical, program, and reentry outcomes</li> <li>• Increase in client satisfaction measures</li> </ul>	
<b>Actions</b>		<b>Timeline</b>
1	<i>Identify and appoint a steering committee, comprised of selected stakeholders, to include current internal and external program providers and security representation, to develop a collaborative case management process.</i>	6 months
2	<i>Develop and implement a process for collaborative case planning that begins at intake, includes routine reviews and updates, and attends to women’s basic needs throughout incarceration in preparation for release.</i>	6 months
3	<i>Begin conducting comprehensive case management plans that address the complex and multiple needs of justice involved women.</i>	6 months
4	<i>Use outcome data to demonstrate and evaluate the impact of the assessment process.</i>	Ongoing
<b>Resource Considerations</b> <ul style="list-style-type: none"> <li>• Funding and hiring the women’s leadership position. Staffing the steering committee.</li> <li>• Cost, staffing and provision of needed medical, mental health and substance abuse services.</li> <li>• Training time for staff and supervisors.</li> </ul>		
<b>Potential Challenges</b> <ul style="list-style-type: none"> <li>• Ensuring that women in programs are those most in need. Integrating community support in case planning.</li> <li>• A consistent adjustment/review process to monitor progress or update goals.</li> <li>• The case management protocol should be reviewed and revised as needed based upon lessons learned and resources available.</li> </ul>		
<i>Goal 2: Enhance programming specific to women’s needs (trauma, relationships, family reunification, anxiety, depression, and parenting). Develop a system designed to match women to programs based on assessed need via Northpoint COMPAS.</i>		

<b>Priority</b> Year 2	<b>Outcome Measures</b> <ul style="list-style-type: none"> <li>• Increase in the percentage of match between justice involve women's needs and program assignment</li> <li>• Increase in program engagement and completion</li> <li>• Pre-post knowledge and skill enhancement</li> <li>• Recidivism reduction</li> </ul>	
<b>Actions</b>		<b>Timeline</b>
1	Through the guidance of classification, programs, and the case management steering committees, evaluate evidence based and research-based programs and practices which address gender-responsive needs and can be delivered at CRDF.	12-18 months
2	Through the guidance of the classification, programs, and case management steering committees, implement evidence based and research-based programs to address gender-responsive needs on a priority basis.	12-18 months
3	Through the guidance of the classification, programs, and case management steering committees, implement pro-social activities and services to address gender-responsive needs on a priority basis.	12-18 months
4	Develop a system designed to match women to programs based on assessed need via Northpoint COMPAS.	12-18 months
5	Develop criteria to match women to pro-social activities and services.	12-18 months
6	Use outcome data to evaluate and demonstrate the impact of gender-responsive programs and services.	Ongoing
<b>Resource Considerations</b> <ul style="list-style-type: none"> <li>• Cost and staff time for program development. Cost of interventions provided by a licensed medical, mental health, or substance abuse professional to address critical/relevant clinical treatment needs.</li> <li>• Cost of designing space needs and hiring, training staff.</li> <li>• Staff availability to develop a system and policy.</li> <li>• Staff time to be trained in matching women's treatment programming to pro-social activities and services.</li> <li>• Staff time to collect and analyze data.</li> </ul>		

**Potential Challenges**

- Staff using/understanding the use of structured interventions that address the needs linked to criminal behavior with the goal of reducing risk.
- Monitoring and evaluating all programs on an on-going basis to ensure quality assurance and fidelity.
- Staff commitment to follow policy.
- Mismatched treatment programming.
- On-going modifications may need to be implemented as needed.

*Goal 3: Review and reconsider the visitation space, schedule, eligibility, duration, and date options. Visitation for women can relieve stress and improve their ties to the family and community. Contact visitation, lengthening timeframes, increasing slots and days of the week, increasing access to the ABC Program, improving options for visits from a distance (such as Skype or Zoom), and other creative solutions can improve not only the quantity but also quality of visits for women housed at CRDF.*

<p><b>Priority</b> Year 1</p>	<p><b>Outcome Measures</b></p> <ul style="list-style-type: none"> <li>• Pre-post increase in justice involved women's self-reported quality and quantity of time with family and positive community connections</li> <li>• Pre-post Increase in justice involved women's actual and perceived social support</li> <li>• Reduction in depressive symptoms</li> <li>• Reduction in rule breaking behavior</li> <li>• Reduction in recidivism</li> </ul>	
<b>Actions</b>		<b>Timeline</b>
1	Increase visiting opportunities for justice involved women and their families to provide as normal a family experience as possible.	12 months
2	Maintain visiting programs that help justice involved women preserve positive ties with family, friends, and the community.	12 months
3	Ensure visitors are provided with information on expectations, policies, and processes.	12 months
<p><b>Priority</b> Year 2</p>		
<b>Actions</b>		<b>Timeline</b>

1	<i>Create adequate visiting space to allow for contact visiting, including a parent and child visitation area, that provides a visitor-friendly environment.</i>	<i>12-18 months</i>
2	<i>Explore expanding video visitation options to maintain family and community contact.</i>	<i>12 months</i>
<b>Resource Considerations</b> <ul style="list-style-type: none"> <li>•Cost for additional staffing to accommodate a 7-day visiting schedule. Costs of providing/developing sufficient visiting space.</li> <li>•Hiring/staffing visiting with individuals committed to the success of the revised visiting protocols. Adequate visit spaces are provided.</li> <li>•Challenges/expertise involved in developing an orientation video. Providing visitor information for those who do not have internet access.</li> <li>•Financial and operational support to revise visitation practices and protocol.</li> <li>•Additional staffing considerations.</li> <li>•Additional space and staffing to accommodate expanded contact visitation.</li> </ul>		
<b>Potential Challenges</b> <ul style="list-style-type: none"> <li>•Disagreements on ‘allowable visitation’. Definition/interpretation of “special visits”. Determination of conditions qualifying for ‘extended family visiting’.</li> <li>•Ensure visit staff are committed to the vision, mission, and values of the program.</li> <li>•Familiarity with using social media.</li> <li>•Requires a significant change, operationally and fiscally, to current visitation practices.</li> <li>•Adapting to the new visiting opportunities and protocols.</li> </ul>		
<i>Goal 4: Conduct a thorough analysis and mapping of community reentry resource providers, including their services, capacity of women they can serve, when they make contact with the women, and data collection tools and tracking, in order to identify strengths, gaps and partnership opportunities in serving the women.</i>		
<b>Priority</b> Year 3	<b>Outcome Measures</b> <ul style="list-style-type: none"> <li>• <i>Pre-post increase in community involvement providing services to justice involved women in the jail and the community</i></li> <li>• <i>Increase in enrollment of justice involved women in community reentry services</i></li> <li>• <i>Reduction in recidivism</i></li> </ul>	
<b>Actions</b>		<b>Timeline</b>
1	<i>Conduct a thorough analysis of all existing community reentry resources.</i>	<i>12 months</i>



2	<i>Design and implement an integrated process of data collection, evaluation, and oversight to monitor and improve system-wide services.</i>	<i>12 months (ongoing)</i>
<b>Resource Considerations</b> <ul style="list-style-type: none"> <li>•Staff time and resources to map each step of the process of transitioning from jail to the community.</li> <li>•Staff time and resources to develop and monitor the integrated process of data collection, evaluation and provide oversight.</li> </ul>		
<b>Potential Challenges</b> <ul style="list-style-type: none"> <li>•Maintaining documentation of current community resources.</li> <li>•Developing and maintaining a current reentry program evaluation process.</li> </ul>		
<i>Goal 5: Develop a collaborative system to identify and mitigate barriers to reentry for women in Los Angeles County through ongoing partnership efforts and an inside out multi-disciplinary case management approach.</i>		
<b>Priority</b> Year 1	<b>Outcome Measures</b> <ul style="list-style-type: none"> <li>• Pre-post increase in community involvement providing services to justice involved women in the jail and the community</li> <li>•Increase in enrollment of justice involved women in community reentry services</li> <li>•Reduction in recidivism</li> </ul>	
<b>Actions</b>		<b>Timeline</b>
1	<i>Enhance community partners' and service providers' services by identifying and addressing reentry barriers specific to women.</i>	<i>6 months</i>
2	<i>Establish and define roles, identify coordinating efforts and services, combine, or eliminate duplicate efforts, and develop a system to ensure consistent, ongoing communication between CRDF and community partners.</i>	<i>6-9 months</i>
3	<i>Conduct wrap-around planning sessions with each justice involved woman prior to leaving CRDF.</i>	<i>9 months</i>
4	<i>Create marketing and communication strategies for CRDF stakeholders to increase their awareness and ability to support reentry.</i>	<i>9 months</i>

**Resource Considerations**

- Staff participation and oversight of the appointed committee (see Goal 1).
- Staff training in their roles. Staff time and investment in developing a communication system between CRDF and community partners.
- Cost of hiring and training case management staff.
- Staff time and resources to analyze, promote and support community reentry programs.

**Potential Challenges**

- Ensure the committee considers all services provided after release from jail in addition to services provided both in and out of jail.
- Staff acceptance of the new reentry process and intent.
- Promoting the involvement of family and friends in re-entry plans. Develop a process for providing aftercare services for women leaving with no required, on-going supervision.
- Maintaining a current resource knowledge base for all staff regarding referrals to community-based services.

*Goal 6: Develop mission, vision, and values statements that support women’s services (gender- responsive, trauma informed) as a vital specialized mission within the LASD.*

<b>Priority</b> Year 1	<b>Outcome Measures</b> •Staff and Stakeholders demonstrate increased clarity of agency direction and values than prior to implementation as measured by pre-post assessment •Staff demonstrate increased understanding of the meaning, and importance of, the gender-responsive mission	
<b>Actions</b>		<b>Timeline</b>
1	Consider creating a multi-disciplinary, facility-wide committee of 10 – 12 persons representative of all levels and job classes, led by Captain or designee.	6 months
2	Hold facility committee meeting(s).	Ongoing (monthly)
3	Finalize vision, mission, and values statements that will guide and support implementation.	6 months

4	<i>Communicate the vision, mission, and values statements.</i>	<i>6 months</i>
<b>Resource Considerations</b> <ul style="list-style-type: none"> <li>•Staff time and resources to develop the vision, mission, and value statements, and communicate them throughout the facility.</li> <li>•Time and workload demand on staff.</li> </ul>		
<b>Potential Challenges</b> <ul style="list-style-type: none"> <li>•Availability of staff to participate in the committee, considering work schedules, etc. The challenge of ensuring staff at all levels understand the purpose and meaning of the plan and the performance implications for their specific job titles.</li> <li>•Availability of committee members to meet considering time frames and workload demands.</li> <li>•Facilitating the development and promoting understanding of the statements.</li> <li>• Supervisory staff need to understand and be willing to promote the vision, mission, and values statements. Identify and implement adaptations in performance expectations that are consistent with the statements.</li> </ul>		
<i>Goal 7: Reach and maintain staffing levels and deployment strategies that consider the needs of women and support an environment characterized by safety, dignity, and respect, allowing for effective supervision, productive interaction with staff, and consistent access to programs, services, and recreation.</i>		
<b>Priority</b> Year 1/2	<b>Outcome Measures</b> <ul style="list-style-type: none"> <li>•Adequate staffing levels maintained</li> <li>•Increased staff recruitment</li> <li>•Decreased vacancy rates</li> <li>•Decreased overtime cost</li> <li>•Pre-post increase in staff understanding/awareness of their specific job expectations</li> <li>•Increased staff retention</li> </ul>	
<b>Actions</b>		<b>Timeline</b>
1	<i>Ensure the staffing pattern supports the operational requirements of working with women and is sufficient to accommodate the supervision and programming needs of all justice involved women, and that the staffing pattern provides for the requirements for ‘same sex’ supervision when needed.</i>	<i>6 months</i>
2	<i>Implement retention strategies specific to CRDF (understanding that it is easier to “keep” current staff than “recruit” new staff).</i>	<i>6 months</i>

<b>Priority</b> Year 2	<b>Outcome Measures</b> • Increased recruitment of staff	
3	Implement recruitment efforts specific to CRDF.	12-16 months
<b>Resource Considerations</b> <ul style="list-style-type: none"> <li>•Physical accommodations and program needs.</li> <li>•PREA considerations.</li> <li>•Availability of medical &amp; mental health services.</li> <li>•Maintaining at minimum, current staffing levels.</li> <li>•Budget considerations for hiring and training staff.</li> <li>•Adequate funding for the positions approved and allocated. Funding and staff availability to invest time and resources to the recruitment of female staff.</li> </ul>		
<b>Potential Challenges</b> <ul style="list-style-type: none"> <li>•Attaining adequate staffing levels. Staff need to maintain professional and respectful relations with inmates.</li> <li>•Hiring and maintaining adequate and appropriate staffing levels. Relations between staff and inmates are maintained at a professional level.</li> <li>•Promoting the image and professional opportunities of becoming a corrections staff person working with female inmates.</li> </ul>		
<b>Goal 8: Evaluate the appropriateness of a dedicated transportation unit for CRDF to avoid pulling staff from posts, shutting down programming, and limiting out of cell time to meet transportation needs.</b>		
<b>Priority</b> Year 2/3	<b>Outcome Measures</b> • Decreased overtime cost • Reduced incidence of program closure due to staffing availability •Reduced in cell time due to staffing availability	
<b>Actions</b>		<b>Timeline</b>
1	Research the need for a dedicated transportation unit for CRDF.	12 months
2	If deemed prudent, develop positions at CRDF for the sole purpose of transporting justice involved women to medical appointments and/or emergencies.	12 months
3	Track the effectiveness of the transportation unit and adjust scheduling requirements as needed.	12-18 months

<b>Resource Considerations</b>		
<ul style="list-style-type: none"> <li>• Identifying staff to assess the need/demand for a specialized transportation unit. Identifying strategic partners/stakeholders.</li> <li>• Budget implications concerning the development of a dedicated transportation unit.</li> <li>• Cost of additional staff positions and equipment. Training, development, and administration of the newly defined transportation unit.</li> <li>• Budget, supervision, equipment needs.</li> </ul>		
<b>Potential Challenges</b>		
<ul style="list-style-type: none"> <li>• The cost/availability of staff to provide for emergency transportation needs. Anticipating staff training and equipment needs.</li> <li>• Cost of newly created, additional positions could be challenging. Providing training and oversight could be a challenge.</li> <li>• The cost of a dedicated transportation unit may be prohibitive.</li> </ul>		
<i>Goal 9: Implement a system in which job descriptions, hiring processes, and performance management clearly outline expectations specific to working with women, support staff development, and hold staff accountable to expectations.</i>		
<b>Priority</b> Year 3	<b>Outcome Measures</b>	
	<ul style="list-style-type: none"> <li>• Reduction in grievances regarding treatment and supervision practices</li> <li>• Increased staff retention</li> <li>• Pre-post increase in job satisfaction ratings</li> </ul>	
<b>Actions</b>		<b>Timeline</b>
1	Modify human resource practices for CRDF to be gender responsive in job descriptions, hiring, and promotions.	12 months
<b>Priority</b> Year 2		
1	Ensure the performance management process, to include setting clear objectives, providing balanced feedback, establishing regular progress reviews, and developing individual treatment plans, is specific to working with women.	12 months

<b>Resource Considerations</b>		
<ul style="list-style-type: none"> <li>•Adequate funding to promote hiring practices and designate job class positions specific exclusively to working with women.</li> <li>•Training (and re-training) considering the constant rotation between corrections and law enforcement duties.</li> <li>•Staffing and review of the P.P.I. (Personal Performance Index)</li> <li>•Budget implications.</li> </ul>		
<b>Potential Challenges</b>		
<ul style="list-style-type: none"> <li>•The rotation between corrections staff and patrol deputy can create ‘divisions’ between the two job classes and erode morale as well as professionalism.</li> <li>•Re-design of the P.P.I. to reflect adherence to the newly defined vision, mission, and values.</li> </ul>		
<i>Goal 10: Implement and maintain a system of training in which department and facility leadership, staff, contractors, and volunteers receive training customized to their roles to support consistent consideration of the gender of the population and that promotes an environment of safety, dignity, and respect.</i>		
<b>Priority</b>	<b>Outcome Measures</b>	
<i>Year 1 /2</i>	<ul style="list-style-type: none"> <li>• <i>Pre-post increases in knowledge and skills specific to gender-responsive practice</i></li> <li>• <i>Reduced grievances related to safety, dignity, and respect</i></li> <li>• <i>Improvements in performance evaluation ratings for staff and contractors</i></li> </ul>	
<b>Actions</b>		<b>Timeline</b>
1	<i>Provide support for leadership development specific to gender-responsive, trauma-informed, and culturally competent practices.</i>	<i>18-24 months</i>
2	<i>Ensure staff have the knowledge and skills necessary to consistently provide gender-responsive, trauma-informed, and culturally competent women’s services.</i>	<i>Ongoing</i>
3	<i>Ensure volunteers and contractors have the knowledge and skills necessary to consistently provide gender-responsive, trauma-informed, and culturally competent women’s services.</i>	<i>Ongoing</i>

**Resource Considerations**

- Training for executive staff, facility leadership and external stakeholders.
- Support for gender responsive training involving strategic partners.
- Budget implications for providing needed training.
- Training staff on how to develop and conduct training.
- Budget considerations to develop curriculum.
- Identification of volunteers and contractors open to learning to work with justice involved women.

**Potential Challenges**

- Resistance to funding and conducting training emphasizing the differences in treating justice involved women from justice involved men.
- Resistance to change at any and/or all levels.
- Resistance to commitment/conforming to the vision, mission and values intended to guide their performance.

*Goal 11: Revise the design of the intake area to allow for more private space for discussion of intake processes.*

<b>Priority</b>	<b>Outcome Measures</b>	
<i>Year 1</i>	<ul style="list-style-type: none"> <li>• Reduction in grievances regarding the intake processes</li> <li>• Reduction in use of force incidents during intake processes</li> <li>• Pre-post improvements in ratings of privacy during intake processes</li> <li>• Pre-post improvements in ratings of perceived safety during intake processes</li> </ul>	
<b>Actions</b>		<b>Timeline</b>
<i>1</i>	<i>Transform the intake space into a more welcoming and humane environment within existing building parameters.</i>	<i>90-120 days</i>
<i>2</i>	<i>Enhance focus and attention to gender responsivity during the intake/orientation process.</i>	<i>90 days</i>

**Resource Considerations**

- Costs to develop and/or modify existing structures.
- Cost and staff time involved in providing and receiving training.

**Potential Challenges**

- Re-design of present facility resources may be costly, time consuming and/or challenging.
- Allocating training time, identifying qualified staff and developing needed resources.

*Goal 12: Provide a clear, specific, and consistent orientation process designed to develop an understanding of needs and safety considerations; support safety, dignity, and respect; and outline expectations. Discuss resources specific to the needs of women and allow time for questions and dialogue.*

<b>Priority</b> Year 2/3	<b>Outcome Measures</b>	
	<ul style="list-style-type: none"> <li>• Reduction in grievances related to misunderstanding of important processes</li> <li>• Increase in pre-post perceptions of safety</li> <li>• Increase in understanding of where and how to access resources or information and get questions answered</li> </ul>	
<b>Actions</b>		<b>Timeline</b>
1	Consider creating an LASD orientation video and supportive handout material for justice involved women. This video should pair with the PREA video11.	12-16 months
2	Develop a presentation and delivery schedule/process that involves key leadership staff as well as select justice involved women who have experience with the facility. Involve them in presenting and discussing the video with incoming justice involved women.	12-18 months
3	Ensure consistency throughout intake/orientation process for justice involved women and staff.	12-18 months
<b>Priority</b> Year 1		
1	Designate space and develop a schedule and tracking system to ensure all incoming justice involved women receive the revised orientation.	12 months

**Resource Considerations**

- Staff and resources to develop the orientation video.
- Strategic partners/stakeholders aware of and supportive of the new policies and practices.
- Budget considerations for producing the orientation video.
- Staff trained in presenting/facilitating the revised orientation video.
- Budget implications for identification/creation of appropriate space to conduct the orientation.
- Sufficient leadership staff committed to the new orientation and treatment process. Identifying justice involved women that would serve as a model to newly justice involved women.
- Staffing schedules that accommodate all staff attending the new orientation. Possible overtime costs.



**Potential Challenges**

- Ensure the video realistically depicts events and challenges in working with justice involved women, as well as appropriate staff supervision and management skills.
- Facilitating the video seen as an additional job task to current job performance demands.
- Ability of staff/inmates to effectively facilitate discussion of the video ensuring appropriate learning points are made and understood.
- The orientation facilitation script needs to be specific to the content and intent of the orientation. Without strict adherence to the script, individual interpretation and personal bias can influence the orientation toward reflecting individual prejudice and promote misinformation.

*Goal 13: Implement a review process for women’s uniforms, nightgowns, indigent kits, and other personal care items to ensure needs are being met specific to size and quantity.*

<b>Priority</b>	<b>Outcome Measures</b>	
<i>Year 1</i>	<ul style="list-style-type: none"> <li>• <i>Reduction of grievances related to clothing</i></li> <li>• <i>Reduction of grievances related to personal care items</i></li> <li>• <i>Pre-post improvements in justice involved women’s perception of their safety, dignity, and respect</i></li> </ul>	
<b>Actions</b>		<b>Timeline</b>
<i>1</i>	<i>Provide clothing that fits appropriately, is suitable to temperature conditions, and promotes safety and dignity.</i>	<i>12 months</i>
<i>2</i>	<i>Provide undergarments for women that fit appropriately and promote dignity and respect.</i>	<i>12 months</i>
<i>3</i>	<i>Ensure items for personal hygiene are gender specific, available to all women, and are provided to those who are indigent.</i>	<i>12 months</i>

**Resource Considerations**

- Financial resources for gender specific clothing/uniforms. Convening a committee comprised of line staff and justice involved women to develop clothing recommendations.
- Financial resources for appropriate undergarments. Identifying key staff and convening a committee comprised of line staff and inmates to develop clothing recommendations.
- Cost of quality products and the adequacy of supplies in the personal care kits. Cost of providing hygiene materials for indigent inmates.

<b>Potential Challenges</b>		
<ul style="list-style-type: none"> <li>•Develop a process to regularly solicit and review feedback on the appropriateness of the clothing.</li> <li>•Develop a process to regularly solicit and review feedback on the appropriateness of the undergarments.</li> <li>•Disagreements on quantity and quality of personal hygiene items provided.</li> </ul>		
<i>Goal 14: Evaluate storage adequacy based on duration of length of stay to ensure that property items are being stored and managed to maximize usable space.</i>		
<b>Priority</b>	<b>Outcome Measures</b>	
Year 1	<ul style="list-style-type: none"> <li>•Reduced number of grievances related to issues of property storage</li> <li>•Reduced number of disciplinary reports related to issues of property storage</li> </ul>	
<b>Actions</b>		<b>Timeline</b>
1	Review and revise property allowances, to include policy statements, considering the vastly different lengths of stay in the women's facility.	12 months
<b>Resource Considerations</b>		
•Staffing configuration that supports line staff participation in the committee. Cost of providing adequate storage.		
<b>Potential Challenges</b>		
•Differences of opinion on the adequacy of storage.		
<i>Goal 15: Create a trauma-informed search policy, and associated training, that aligns with contemporary best practices in women's jails, to include staff professionalism, communication of search process, physical and emotional safety, and trauma-informed instruction.</i>		
<b>Priority</b>	<b>Outcome Measures</b>	
Year 2	<ul style="list-style-type: none"> <li>• Reduction of grievances related to searches (clothed, unclothed, room or property)</li> <li>•Reduction in uses of force related to searches (clothed, unclothed, room or property)</li> <li>•Pre-post improvements in justice involved womens' perception of their physical, sexual, emotional, and relational safety</li> <li>•Pre-post improvements in staff perception of their physical, sexual, emotional, and relational safety</li> </ul>	
<b>Actions</b>		<b>Timeline</b>
1	Evaluate the effectiveness of clothed, unclothed, room, and property searches consistent with maintaining the safety and security of the facility as well as being attentive to the physical, sexual, emotional, and relational safety needs of the inmates/detainees.	12 months

<b>Priority</b> Year 1		
<b>Actions</b>		<b>Timeline</b>
1	Create a trauma-informed search policy to include clothed, unclothed, room, and property searches.	6 months
2	Train all security staff to ensure searches are done in a professional, consistent, and trauma-informed manner.	12 months
<b>Resource Considerations</b>		
<ul style="list-style-type: none"> <li>•Staff availability to conduct a thorough review of present search practices, research best practice and incorporate needed changes into policy and practice.</li> <li>•Staff training time in the revised search procedures.</li> </ul>		
<b>Potential Challenges</b>		
<ul style="list-style-type: none"> <li>•Staff re-learning and implementing changes into their search practices.</li> <li>•Staff resistance to incorporating revised policies into their search practices.</li> <li>•Staff resistance to changing their search practices.</li> </ul>		
<i>Goal 16: Review current practices and update all cross-gender-related searches, supervision, and announcement policies to be consistent in theme, messaging, and instruction to staff.</i>		
<b>Priority</b> Year 1	<b>Outcome Measures</b>	
	<ul style="list-style-type: none"> <li>• Reduction in grievances related to privacy or unnecessary observation</li> <li>•Pre-post increase in perceptions of sexual, emotional, and relational safety</li> </ul>	
<b>Actions</b>		<b>Timeline</b>
1	Expand Unit Order #3-09-050 "Personnel & Inmates of Opposite Gender" to ensure staff conduct searches using the maximum amount of safety, dignity, and respect for justice involved women possible.	12 months
<b>Resource Considerations</b>		
ost of appropriate shower facilities and staff time to install/revise as needed.		
<b>Potential Challenges</b>		
•Staff failing to accommodate the new policy/practice.		

*Goal 17: Consider a gender-specific section within the use of force policy and training to discuss differences in women’s communication styles, physical strength, prior trauma, reactions, staff de-escalation measures, team composition, relationships, and mental health factors.*

<b>Priority</b> Year 1/2	<b>Outcome Measures</b> <ul style="list-style-type: none"> <li>• Use of force practices and policy compliant with Title 15 Minimum Standards for Local Detention Facilities in California</li> <li>• Decrease in grievances related to use of force incidents</li> <li>• Pre-post increases in justice involved women’s perception of their physical, emotional, and relational safety</li> </ul>
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<b>Actions</b>		<b>Timeline</b>
1	<i>Review and update all applicable use of force policies, manuals, and the use of force continuum, to ensure they are consistent with best practices specific to working with justice involved women.</i>	12 months
2	<i>Provide staff training and coaching pertinent to implementing gender specific use of force, cell extraction, and use of restraints on justice involved women.</i>	12 months (ongoing)
3	<i>Develop strategies to support staff and justice involved women after a serious incident or violence in the facility.</i>	12 months

**Resource Considerations**

- Available trained staff to accommodate appropriate composition of extraction teams. Lack of awareness of policies/practices when dealing with pregnant or post-partum justice involved women.
- Training time for staff and mandatory review of any use of force incident.
- Availability of competent and respected staff to review and provide feedback subsequent to use of force situations.

**Potential Challenges**

- Possible staff resistance to revised policies on use of force. Lack of self-awareness or restraint when applying inappropriate use of force tactics.
- Staff not open to ‘critical’ feedback after experiencing a use of force situation.
- Staff and/or inmates/detainees involved in a serious incident reluctant to review/discuss their involvement.

*Goal 18: Conduct a more in-depth review of the reasons for high grievance numbers, to include identifying other methods women can use to get questions answered and needs met. Review of staff ownership and helpfulness on units around low-level issues, access to other methods of reporting, access to supervisory staff, and effectiveness of current grievance policy are recommended.*

<b>Priority</b> Year 1	<b>Outcome Measures</b>	
	<ul style="list-style-type: none"> <li>• Reduction in grievances related to low-level issues</li> <li>• Recommendations for enhancement of reporting systems</li> </ul>	
<b>Actions</b>		<b>Timeline</b>
1	Conduct a multi-disciplinary mapping of the present grievance system to identify strengths and gaps in current policy and practice.	12-18 months
2	Identify methods (other than grievance) available to justice involved women to get their questions answered, problems resolved, and needs met.	6 months
3	Review the process of reporting incidents to ensure separate tracks for reporting grievances and PREA are maintained. Ensure the reporting process does not require justice involved women to submit a report to a staff member who may be the 'subject' of said complaint.	12 months
<b>Resource Considerations</b>		
<ul style="list-style-type: none"> <li>• Financial and staff resources to conduct an in-depth review and mapping of the entire grievance system. Staff time/availability to review procedural orders and policies and reconcile them with the revised vision, mission, and value statements.</li> <li>• Staff assignments and resource considerations requiring supervisory staff to conduct daily 'walk-throughs.'</li> <li>• Staff time to review reporting of grievances and PREA.</li> </ul>		
<b>Potential Challenges</b>		
<ul style="list-style-type: none"> <li>• Time and availability of staff to conduct an analysis/review of the grievance process and protocols.</li> <li>• Willingness of supervisory staff to conduct daily 'walk-throughs'.</li> <li>• Staff openness to listen and attend to inmate/detainee concerns/problems.</li> <li>• Alternate strategies for reporting incidents/grievances available for women in High Observation Housing.</li> </ul>		
<p><i>Goal 19: Consider revision of current disciplinary processes to include preventive actions staff can assist with, alternative sanctions, learning opportunities (such as thinking reports, therapy assignments, or apology letters), and collaboration with clinical staff in appropriate cases.</i></p> <p><i>Ensure staff training is aligned with their expectations.</i></p>		
<b>Priority</b> Year 1	<b>Outcome Measures</b>	
	<ul style="list-style-type: none"> <li>• Reduction in sanctioning for minor incidents and common categories such as "disrespect" and "refusing a direct order"</li> <li>• Pre-post increases in gender responsive women's perception of physical, sexual, emotional, and relational safety</li> <li>• Increases in positive behavior and self-management behavior</li> </ul>	

<b>Actions</b>		<b>Timeline</b>
1	<i>Research best practices for a gender-responsive discipline and sanctions process that is characterized by efforts to maximize safety, dignity, respect, fairness, and a focus on learning rather than punishment.</i>	6 months
2	<i>Develop a disciplinary structure and sanction process that is evidence-based, strength based, gender responsive, trauma-informed, and that reinforces a safe facility culture by motivating justice involved women's positive behavior and encouraging self-management.</i>	8 months
3	<i>Revise all applicable policy, procedure, and processes specific to revised discipline and the sanction process.</i>	12 months
4	<i>Implement the revised disciplinary and sanctions processes.</i>	12 months
5	<i>Use outcome-based data to evaluate the effectiveness of the revised discipline and sanctions process.</i>	12 months

**Resource Considerations**

- Staff time and cost to conduct reviews of disciplinary actions, use of restrictive housing, and outcomes.
- Ensure that the disciplinary system is sensitive to the needs uniquely important to justice involved women.
- Availability of alternative behavior interventions to shape behavior.
- Staff training time and cost.
- Time and staff resources available to conduct and analyze data.

**Potential Challenges**

- Staff reluctance to change disciplinary actions/strategies.
- The revised disciplinary structure and sanction process is infused with a 'punitive' orientation rather than promoting learning. Disciplinary processes are applied inconsistently.
- Knowledge of available options to use in shaping behavior.
- Staff resistance to changing the disciplinary process and implementing a more learning-based sanctioning process.
- Staff continuing to use the previous discipline and sanction process and resist adjusting to the new policies & procedures.

*Goal 20: Review how incident and other data are used to engage in problem-solving and preventative actions, with an emphasis on women's pathways, how they think and act, and the meaning and reasons behind their behaviors.*

<b>Priority</b> Year 1	<b>Outcome Measures</b> •Reduction in repeat incidents	
<b>Actions</b>		<b>Timeline</b>
1	<i>In reviewing actionable incidents with the CRDF population, consider how their pathways to incarceration, trauma history, and history of physical, sexual, and emotional abuse, may have affected or influenced their behavior during the incident.</i>	12-18 months
2	<i>Design and implement data collection protocols that promote the examination and identification of performance areas needing improvement and provide insight into lessons learned.</i>	12 months
<b>Resource Considerations</b>		
<ul style="list-style-type: none"> <li>•Staff time and resources for the development and implementation of data collection protocols. Time and resources to train supervisors on strategies to monitor and track staff performance.</li> <li>•Staff and time to provide for ongoing process modifications based upon data collected and analyzed.</li> </ul>		
<b>Potential Challenges</b>		
<ul style="list-style-type: none"> <li>•Data collection practices are incomplete and inaccurate.</li> <li>•Incomplete or inaccurate data.</li> </ul>		
<i>Goal 21: Improve clinical and custody collaboration at CRDF.</i>		
<b>Priority</b> Year 1	<b>Outcome Measures</b> •Increased pre-post measures of perceived collaboration by custody and clinical staff •Increased pre-post ratings of space adequacy and privacy	
<b>Actions</b>		<b>Timeline</b>
1	<i>Establish the shared value of quality Mental Health (MH) services for justice involved women.</i>	6 months
2	<i>CHS and Custody should jointly consider the development of a proposed schedule for MH service delivery.</i>	3 months

<b>Resource Considerations</b> <ul style="list-style-type: none"> <li>•Time.</li> <li>•Contracted Services.</li> <li>•Internal Support.</li> </ul>		
<b>Potential Challenges</b> <ul style="list-style-type: none"> <li>•Partnership between CHS and CRDF.</li> <li>•Ability to agree on level of services.</li> <li>•Defining shared priorities.</li> </ul>		
<i>Goal 22: Improve the privacy options for mental health clinicians to be able to meet with clients in a more appropriate and nonpublic setting.</i>		
<b>Priority</b> <i>Year 1</i>	<b>Outcome Measures</b> <ul style="list-style-type: none"> <li>• <i>Increased pre-post ratings of space adequacy and privacy</i></li> </ul>	
<b>Actions</b>		<b>Timeline</b>
1	<i>Based on the MH services schedule developed in Goal 21, determine specific needs for physical space and accompanying privacy requirements.</i>	<i>3 months &amp; ongoing</i>
2	<i>Identify existing areas appropriate for the delivery of MH services that expand privacy options for mental health clinicians to be able to meet with justice involved clients in a more appropriate and nonpublic setting.</i>	<i>4 months</i>
<b>Resource Considerations</b> <ul style="list-style-type: none"> <li>•Time.</li> <li>•Contracted Services.</li> <li>•Internal Support.</li> <li>•Cost of remodel.</li> <li>•Number of MH staff to deliver programs.</li> </ul>		
<b>Potential Challenges</b> <ul style="list-style-type: none"> <li>•Partnership between CHS and CRDF.</li> <li>•Ability to agree on level of services.</li> <li>•Defining shared priorities.</li> </ul>		



*Goal 23: Consider developing one division responsible for management and oversight of women’s classification, programs, and case management to include case and release planning.*

<b>Priority</b> Year 1/3	<b>Outcome Measures</b> • Increase in consistency and fidelity of classification procedures	
<b>Actions</b>		<b>Timeline</b>
1	Task the Director of Gender Responsive Services with the responsibility for management and oversight of women’s classification, programs, and case management.	6 months
2	Establish a culture at CRDF that embraces a division of classification, programs, and case management.	18-24 months

**Resource Considerations**

- Funding for necessary job classification, including the Director position. Cost of developing dedicated space requirements to implement and sustain respective programs. Training staff in their respective job responsibilities.
- Staff time to review, modify, and develop policies specific to CRDF women’s services classification, programs, and case management.

**Potential Challenges**

- Creating a sustaining culture and structure to ensure continuation of a division responsible for management and oversight of women’s classification, programs, and case management.
- Organization support for women’s services classification, programs, and case management. Ensure information regarding women’s classification, programs, and case management initiative is shared frequently with all CRDF staff in a timely manner.

*Goal 24: Explore the implementation of a classification process designed for women to include at minimum custody classification and risk need assessment. Consider a long term goal of validation of the gender-responsive classification system.*

<b>Priority</b> Year 1/2	<b>Outcome Measures</b> • Consistent administration of assessments with fidelity •Reduction of instances of over-classification •Increase in the percentage of match between justice involve women's needs and program assignment	
		<b>Timeline</b>

1	<i>Identify and appoint a steering committee, chaired by the Director of Gender Responsive Services, and comprised of selected stakeholders, current internal and external program providers, and security representation, to determine assessment implementation considerations.</i>	<i>6 months</i>
2	<i>Develop and implement gender-responsive assessment and classification procedures.</i>	<i>6-9 months</i>
3	<i>Ensure assigned PMB12 staff are available to carry out and are trained on classification procedures specific to justice involved women at CRDF.</i>	<i>6 months</i>
4	<i>Begin conducting evidence-based risk and needs assessments validated for women.</i>	<i>3-6 months</i>
<b>Priority</b> <i>Year 3</i>		
1	<i>Use outcome data to evaluate/demonstrate the impact of assessment process.</i>	<i>Ongoing</i>

**Resource Considerations**

- Funding for the leadership position. Staffing and time demands for the steering committee. Space and resource needs for assessment staff.
- Staff training and costs in conducting gender-responsive assessment and classification procedures.
- Hiring and training of assessment staff.
- Staff time to identify performance measures and develop tracking systems.

**Potential Challenges**

- The complexity of completing the task to include hiring staff, developing policies, and conducting training.
- Staff receptivity to the new ‘treatment oriented’ assessment and classification procedures.
- Implementing the assessment process.
- Ensuring the classification trends are regularly reviewed and revised as needed.

Attachment B: Goals Timeline

<b>GENDER RESPONSIVE JUSTICE STRATEGIC IMPLEMENTATION PLAN: TIMELINE</b>													
Quarter	Priority Year 1				Priority Year 2				Priority Year 3				
	1	2	3	4	1	2	3	4	1	2	3	4	
<b>Section 1: Collaborative Case Management, Program Planning and Provision, and Continuum of Reentry Services</b>													
<b>Goal 1: Implement a collaborative case management process.</b>													
1. Identify and appoint a steering committee, chaired by the Director of Gender Responsive Services, and comprised of selected stakeholders, to include current internal and external program providers and security representation, to develop a collaborative case management process.													
2. Develop and implement a process for collaborative case planning that begins at intake, includes routine reviews and updates, and attends to women’s basic needs throughout incarceration in preparation for release.													
3. Begin conducting comprehensive case management plans that address the complex and multiple needs of justice involved women.													
4. Use outcome data to demonstrate and evaluate the impact of the assessment process.				<i>Ongoing</i>									
<b>Goal 2: Enhance programming specific to women’s needs.</b>													
1. Through the guidance of Classification, Programs, and Case Management Steering Committees, evaluate evidence based and research-based programs and practices which address gender-responsive needs and can be delivered at CRDF.													
2. Through the guidance of the Classification, Programs, and Case Management Steering Committees, implement evidence based and research-based programs to address gender-responsive needs on a priority basis.													
3. Through the guidance of the Classification, Programs, and Case Management Steering Committees, implement pro-social activities and services to address gender-responsive needs on a priority basis.													
4. Develop a system designed to match women to programs based on assessed need via Northpoint COMPAS.													
5. Develop criteria to match women to pro-social activities and services.													
6. Use outcome data to evaluate and demonstrate the impact of gender-responsive programs and services.													<i>Ongoing</i>
<b>Goal 3: Review and reconsider visitation space.</b>													
1. Increase visiting opportunities for justice involved women and their families to provide as normal a family experience as possible:													

Attachment B: Goals Timeline

<b>GENDER RESPONSIVE JUSTICE STRATEGIC IMPLEMENTATION PLAN: TIMELINE</b>												
Quarter	Priority Year 1				Priority Year 2				Priority Year 3			
	1	2	3	4	1	2	3	4	1	2	3	4
2. Maintain visiting programs that help justice involved women preserve positive ties with family, friends, and the community.												
3. Ensure visitors are provided with information on expectations, policies, and processes.												
4. Create adequate visiting space to allow for contact visiting, including a parent and child visitation area, that provides a visitor-friendly environment.												
5. Explore expanding video visitation options to maintain family and community contact.												
<b>Goal 4: Conduct a mapping of reentry resource providers.</b>												
1. Conduct a thorough analysis of all existing community reentry resources.												
2. Design and implement integrated process of data collection, evaluation, and oversight to monitor and improve system-wide services.									<i>Ongoing</i>			
<b>Goal 5: Develop a collaborative community partners and services system.</b>												
1. Enhance community partners' and service providers' services by identifying and addressing reentry barriers specific to women.												
2. Establish and define roles, identify coordinating efforts and services, combine, or eliminate duplicate efforts, and develop a system to ensure consistent, ongoing communication between CRDF and community partners.												
3. Conduct wrap-around planning sessions with each justice involved woman prior to leaving CRDF.												
4. Create marketing and communication strategies for CRDF stakeholders to increase their awareness and ability to support reentry.												

Attachment B: Goals Timeline

<b>GENDER RESPONSIVE JUSTICE STRATEGIC IMPLEMENTATION PLAN: TIMELINE</b>													
	Priority Year 1				Priority Year 2				Priority Year 3				
	Quarter	1	2	3	4	1	2	3	4	1	2	3	4
<b>Section 2: CRDF Operations, Programs and Services</b>													
<b>Goal 6: Develop mission, vision, and values statements.</b>													
1. Consider creating a multi-disciplinary, facility-wide committee of 10 – 12 persons representative of all levels and job classes, led by Captain or designee													
2. Hold facility committee meeting(s).		<i>Ongoing</i>											
3. Finalize vision, mission, and values statements that will guide and support implementation.													
4. Communicate the vision, mission, and values statements.													
<b>Goal 7: Maintain staffing levels that consider the needs of women.</b>													
1. Ensure the staffing pattern supports the operational requirements of working with women and is sufficient to accommodate the supervision and programming needs of all justice involved women, and that the staffing pattern provides for the requirements for 'same sex' supervision when needed.													
2. Implement retention strategies specific to CRDF (understanding that it is easier to "keep" current staff than "recruit" new staff).													
3. Implement recruitment efforts specific to CRDF.													
<b>Goal 8: Evaluate a dedicated transportation unit for CRDF.</b>													
1. Research the need for a dedicated transportation unit for CRDF.													
2. If deemed prudent, develop positions at CRDF for the sole purpose of transporting justice involved women to medical appointments and/or emergencies.													
3. Track the effectiveness of the transportation unit and adjust scheduling requirements as needed.													
<b>Goal 9: Implement an HR system specific to working with women.</b>													
1. Modify human resource practices for CRDF to be gender responsive in job descriptions, hiring, and promotions.													
2. Ensure the performance management process, to include setting clear objectives, providing balanced feedback, establishing regular progress reviews, and developing individual treatment plans, is specific to working with women.													
<b>Goal 10: Implement gender responsive training.</b>													

Attachment B: Goals Timeline

GENDER RESPONSIVE JUSTICE STRATEGIC IMPLEMENTATION PLAN: TIMELINE												
Quarter	Priority Year 1				Priority Year 2				Priority Year 3			
	1	2	3	4	1	2	3	4	1	2	3	4
1. Provide support for leadership development specific to gender-responsive, trauma-informed, and culturally competent practices.												
2. Ensure staff have the knowledge and skills necessary to consistently provide gender-responsive, trauma-informed, and culturally competent women’s services.			Ongoing									
3. Ensure volunteers and contractors have the knowledge and skills necessary to consistently provide gender-responsive, trauma-informed, and culturally competent women’s services.			Ongoing									
<b>Goal 11: Redesign the intake area for more privacy.</b>												
1. Transform the intake space into a more welcoming and humane environment within existing building parameters.												
2. Enhance focus and attention to gender responsiveness during the intake/orientation process.												
<b>Goal 12: Provide an orientation process specific to the needs of women.</b>												
1. Consider creating an LASD orientation video and supportive handout material for justice involved women. This video should pair with the PREA video												
2. Designate space and develop a schedule and tracking system to ensure all incoming justice involved women receive the revised orientation.												
3. Develop a presentation and delivery schedule/process that involves key leadership staff as well as select justice involved women who have experience with the facility. Involve them in presenting and discussing the video with incoming justice involved women.												
4. Ensure consistency throughout intake/orientation process for justice involved women and staff.												
<b>Goal 13: Implement a review process for women’s clothing and personal care items.</b>												
1. Provide clothing that fits appropriately, is suitable to temperature conditions, and promotes safety and dignity.												
2. Provide undergarments for women that fit appropriately and promote dignity and respect												
3. Ensure items for personal hygiene are gender specific, available to all women, and are provided to those who are indigent.												
<b>Goal 14: Evaluate storage adequacy for property items</b>												
1. Review and revise property allowances, to include policy statements, considering the vastly different lengths of stay in the women’s facility.												
<b>Goal 15: Create a trauma-informed policy and training.</b>												

Attachment B: Goals Timeline

GENDER RESPONSIVE JUSTICE STRATEGIC IMPLEMENTATION PLAN: TIMELINE												
Quarter	Priority Year 1				Priority Year 2				Priority Year 3			
	1	2	3	4	1	2	3	4	1	2	3	4
1. Evaluate the effectiveness of clothed, unclothed, room, and property searches consistent with maintaining the safety and security of the facility as well as being attentive to the physical, sexual, emotional, and relational safety needs of the justice involved women.												
2. Create a trauma-informed search policy to include clothed, unclothed, room, and property searches												
3. Train all security staff to ensure searches are done in a professional, consistent, and trauma-informed manner.												
<b>Goal 16: Consider gender-specific section in the use of force policy and training.</b>												
1. Expand Unit Order #3-09-050 "Personnel & Inmates of Opposite Gender" to ensure staff conduct searches using the maximum amount of safety, dignity, and respect for justice involved women possible.												
<b>Goal 17: Consider gender-specific section in the use of force policy and training.</b>												
1. Review and update all applicable use of force policies, manuals, and the use of force continuum, to ensure they are consistent with best practices specific to working with justice involved women.												
2. Provide staff training and coaching pertinent to implementing gender specific use of force, cell extraction, and use of restraints on justice involved women.			<i>Ongoing</i>									
3. Develop strategies to support staff and justice involved women after a serious incident or violence in the facility.												
<b>Goal 18: Conduct an in-depth review of grievance numbers.</b>												
1. Conduct a multi-disciplinary mapping of the present grievance system to identify strengths and gaps in current policy and practice.												
2. Identify methods (other than grievance) available to justice involved women to get their questions answered, problems resolved, and needs met.												
3. Review the process of reporting incidents to ensure separate tracks for reporting grievances and PREA are maintained. Ensure the reporting process does not require justice involved women to submit a report to a staff member who may be the 'subject' of said complaint.												
<b>Goal 19: Consider revision of current disciplinary processes.</b>												
1. Research best practices for a gender-responsive discipline and sanctions process that is characterized by efforts to maximize safety, dignity, respect, fairness, and a focus on learning rather than punishment.												

Attachment B: Goals Timeline

<b>GENDER RESPONSIVE JUSTICE STRATEGIC IMPLEMENTATION PLAN: TIMELINE</b>													
Quarter	Priority Year 1				Priority Year 2				Priority Year 3				
	1	2	3	4	1	2	3	4	1	2	3	4	
2. Develop a disciplinary structure and sanction process that is evidence-based, strength based, gender responsive, trauma-informed, and that reinforces a safe facility culture by motivating justice involved women’s positive behavior and encouraging self-management.													
3. Revise all applicable policy, procedure, and processes specific to revised discipline and the sanction process.													
4. Implement the revised disciplinary and sanctions processes.													
5. Use outcome-based data to evaluate the effectiveness of the revised discipline and sanctions process.					<i>Ongoing</i>								
<b>Goal 20: Review how incident and other data are used in problem-solving.</b>													
1. In reviewing actionable incidents with the CRDF population, consider how their pathways to incarceration, trauma history, and history of physical, sexual, and emotional abuse, may have affected or influenced their behavior during the incident.													
2. Design and implement data collection protocols that promote the examination and identification of performance areas needing improvement and provide insight into lessons learned.													
<b>Goal 21: Improve clinical and custody collaboration.</b>													
1. Establish the shared value of quality Mental Health (MH) services for justice involved women.		<i>Ongoing</i>											
2. CHS and Custody should jointly consider the development of a proposed schedule for MH service delivery.		<i>Ongoing</i>											
<b>Goal 22: Improve privacy options for mental health clinician and client meetings.</b>													
1. Based on the MH services schedule developed in Goal 21, determine specific needs for physical space and accompanying privacy requirements.		<i>Ongoing</i>											
2. Identify existing areas appropriate for the delivery of MH services that expand privacy options for mental health clinicians to be able to meet with justice involved clients in a more appropriate and nonpublic setting.													
<b>Goal 23: Consider developing women’s classification, programs, and case management division.</b>													
1. Task the Director of Gender Responsive Services with the responsibility for management and oversight of women’s classification, programs, and case management.													
2. Establish a culture at CRDF that embraces a division of classification, programs, and case management.					<i>Ongoing</i>								



Attachment B: Goals Timeline

GENDER RESPONSIVE JUSTICE STRATEGIC IMPLEMENTATION PLAN: TIMELINE												
Quarter	Priority Year 1				Priority Year 2				Priority Year 3			
	1	2	3	4	1	2	3	4	1	2	3	4
<b>Goal 24: Explore the implementation of a classification process for women.</b>												
1. Identify and appoint a steering committee, chaired by the Director of Gender Responsive Services, and comprised of selected stakeholders, current internal and external program providers, and security representation, to determine assessment implementation considerations.												
2. Develop and implement gender-responsive assessment and classification procedures.												
3. Ensure assigned PMB (Population Management Bureau) staff are available to carry out and are trained on classification procedures specific to justice involved women at CRDF.				<i>Ongoing</i>								
4. Begin conducting evidence-based risk and needs assessments validated for women.			<i>Ongoing</i>									
5. Use outcome data to evaluate and demonstrate the impact of the assessment process.										<i>Ongoing</i>		

## Attachment C: Literature Review

Gender-responsive women’s facilities are characterized by “approaches, guided by women-centered research, that are relational, strengths-based, trauma informed, culturally competent, holistic, and account for the different characteristics and life experiences of women and men” (p. 9)<sup>1</sup>. The following pages provide a summary of key research for facility teams as context to keep in mind as they work as a team to develop strategies to improve practice. The discussion is excerpted from a larger literature review by Owen, Wells, and Pollack for the NIC Safety Matters Project<sup>2</sup>.

### **PATHWAYS**

Many researchers have contributed to the development of the pathways model of female criminality (Bloom, 2004; Bloom et al., 2003, 2004; Belknap & Holsinger, 1998; Belknap, Holsinger, & Dunn, 1997; Chesney-Lind, 1997, 2000; Covington, 1998, 2000, 2001; Daly, 1992; Owen, 1998; Pollock, 1998, 2002; Richie, 1996; and Triplett & Meyers, 1995). The pathways model argues that women and men come to crime from different pathways. These researchers have identified factors between male and female offenders that result in distinct pathways for women. For example, women are more likely to

- Be primary caregivers of young children
- Have experienced childhood physical or sexual abuse or both
- Report physical and sexual abuse victimization as adults
- Have drug dependency issues
- Indicate psycho-social problems
- Have an incarcerated parent
- Come from a single parent home
- Suffer from serious health problems, including HIV and AIDS.

Further, women are less likely to:

- Be convicted of a violent crime
- Have stable work history and, therefore, experience greater poverty.

### **THE IMPORTANCE OF RELATIONSHIPS**

In addition to examining life course events, the pathways approach also incorporates the relational model of development for women, as suggested by Covington (1998). She argues that the primary motivation for women throughout life is not separation, but connection. Women’s emotional

### **THREE OVERLAPPING PATHWAYS**

Research (VanVoorhis, Groot, & Bauman, 2010), Brenan, et al. (2012) conducted in prisons and jails across the country have combined these factors into three related and overlapping pathways:

- Childhood victimization model shaped by sustained abuse in childhood leads to mental health issues and subsequent attempts to self-medicate with substance abuse
- Relational model created by relationship dysfunction, intimate partner violence, and low self-efficacy within repeated victimization; culminating in mental health and substance abuse issues
- Social and human capital model that is also shaped by family intimate relationship dysfunction; low educational and vocational attainment, leading to low self-efficacy and employment or financial difficulty

<sup>1</sup> Benedict, A., Ney, B. & Ramirez, R. (2015). Gender Responsive Discipline and Sanctions Policy Guide for Women’s Facilities. Silver Spring, MD: National Resource Center on Justice-Involved Women.

<sup>2</sup> Review conducted under Cooperative Agreement 13CS10GKQ5 between The National Institute of Corrections and The Moss Group. The bibliography for this review can be found in Attachment E, Literature Review References.

development is dependent upon relationships and when women feel disconnected from others, they experience disempowerment, confusion, and anxiety. Dysfunctional families where emotional support is weak or non-existent and where relationships with primary caregivers may be rife with violence or exploitation dramatically affect a woman's ability to have healthy relationships in her adult life. Patterns emerge where the woman may form a sequence of intense but dysfunctional relationships (Covington, 2000).

#### VICTIMIZATION AND ITS EFFECTS

One of the most consistent findings is that female offenders are very likely to have experienced violent victimization, especially sexual victimization, and this experience results in gendered offenses and behavior while incarcerated (Bloom et al., 2003; Belknap, Holsinger, & Dunn, 1997; Belknap, 2001; Pollock, 1998, 2002; McClellan, Farabee, & Crouch, 1997; Human Rights Watch, 1996; Tjaden & Thoennes, 2006; Carlson, 2005; Browne, Miller, & Maguin, 1999; Harlow, 1999; Snell, 1994; Owen, 1998).

Browne, et al. (1999), for instance, found that in their sample of 150 New York female prisoners, 59 percent had been sexually abused and 70 percent had been physically abused as children, 49 percent had been raped as adults, and 70 percent had experienced severe intimate partner abuse. The most comprehensive national study was conducted by the Bureau of Justice Statistics researchers with Harlow (1999) indicating that 47 percent of women in state prisons reported physical abuse and 39 percent reported sexual abuse at some point in their lives; 25 percent and 26

percent reported experiencing physical abuse and sexual abuse before age 18.

#### CONSEQUENCES OF CHILDHOOD SEXUAL ABUSE

Finkelhor and Browne (1985, see also Brown and Finkelhor, 1986) describe several consequences that may occur including:

- Girls become **prematurely sexualized** and learn to use sex to manipulate others and views herself primarily as a sexual commodity.
- Girls feel **betrayed** by someone who was a trusted caregiver leading to dependency, impaired judgment of the trustworthiness of others, and vulnerability to abusive partners.
- Girls have pervasive feelings of **powerlessness** that extends into adulthood.
- Girls grow up with a feeling of **shame and guilt** with a self-image that incorporates a feeling of "badness" that, in turn, translates to self-destructive behavior.

Childhood sexual victimization has been linked to a wide range of physical and psychological consequences, including personality disorders, depression, suicidal and self-destructive behaviors, eating disorders, anxiety, feelings of isolation and stigma, poor self-esteem, poor social and interpersonal functioning, trust issues, substance abuse, sexual problems, and high-risk sexual behavior (Breitenbecher, 2001; Islam-Zwart & Vick, 2004; Easteal, 2001; Ketring & Feinaur, 1999). Cathy Widom (1991, 2000) argues that childhood experiences of victimization contribute to the multiple problems female offenders have in adulthood, including lack of intellectual performance, inability to cope with stress, suicide, abuse of alcohol and drugs, sensation-seeking and anti-social attitudes, and lower levels of self-esteem and sense of control.

Most notable here are findings that

show this prior victimization is linked to inappropriate sexual behavior, including high-risk sexual behavior (Breitenbecher, 2001; Islam-Zwart & Vik, 2004; Finkelhor & Browne, 1985; Browne & Finkelhor, 1986; Widom, 2000; Bloom, 1997; Maeve, 2000; Battle, Zlotnick, Najavits, Guitierrez, & Winsor, 2003; Green et al., 2005; Jordan, et al., 1996; Brewer-Smyth, et al., 2004; Mullings, Marquart, & Brewer, 2000; Mullings, Marquart, & Hartley, 2003; Surratt, Inciardi, Kurtz, & Kiley, 2004). Many of these studies suggest sexual victimization is correlated with revictimization. Other researchers argue that some women are just as likely to be perpetrators of intimate partner violence as men (for a review, see Robertson & Murachver, 2007). Later researchers, looking at incarcerated populations, have found that violent female offenders are more likely to have experienced childhood victimization than offenders incarcerated for property crimes (Brewer-Smyth, et al., 2004; Mullings, Pollock, & Crouch, 2002; Pollock, Mulling, & Crouch, 2006).

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Batchelor, Burman, and Brown (2001) found that some young incarcerated women did not view certain behaviors or experiences as violent, such as attempted rapes by acquaintances or physical fights with siblings.

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One important finding of this research was that girls could not be neatly categorized into victims and offenders. Also, in several studies, the concept of respect was found to be salient for marginalized female offenders as well as male offenders (Batchelor et al., 2001; Batchelor, 2005; Baskin & Sommers, 1998; Kruttschnitt & Carbone-Lopez, 2006; Pollock, 2002; Owen, 1998).

Maeve (2000) chronicles the high prevalence of childhood abuse among female prisoners. She explains that such abuse can lead to symptoms of Post-Traumatic Stress Disorder (PTSD), such as *over-remembering*, which may lead to lashing out violently to inappropriate cues; *under-remembering*, a type of disassociation, which may lead to reacting with passivity to an external threat; *cyclical reexperiencing*, which may lead to becoming involved in successive intense relationships that are unstable in a continual reenactment of “rescue, injustice, and betrayal;” and *self-blame*, which may lead to self-hate and self-destructive behavior.

Even greater numbers of female offenders have been victimized in adulthood. Between 40 percent and 88 percent of incarcerated women have been the victims of domestic violence, also referred to here as intimate partner violence, and sexual or physical abuse prior to incarceration (Belknap, 2015; Pollock, 2014). This compares to lifetime prevalence rates of non-incarcerated women of about 18 percent for rape and 52 percent for physical assault (Bloom et al., 2003; Human Rights Watch, 1996; Tjaden & Thoennes, 2006; Carlson, 2005; Batchelor, 2005).

Cook, Smith, Tusher, & Railford (2005) found that, in their sample of incarcerated women, 99 percent reported experiencing at least one traumatic life event, 81 percent reported five or more. Some evidence indicates that white women in prison are even more likely than black women to have these experiences (Keaveny & Zausniewski, 1999). The data is clear that women in prison have experienced more traumatic events than non-incarcerated samples, and especially trauma that involves violence, either as a victim of violence or the loss of a loved one through violence. As Belknap (2015, p. 93) summarizes, “Undeniably, trauma is a key pathway to offending.” Dehart (2008, cited in Belknap, 2015, p. 93) further provides this illustration.

## REVICITIMIZATION

Sexual victimization, in childhood or adulthood, seems to be correlated with revictimization. Studies consistently demonstrate that women and girls who are raped are more likely than non-victims to experience subsequent sexual victimization (Messman-Moore & Long, 2000; Tjaden &

Thoennes, 2006). This certainly seems to be true for incarcerated women, although exactly why such women are vulnerable to revictimization is unclear. For incarcerated women, it is likely due to a variety of risky behaviors and their tendency to become involved with abusive partners and engage in high-risk sexual behavior. However, one study identified a greater vulnerability to sexual harassment and coercion from authority figures for those women who had experienced prior sexual victimization (Messman-Moore & Long, 2000).

Many studies show that prison can, in effect, retraumatize women through routine operational practice (Maeve, 2000; Covington & Bloom, 2006; Covington, 2012, 2013; Heney and Kristiansen (1997). Maeve, for example, argues that a prison operational practice can recreate trauma and aggravate the symptoms of PTSD. The experiences of pat-downs and strip searches are recreations of childhood sexual abuse, especially when the authority figure abuses his or her position. Maeve

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For some women, erupting in violence reduces anxiety. Partners in prisons are also likely targets of abuse. She described one prisoner with an extensive history of childhood abuse who became increasingly anxious when a relationship was too peaceful; her comment was that “...I don’t like it, it’s not real—something’s got to happen” (Maeve, 2000, p. 485).

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finds that female prisoners’ violence, dissociation, depression, and self-mutilating behaviors could be predicted based on their prior histories. Women’s violence in prison relationships can be understood by recognition of PTSD symptoms.

Widom (1989a & b) linked early victimization to criminality for both sexes, although she found a correlation between early victimization and later violent crimes during adulthood only for men, not women. She did find, however, that early victimization was

correlated with violent delinquency by female juveniles (Widom, 1991). Other researchers reported that while early victimization seems to be correlated with violent crime for male victims, the relationship is not so clear for female victims, who seem to be more prone to drugs and alcohol and other non-violent crimes (for a review, see Holsinger & Holsinger, 2005).

In a study that examined the later lives of a sample of girls treated for child sexual abuse and a control sample, Siegel and Williams (2003, p. 79) found that, along with familial neglect and abuse, sexual abuse was a significant factor in later violent criminality. The women in the victim sample were over twice as likely to have committed a violent offense as a juvenile and five times as likely to have run away. As adults, they were twice as likely to commit any crime, about twice as likely to commit a violent crime, and about seven times as likely to commit a drug crime.

Other researchers, looking at incarcerated populations, have found that violent female offenders are more likely to have experienced childhood victimization than property offenders (Brewer-Smyth, et al., 2004; Pollock, Mullings & Crouch, 2006). Brewer-Smyth, et al., (2004) link early violent victimization to neurobiological effects. In this proposed relationship, early abuse leads to either brain injury or adverse brain development because of elevated levels of cortisol (the stress hormone). A variety of behavioral effects may result, including reacting in violence to stressors or triggers that would not create a violent response in non-traumatized individuals.

## WOMEN'S PRISON EXPERIENCE

Men's prison culture has been described as a "jungle" where the strong prey upon the weak, and both expressive and instrumental violence is not uncommon (see Johnson, 2006; Pollock, 2004). Sexual assault is only one type of violence found in prisons for men, albeit, perhaps, the most

feared. Sex, in men's prisons, seems to equal power, control, and violence.

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There is a great deal of research indicating that the prison cultures of women and men are different and reflects, to a certain extent, differences between the sexes in the outside world.

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The subculture in women's prisons has been described as very different from that found in prisons for men (Pollock, 2002; Owen, 1998). Unlike men's institutions, women's prisons were described with remarkably low levels of racial tension and violence (Kruttschnitt, 1983; Pollock, 2002). In general, older studies of women's prison

subculture portrayed it as less violent and victimizing than the subculture in men's prisons. Women's sexual relationships are described as usually consensual rather than coercive. Unlike men, women sometimes develop pseudo-families as a result of these relationships. These affiliations mimic familial relationships in society, with mothers, fathers, siblings, and children acting in general accordance with their role (Owen, 1998; Pollock, 2002; Girshick, 1999). While some current research disputes the presence of familial groupings (Greer, 2000), others note their continued existence (Keys, 2002). Inconsistent findings may be due to the type of institution, regional differences, or methodology.

Owen (1998), in one of the more comprehensive examinations of the women's prison subculture, describes "the mix" as the activities women engage in that are likely to get them into trouble with each other and with prison officials. The "mix" included involvement with homosexuality, use of drugs, and fighting. Owen's respondents advised new offenders to stay out of "the mix" in order to do their time with less trouble. There was little mention of violent sexual assault or coercion, especially for those women who stayed out of "the mix." In contrast, Alarid (2000), Greer (2000), and Pogrebin and Dodge (2001) suggest that this culture is changing, and sexual coercion and victimization does occur in women's prisons.

## GENDERED VIOLENCE AND SAFETY

In response to the Prison Rape Elimination Act of 2003 (PREA), Owen, Wells, Pollock, Muscat, and Torres (2008) investigated the context of gendered violence and safety in women's correctional facilities through a multi-method approach, including focus groups with female inmates and staff and survey development. They examined the context and correlations of both violence and safety in correctional facilities for women. The NIJ funded study, *Gendered Violence and Safety: A Contextual Approach to Improving Security in Women's Facilities* (Owen, et al, 2008), described the dynamics and context of interpersonal sexual and physical violence in women's correctional facilities. Multiple organizational, environmental, and individual factors were found to contribute to violence in women's facilities. Their analyses found that the dynamic interplay between individual, relational, community, facility, and societal factors create and sustain violence potentials in women's jails and prisons. The operational implications of this study calls for a focus on prevention and intervention by addressing multiple factors that shape the context of violence in women's facilities.



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This study found that violence in women's jails and prisons is not a dominant aspect of everyday life, but exists as a potential, shaped by time, place, prison culture, interpersonal relationships, and staff actions.

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Ongoing tensions and conflicts, lack of economic opportunity, and few therapeutic options to address past victimization or to treat destructive relationship patterns contribute to the potential for violence in women's facilities. These findings did not suggest that women's jails and prisons are increasingly dangerous. While some patterns that shape vulnerability and aggression exist in any facility, most women learn to protect themselves and do their time safely.

#### PERCEPTIONS OF SAFETY

The following is a summary of work conducted by Owen, Wells, and Pollock (2008) and Wells, Owen, and Parson (2013) that provides both qualitative and quantitative descriptions of women prisoners and their experiences with gendered safety and violence. Overall, with few exceptions, women told researchers that they became less worried about physical or sexual violence over the course of their incarceration. While again stressing that anything can happen at any time, most women learned how to protect themselves from all forms of violence. Day-to-day tension, crowded living conditions, the lack of medical care and the potential for disease, and a scarcity of meaningful programs and activities were seen as more significant threats to a woman's overall well-being than physical or sexual attack. Some individual women said they did not feel safe, but most said they learned to protect themselves. Health concerns eclipsed worries about sexual or physical safety in every focus group and these concerns were related to the lack of medical care and cleaning supplies, deteriorating physical plant conditions, substandard food, and the lack of rehabilitative programs. Idleness and an inability to earn money were also said to undermine women's sense of well-being.

One point of agreement was a strong perspective on place. In every facility where interviews were conducted, offenders and staff were unanimous that some facilities were far more dangerous than others. Within facilities, particular living units were also defined as particularly risky and dangerous. Contributing factors in any particular location included an interactive combination of individual, relational, and living unit and facility characteristics.

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Living units function as "neighborhoods" and, as such, exist as the physical place where the processes that shape violence or safety converge. Women perceived themselves as safe when they were comfortable in their living unit. Many participants expressed fear regarding other units in the same facility or other facilities because of the reputation such places had for increased violence and victimization.

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#### CONCLUSION

This summary literature review of women in prison has shown that woman offenders are different from male offenders in family background, criminal history, drug and alcohol use, and prior victimization. Their current lives and behavior while incarcerated reflect their history. Violence in women's prisons is rarely stranger violence and, more often, takes place within relationships. Prior histories of intimate partner violence seem to be repeated in the prison environment. Cultural and subcultural factors also affect the potential for violence, i.e., living in a subculture where respect is given extraordinary emphasis can affect women's tendencies to use violent means to protect their self-image. Substantial percentages of woman offenders are likely to suffer from drug addiction and co-occurring disorders and are likely to have violent victimization histories. These histories may

have influenced the woman's entry into crime, violent crime, or violent coping patterns in relationships while in prison or jail as well.

Prison and jail environments also seem to be a factor in the potential for violence. As this review suggests, individual factors alone are not sufficient to understand vulnerabilities and victimization. While they may have a significant effect on any given woman's potential for violence and conflict, individual factors such as pre-prison victimization are mitigated or aggravated by contextual elements in the environment, including relationship, group, and environmental factors.



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**Los Angeles County  
Alternatives to Incarceration Work Group**

**Final Recommendations**

December 27, 2019

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## Intercept 0:

### *Holistic and Decentralized Community-Based System of Care—Prevention and Reentry Recommendations*

#### A. Restorative Behavioral Health and Primary Care Villages

1. Decentralize and develop cross-functional teams to coordinate behavioral health needs before booking, with an emphasis on warm handoffs when connecting clients to optimal services.
2. Create and expand decentralized, coordinated service hubs (ex: MLK Behavioral Health Center) in strategic locations across the 8 Service Planning Areas (especially SPA 1, 3, and 7) where people, their families, and support network can seek referral and/or immediate admission 24 hours a day to a spectrum of trauma-informed services that include but are not limited to mental health including Psychiatric Urgent Care Centers; supportive housing via a coordinated entry system; and substance use disorder services such as withdrawal management, medication-assisted treatment (MAT) and recovery intake centers (i.e., sobering centers).

#### B. Families and Support Network

3. Expand family reunification models and connect families to low-cost or no-cost parenting groups. Family reunification models and parenting groups should be evidence-informed and have demonstrated they are correlated with better outcomes for participants and their children. These resources should be provided by community organizations and there should be ready availability of resources tailored to the unique needs of cisgender women who identify as mothers as well as LGBQ+ and TGI parents.
4. Train families of people with clinical behavioral health disorders on how to support their loved ones, assess service needs, provide assistance through various stages of treatment, and follow prevention/treatment plans while incentivizing family/client involvement with compensation and certificates, etc.
5. Support meaningful exchange of information and clarity between provider, patient, and family/caregiver to improve patient care and health outcomes, including but not limited to modifying DMH's HIPAA policy for contractors.
6. Improve, enhance, and integrate case management opportunities and points of contact and engagement for Community Health Workers and peer support organizations to connect with clients and their families/loved ones outside of justice involvement and pre/post incarceration. Create robust community education—especially in impacted communities—about services tailored to people who identify as cisgender women, LGBQ+, or TGI so that incarceration is not the first point of contact for services. Give peer support organizations and Community Health Workers access to real-time data on treatment availability to streamline the referral process.

### C. Restorative Justice and Trauma Prevention

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| 7. Establish effective restorative justice programs for the adult justice-involved population by learning from existing County programs and other programs, especially those serving youth.  |
| 8. Create or expand crisis mediation and violence prevention work based on restorative justice principles, with a focus on programs specifically for people who identify as cisgender women, LGBTQ+, or TGI and conduct community outreach to promote awareness of these options outside of the justice system.        |
| 9. Collaborate with the communities most impacted by incarceration to create outreach campaigns for families and support networks on affirming gender identity and queerness as well as community support options. This will help prevent trauma and promote stronger social support networks for LGBTQ+ / TGI people. |

### D. Mental Health, Substance Use, and Co-Occurring Disorder

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| 10. Advocate for changes to expand services and populations covered by Medi-Cal, MHSA, and/or to support integrated service delivery for system-involved individuals and their families, which could provide a source of sustainable funding to support ATI recommendations related to an integrated system of prevention and care.   |
| 11. Optimize and increase the appropriate use and process for mental health conservatorship and assisted outpatient treatment, and resource them accordingly.   |
| 12. Support and broaden implementation of community-based harm reduction strategies for individuals with mental health, substance use disorders, and/or individuals who use alcohol/drugs, including but not limited to, sustained prescribing of psychiatric medications and MAT.  |
| 13. Deliver integrated mental health and substance use disorder services, rather than parallel services, including building partnerships between DPH-SAPC and DMH for residential co-occurring disorder (COD) services.   |
| 14. Support parity between the mental health and substance use disorder systems and available services.   |
| 15. Remove time limits to service provisions that prevent access to long term health, mental health or substance use disorder treatment plans.  |
| 16. Reduce the adverse impact that the severity of substance use charges (e.g. possession of a controlled substance, DUI) have on people who identify as cisgender women, LGBTQ+, and/or TGI. Assess and develop public health and urban planning interventions (e.g. access to subsidized public transportation, safe consumption sites) to mitigate the risks of these charges. |
| 17. Create safe consumption sites that will act as service hubs and be a part of the decentralized system of care.  |



## E. Housing and Services

18. Create a system that contributes to and/or offsets the cost to family members and caregivers for housing loved ones within their home or in the community through options such as tax credits, stipends, vouchers, motel conversions, or partial pay options. Utilize this system to address the cost of family members caring for the child of an incarcerated loved one, including transportation assistance to support the child visiting their parent in jail, to maintain a strong relationship, and to support cisgender women, LGBQ+ people, and TGI people who act as caregivers of children, elderly family or loved ones.
19. Create an individualized/personalized master transition plan for displaced individuals.
20. Expand or refine affordable successful housing models designed for and tailored to justice-involved individuals with mental health and/or substance use disorder needs, specifically: (a) short-term treatment inclusive of acute inpatient, AB 109 and forensic inpatient (FIP) and IMD subacute beds; (b) interim housing inclusive of clubhouse living with supportive employment, recovery bridge housing and sober living; and (c) permanent subsidized housing inclusive of independent living and board and care facilities.
21. Create and scale up innovative programs that comprehensively provide housing, wraparound services, and career-track employment for justice-impacted individuals. Ensure the availability of programs that meet the needs of and are tailored to people who identify as cisgender women, LGBQ+, and/or TGI.
22. Develop partnerships with and between landlords, County departments, providers, and communities/neighborhoods that increase housing options and support residents in maintaining housing, including onsite management staff. Incentivize the creation and reservation of sufficient units for short- and long-term housing options for people who identify as LGBQ+ and/or TGI.
23. Work with Housing State Funding, DHS Housing Programs, and housing projects for people experiencing homelessness and mental health and/or substance use disorders.
24. Work with Housing State Funding, DHS Housing Programs, and housing projects for people who identify as LGBQ+ and/or TGI.

## F. Training and Employment

25. Establish a partnership with the State Department of Occupational Rehabilitation and coordinate with other agencies, including but not limited to WDACS, regarding economic and employment opportunities. Develop partnerships to create opportunities specifically for people who identify as LGBQ+, TGI and/or cisgender women by incentivizing employers to participate.
26. Expand supported employment opportunities for persons with mental health, substance use, or co-occurring disorders, including flexible funds for basic client needs to find employment (e.g., birth certificates, etc.).

27. Expand supported employment opportunities for people who identify as LGBTQ+, TGI and/or cisgender women, including flexible funds for basic client needs to find employment (e.g., birth certificates, identification consistent with gender identity, childcare, etc.).
28. Incubate new innovative employment programs for people with serious mental health disorders.
29. Incubate new and innovative employment programs for people who identify as LGBTQ+, TGI and/or cisgender women.
30. Provide greater access and options for subsidized public transportation in order to reduce arrests and recidivism for common charges related to lack of transportation.

**G. Reentry and Legal Services**

31. Remove barriers to treatment, employment, and affordable housing, including recovery housing, based on stigmatization and discrimination due to record of past convictions through local and state legislative intervention or updating County policies.
32. Offer tailored services to people throughout the LA County Superior Court system, such as Family, Children’s, Reentry, Criminal, and other Courts to address reunification with their children, housing, employment, fines/fees, and health needs to prevent crises that lead to involvement in the system. These services should be tailored to people who identify as cisgender women, LGBTQ+, and TGI. Offer peer advocates described in Recommendation 6 to help navigate all court systems.
33. Facilitate individuals’ ability to comply with court requirements and clear their record by providing financial assistance to individuals released to assist with costs associated with court requirements (e.g. restitution fees, mandated classes, etc.), creating a mechanism for people to get these costs waived due to financial hardship, and increasing access to legal services such as free expungement.
34. Provide comprehensive community-based reentry services across the County including but not limited to: job training and placement, specialized training to build a pipeline to employment in reentry programs (with career pathway options), advocacy to change rules that bar formerly incarcerated individuals from applying for certain professional certifications, assistance to find housing, temporary financial aid for basic needs (e.g., food, clothing, transportation), assistance to secure legal identification and to enroll in benefit programs (e.g., Medi-Cal, General Relief, SNAP), life skills classes (budgeting, etc.), and connections to mental health and substance use treatment services.

**Intercept 1: Community Response and Intervention Services  
Recommendations**

35. Significantly increase the number of DMH Psychiatric Mobile Response Teams (PMRTs) to reduce service wait times.
36. Increase (DMH) ambulance contracts to improve response times.
37. Create another option for behavioral health crises, i.e., CBO behavioral health services through an app.
38. Expand, diversify, and strengthen non-crisis mobile response teams to address gaps, including: (a) following through with clients in crisis to avert involuntary hospitalization; (b) involving peers in mobile response teams that connect to individuals' gender identity; (c) developing system for outreach workers to respond to non-law enforcement calls; (d) assisting people who identify as TGI, LGBTQ+ and/or cisgender women who are in an emerging crisis and/or need community-based conflict resolution.
39. Invest in public education and law enforcement education campaigns to encourage the use of DMH ACCESS, SASH, suicide prevention and other helplines, and the CBO Network on homelessness, mental health, substance use and stigma.
40. Establish, expand, enhance, and coordinate the database and tools available for real-time bed availability for all justice and health system partners.
41. Develop and expand a decentralized range of clinical spaces countywide and ensure that current sites are sufficiently resourced.
42. Improve staffing for the DMH ACCESS line to minimize caller wait times and ensure live operator coverage 24 hours, 7 days a week.
43. Train 911 operators and dispatch on mental health screening to direct calls involving behavioral health crises that do not require a law enforcement response towards DMH's ACCESS line (e.g., integrate DMH line with 911 or allow direct access from 911 operators to ACCESS). Train 911 operators and dispatch to allow callers to request a responder that connects to the gender identity of the individual in crisis.
44. Ensure that response teams (e.g. MDT, PMRT, etc.) have the capacity to (a) minimize and/or eliminate a child's trauma and family separation; and (b) connect caregivers to community-based support services, including immigration services.

## **Intercept 2: *Law Enforcement* Recommendations**

45. Substantially increase the number of co-response teams.
46. Train all law enforcement officers in Los Angeles County in a formal Crisis Intervention Team (CIT) curriculum, including information on appropriate responses to people who identify as TGI, LGBTQ+ and/or cisgender women, and refresher courses, that incorporate connections and networking with neighborhood-specific community-based resources with a treatment-first, harm reduction approach. SMART/MET teams to receive substantially more specialized training.
47. Promote a practice where law enforcement officers, whenever possible and appropriate, release individuals with clinical behavioral health disorders at the time of contact and ensure a warm introduction to supportive services.
48. Develop and expand pre-arrest and pre-booking diversion programs, using decentralized, cross-functional teams to coordinate behavioral health assessments and connections to community-based systems of care, for people whose justice system involvement is driven by unmet behavioral health needs, in coordination with law enforcement and community providers.
49. Ensure that pregnancy, lactation and postpartum needs are distinguished as an indicator for pre-arrest and/or pre-booking diversion, promoting warm introductions to appropriate community-based services such as harm reduction strategies and parenting services.
50. Reassess law enforcement practices and policies on arrests/bookings for sex work, especially given the racial disparities with respect to Black women. Prioritize pre-arrest diversion of cisgender women, LGBTQ+ people, and TGI people engaged in sex work with connection to job training and placement programs and peer outreach workers who can offer voluntary services rooted in harm reduction.
51. Ensure that the LA County Civilian Oversight Commission, the Office of the Inspector General, the LA County Probation Oversight Commission, and other related bodies have the consistent presence of people equipped to address the negative treatment of LGBTQ+ / TGI people and cisgender women by law enforcement. Establish clear documentation and discipline processes when there are violations for homophobic, transphobic, and/or misogynistic harassment or assaults by law enforcement.
52. Decriminalize drug use, public intoxication, fare evasion, driving without a license, licensing suspensions, licensing revocation and/or other quality-of-life crimes and survival crimes. Until this is fully implemented, individuals should not be arrested, booked or prosecuted for these offenses but instead law enforcement should ensure individuals are connected to harm reduction services.

### **Intercept 3: *Booking and First Court Appearance*** **Recommendations**

53. Improve and expand return-to-court support services to reduce failures to appear.
54. Create a front-end system with behavioral health professionals that solicits information about unmet behavioral health needs so prosecutors can offer diversion instead of filing charges, or can file reduced charges, for individuals whose justice system involvement is driven by those needs.
55. Develop a strengths- and needs-based system of pretrial release through an independent, cross-functional entity, situated outside of law enforcement, to coordinate voluntary needs and strengths assessments expeditiously upon booking, and to provide relevant information to court officers to make informed release decisions.
56. Institute a presumption of pretrial release for all individuals, especially for people with behavioral health needs, whenever possible and appropriate, coupled with warm handoffs to community-based systems of care, to provide targeted services, if necessary, to help individuals remain safely in the community and support their return to court.
57. At the earliest point possible, connect individuals to a personal advocate or community member to assist them in navigating the justice system process and assist in advocating for diversion opportunities. These advocates, whenever possible, should include and be trained to provide tailored help/referrals to people who identify as LGBTQ+, TGI and/or cisgender women.

#### **Intercept 4: Jail Custody and Court Process Recommendations**

58. Improve equal access to all treatment resources for justice-involved individuals, wherever they may be (in or out of custody) by: (a) directing health agencies to change eligibility criteria and increase capacity and funding to ensure behavioral health treatment facilities are available in all stages of the court process; (b) creating a more rapid referral and response process for mental health and co-occurring disorder placements at all levels; (c) developing a coherent strategy and connecting every qualifying individual to an appropriate court-based program at inception of diversion dialogue; (d) refining multiple points of entry within Intercept 3 for mental health and SUD services; (e) ensuring in-custody involvement of CBOs for services; and (e) expanding capacity and removing archaic barriers at all levels of care. Ensure consistent, culturally appropriate, and sufficient availability of the full range of services and court-based programs for people who identify as cisgender women, LGBTQ+, and/or TGI so no one is left without care or diversion because of gender identity or sexual orientation.
59. Create a robust AB 1810 Diversion scheme—PC 1001.36 and 1170(a)(1)(B)(iv) and 1370.01(a)(2)—to identify early on persons eligible for diversion and develop pathways countywide to connect individuals to appropriate mental health programs to accomplish the goals of pre-conviction diversion and respond to all other present and future diversion opportunities, including pre- and post-conviction.
60. Increase ‘staffing on the ground’ across departments, including Public Defender/Alternate Public Defender, District Attorney/City Attorney, Department of Health Services/Office of Diversion and Reentry, Department of Mental Health/ Mental Health Court Linkage Program, County Counsel, Department of Public Health, and community-based organizations that work with departments to expand and integrate court-based services for as many individuals as possible.
61. Expand access and enhance substance use treatment programs in the County jails, e.g., the START program substance use disorder (SUD) treatment for currently incarcerated people with mental health needs and SUD and Medication-Assisted Treatment services in the jails to provide: (a) comprehensive withdrawal management; (b) full spectrum MAT for opiate use disorder; and (c) specialty MAT clinics to allow clients patient-centered, harm reduction services on-site.
62. Increase collaborative, non-adversarial processes in all courtrooms where diversion/alternate sentencing occurs, to enable better outcomes that are trauma-informed and respect individual care and rights.

<p>63. Tailor the conditions and services required/offered in any alternatives to incarceration programming to the needs and strengths of people who identify as LGBQ+, TGI, and/or cisgender women. Create policies that address the challenges and barriers frequently faced in attempting to comply with mandates (e.g. childcare obligations as a single parent, lack of money for transportation, lack of money for program enrollment or completion, etc.) as well as how these programs can contribute positively to wellness rather than being grounded in negative sanctions (e.g. incarceration, probation extension, fees, loss of parental rights, etc.).</p>
<p>64. Review and update the existing LA County compassionate release program to facilitate and expedite the release of individuals whose medical needs are not adequately addressed in the jail, including but not limited to: individuals with terminal diagnoses, chronic diseases, disabilities and individuals who are pregnant, lactating and/or postpartum.</p>
<p>65. Create a simple and real-time map of diversion options and eligibility criteria to share with the public and all system actors so that people and their support networks can help identify eligibility for diversion. The map should note available options tailored to cisgender women, LGBQ+ people, and TGI people.</p>
<p>66. Hire peer navigators and direct service providers and lawyers focused on LGBQ+ and TGI clients at the public defenders’ offices to maximize connections to alternatives to incarceration and diversion throughout the court process.</p>
<p>67. Identify drivers of license suspensions and create mechanisms, in collaboration with Traffic Court, to prevent LGBQ+ people, TGI people, and cisgender women from losing their licenses due to inability to pay tickets and from being arrested, booked or prosecuted for failures to appear related to unpaid tickets and license suspensions.</p> <ol style="list-style-type: none"> <li>a. Collaborate with system actors to reduce the number of arrests, bookings, and racial disparities that exist for driving with a suspended/revoked license.</li> <li>b. Create or expand community events, including childcare, to clear warrants for failures to appear without threat of arrest. These events can be in conjunction with existing expungement clinics. Create mechanisms to clear warrants for failures to appear via phone or internet to facilitate easy access for those who cannot attend in-person events.</li> <li>c. Build a unit at the public defenders’ offices that helps people address warrants for failures to appear along with attendant consequences (e.g. removing license suspension, unpaid tickets, impounded cars, criminal case representation, etc.).</li> </ol>
<p>68. Conduct mental health assessments for all individuals as expeditiously as possible once they are incarcerated, offer individual counseling/therapy to all individuals in need, and for those who qualify for diversion, provide services to stabilize their mental health before linking them to community based-care.</p>

## **Intercept 5: *Pre-Release and Release* Recommendations**

69. Incentivize community treatment facilities to accept patients from jail who have clinical mental health needs, substance use disorders, and/or co-occurring disorders.
70. Change release time for men to match those of women from CRDF to avoid overnight release without direct link to programs, interim housing, safe place, or transportation. Increase coordinated releases for clients exiting directly to a program and provide funding to expand CBO intake hours. If not exiting directly to a program, notify family members of a person's release (with that person's permission) with enough time for family to pick them up, and increase use of coordinated releases to family.
71. Develop and fund a transition shelter within a few blocks from all county jail facilities from which people are released, operated by community-based organizations with safe, welcoming overnight stays for people released after hours with a range of support. Create transition shelter beds for people who identify as LGBQ+, TGI, and/or cisgender women so they do not have to remain incarcerated for a safe transition to the community.
72. Begin release planning for everyone as soon as possible after being booked into jail, using a reentry provider. Pre-release planning should include an assessment of health/medication needs, family/loved ones in the region, custodial responsibilities, employment status, and individuals' reentry goals. Ensure all people who identify as cisgender women, LGBQ+ and/or TGI have a plan tailored to the unique barriers they may face upon release, especially with respect to housing.
73. Improve, where possible, care coordination, information sharing and release planning for: (a) people returning to Los Angeles County from CDCR prisons, inclusive of cisgender women, LGBQ+, and TGI people; and (b) people transferring from LA County jails to CDCR prisons, inclusive of cisgender women, LGBQ+, and TGI people.
74. Without any delay of release, ensure that all individuals before they are released from County Jail are offered services to obtain their California ID, Social Security card, birth certificate, and other documentation needed for obtaining healthcare, employment, housing, government benefits, etc., and inform them how to receive fee waivers.



## **Intercept 6: *Supervision in the Community*** **Recommendations**

### **A. Improve Partnerships with CBOs**

75. Establish a “Supervision in the Community” task force to analyze and recommend alternative forms of community supervision, which may or may not include the LA County Probation Department, distinguishing in the process developing alternative models which will meet the specific and unique supervision needs of the most vulnerable populations, including individuals with behavioral health disorders.
76. Create sustainably funded community engagement work groups within the ATI Initiative, with consistent representation of people and their family members with lived experience of detention, incarceration, and/or supervision, including cisgender women, TGI and LGBTQ+, young people 18-25, community members, advocates, community-based service providers, supervision entity representatives and stakeholders with expertise in working with people with serious mental illness, substance use disorders, and/or co-occurring disorders to allow for consistent feedback on implementing a “care first” culture change within community supervision entities.
77. Promote and incentivize a culture change among Probation Officers to encourage greater support for people on supervision and increase collaboration among Probation Officers, relevant County departments, and community-based providers to increase referrals to community-based services for people on probation and their families. Develop probation outcome measures that focus on the quality of engagement between Probation Officers and clients and the application of community input, evidence-based and/or promising practices in addition to traditional probation outcome measures involving successful reentry.

### **B. Reduce Supervision Violations**

78. Improve quantitative and qualitative data collection and sharing practices around community supervision, for Probation and/or the appropriate designated community supervision entity, in collaboration with external and internal research entities to understand how supervision violations lead to jail time, especially for people with serious mental illness, substance use disorders, co-occurring disorders, and young people 18-25. Data collection should identify the reason for the violation, length of stay in jail, and what services they are connected to through Probation and/or the appropriate community supervision entity; and it should also align with best practices for data collection for cisgender women, TGI, and LGBTQ+ individuals as well as capture data on race, ethnicity, geography, and charges to reduce disparities and include community-focused participatory research best practices. Aggregated data reports should be shared publicly and analyzed regularly to improve practices.

79. Explore ways to reduce the number of supervision check-ins, reduce and potentially eliminate technical violations, and reduce and potentially eliminate the issuance of bench warrants for people who incur technical violations on community supervision.

80. The community supervision entity, in collaboration with the Courts, should work more intensely to reduce the length and intensity of supervision terms through regular reviews of supervised cases, to assess the effectiveness of supervision terms on people’s successful reentry, positively motivate compliance, and reduce caseloads.

81. Los Angeles County should assess probation terms, conditions, and length of supervision to assess effectiveness in promoting public safety and successful re-entry. The assessment should create recommendations to align probation terms, conditions, and length of supervision with evidence-based practices and promote harm reduction strategies and referral to culturally humble services.

### **C. Create Specialized Caseloads for Vulnerable Populations**

82. Use specialized supervision caseloads (such as in ODR housing) and multi-disciplinary case conferencing teams, including mental health providers, substance use counselors, and social workers, to tailor services and supervision for those with severe mental illness and co-occurring disorders. Specialized supervision caseloads should have a focus on engagement with services and treatment, be smaller, provide more intensive services, and be supervised by officers who receive advanced training in behavioral health treatment services. The community supervision entity should continue to collaborate with health and community-based agencies to develop best practices for screening and assessing individuals for behavioral health needs through evidence-based tools to identify SMI, SUD, and COD.

### **D. Eliminate Fines and Fees**

83. Discontinue collection of fees assessed for justice-involved adults, which should include:

- a. Ending supervision-related fees;
- b. Forgiving outstanding Probation-related debt (public and private attempts to collect past debt);
- c. Collaboration among justice partners (such as LASD, Probation, and the Courts) and relevant County agencies to eliminate justice-related fines and fees, including fees for classes and services and identifying permanent alternative funding sources for classes and services; and
- d. Advocating with state officials to end the imposition and collection of fees and fines at the state level, including but not limited to supporting SB 144 (Mitchell) and to identifying permanent alternative funding sources for classes and services.

## **Infrastructure:** Cross-Cutting Recommendations

### **A. Public Communication and Accountability**

84. Increase, ensure, and fund public collaboration in all phases of Alternatives to Incarceration planning, implementation, evaluation, and system oversight and across relevant County, Court, justice, health and social service systems. This collaboration can be piloted via the ATI Community Engagement Workshops and the Ad Hoc Committee structure, which includes work on gender, sexual orientation, and racial equity, by instituting quarterly stakeholder meetings to communicate updated ATI progress, discuss service and communication gaps, and highlight best practices. Fund and staff post-ATI final report, i.e., the initiative should host recurring implementation meetings across the County and with relevant County departments to discuss policy impacts, resolve policy conflicts, monitor fiscal impacts, assess eligibility barriers, and develop evaluation metrics of success.
85. Establish online mechanisms for the public to get information, locate services to prevent incarceration and recidivism, and promote recovery. This tool should track identified problems and response progress through an accessible dashboard, and should align with existing tools such as One Degree, etc.
86. Create, staff, and fund an Advisory Collaborative of Impacted People to ensure there is continuous feedback and accountability to the prioritized communities and LA County at large in the implementation of the comprehensive roadmap. Ensure consistent representation of people who identify as cisgender women, LGBTQ+, and TGI, including the most marginalized racial, ethnic and cultural groups in the geographic areas most impacted by incarceration, on the Advisory Collaborative.

### **B. Equitable Resource Distribution**

87. Utilize data-driven tools (e.g., Race Forward’s Community Benefits Agreement and Racial Impact Tool, or Advancement Project’s JENI/JESI, etc.) to create processes for equitable resource and contract distribution with program offices across health and social service departments. These processes should prioritize remedying racial and geographic disparities while also taking into account cultural, gender, sexual orientation, and special populations’ needs. Involve County and impacted communities in equitably distributing and leveraging resources to sustain community health.

88. Fund comprehensive rehabilitative, evidence-based mental health and substance use care, as well as transitional housing with wraparound services, gender-affirming primary care, violence prevention, gang intervention, art therapy, family reunification, occupational therapy, and other programs in lieu of incarceration, i.e., interventions should take a holistic, whole person (or even family-centered) approach as their model in serving individuals while utilizing justice funds saved by decreased incarceration. This programming should be inclusive of and tailored to people who identify as women, TGI, and LGBTQ+ people including the most marginalized racial, ethnic and cultural groups in the geographic areas most impacted by incarceration.

### **C. Public Awareness and Education**

89. Develop a public education and communications campaign to build awareness of a treatment-first model, not incarceration and punishment. This campaign should stress use of the DMH ACCESS line, CBO network, SASH helpline, suicide prevention hotline (rather than 911) for behavioral crises, available non-law enforcement resources, and different types of community-based solutions.

### **D. Organizational Capacity Building and Contracting**

90. Create contract language that supports effective models that are servicing people 24/7, with appropriate specialization, intensity, staffing, language/culture, quality, and staff with lived experience, etc.

91. Institute payment reform to prioritize performance-based contracts (instead of fee-for-service) with flexible service delivery rules to ensure providers can deliver treatment and support all clients' needs concurrently.

92. Utilize County capacity-building programs, in conjunction with equity analysis, to expand the community-based system of care by: (a) finding and supporting smaller organizations in different SPAs to qualify for and access funds while providing seed funding (i.e. philanthropic partnerships, business loans, flexible government funding, pay for success models, and/or zone area investments, etc.); including those organizations with a history of serving system-involved people who identify as cisgender women, LGBTQ+ and/or TGI; (b) promoting existing providers as potential incubators; and (c) supporting training and TA to become service providers accessing Medi-Cal Fee Waiver, County and State funding, and organizational coaching as well as training in evidence-informed practice in serving TGI/LGBTQ+ people.

93. Dedicate funding to long-term, sustainable infrastructure and professional development support for community-based systems of care beyond service delivery, and connect contractors to new and existing capacity-building resources.

94. Conduct a comprehensive assessment of existing contracting practices (including but not limited to actively gathering anonymous feedback from service providers contracted and not contracted with the County) to ensure transparency in understanding participatory hurdles and identify

<p>innovative solutions to make a positive impact, while conducting an audit of current spending and investments to identify impacted geographic communities.</p>
<p>95. Standardize a simplified, more accessible contracting process across agencies and departments and outreach to service providers who might benefit from such reforms.</p>
<p>96. Create/enforce anti-LGBQ+ and/or TGI-discrimination policies for all general housing and service options with meaningful accountability processes, including through the CA Department of Fair Employment and Housing. Create easy ways for LGBQ+ and/or TGI people to report violations and receive tailored services upon reporting.</p>
<p>97. Train all law enforcement officers and first responders, including LAFD, DCFS, and 911 dispatchers regularly on respectful practices and communication with people who identify as LGBQ+, TGI and cisgender women, grounded in a care-first, trauma-informed approach. Ensure that accountability measures for discrimination on these grounds are enforced.</p>
<p>98. Require that mental health clinicians, behavioral health and primary care physicians complete trainings on serving people who identify as cisgender women, LGBQ+, and/or TGI to improve culturally and medically appropriate service provision by clinicians that affirms sexual orientation and gender identify.</p>

**E. Workforce Hiring and Training**

<p>99. Train all law enforcement officers along with 911 dispatchers and desk personnel in LA County in a formal CIT curriculum to aid in understanding alternatives to 911, arrest, and jailing.</p>
<p>100. Design and implement training curricula for justice partners and all workforce that interacts with the justice-involved population in partnership with justice-impacted individuals and their families. The trainings about people who identify as cisgender women, LGBQ+, and/or TGI should be developed and conducted by community-based organizations serving people with these identities – especially people of color and those with system involvement – to center the voices of those directly impacted.</p>
<p>101. Train bench officers and the court-based workforce, and conduct educational seminars, in partnership with service providers and incarcerated persons' social support networks to address the continuum of needs of incarcerated persons (e.g. mental health, substance use disorder, treatment) and increase awareness and utilization of behavioral health resources (e.g.: Mental Health Court Programs, real-time resource mapping) to change the culture of the criminal justice system towards treatment first, not incarceration and punishment. Train the court-based workforce to create individualized plans that are culturally competent, responsive to all gender identities, and include those not eligible for community-based diversion (i.e., violent felony charges).</p>
<p>102. Require that mental health clinicians complete trainings that build their capacity to provide integrated Substance Use Disorder care with psychiatric treatment, including cross training.</p>

<p>103. Train social/health service workforce to address the continuum of need and to ensure that individuals' care plans are culturally sensitive and include those not eligible for community-based diversion (i.e., violent felony charges). Require training on serving people who identify as cisgender women, LGBQ+, and/or TGI to improve culturally appropriate service provision by a social and health service workforce that affirms sexual orientation and gender identity.</p>
<p>104. Provide paid training and employment to increase the number of justice-system-impacted individuals working as the technologists behind data collection and analysis.</p>
<p>105. Design and implement curricula for all workforce trainings recommended herein by partnering with justice-impacted individuals and their families. The trainings on people who identify as cisgender women, LGBQ+, and/or TGI should be developed and conducted by community-based organizations serving people with these identities – especially people of color and those with system involvement – to center the voices of those directly impacted.</p>
<p>106. Attract and develop a social/health service workforce capable of delivering integrated health, mental health, and substance use treatment; as well as tailored care to people who identify as cisgender women, LGBQ+, and/or TGI; and livable wages in partnership with justice-impacted individuals and their families. Recruit and fund partnerships with LGBQ+ / TGI / people of color (POC) therapists who have a harm reduction approach. These therapists should be members of and/or have experience working in an affirming manner with communities most impacted by criminalization to maximize positive engagement with therapy.</p>
<p>107. Conduct intensive and extensive outreach to medical schools, schools of social work, professional organizations, and local educational institutions for qualified forensic mental health professionals—particularly those who identify as LGBQ+ / TGI—and community health workers, while providing incentive bonuses for bilingual experts and developing certification or credential programs for CHWs with educational partners.</p>
<p>108. Increase employment and retention of Community Health Workers (CHWs) to expand service capacity, cultural competency, and client/provider trust, by: (a) hiring, training and professionally advancing CHWs with lived experience of the justice system and/or who identify as LGBQ+, TGI, and/or cisgender women; (b) creating pathways for CHWs to move up to full-time, salaried County jobs with benefits; and (c) including continual evaluation and improvements made to ensure the CHW program is effective in building this innovative workforce.</p>
<p>109. Train transitional housing providers about LGBQ+ / TGI needs and discriminatory experiences, particularly those who run mixed-housing sites, so that people are not excluded from housing because of gender identity or sexual orientation. Create process for consumers to provide anonymous feedback to evaluate success of trainings and services.</p>

## F. Data Collection and Service Coordination

<p>110. Expand and coordinate data tracking/collection across all relevant County justice and health/social service entities to retrieve data necessary for services, programming, preventive measures, and alternatives to incarceration. Align this data collection with existing County data tools/portals such as One Degree, CHAMP, LANES, CES, etc. to inform a uniform client database.</p>
<p>111. Develop a uniform client database across all relevant County services and justice entities to follow and support the justice-involved individual (longitudinally &amp; latitudinally) regardless of system access point, with the following database features: (a) interface capabilities linking services providers as well as tracking service availability among LA County’s considerable resources; (b) alignment with existing tools such as One Degree, CHAMP, LANES, CES, etc. to improve patient referral processes as well as to assist in performance tracking and accountability as individuals move between systems and services; (c) capacity for family and service provider feedback to track problems and response progress; and (d) protection of privacy rights and interests of justice-involved individuals.</p>
<p>112. Provide real-time Full-Service Partnership (FSP) availability throughout all service areas, keep a real-time database, track FSP successes and failures, and report these to DMH.</p>
<p>113. Track and make public all relevant County service and incarceration spending both for those incarcerated and those reentering the community.</p>
<p>114. Design a process that enables a public university (or universities) to collect detailed data, including gender (including non-binary) and sexual orientation demographics under conditions of voluntary and safe disclosure. Collaborate with university data scientists and researchers on statistically valid methods. The goal is to produce data that can inform future efforts to develop alternatives to incarceration and evaluate which programs and interventions are operating as intended and which have a disparate impact.</p>

# Incarceration Mothers Relationships Community Visitation P

Attachment E: Visitation Workgroup Report

## Jail Visitation Innovation

Visitation and Family Support Services at  
Century Regional Detention Facility  
Promote Public Safety

Prepared by:

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Harriett Buhai Center for Family Law

February 11, 2020

*I believe that those programs which make  
life better for some of our people will make  
life better for all of our people.*

*A rising tide lifts all the boats.*

– John F. Kennedy





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**Note regarding references and footnotes:** Information sources are noted by superscript numbers throughout the report, which correspond with a citation at the end of the report. Sources are numbered in the order they appear. Later references to the same source use the same number (e.g., the first source is always noted by <sup>1</sup> throughout the report). Footnotes are indicated by superscript letters.

## I. STATEMENT OF INTEREST

The Harriett Buhai Center for Family Law (“the Center”) was founded in the 1980s to provide family law services to victims of domestic violence and low-income families in Los Angeles County. During its existence, the Center has seen a massive increase in the population of parents and children impacted by incarceration. It has developed strategies to meet and advocate for the needs of these individuals, with a particular focus on incarcerated women, 70% of whom are mothers.<sup>1</sup> These strategies include education, direct services, and policy advocacy.

First, the Center developed an original legal education curriculum called Mothers Behind Bars, which it taught at Century Regional Detention Facility (“CRDF”), the Los Angeles County women’s jail, through a contract with the Los Angeles Sheriff’s Department (“the Sheriff’s Department”) during various periods starting in 2004 and ending in December 2019. It covered topics such as navigating dependency court, seeking domestic violence restraining orders, and parental rights. Second, since 2010, the Center has served formerly incarcerated mothers by providing individual legal assistance with their family law cases to increase parent-child contact.

Third, the Center advocates with County policy makers, including the Board of Supervisors and Sheriff’s Department, for policies that are tailored to gender-related needs of people detained at CRDF through its Women’s Gender-Responsive Jail Project. Originally named the Mira Loma Women’s Jail Project, this project began as an effort to bring attention to the County’s plan to move the women’s jail to Mira Loma Detention Center, almost ninety miles away from the existing hub of service providers, courts, and community organizations. The Center’s seminal report, *Lynwood to Lancaster*<sup>a</sup>, was relied upon in part by the Los Angeles County Board of Supervisors in February 2019 when announcing its decisions to abandon the move, create a position for a Director of Gender Responsive Services, retain gender-responsive expert consultants, and re-establish the previously convened Gender Responsive Advisory Committee (“GRAC”). Ricca Prasad, Project Director for the Center’s Women’s Gender-Responsive Jail Project, serves as an Alternate Member for District One on the newly reconvened GRAC.

Throughout 2019, Ms. Prasad led a Visitation Workgroup created as part of the earlier GRAC and composed of county and community stakeholders dedicated to understanding CRDF visitation and family support services. While this report includes findings from the Workgroup’s efforts, *this report represents only the opinions of the Harriett Buhai Center for Family Law and the facts as it understands them based on its research*. It is not endorsed or verified by any other party. We hope that policy makers, government leaders, Sheriff’s Department officials, community members, and others find it helpful. By working together, gender-responsive reform at CRDF can and should be a success story for the County of Los Angeles.

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<sup>a</sup> Available at <https://www.hbcfl.org/wp-content/uploads/2019/03/HBCFL-Lynwood-to-Lancaster-Mira-Loma-Report.pdf>.

## II. ACKNOWLEDGEMENTS

While this report is the sole responsibility and of the Harriett Buhai Center for Family Law (“the Center”) and not endorsed or verified by any other party, many stakeholders contributed information and assistance. The Center would like to thank the Los Angeles Sheriff’s Department, Board of Supervisors, and community groups who provided information for this report. We would like to give a special thank you to Claire Hoffman, second year law student at UCLA School of Law, and Imelda Padilla, Community Engagement Director for the Los Angeles County Women and Girls Initiative, for leading the Visitation Workgroup during the summer of 2019 to continue learning about jail visitation. We are also very grateful to the people who made the Visitation Workgroup’s special events possible. Thank you to Melissa Kelley, Director of Gender Responsive Services and former Educational Development Administrator; Marcia De Anda, Sergeant in Custody Services Division; and Tammy Sherman, Deputy, of the Sheriff’s Department for facilitating a site visit to the women’s jail for the Visitation Workgroup. Thank you to the wonderful speakers at a panel discussion organized by the Workgroup: April Amey, St. Joseph Center; Sutina Green, The Place 4 Grace; and Shalei Heflin, Miss Sierra Nevada 2019. We also appreciate the assistance provided by Nicole Jeong of Root and Rebound and Nicholas Reiner of the Anti-Recidivism Coalition in securing space and parking for the panel discussion. We are grateful to Yvonne Vollaire of HealthRIGHT360 for providing a tour of the Gender Responsive Rehabilitation Program at CRDF.

Thank you to the following people who participated in the Visitation Workgroup by providing program information, observations, opinions, and other input for this report:

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### III. EXECUTIVE SUMMARY

This report is intended to serve as a primer about why visitation for women in jail is important to public safety, what visitation and family support is provided at Los Angeles County's women's jail (Century Regional Detention Facility, "CRDF"), and how the newly appointed Gender Responsive Advisory Committee ("GRAC") can help support meaningful contact and visitation between people at CRDF and their loved ones. The GRAC was re-established by the County's Board of Supervisors by a motion in February 2019. Its purpose is to advise the Board on ways to improve gender-responsiveness in LA jails. It is hoped that this report is timely, as the new GRAC is considering its agenda, and that it will shed light on the central issue of visitation. It is also hoped that visitation will be a primary focus of the GRAC.

The GRAC, as constituted in late 2018, formed sub-committees, including a sub-committee on visitation. This sub-committee ("the Visitation Workgroup") was composed of volunteer County and community stakeholders who work closely with currently and formerly incarcerated women. The Workgroup continued to meet throughout 2019 while the GRAC was undergoing restructuring. During monthly meetings, participants shared program information, reviewed available data, identified visitation issues, and discussed ideas for improvements. Although this report is authored solely by the Harriett Buhai Center for Family Law ("the Center"), it also summarizes a year's worth of efforts by the Workgroup, completed with limited resources and available data, to understand visitation and family support at CRDF and identify areas for improvement.

Notably, the Center found that as few as 8% of people at CRDF are receiving visitors.<sup>2</sup> There are major impediments to visitation. The Center believes that the new GRAC needs data and case studies to help understand which barriers to visitation are most significant in order to improve the visitation rate. Also, the few specialized visitation and family support programs that exist at CRDF could be greatly expanded by reducing eligibility restrictions and increasing service capacity.

Los Angeles County is uniquely positioned to pilot innovative visitation models and protocols because of the size of CRDF. On the one hand, it is small compared with Men's Central Jail, making visitation issues solvable and allowing for smaller scale pilots and swifter implementation. On the other hand, CRDF is large enough to allow for statistically significant conclusions to be drawn from data gathered there, which can help policy makers to start understanding visitation issues specific to women and help researchers to start filling the gender gap in the body of literature about visitation in detention settings. The findings from LA could be useful to other smaller systems nationwide looking to become more gender-responsive.

## IV. INTRODUCTION

Visitation can be a critical component of rehabilitation during incarceration with the appropriate structure and support, especially for individuals whose family relationships with partners and children form the core of their positive self-identity. But visitation rates among women<sup>b</sup> incarcerated at all types of detention facilities throughout the country are reportedly low. Anecdotal accounts of visitation rates at Century Regional Detention Facility (“CRDF”) confirm that it follows this general pattern.

Recognizing the importance of visitation, the Harriett Buhai Center for Family Law (“the Center”) volunteered to chair the Visitation Workgroup, composed of county and community stakeholders, during 2019. The Workgroup’s goal was to understand CRDF visitation protocols and parental support services. Prior to the convening of the current Gender-Responsive Advisory Committee (“GRAC”) in November 2019, an earlier version of the GRAC met from 2016 to early 2019. It created sub-committees on the topics of reentry, transportation, programming, pregnant residents, and visitation in November 2018. Although the early GRAC and sub-committees stopped formally meeting after the Board of Supervisors (“the Board”) re-established the GRAC by a motion in February 2019, the Visitation Workgroup continued meeting in order to gather relevant visitation information for the new GRAC to consider once convened.

This report represents the Workgroup’s efforts throughout 2019, with additional research and recommendations made by the Center. The Workgroup met nine times, usually through hour-long conference calls. Participating stakeholders included community groups that work with currently and formerly incarcerated women, county agencies, and the Sheriff’s Department. **The unifying mission adopted by the Workgroup was: to assist people incarcerated in Los Angeles County’s women’s jail(s) in maintaining regular and meaningful contact with their external support network and children by improving the culture, environment, and policies affecting visitation and other forms of contact in order to improve family reunification and social support.** To this end, participants shared information about visitation and family support programs at CRDF, barriers their clients encounter, and available data. The Workgroup organized two special events to learn more: (1) CRDF Site Visit (tour of the visitation areas of CRDF) and (2) SKIP – Supporting Kids and Incarcerated Parents (a panel discussion among community members directly impacted by parental incarceration). After debriefing from these events, the Workgroup identified systemic, cultural, and operational barriers to visitation at CRDF. The Center used the information gathered by the Workgroup to develop ideas to address these issues, contained later in this report. The Center’s efforts concluded with an appraisal of peer-reviewed research about the impacts of visitation programs on public safety.

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<sup>b</sup> Although, this report uses the terms “women” and “mother” throughout to clearly distinguish the female jail population from men, the Center acknowledges that there are transgender and nonbinary people incarcerated at CRDF as well. The information and suggested next steps in the report are intended to benefit all people at CRDF, regardless of gender identity or sexual orientation. But any efforts to improve visitation and family support should also consider the unique needs of LGBTQ people at CRDF.

The Board's motion to re-establish the GRAC specifically noted "meaningful family visitation" as an important component of gender-responsive services. The Center agrees and believes the new GRAC, in collaboration with the new Director of Gender Responsive Services and recently retained gender-responsive expert consultants, have the expertise and tools to improve visitation at CRDF and at any future facility housing incarcerated women.

## **V. IMPROVING VISITATION CAN PROMOTE PUBLIC SAFETY**

Many theories about why crime occurs and how it can be prevented hypothesize that positive social ties promote pro-social behavior by providing opportunities and resources, helping build a sense of identity and self-worth, bonding individuals to their community, and supporting them through stressful times.<sup>3</sup> Visitation is associated with a host of benefits described below, including direct benefits for women, their children if they have any, and law enforcement and indirect benefits for the greater community. While there are some risks of recidivism that law enforcement cannot mitigate (e.g., age), receiving visits is a factor that law enforcement directly controls and can promote as a tool for rehabilitation.

Additionally, the jails present a unique opportunity to increase visitation beyond what may be possible at prisons because they are usually located closer to the incarcerated person's neighborhood and social network. Unlike prison visitors, jail visitors may not need to book overnight accommodations, take off from work, pay costly transportation fees, or find child care. They may even be able to visit on a weekly basis. Visitation is associated with a host of benefits described below, including benefits for women in jail, their children if they have any, law enforcement, and the greater community. Investing in visitation can be a tide that lifts all boats by promoting public safety.

### **A. Visitation and Social Support Help Incarcerated Women**

While, this report is primarily concerned with visitation for people incarcerated at CRDF, a women's county jail, most of the published studies about the benefits of visitation emphasize men's prisons. Researchers may prefer to study men's prisons because they provide larger data sets, since more men are incarcerated, and people in prisons serve longer sentences. Though the short shrift the literature gives to specific discussions of women and jail programs is an important knowledge gap, it does not suggest that women are less likely to benefit from visitation. It also does not suggest that visitation at jails is unimportant.

Incarcerated women face many challenges in maintaining relationships with friends and family on the outside, but having these relationships promotes rehabilitation. Research about visitation in prison has generally shown that it decreases misconduct pre-release and recidivism post-release.<sup>4</sup> The reduction in misconduct means that even women who do not receive visitors may indirectly benefit from an improved jail environment when robust visitation is occurring at the facility level.

Visitation and social support can take many forms, including in-person contact visits, through-the-glass visits, technology-assisted video visitation, phone calls, letters, tape recordings, and pictures. Common visitors include parents, spouses, significant others, children, relatives, friends, service providers, and clergy.

While researchers are still parsing out the magnitude of benefits incarcerated people derive from various types, frequency, and timing of visits relative to release date, multiple studies in Florida, Minnesota, and Canada suggest that the more visits someone receives, the less likely they are to recidivate.<sup>4</sup> For example, one study that followed a cohort of 7,000 people, including women, who recently served twelve months or more in a Florida prison found that people who were visited had 30.7% lower odds of recidivating than people who were not. Each unique visit to an incarcerated person was associated with a 3.8% decrease in odds of recidivating within two years of release. There was also a reduction in recidivism for each additional month that a visit occurred, and visitation was correlated with a delay in onset of recidivism when recidivism did occur.<sup>3</sup>

## **B. Visitation and Contact Help Incarcerated Parents and Their Children**

Most of the research that specifically discusses women and visitation is about mother-child visitation. The majority of children with incarcerated mothers lived with their mother at the time of arrest,<sup>5,6</sup> and 70% of women in jail are mothers.<sup>1</sup> Maternal incarceration disrupts a child's home life and sense of security. Despite concerns that exposing a child to a jail environment could be harmful, decades of research has found that both mothers and children typically benefit from sustained contact, including visits, during incarceration.<sup>7,8</sup> The best way to maximize the benefits of these visits and reduce any risks, especially for the children, is for the visits to occur in conjunction with a structured evidence-based program aimed at starting visits soon after maternal incarceration and increasing the frequency and quality of visits.<sup>8</sup>

Mothers commonly report that separation from their children is the hardest part of incarceration.<sup>8</sup> Mothers who receive visits from their children are less likely to be depressed<sup>9</sup> and less likely to engage in violence and to recidivate.<sup>10</sup> Visits allow them to process their grief about being separated from their children, and, in turn, help their children process their feelings about the separation.<sup>7</sup> Contact through phone and letter writing, even without visitation, may reduce parental stress.<sup>9</sup>

Children also have better behavioral outcomes when they can visit their mothers in jail. Children under five cannot yet understand the concept of incarceration and may experience the disruption as parental rejection, believing their mother chose to abandon them, or as a total loss, believing their mother died.<sup>6</sup> The format of visitation should reinforce that their mother is alive and safe. For example, children speaking to their mother through a screen or a phone may not feel as reassured as children participating in contact visits. They may perceive the visit as unreal because the screen

is like seeing someone on television and the phone equipment and acoustics of jail distort their mother's familiar voice.<sup>7</sup>

Mother-child visitation helps children across the age spectrum to emotionally adjust to their parent's incarceration, develop a realistic understanding of the separation, and refrain from modeling their parents' criminal behavior.<sup>6</sup> Visitation is also associated with healthier outcomes, like higher IQ and wellbeing scores.<sup>6</sup> Older children who have more contact with their incarcerated mother through phone calls, visits, and letters experience a lower rate of drop-out and suspension. For children under the age of ten, though, face-to-face contact visits are particularly important due to their developmental stage.

Mothers who were experiencing multiple socio-economic risks at the time they became incarcerated (e.g., unemployed, young, single parent) are less likely to receive visits from their children.<sup>8</sup> Additionally, service providers have observed that mothers at CRDF often mistakenly believe that their parental rights were terminated upon incarceration.<sup>11</sup> There is no rule in California allowing for a default termination of parental rights upon incarceration.<sup>12</sup> If a case is opened by the Department of Children and Family Services ("DCFS"), incarcerated parents are supposed to be provided with reunification services, including visitation, unless the court finds by clear and convincing evidence that those services would be detrimental to the child (e.g., based on factors such as the child's age, degree of parent-child bonding, etc).<sup>12</sup> Generally, any type of continued contact with a child helps with family reunification in dependency court proceedings.

Although the effects of parent-child visitation are complicated and can result in short-term affects of confusion or upset,<sup>8,13</sup> children have a right to maintain their relationship with an incarcerated parent. But sometimes mothers who want to see and contact their children do not because they are concerned about their child's exposure to security protocols, hostile visiting conditions, and seeing their mom in a jail setting wearing inmate attire.<sup>8</sup> Sometimes caregivers, as the gatekeepers of children's access to their incarcerated parents, may hinder contact if they are unwilling or unable to pay for collect phone calls, pass on the letters a parent sends, or take the child to visit the parent.<sup>14</sup> Caregivers may be trying to protect the child, believing contact is harmful.

Due to the social stigmas around parental incarceration and children visiting detention facilities, some mothers prefer to pretend for their child's sake that they are away at school or some other pro-social endeavor while they are incarcerated.<sup>15</sup> Eventually though, most children find out if they have been lied to, undermining their trust and secure attachment to the parents, caregivers, and family members that perpetuated the fantasy. Research suggests that honesty with children about where their incarcerated parent is can improve their ability to cope with the situation.<sup>16</sup> There are, of course, parts of parental incarceration that children should be protected from, and each child is unique in their development and coping abilities. There are resources



available to help incarcerated parents navigate age-appropriate conversations with their children.<sup>c</sup>

### **C. Evidence-Based Visitation Programs Can Benefit Law Enforcement and the Public**

While women and their children may be the direct recipients of the behavioral and health benefits related to visitation and described above, these benefits also ripple out to the law enforcement personnel working with them. When women are able to regulate their emotions and use positive coping behaviors, they may be less likely to violate rules, including engaging in violence. Theories about misconduct in detention settings hypothesize that the strain and deprivation of incarceration tax people's coping skills, causing them to lash out at the people enforcing their detention (e.g., correctional officers). So, mitigating the differences between their life pre- and post-incarceration can reduce misconduct.<sup>17</sup> Reducing stress for correctional officers is an important public health goal, as they have a shorter life expectancy than other people in similar occupations.<sup>15</sup>

There is, however, some evidence that visits may reduce misconduct leading up to the visit, and then result in a spike in misconduct afterwards. There are anecdotal reports that this may be an issue at CRDF.<sup>11</sup> There is also one study finding this outcome among prisoners serving long-term sentences, who may have found that maintaining relationships on the outside through visits was a painful reminder of their sentence length.<sup>17</sup> But quality of the visits is an important variable to consider related to this pattern. The highest risk for a spike in misconduct may be when the quality of the visits is low and visits are infrequent. Regular visitation, paired with efforts to make the visits comfortable and enjoyable and with structured programming to prepare people for visits and help them process afterwards, likely yields the biggest reduction in misconduct.

The communities paying for law enforcement and the communities the women will return to may also receive indirect benefits from robust visitation. When recidivism is reduced, crime is prevented and money is saved. There is some evidence that investing in social support programming yields measurable returns.<sup>4</sup> The County will directly reap any returns on its investments in visitation, since the women incarcerated at CRDF are largely from the County and will return to the County upon release. There could be additional benefits related to visitation for other reentry outcomes, like employment, but they have not yet been studied.

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<sup>c</sup> See e.g., Sesame Street's "Coping with Incarceration" resource page at <https://sesamestreetincommunities.org/topics/incarceration/>.

## VI. CURRENT LANDSCAPE AT CRDF

### A. CRDF Data

CRDF opened in 1994 as a high security jail for men. It began housing women in 2006.<sup>18</sup> Roughly 2,230 women are incarcerated at CRDF today,<sup>18</sup> the majority of whom are cisgender women<sup>d</sup> and a minority of whom are transgender<sup>e</sup> or nonbinary.<sup>f</sup> About 25,000 women cycle through CRDF every year.<sup>15</sup> The average stay is fifty-three days,<sup>18</sup> and the median stay is just six days.<sup>19</sup> Almost half of the women at CRDF have not been sentenced.<sup>18</sup> Due to AB-109 and pre-trial incarceration, many women at CRDF stay a year or more. Women typically serve only 30-50% of their sentence before being released due to overcrowding, unless they are categorized as AB-109, have a serious or violent charge, or are sentenced to 120 days or more.<sup>20</sup>

The proportion of women held at CRDF for violent charges or convictions is unclear, and may be notably higher than female jail populations in other states. There have been anecdotal reports that the charges of women at CRDF have become more violent, on average, over the past decade due to AB-109 and efforts to alleviate overcrowding by not booking low-level offenders. The Sheriff's Department informally quoted the approximate proportion of women at CRDF with violent charges as 70% in 2019.<sup>15</sup> Million Dollar Hoods and the Vera Institute have reported that the five most common charges at CRDF between 2010 and 2016 were all non-violent and accounted for 41% of the charges.<sup>19, g</sup> This is an important characteristic to further untangle, since security level can impact visitation eligibility. There are generally three security classifications based on risk of misconduct during incarceration: low, medium, and high.<sup>20</sup>

About half of the women at CRDF are part of the Sheriff's Department's "mental health population," either in a mental health housing unit or taking psychotropic medications.<sup>19, 21</sup> Twenty-seven percent struggle with mental illness, a proportion almost 1.5 times higher than among men in LA jails.<sup>19</sup> A recent study by RAND found that 73.6% of women in the mental health population are appropriate candidates for diversion.<sup>21</sup> The average age of someone at CRDF is thirty-three. There are 3,000 women over fifty years old booked into CRDF annually, mostly for low-level crimes and supervision violations.<sup>19</sup> CRDF's population is 43% Hispanic, 30% Black, and 23% White.<sup>20</sup> Overall, 9% of women incarcerated there are homeless, but 14% of women over fifty there are homeless.<sup>19</sup> Approximately 60% of the women at CRDF participate in educational programming each month through over fifty programs and one hundred different

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<sup>d</sup> Cisgender means that someone's sex at birth matches their gender identity.

<sup>e</sup> Transgender people at CRDF were born female, but identify as men ("transgender men"). Transgender women (people born male who identify as female) are held at Men's Central Jail and are excluded from CRDF data.

<sup>f</sup> Nonbinary people do not identify as solely male or female.

<sup>g</sup> The top five most common charges, starting with the most common, were possession of a controlled substance, driving on a suspended license or without insurance, theft or larceny, failure to appear, and driving under the influence.

classes provided by dozens of organizations, many of which are there on a volunteer basis.<sup>18</sup> In May 2019, 175 women with open DCFS cases listed CRDF as their address.<sup>22</sup>

CRDF has approximately forty-one pregnant inmates at any given time and approximately thirty-two deliveries annually.<sup>18</sup> In 2017 - 2018, the count of pregnant women at CRDF ranged from thirty-three to sixty-eight. Between January 2017 and August 2017, sixteen babies were delivered by women in custody, fifteen pregnancies were terminated, and three pregnancies were miscarried.<sup>23</sup> Roughly 50% of the babies delivered went into the care of a family member, though this was not being formally tracked.<sup>23</sup>

Although the true rate of visitation at CRDF is unknown, the Sheriff's department created a profile of typical weekend visitors and women receiving visits through administering voluntary surveys during visits at CRDF in fall of 2018.<sup>2</sup> Less than 10% of women received visitors. Parents were the most common visitor (33 - 36%), followed by spouses (15 - 21%), friends (10 - 19%), siblings (10 - 14% each), children of any age (9 - 11%), and other family (10 - 12%). Most visitors traveled to CRDF by personal vehicle (83%). About 45% of the women who were visited were between twenty-five and thirty-five years old, about 60% of them reported receiving weekly visits, and about 75% were classified as General Population.<sup>h</sup> More than 90% of the visits were face-to-face through glass and the others were through video screens. Visitors and the incarcerated women they were visiting came from all districts and out of county, with people in both categories coming from District One most frequently (roughly 40% for both). Notably, District Two had the lowest representation among both categories, despite CRDF being located there.<sup>2</sup>

## **B. Visitation and Family Support Programs and Services**

Women detained at CRDF are primarily oriented in their housing module, not the Inmate Reception Center. Visitation information is not provided in writing and is not an orientation topic.<sup>15</sup> The Sheriff's Department does provide a short five minute educational video about parental rights and programs that it shows at the Inmate Reception Center.<sup>23</sup> The housing module a woman is assigned to can have implications for her access to visitation and parental support programs. There are nine housing classifications used at CRDF, including school (Education Based Incarceration, or "EBI"), medical, mentally ill, and disciplinary housing.<sup>20</sup>

### **General Visitation**

*(through-the-glass and video visitation)*

#### **Eligibility:**

People with felony convictions, who are currently on parole or probation, or have an outstanding warrant (including for failure to appear after failure to pay a ticket) are generally barred from visiting. If someone has an outstanding warrant, the Sheriff's

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<sup>h</sup> Other classifications of women receiving visits were Moderate Observation Housing (MOH), High Observation Housing (HOH), or Administrative Segregation.

Department does its best to give a warning, rather than make an arrest, because it does not want to deter visitors. But officers are supposed to arrest anyone with a warrant for \$30,000 or more, which can accumulate over time even on low-level offenses (e.g., driving without a license).<sup>15</sup> A person who has a restraining order against them cannot visit the victim. People with prior felonies can submit a special form via mail or in-person to the appropriate visiting center to request clearance per California Penal Code Section 4571.<sup>15</sup>

Adult visitors must be able to present state-issued identification, a U.S. passport, or a Mexican government-issued identification card so that the Sheriff's Department can run a background check every six months.<sup>i</sup> Minor visitors may present a school identification card, and infants and preschoolers may present a birth certificate. There is no minimum age requirement to visit.<sup>15</sup> Clothing requirements generally ban revealing clothing, gang affiliated attire, sleeveless shirts, and obscene/graphic images on clothing.<sup>24</sup>

### **Logistics:**

Every visitor must also be cleared through the background check described above before they can schedule a visit. Visits are appointment-based in order to reduce wait times. They should be scheduled online after creating a user account.<sup>24</sup> User accounts do not expire. Visitors must enter the name of the person they want to visit to check if the person is eligible for visits. If eligible, the system will display the appointment schedule.<sup>j</sup> Walk-in visits are allowed, but subject to availability.<sup>15</sup>

Visitors can call the help desk for advice about navigating the online system. As a last resort, a visitor can come in person to CRDF to receive help. Visitors must provide a current photo ID at check-in for the visit, and the Sheriff's Department also takes a digital photo of adult visitors at that time. Children ages fourteen to seventeen must present a current school photo identification.<sup>15</sup> Disabled visitors requiring disability accommodations must contact the Help Desk to schedule a visit. Public visits are Saturday and Sunday only from 7:30AM to 12:30PM and 3:30PM to 5:30PM. They last for thirty minutes and a person can receive one visit per day. Up to two visitors (including children of all ages) can participate in a single visit.<sup>24</sup> Visitors who arrive late will have their visit canceled, and it will be treated as a walk-in.<sup>15</sup>

### **Accommodations:**

Limited parking is available for \$4.00 in a privately owned lot on-site. All personal belongings must be stored in the visitor's car or in one of the lockers in the waiting room (only identification and a single key are permitted in the visitation area).<sup>15</sup> The lockers require coins for rental, and there is a change machine in the lobby. There is also a snack vending machine, a water fountain, and restrooms. The waiting room has murals on the walls and a play corner for young children. There is a Family Outreach room in the

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<sup>i</sup> Only certain forms of identification are compatible with the scanner.

<sup>j</sup> There have been reports that people have showed up to CRDF after successfully scheduling an appointment, only to be told that the person they want to visit is ineligible.

waiting room provided through Chaplain Services. There are also five video visitation stations in a glass room in the waiting room.<sup>15</sup>

Video visitation is logistically treated the same as through-the-glass visitation, and can be useful when there is a long wait time for visits or if a visitor is remote. There are about thirty-five video visitation terminals throughout the county located at Sheriff's Department stations for remote visitors. The stations, which have not been updated in many years and experience connectivity issues, will likely be replaced with tablets eventually. This is a department-wide budgetary issue, not restricted to CRDF.<sup>15</sup>

### **Supplementary Methods of Communication**

#### **Phones:**

Upon arrest and booking, women are allowed three free phone calls. Women are not allowed to look up phone numbers, so they are limited to the numbers they have memorized. The outgoing number from CRDF shows up on caller identification systems as restricted or unknown.<sup>15</sup> After the free calls, someone must put money into the account of the person at CRDF before they can make a call. Funds from collect calls made by the women incarcerated at CRDF go to the Inmate Welfare Fund. The Inmate Welfare Commission is made of appointed members who have some level of oversight for how the fund is used.<sup>15</sup> The fund is expected to diminish due to SB-555.<sup>25</sup> Phone call recipients do not need to be cleared by the Sheriff's Department.

#### **Mail:**

Indigent kits are available to women as needed and include stamps, envelopes, and paper.<sup>15</sup>

#### **Email:**

The Sheriff's Department is looking into setting up an email system. Some systems also allow for video visitation and sending photos by email. People may be charged per email sent. Ideally, the third-party vendor would provide tablets and/or stations free of cost within the jail so that women could access incoming emails at no cost (e.g., the JPay model used by the California Department of Corrections and Rehabilitation). CRDF is also hoping to add a computer room soon, or may have already, which could allow for traditional email access. Although it was undecided whether the computers would have internet access at the time this was discussed.<sup>15</sup>

### **Adults Bonding with Children (ABC)**

*(contact visitation)*

#### **Overview:**

ABC allows for contact visits between mothers and their young children. It is a Sheriff's Department program staffed by officers in the EBI unit. The visits occur weekly on Saturday mornings (8AM to 11AM). The program is run by one custody assistant.<sup>15</sup>

**Eligibility Criteria:**

The ABC program is open to all women housed in an EBI dorm, regardless of whether they are pre-sentence or post-sentence. Having an open DCFS case does not affect eligibility, but mothers are ineligible if they have stay away orders from their children or have had their parental rights terminated.<sup>15</sup> Mothers must be currently enrolled in EBI parenting classes (Breakthrough Parenting) and meet other criteria related to their incarceration (e.g., mothers are disqualified for excessive bail, domestic violence charges, M-7 violent charges, and misconduct at CRDF).<sup>15,k</sup> Eligibility is ultimately determined by the Custody Assistant who oversees the program. Children must be under the age of 12, and their mother must be able to provide the contact information for their caregiver.<sup>15</sup>

**Capacity:**

The long-term goal is to allow anyone who is participating in parent classes and who does not have visitation restrictions to join the program, but this requires sufficient space. There is typically a waiting list to join the program due to space restrictions. In January 2018, the Sheriff's Department reported that in the six months prior, thirty-six women were approved for participation and 120 were rejected. At that time, only seven women and ten children were participating.<sup>26</sup> In April 2019, ABC reported that seventeen children were enrolled, and a couple mothers were on the wait list.<sup>15</sup>

**Logistics:**

A caregiver must transport the child and drop them off. The caregiver is not allowed into the room.<sup>15</sup> In order to access the visitation room, children and caregivers do not have to go through security. This is a primary reason for the strict eligibility criteria relating to criminal history and current charges. An armed officer, typically the same person each time, guards the door from the inside of the room. He tries to build rapport with the children to avoid intimidating them. The physical layout of the room does not allow for him to stand on the outside of the door.<sup>15,l</sup>

Lack of space is the primary capacity limitation. The Sheriff's Department won a federal grant for \$750,000 in October 2018 to expand the program by creating more space through buying a portable modular building. The County formally accepted the grant funding in March 2019. The building has not yet been purchased, but will be placed within the borders of CRDF's secured area, unlike the current room, so the eligibility restrictions related to criminal history and charges can be loosened. Because the building will be free-standing, children will still avoid going through CRDF's regular security check. The grant will take three to five years total to implement.<sup>15</sup>

**Accommodations:**

The current room can only accommodate nine children at once. The space overall is geared toward younger children (children aged seven or less). It has games,

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<sup>k</sup> The Sheriff's Department denied a public records request for the exact ABA eligibility criteria.

<sup>l</sup> There are two consecutive doors with only a small space in between.

movies, books, toys, a table, chairs, a couch, and a plastic climber with a slide for toddlers. There is an infant changing table with supplies and a bathroom.<sup>15</sup> Once the modular building is opened, the current space might be used as a waiting room with resources for caregivers, who currently must wait in their car or off site while children are at ABC visits.<sup>15</sup>

### **Incarcerated Parents Program (IPP)** *(through-the-glass visitation)*

#### **Overview:**

IPP provides supervised parent-child visits through glass. It is staffed and facilitated through a partnership between Friends Outside Los Angeles (FOLA) and DCFS. The current contract for IPP expires at the end of January 2023.<sup>22</sup>

#### **Eligibility Criteria:**

Mothers must have an open DCFS case and be referred by their DCFS social worker or the FOLA case manager. The FOLA case manager circulates throughout the General Population modulations to advertise the program and make assessments for referrals. Women in the mental health unit, who are mentally unstable, or who have a stay away order from children are ineligible. Children must be twenty-one years old or younger, with the estimated average age of participants being around eleven years old.<sup>22</sup>

#### **Capacity:**

The program serves, on average, about twenty to twenty-five mothers at CRDF each month.<sup>22</sup>

#### **Logistics:**

IPP relies on caregivers, social workers, and placement agency staff (e.g., group home staff) to transport children to the visits. If a caregiver or foster parent of a child with an open DCFS case lives over a certain number of miles away from the jail, they are not required to transport the child for court-ordered visits that are part of the reunification plan. Support staff at the DCFS regional office closest to the child will transport children, when available, if caregivers are unable to.<sup>22</sup> Visits typically take place on weekdays because DCFS social workers do not work on weekends. Because weekday visiting (not available to the general public) ends at 4PM, children may have to leave school early in order to arrive in time. Length and frequency of visits vary depending on the family reunification plan and range from weekly to monthly and from twenty minutes to one hour. The FOLA case manager meets with children and their caregivers in CRDF's visiting lobby before visits to explain rules and answer questions. She supervises the visits, then debriefs with the children and their caregivers afterwards. She also prepares visit reports for the DCFS social workers.<sup>22</sup>

## **Accommodations:**

If available, visits take place in the Attorney room. If not, the floor modules (general visitation stations) are used. With either option, visits are through glass.

## **Parental Support Programs**

*(in alphabetical order)*

### **1. Breakthrough Parenting**

#### *Overview:*

This EBI Life Skills class is funded by the Inmate Welfare Fund and taught by EBI staff. It is built upon a Restorative Parenting framework, and combines psychological theories including attachment, cognitive behavior, and empowerment with the foundational principles of Restorative Justice. The class takes a developmental approach that emphasizes identifying strengths and increasing the capacity of parents to build, when safe, a respectful relationship with their children, to maintain safety for all family members, and to increase accountability for their own behavior.<sup>27</sup>

### **2. Gender Responsive Rehabilitation Program (GRR Program)**

#### *Overview:*

This eight-week program has been offered by HealthRIGHT 360 in one EBI housing module (3500) since 2012. It is a trauma-informed and uses a therapeutic community model for shared group learning. Participants must complete thirty-two hours of programming per week between Monday and Saturday. Group and individual counseling is available. Ten to twelve groups are conducted per day, split among the cohorts, which meet in separate corners of the housing module. Fridays are elective days, with options for activities like creating vision boards and journaling. Participants must also help out with at least one committee to help run the program (Culture and Motivation, Environment, Orientation, or Reentry). At the end of eight weeks, participants present on what they learned and receive certificates of completion.<sup>11</sup>

The GRR Program collaborates with many community organizations, like Chrysalis, and invites providers to visit and present their services through the Sheriff's Community Alliance. The California Department of Corrections and Rehabilitation visits biannually to present on what women can expect if they are transferred to prison.<sup>11</sup> The Program has close relationships with Homeboy Industries and A New Way of Life, local reentry programs. Prototypes, a transitional home for women, has beds reserved for Program participants meeting certain criteria. The program also works closely with Second Chance Women's Reentry Court. For example, one program participant was facing a potential sentence of fifteen years for a robbery committed by her partner that she has no memory of due to being under the influence at the time. After the program advocated for her, Women's Reentry Court accepted her.<sup>11</sup>

There are five program cohorts that run simultaneously. Women usually participate in two cohorts at once, participating in programs for one cohort in the



morning and another cohort in the afternoon. Cohort A is the trauma-focused cohort, overseen by a therapist. It follows the Pathways curriculum, developed by HealthRIGHT 360 in response to the high number of women coming through who were victims of sex trafficking. Cohort B focuses on addiction to substances and other unhealthy behaviors, including criminal thinking, eating disorders, and domestic violence. Cohort C develops leadership. Cohort S – the “Second Chance” cohort – is for women who have recidivated. It is more intensive and is supported by a Transitional Coordinator, who advocates for additional assistance, like participants’ releases to happen during business hours.<sup>11</sup>

Cohort D provides family services and is overseen by a Family Services Coordinator. The Coordinator teaches parenting skills, effective communication, age-appropriate mother-child activities, and healthy family dynamics. They have piloted two projects: helping mothers record themselves reading age appropriate books to send to their children (ongoing) and a parenting program using rag dolls made in another EBI program to simulate infants (pilot lasted for two eight-week cycles). The doll project was a success, and there was a recent fundraiser to purchase electronic infant simulator dolls. The Coordinator also maintains a caseload of pregnant and postpartum participants and works with DCFS social workers and attorneys, if there is an open case, to assist them with custody issues. There is a Relationship Therapist too, and both are available on Saturdays, while ABC visits are occurring.<sup>11</sup>

#### *Eligibility Criteria:*

Everyone who comes to CRDF is screened for eligibility. Generally, anyone with a history of trauma, regardless of their charges, conviction status, and sentence length, is eligible. A participant’s cohort placement is determined during screening. Some women are released before they complete the program, while others complete the program multiple times (they are not terminated after eight weeks; they can continue on to another session if they want). The main disqualifying characteristic is if someone needs a higher level of care and would be a distraction to others (e.g., classified as High Observation Housing). Women with mental illness can participate if they are effectively managing their condition with medications.<sup>11</sup>

#### *Capacity:*

The GRRP module has a total of 135 beds, and Healthright 360 is contracted by the Sheriff’s Department to maintain at least 124 participants.<sup>11</sup> Because the capacity is limited by the number of beds in the housing module, there is usually a wait list.<sup>11</sup> In November 2019, there were 133 participants and a wait list. About thirty of participants were under the age of thirty and fighting life sentences. Some women had been there two to four years.<sup>11</sup> In January 2018, the Family Services Coordinator for Cohort D had a caseload of eight mothers.<sup>26</sup>

### **3. Lactation Program**

#### *Overview:*

The Sheriff's Department and Correctional Health Services implemented a lactation program in January 2016. It is offered to pregnant women during their initial prenatal or post-delivery appointments and to mothers who report that they were breastfeeding prior to incarceration. Medical Services freezes and stores the milk,<sup>18</sup> and a pre-designated person must commit to retrieving milk from CRDF every one to two weeks.<sup>26</sup>

#### *Eligibility:*

To participate, mothers must be medically cleared. Their child must be less than six months old, according to one source,<sup>26</sup> and according to another, women are allowed to pump milk for up to one-year.<sup>18</sup>

#### *Capacity:*

In January 2018, there are six participants in the program.<sup>26</sup>

### **4. MAMA's Neighborhood**

#### *Overview:*

This program is provided through the Department of Health Services (DHS) and was implemented at CRDF in early 2018. It serves pregnant and post-partum women by providing health services and referrals, assistance with postpartum depression and parenting, and help navigating the DCFS process to reunite with children upon release. Program participants receive services in the community setting for up to eighteen months post-release.<sup>26</sup>

As of 2018, it was also working on a doula program to allow pregnant women to have a support person with them during labor and delivery. At that time, the doula program was encountering significant barriers to implementation, including differences in hospital protocols, lack of control over which hospital the delivery happened at, clearance for the support person from the Sheriff's Department and DCFS, and abrupt transfers of pregnant women to state prison.<sup>23</sup> In 2019, the Sheriff's Department described the program as active for pre-planned deliveries. The mother identifies someone to care for the baby. DCFS has to clear the caretaker, and if the caretaker does not get approved, DCFS assumes full responsibility and authority for placing the infant.<sup>18</sup>

### **5. MIRACLE Project**

#### *Overview:*

This is an EBI program provided by Families and Criminal Justice that runs on a quarterly cycle. It offers maternal support services, including health education about reproduction, birth, and prenatal and infant development; advocacy for "baby-friendly" sentencing, newborn placement, and infant/child custody; and modified case management. Post-release, it offers home-based services and community-based group

activities for at least one year for mothers who participated in MIRACLE at CRDF. MIRACLE has also advocated for women to have labor and delivery companions/family support available, like the doula program described under MAMA's Neighborhood. MIRACLE collects data and tracks outcomes about its participants.<sup>23</sup> For mothers who complete the program, including the post-release community-based services, the recidivism rate is less than 5% and the long-term family reunification rate of 91%.<sup>11</sup>

*Eligibility:*

MIRACLE is available to parents of infants (up to six months post-partum) and pregnant women. Women in non-EBI "general population" housing units are not eligible to participate but may transfer to EBI housing to become eligible. Because MIRACLE is a large group activity, it cannot be offered to women in the East Tower special housing units. Having an open DCFS case does not generally affect eligibility.<sup>11</sup>

*Capacity:*

Since 2013, MIRACLE has served from 100 - 135 women per year but that number has recently declined as the number of pregnant women in the jail has declined. In January 2018, MIRACLE had a maximum enrollment of twenty-eight participants. In March 2018, eleven participants were enrolled. Most women in any quarterly MIRACLE cycle are released before completing the course.<sup>11</sup>

## **6. Parents in Partnership (PIP)**

*Overview:*

PIP is a program provided through DCFS at CRDF on the first and third Wednesday of every month. PIP utilizes a peer-help model. Parent Partners, who have previously navigated DCFS, help parents currently navigating DCFS by sharing their stories of successful reunification, providing referrals and support, and empowering parents to comply with case planning activities quickly. A Parent Orientation explains the DCFS process and provides helpful tips to assist incarcerated parents in working with DCFS, like how to contact social workers via collect call from CRDF and how to request transportation to court for dependency court hearings. Other services are tailored to meet the individual needs of the participants. Parents who comply with their case plan and court orders while receiving services from PIP are often better prepared to successfully reunify with their children. A study published in 2016 found that parents who received services from PIP in Los Angeles reunified with their children five times more often than similar parents who did not.<sup>28</sup>

## **7. Women's Integrated Services Program (WISP)**

*Overview:*

This collaboration between the Sheriff's Department, DHS, and Probation was piloted starting in December 2016. Probation personnel work with women to determine their post-release probation plans. Three WISP Clinical Social Workers and two deputy probation officers conduct a comprehensive assessment, provide case management, help women access services while in custody, and develop a reentry plan covering areas

including health, mental health, substance use, family/social support, housing, benefits and employment. The program emphasizes substance abuse treatment, but the social workers do not provide in-custody treatment. They continually assess clients and will refer them for substance use treatment as needed. There is also a diversion opportunity. If a client has an open DCFS case, their social work may help with post-release family reunification planning.<sup>23,26</sup>

*Eligibility:*

It provides services to general population women with non-violent offenses. All pregnant women are evaluated for eligibility.

*Capacity:*

In 2017, WISP was only serving every seventh eligible woman due to capacity constraints.<sup>23</sup> In February 2018, there were eighty-two participants, six of whom were pregnant.<sup>26</sup>

## **VII. RECOMMENDATIONS AND IDEAS FOR NEXT STEPS**

The information gathered by the Visitation Workgroup provided the Harriett Buhai Center with a foundation for understanding the current visitation protocols and family support programs at CRDF. In reviewing of the research about impacts of visitation, the Center confirmed that visitation is essential to public safety. Based on all of the information collected, the Center has identified two high-level recommendations and possible ways to start addressing them, discussed below. It is also recommended that the GRAC continue gathering information to gain the deeper understanding of visitation issues specific to CRDF that is needed to make concrete policy recommendations.

### **A. Recommendation #1: Increase the Visitation Rate at CRDF.**

We know that the visitation rate at CRDF is low, but it is not clear which barriers to visitation are the most common hurdles that should be prioritized to address. The 2018 Visitation Survey Data suggest that people from some LA Districts experience more barriers than people from others.<sup>2</sup> Stakeholders engaged by the Workgroup reported barriers related to (1) mothers preferring their children not visit them in jail or even know that they are there, (2) visitors frequently being barred due to their criminal records, (3) incarcerated women having dysfunctional families and little social support, (4) visitors lacking transportation, (5) visitors not being able to navigate the internet-based appointment system due to lack of internet access or technology literacy, and (6) visitors not being able to come to CRDF during the designated public visiting hours because of work or other responsibilities. Improving the overall visitation rate is important to addressing family reunification and reducing recidivism.

The Sheriff's Department and community stakeholders need a better understanding of how the barriers operate and which are the most common in order to

create an intervention that will improve the visitation rate. The Center offers the following ideas for accomplishing this objective:

- 1) **Convene meeting(s) of community and county stakeholders** (e.g., Anti-Recidivism Coalition, Los Angeles Regional Reentry Partnership, A New Way of Life, Friends Outside LA, Homeboy Industries, Prototypes, Root and Rebound, Just Leadership USA, Dignity and Power Now, DCFS, DPH, LASD) to gather input about cultural barriers to visitation.
- 2) **Use case studies** at CRDF to gain an in-depth understanding of the visitation experience from the point of view of women incarcerated at CRDF. This would require finding volunteers among people incarcerated at CRDF that are representative of different groups of people at CRDF (e.g., elderly, non-parents, parents, LGBTQ). Non-law enforcement service providers, with consent, could interview volunteers at multiple points in time, shadow their visits, and interview their visitors.
- 3) **Administer a visitation survey to women incarcerated at CRDF.** This would be best administered by peers (e.g., select women incarcerated at CRDF to be survey champions and administer the survey to their peers).
- 4) **Partner with community organizations** to survey women released from CRDF to better understand the long-term impacts of CRDF programs and services.

Although there needs to be an emphasis on gathering data to better understand the problem of the low visitation rate, while data are being gathered, the Sheriff's Department should move forward with some obvious improvements, including the following:

- 5) **Advertise visitation services:** Information can be provided to women at CRDF through posting throughout the facility (e.g., posters and resource binders available in each module). The same information could be available in a flyer format, and copies could be made available to women upon booking to send to their loved ones and/or keep for later reference. Merit Masters, who are peer leaders in the dorms, can help women with low literacy access the written information. Advertising visitation information more widely, including online to potential visitors, will also help reduce the volume of related phone inquiries.
- 6) **Support visitor transportation:** Provide transportation vouchers or contract with an organization to provide rides to qualifying visitors, like children, the elderly, and people below an income threshold (see, e.g., organizations like HopSkipDrive<sup>29</sup> that provide safe private transportation for children and programs like Get on the Bus<sup>30</sup> that transport families to prison).
- 7) **Expand visitation hours:** Expand or shift visitation hours to allow for early evening visitation on two weekdays, so people who work during weekends and school age children visiting through IPP on weekdays can have better access to visitation.

## **B. Recommendation #2: Increase Family Support Services for Women Incarcerated at CRDF and Their Loved Ones.**

There are several beneficial family support programs at CRDF that should serve more women by expanding access (e.g., reducing eligibility restrictions). The current need for these programs is also greater than their capacity, as reflected by multiple programs' wait lists. Expanding access and capacity is hindered by the physical layout of CRDF, which was designed as a high security jail. Women are severely restricted in their movement between housing modules, so they generally eat, sleep, and attend programs in their assigned module. Their housing module assignment can determine what programs they are eligible for, since not all programs visit all modules.

The Center offers the following ideas for ways to improve visitation and family support services at CRDF:

- 1) **Utilize a standardized assessment:** Everyone should be assessed for program eligibility and need for services upon booking into CRDF. Currently, service providers have reported that some women fall through the cracks and others receive duplicative services. Sharing information among service providers is difficult. By implementing a standardized assessment, the Sheriff's Department can start sorting women into modules and programs more efficiently and begin gathering data to understand the scope of unmet need for particular services in order to build out program capacity accordingly. The County's Alternatives to Incarceration Work Group ("ATI") is also in the early stages of developing an implementation plan for a standardized assessment for people in County custody. The GRAC should coordinate with the ATI to develop an assessment for CRDF.
- 2) **ABC visitation space:** As the Sheriff's Department expands the ABC program into a new building, with the help of a federal grant, it should consider designating a portion of the space to specifically accommodate older children, ages eight to twelve (e.g., a space for parents to help with homework, age-appropriate board games, etc.), since the current space is geared toward younger children. Second, it should create semi-private spaces to reduce the noise and chaos of having all families visit in the same room (e.g. plexiglass partitions). Third, the Sheriff's Department has expressed interest in transforming the current ABC space into a waiting room for caregivers, who are currently forced to wait in their cars. The Workgroup supports this idea. The space could even be the storage and distribution site for basic children's necessities described in (4) below.
- 3) **Support for ABC staff:** The Sheriff's Department runs ABC, but law enforcement officers are not typically trained in child psychology and development. Their interactions with the children, parents, and caregivers can have a huge impact on the quality of the visits. All parties could benefit from the presence of a child development expert, a component of contact visitation programs at some other detention facilities. The expert could meet with the ABC staff once or twice per

month to talk through successes, review challenging cases, and provide general support.

- 4) **Provide free basic children's necessities:** The Sheriff's Department can partner with a community organization, such as Baby2Baby,<sup>31</sup> to collect donations for children's items like diapers, clothing, and toys, and distribute them to caregivers of parents incarcerated at CRDF and visitors who have young children. This can incentivize visits and also support families impacted by incarceration.<sup>m</sup>

## VIII. CONCLUSION

Los Angeles County is home to the largest women's jail in the country.<sup>32</sup> Visitation helps aid rehabilitation and family reunification, but the percentage of women at CRDF receiving visitors may be as low as 8%.<sup>2</sup> With limited resources and data, the Harriett Buhai Center found that there are likely several major barriers to visitation, including cultural reasons (e.g., shame), resources required (e.g., transportation), and system barriers (e.g., visitors are required to have a state-issued ID). More data, both quantitative and qualitative, is needed to understand what the biggest barriers to visitation at CRDF are, so that resources can be appropriately allocated to address the issues. While there are several programs for visitation and family support provided at CRDF, access to and participation in these programs is limited. Women are especially restricted in their access to programs due to capacity limitations and eligibility criteria. The GRAC, Director of Gender Responsive Services, and the gender-responsive expert consultants retained by the County are well positioned to help achieve these goals. Visitation is a critical topic for the GRAC to focus on, as it can help improve behavioral and health outcomes for incarcerated women and their loved ones, improve the environment at CRDF, and promote public safety by reducing recidivism.

If you have questions or comments about this report or would like to report inaccuracies, please contact:

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<sup>m</sup> Baby2Baby has confirmed interest in such a partnership during a discussion in October 2019.

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Attachment F: Steve Carter Physical Plant Report



Central Regional  
Detention Facility  
*Physical Plant Considerations*  
February 2020

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## Improvements in the Conditions for Confinement

This report has addressed the means and methods to transform the CRDF into a more gender-responsive facility for women. While the focus is upon staff development, this final section acknowledges the contribution that environment and the conditions for confinement can have on staff and inmates, especially women. Designing a purpose-built facility for women has many unique requirements and converting a facility that was intended for men to one that is responsive to the specific environmental needs of women is an even more challenging requirement and beyond the scope of this abbreviated assessment. Nonetheless, in the following pages a brief discussion is offered of specific areas where relatively minor internal improvements could be made that would support more gender-responsive programming for women. These specific focus areas include:

1. The image and setting of CRDF
2. Changes in the Intake and Assessment Area
3. Opportunities for Improving Program Areas
4. Improving the Housing Environment
5. Incorporating the Natural Environment

The suggestions offered in this document were developed through two days on site; walking tour of the CRDF; discussion with staff and external consultants; and a review of very difficult to read copies of as-built drawings of the CRDF. Should the County elect to adopt any of the suggestions, far more detailed analysis will be necessary to clarify the feasibility, design and construction requirements, and the costs.

## Overview

The CRDF was opened in 1994 as one of the first direct supervision correctional facilities in LA County. This 3-decade old decision is one of the greatest assets when attempting to transform a facility designed for males into a female-focused environment. Direct supervision requires that officers are a part of the dayroom environment and in direct and continuous contact with the women, and research supports that justice involved women prefer this more direct communication. A second advantage of the CRDF is that the facility now exclusively houses women and the entire management, care and custody policies can be focused on the unique characteristics of correctional environments for women that include, but are not limited to the following:

1. The overall risk for flight is less for women than men;
2. Women are less physically violent;
3. Women are less destructive of the physical environment;
4. Women prefer open and direct communication;
5. Individual privacy and personal dignity are highly valued;
6. The preferred forms of leisure and recreation are more passive than active;
7. Accessing double bunks present a particular challenge; and
8. Ability to have contact visits with children is paramount.

Another positive benefit of the CRDF is the original size of the housing units (12 – 48 cells) and that the facility is based on cells and not dormitory-style accommodations. Unfortunately, due to the demand for bedspaces, most of the cells have been double-bunked and in many dayrooms, single and double bunks have been added. These crowded dayrooms exacerbate the ability to offer effective

dayroom-based programs to an extent that many of the adjoining outdoor recreation spaces have been converted to on-unit programming spaces.

Meetings with the CRDF maintenance staff highlighted the very extensive deferred maintenance problems. One of the most pressing problems involves restoration of the elevators to a dependable condition. On the days of the site visit, one elevator was not operating and had not been in service for months placing more demands on the remaining elevators. As a mid-rise facility, the CRDF depends on the elevators to move staff, inmates, visitors, food, and supplies to the housing floors. According to the maintenance staff, money has been allocated to repair the elevator.

Other continuous maintenance problems involve plumbing, locks, access controls, cameras, temperature control, roof, and windows. Many of these types of maintenance problems are apparent in any correctional facility that is 26 years old, but contribute to the challenges of offering a gender-specific setting where the women are, in effect, completely at the “mercy” of the built environment as the opportunity for outdoor activities is very limited.

An overarching factor that requires additional discussion is that the current facility is intended to be an interim step in a 10-year plan to develop a purpose-built women’s campus. If this is a realistic aspiration, three basic questions should be addressed arising from this brief analysis:

1. What level of capital investment is the County willing to make to transform the CRDF to a more women-centric facility?
2. What plan does the County have to accommodate women while improvements are made to the CRDF?
3. What options have been discussed for the future use of the CRDF if women are eventually relocated to a purpose-built facility?

In the following pages, the five specific areas addressed earlier will be discussed in general terms. Since drawings were not available that were suitable for sketching ideas, this report relies more on narrative, diagrams, and images to advance ideas. Time was not available to provide a detailed description of the suggestions but, hopefully, the information provided will suffice to advance the discussion.

## The Image and Setting

As correctional facilities, especially those located in well-populated areas, are evolving from a punitive environment to one that supports public safety through a secure treatment and rehabilitative setting, the physical appearance is changing to support this transformation. Fortunately, although constructed more than 25 years ago, the CRDF setting is absent the fences with razor ribbon and towers that have come to characterize some urban detention centers. Also, the scale of the building mass and the more mature landscaping have helped to incorporate the building into the urban context.

Any significant alterations of the CRDF to present a more treatment-focused environment would require major changes to the building structure (such as creating more glazed penetrations in the façade) but the application of different color shades to the façade could reduce the punitive

appearance. The existing type of façade material will accept paint and the use of accent colors could improve the appearance.

While trees and other landscaping exists on the site, more could be done to improve the front entrance plaza and parking area. The image of the front entrance, in particular, would benefit from a more user-friendly landscaping scheme of trees, flowers, seating and lighting that would present a more welcoming appearance for visitors. Consideration could be given to creating an independent structure that would enclose the existing plaza and convert the space to useable interior spaces to incorporate information kiosks, community meeting spaces, and visitor waiting/processing. The following summarizes the various action items that could be undertaken to improve the image of CRDF.

1. Develop a façade improvement plan that includes selected painting of portions of the exterior.
2. Develop a comprehensive landscaping plan for the campus with additional trees, vegetation, lighting, and seating.
3. Develop a plan for the front entrance that at a minimum improves the landscaping, hardscaping, way-finding, seating, and lighting.
4. Develop a feasibility plan to enclose the front plaza to create space for visitor processing and waiting, community meetings, and information kiosks/offices.



Los Colinas Women's Facility



Kitchner Ontario Women's Facility

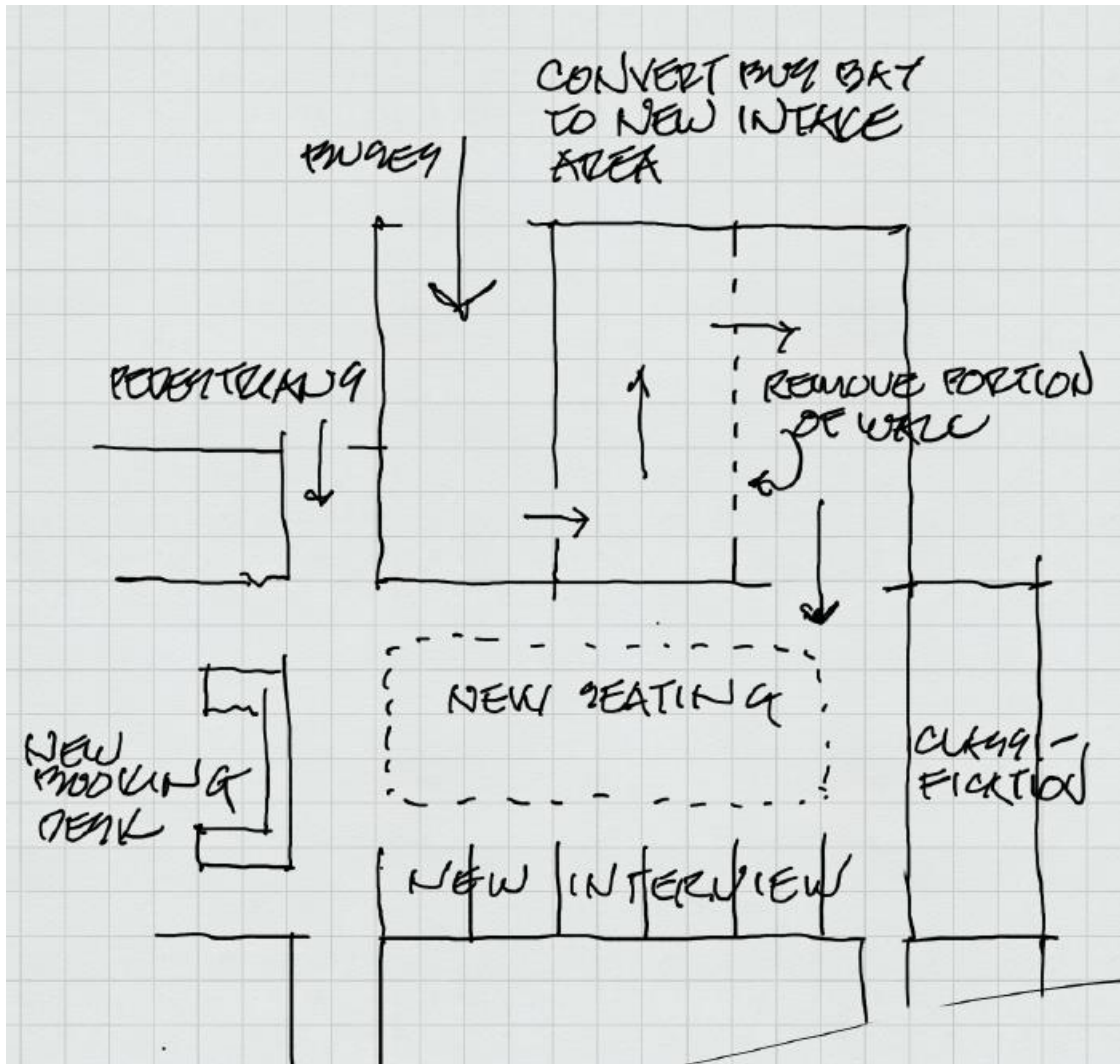
Being located adjacent to a freeway, literally thousands of County residents pass by the CRDF each day and the appearance of the facility is, in a manner of speaking, a statement about the value Government assigns to buildings that incarcerate women. On the non-freeway sides of the CRDF, the facility makes a similar visual statement to the commercial and residential neighborhoods. Regardless of whether the CRDF remains as a women's facility beyond the current decade, relatively low-cost improvements can be made to improve the appearance and send a transforming message regarding human dignity.

## Intake and Assessment

No other component of a facility makes a lasting impression about the concern for a restorative environment than the initial intake into the facility. In this category, the CRDF is a failure. On average, LA County admits approximately 25,000 women annually, and while some are repeat offenders, for most, the existing CRDF Intake Area is a stark visualization of what incarceration may represent. Not only are women subjected to the indignity of being strip-searched with little privacy in a converted bus bay but are assigned to group holding cells that are characterized by concrete benches and stainless steel combination toilets/lavatories with limited privacy. Individual interview spaces are non-existent and the “intake flow” through the assessment process is neither linear or continuous. The lack of natural light, high noise levels, glaring lights, and punitive-style seating creates an impression that does not foster confidence that rehabilitation and reentry is a mission at the facility.

Transforming the space into a more welcoming and humane environment is possible within the building parameters that exist. If the facility remains in a correctional use beyond the interim use as a women’s facility, the transformation will be beneficial for a future correctional use. Far more study will be necessary to re-imagine the Intake and Assessment Area, but the sketch below presents a basic concept.





Concept for Improved Intake and Assessment Area (Not to Scale)

The proposed approach converts an additional bus bay to the initial receiving area and begins the flow through the booking process from the front end of the discharging bus into a newly re-purposed bus bay. The re-design of the proposed converted bay and the existing bay should focus on creating a more welcoming environment through the use of sound absorbent floor, ceiling, and wall materials. The application of color on walls and the use of normative furnishings will vastly improve the negative image of being booked into a correctional facility. By using the large space created through renovating two bus bays, a substantial portion of the intake process can be accomplished in “new space”.

By undertaking this re-creation of the intake function in “found space”, the existing Intake Area can also be upgraded with the focus on the use of normalized furnishings for open seating. Again, more detailed plans will need to be developed but with at least 750-1,000 more square feet available through the conversion of the second bus bay, devoting the existing Intake Area to additional open seating and interview carrels should be possible. Several of the existing group holding cells could be converted to offices and additional interview rooms. The following is a partial listing of the suggested improvements for further consideration.



1. Conversion of an additional bus bay for intake processing and the removal of part, or all, of the wall between two bus bays to create one “continuous flow” space.
2. Through creative interior design, transform the two bus bays into a welcoming environment through floor/wall/ceiling materials; sound absorbent materials and furnishings; color; and the possible introduction of natural light.
3. Convert the existing intake space into open seating and interview carrels for classification, medical, and mental health information.



Los Colinas Open Seating Area



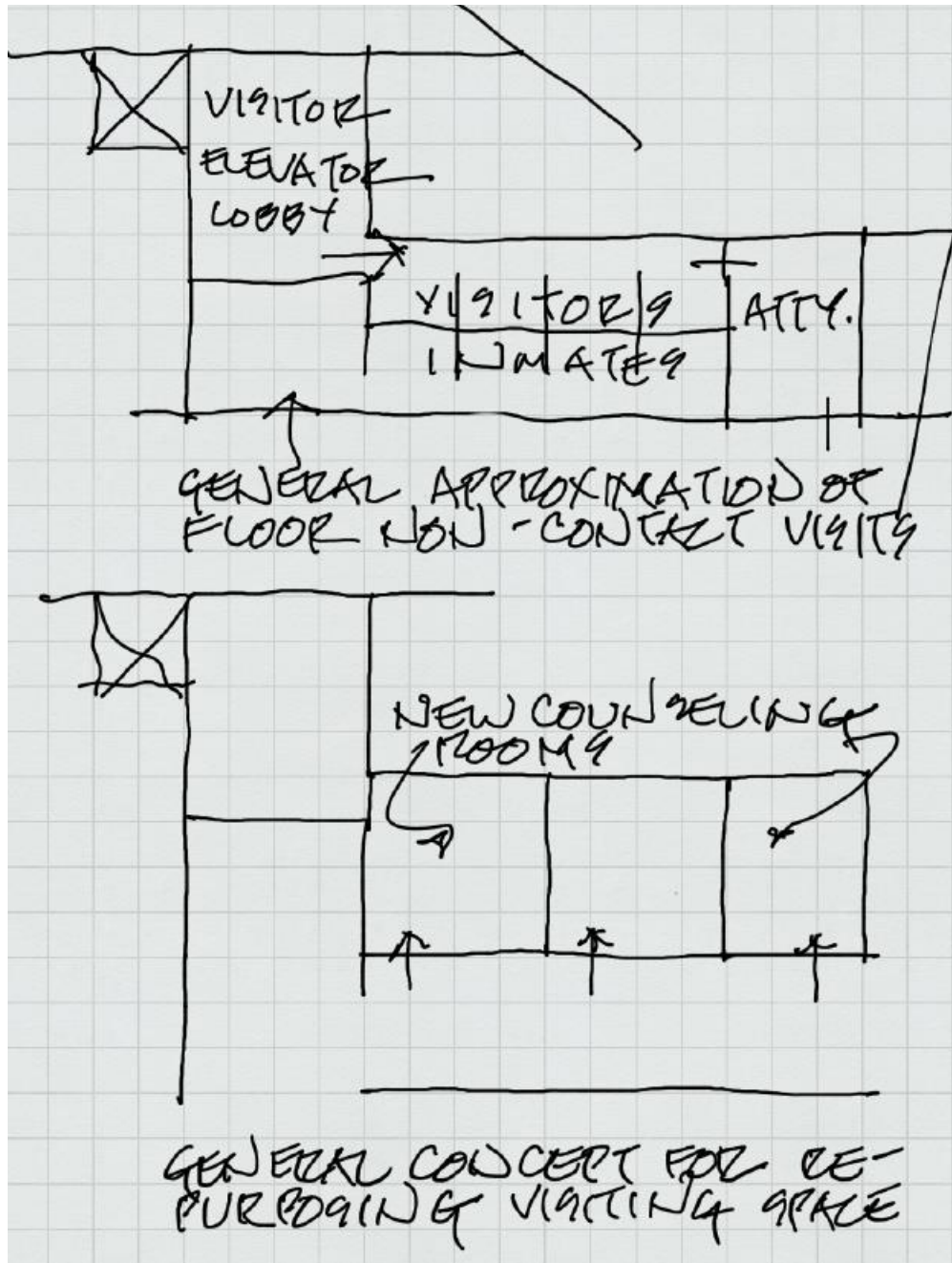
Hillsborough County (Tampa) Open Booking Area

The need for an improved image of intake cannot be overstated. The entire function of intake is to assure the offender that she is entering a safe and humane environment where maintenance of her dignity is paramount. While a significant part of projecting this image is through the actions and attitudes of staff, the physical environment contributes to maintenance of dignity and respect.

## Program Areas

As a pretrial facility from the beginning, the CRDF inclusion of program spaces is fairly representative of other jails constructed in the same era. In a number of ways, the CRDF has more program space than a typical 1990’s jail. This can be partially attributed to the “de-centralized” services philosophy where some classroom and non-contact visitation space are located on the floors between two housing units. At the time of the CRDF design, the average length of stay (ALOS) was much shorter than currently. With the more complicated cases and the “re-alignment legislation” from the State, the current ALOS is lengthy enough to support additional programming (and even employment) opportunities.

The opportunities for re-purposing existing space for programs were considered in centralized and de-centralized locations. Following the de-centralized philosophy, the space between two housing units on the floors offers some potential. For the most part, the two existing multipurpose spaces are in periodic use as classrooms and, in one instance, a vocational training room. Additional space could be created by re-purposing the existing non-contact visitation spaces on each floor for group and individual counseling rooms/multipurpose space as shown in the conceptual sketch below.



Basic Concept for Converting Floor Non-Contact Visiting to Counseling/Multipurpose Rooms (No Scale)

This conversion would be relatively simple and could be accomplished with little disruption to daily activities on the floors. To accomplish this change, however, a new management and spatial concept for visiting will be necessary. Other options for visiting follow.

One of the requested programs is a culinary arts teaching classroom. At the moment, any women participating in culinary training do so in the actual food preparation area. What is needed is the creation of a separate, dedicated teaching classroom that is adjacent to the existing food preparation area. With a re-organization of the cart storage and washing area, such a classroom could be created with minimal interference with daily food service activities.

Creation of more centralized program space would require a re-visioning of visitation from both an operational and spatial perspective. Three basic options are suggested based on the principles that: 1) many women have children who want to visit; 2) except in rare situations, women should be afforded contact visits; 3) visiting time is also a productive time for teaching parenting skills; 4) the time allotted for visiting should be longer, especially if children are involved; and 5) the risk of flight or disturbance is minimal for women. With these principles, three basic ideas are offered:

- 1. Re-Purposed Existing Visitor Processing and Waiting:** At the present time, visitors enter the courts/law enforcement/detention complex in Linwood through the entrance plaza (previously discussed) and proceed downstairs to a waiting and processing area. Once approved, they proceed unescorted through dedicated corridors and elevators to non-contact visiting cubicles on the housing unit floors (discussed in previous paragraphs and sketch). The large lower level waiting/processing space could be converted to a new contact visiting area through a reversal of the flow where inmates move unescorted through the dedicated elevators to the new Visits Center at the Lower Level. This space could be re-designed to include a separate children's visiting room; open contact seating; non-contact cubicles; and offices for volunteers. Visitor waiting could be accommodated at the plaza entry lobby, but waiting time should be significantly reduced under the contact visitation model.
- 2. Re-Purposed Courtroom Space:** For some time, the original space dedicated to the Superior Court has not been used. Two fully equipped courtrooms are idle along with thousands of square feet of office space (which could be used for additional centralized program and vocational training space). This wing of the complex already has a children's visiting area that is used on a regular basis. A secure and separate inmate circulation corridor exists that could be used for separate inmate access to the courtrooms which could be converted to a combination of visiting venues. A portion of a courtroom, or some of the adjacent office space, could be converted to overnight apartments for women with children who qualify for this program. Visitors could use the existing waiting spaces outside the courtrooms. The conversion of the former courts space for correctional purposes has many possibilities to create a new Visits and Program Center for the CRDF.
- 3. New Visitation Center:** If the existing plaza is enclosed, the possibility exists to create a new visiting center as a part of this space by transforming the courts space (Option 2) or purpose-building a new visiting venue through the re-design of the enclosed plaza. To some extent, Option 3 is a hybrid that incorporates the re-purposing of the existing Lower Level visitation space (Option 1) and the conversion of the courtrooms to visitation (Option 2) in conjunction with developing a new entrance for the CRDF.

Regardless of which option is explored in greater detail, the focus should be on creating a more visitor-friendly environment through the selection of normative furniture, colors, natural light, and multiuse approaches to the large spaces. The following are images of visiting spaces that promote normalization regimes.





The opportunities for creating additional programming spaces are many and varied. From a design perspective, most are relatively easy to accomplish and will have a life beyond that of the CRDF as a women's facility. The first requirement is that the policies, procedures, and mostly the practices that are currently used to operate the CRDF as a women's facility are thoroughly examined and altered to become more gender responsive. The following list is suggested for further examination to achieve additional programming capabilities.

1. Conversion of the existing non-contact visitation areas on each housing unit floor to counseling and multipurpose rooms.
2. Create a new culinary arts classroom in the food preparation area.
3. Create a new Visits and Program Center through one or more of the following options:
  - a. Re-purpose the existing visitor waiting/processing area to a new contact/family visits center.
  - b. Convert the existing courtrooms to a visitation center and the office space to an apartment-based overnight mothers and babies center and additional classrooms for general and vocational education and offices.
  - c. Construct a new Visitation Center in the plaza area at the entrance to the complex and re-purpose the courts areas for program spaces.

Most of these suggestions can be accomplished with a minimum of disruption to the current operations and all of these options have a useful life beyond the use of CRDF as a women's facility.

## Housing Areas

The CRDF is defined by two housing towers with shared, connecting space linking the towers. The facility was designed at a time when direct supervision was in a second decade of application in pretrial facilities. Most of the basic principles used in the design of dynamic supervision are evident and provide a significant advantage to transforming CRDF to an acceptable interim women's facility. The underlying problem that prevents a more comprehensive improvement in the housing areas is the level of crowding that is permitted.

The cells were designed for single occupancy but double occupancy has existed for so long that the practice is accepted as the original basis for design. However, the cells are approximately 70 square feet and that virtually universal standard for best practice cannot be met with double occupancy. To exacerbate the housing challenge, bunkbeds have been added to many dayrooms further taxing the showers that were originally designed on a 1:8 ratio. Also, in some housing units, at least one cell has been decommissioned to serve as a toilet for the women who are assigned to a bed in the dayroom. Some of the outdoor recreation courtyards adjacent to the dayrooms have been converted to separate dining or program spaces to relieve the pressure in the housing units.

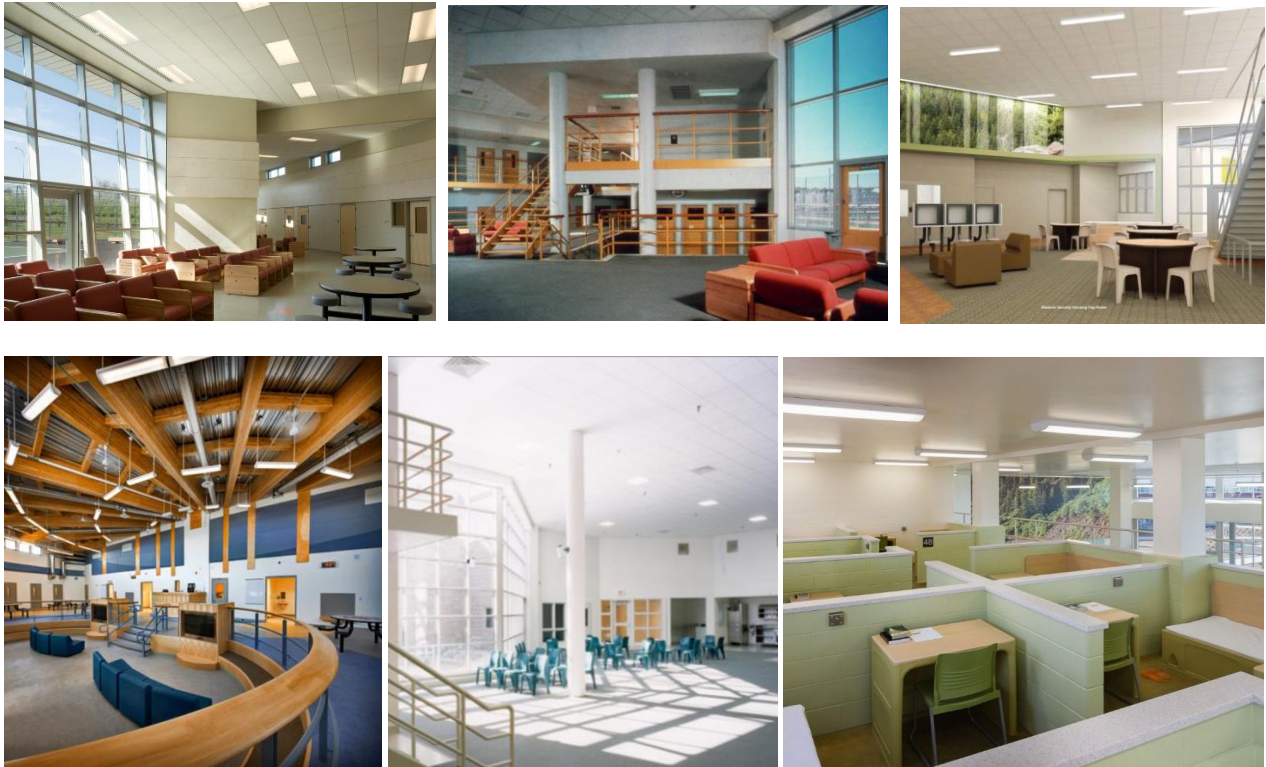
As noted, without a significant reduction in the population, very few major changes can be done to the housing units that would truly transform these spaces into "normalized" environments. If de-population can occur, some of the following suggestions should be evaluated:

1. In the housing units using dormitory-style accommodations, develop individual cubicles that would provide a greater sense of personal privacy.



2. Within all housing units, remove the supplies and old furniture that is occupying the room intended for multipurpose activities. Remove the same excess equipment in the dayroom areas.
3. Within the dayrooms through the creation of visually transparent cubicles, create group and private meeting spaces. These can be designed much like those in open office environments where glazed-sided meeting rooms are provided.
4. Create within the dayroom area fixed serving lines for the food service function while also designating dining areas with moveable furniture.
5. Re-design the “outdoor courtyards” with operable windows that provide a view to the outside and can be transformed for a variety of uses from programming, leisure activities, and/or dining.
6. Reduce the size of the open officers’ stations in the dayrooms to promote more movement in the dayroom and interaction with the women.
7. Alter the lighting approach to eliminate the high lumens fixtures and replace these with decorative, lower-level lights.
8. Develop and implement a color scheme for all of the units that is based on less “institutional” colors.
9. Replace all furniture with non-fixed, moveable pieces while also replacing all carpet and in some units, installing carpet.

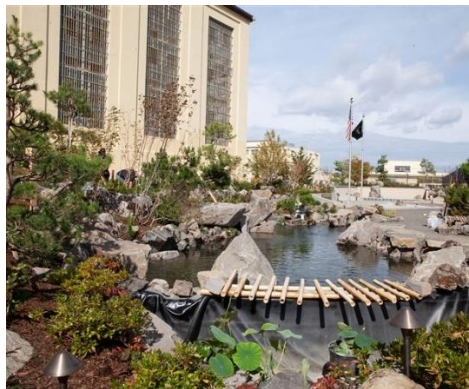
Ideally, these and other changes could be undertaken a floor at a time but the ability to accomplish and significant changes in the housing units with depend on a significant de-population of CRDF.



## The Natural Environment

As an urban facility that is “land-locked” very little opportunity exists to actually incorporate the outdoor features of a campus. Instead, any improvements that include natural elements will be “found spaces” and/or design applications to existing walls, ceilings, and floors. For example, at virtually no cost a flower and hanging basket program could be implemented and perhaps supplemented through a horticulture program developed on a new “green roof” or in the outdoor courtyard space between buildings in the complex.

An immediate opportunity is to use the only green space that is accessible to the housing units. This space will require modifications to the inmate movement policies but the need to incorporate true outdoor experiences for the women cannot be emphasized enough. Even though the space is small (approximately 8-15,000 square feet), the space has potential for passive outdoor activities all seasons of the year. A comprehensive landscape plan should be developed for a multiuse outdoor learning and recreation environment that is useable during days and evenings. While some additional security features may be necessary, these will be minimal. Some of the images below demonstrate what other jurisdictions have done with “found space” in correctional environments.



The following is a summary of some of the suggestions that could assist in incorporating more of the natural environment into the CRDF environment:

1. Prepare a comprehensive plan to provide floral accents throughout the spaces that are most used by the population and staff.

2. Develop a plan to use the only green space that is accessible to the inmates and within the secure envelope. The space should be designed for a variety of leisure activities and through additional staff, accessible to inmates for 10-12 hours per day.
3. Develop a horticulture/hydroponic program that could be located on a roof in the complex; in one or more existing housing unit courtyards; or in a portion of the previously mentioned “green space”.

## The Way Forward

The CRDF will serve as the principal women’s facility in LA County for at least a decade. If current statistics are any indication of the future, over the coming decade, 250,000 admissions will occur at this site and most of those women will spend at least two weeks in the facility. Sadly, many of these women will return, some more than once. While the LASD has little to do with how and why they will arrive at CRDF or how long they will remain, the LASD can have a significant impact on how they will be treated and what programs and services can be made available during their period of confinement. Numerous studies have acknowledged that environment does influence and impact human behavior and to this end, society has an obligation to promote and provide humane conditions, especially for those incarcerated.

The next logical steps for improving CRDF is to vet the ideas suggested in this brief paper and to expand them through a more vigorous examination of the feasibility and cost to transform the facility into as state-of-the-art re-purposed asset as feasible with a correctional life beyond a 10-year timeframe. This should not diminish the goal of ultimately designing and constructing a purpose-built facility for women in a more campus-style setting in the future. However, with an imaginative, committed focus on transforming all of the Linwood Complex to a women’s center for corrections, a valuable urban facility could result.

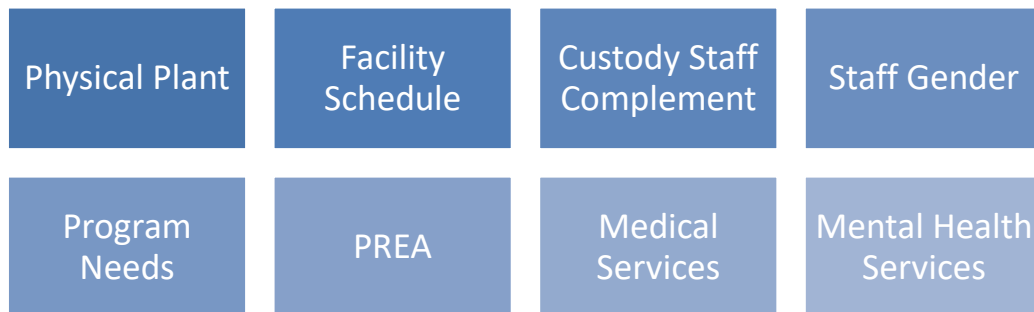


## Attachment G: Gender-responsive Staffing Considerations

Most staffing plan models used by prisons and jails were developed for male facilities and account only for custody staffing needs. That model, however, neither leverages the full staffing resources available to a facility, nor considers the unique needs of housing women. Women are relational and effective management mandates ongoing interaction; they typically use medical, mental health, and program services more intensively than justice involved males; they have program and parenting needs that differ from their male counterparts; and facilities were often not designed to address the needs of women. For a staffing plan to be useful, it must reflect all staffing resources required to operate a facility that promotes safety, dignity, and respect while encouraging positive outcomes for the women.

One approach to conducting a gender-responsive staffing analysis is to use the mathematical models that already exist to calculate security staffing needs and overlay gender-specific considerations to best understand the full staffing complement required for the facility.

The following staffing plan considerations support the development of plans that more adequately staff women's facilities when they are used as an overlay to traditional methods of calculating staffing needs.



### **PHYSICAL PLANT**

Physical plant may hinder or enhance effective supervision. While the facility may not be able to undertake capital improvements to address structural challenges, awareness of these challenges allows for mitigation with direct supervision resources. It is important that facilities consider the following to determine adequate staffing capabilities to determine if additional staff are needed due to:

- Blind spots
- Isolated areas
- Lack of cameras
- Facility size
- Population size
- Housing configuration
- Access to halls, corridors, and closets
- Inmate movement
- Program space configuration

## **FACILITY SCHEDULE**

It is important to understand the effect of the hourly, daily, weekly, and monthly activities that impact staffing resources at a women's facility. The following are key activities to review for women's facilities:

- Dining: Typically meals take longer due to the relational nature of women.
- Showers: Typically the time necessary for showers and hygiene is longer for women.
- Programming: Women have differing needs related to both attending and processing programming and trauma that requires additional staff time and supervision.
- Medical and Mental Health: Typically women have more appointments than men.
- Family Visitation: The time needed for family visitation and the intensity of supervision needs typically differ in women's facilities due to the relational nature of women and the importance of facilitating healthy and supportive connections among family, children, significant others, and the community.
- Transportation: It is important that at least one female staff be on transport teams for women. Transportation needs may be greater for women than men due to outside medical and court appointments.
- Medication Lines: Typically women have more medication needs than men, requiring more staff resources for administration and monitoring.

## **CUSTODY STAFF COMPLEMENT**

Women tend to be less violent than men; therefore, there is often a misconception that fewer security staff are needed. In fact, women's facilities may need more staff, not less, given the differing roles they play in women's facilities. For example,

- Security staff are often required to engage more frequently with women to deescalate relationship-driven issues.
- Security staff often play an important role in ensuring that women get the programs and services that they need. This may be especially true in units, such as restricted housing, mental health, and intake, as women will have decreased access to outside support and relational contact (e.g., family, significant others, and children), which may in turn increase anxiety.
- Enough staff must be available to manage movement to and from the scheduled activities.
- Enough staff must be available to help manage and supervise programs, activities, and services.

## **MALE TO FEMALE STAFF RATIOS**

In addition to ensuring that there are female supervisors and security staff on each shift, practitioners recommend that the male to female staff ratio in women's facilities approximate 40 percent male and 60 percent female. It is important to note, however, that having both professional and respectful male and female staff in the facility is vitally important to provide appropriate role models and replicate the experience women will have in the community. The recommended ratio does not diminish the role of male staff, rather accounts for same gender staff availability to address sensitive issues and provide supervision during sensitive times.

## **MEDICAL AND MENTAL HEALTH SERVICES**

Women typically use medical and mental health services at a higher rate than their male counterparts. For that reason, it is important that the facility consider the following:

- If grievances indicate pattern of long wait times or poor service
- If mental health caseloads are consistent with the appropriate caseload size determined by providers of these services
- How many women are seen by medical daily and how many are unable to make appointments due to long wait times
- How long women wait to see a medical provider for specialized care (e.g., dentists, obstetrician, gynecologist, dentist, optometrist, etc.).
- Anticipated demand for services based on classification, medical, and mental health needs

## **CONSISTENCY WITH PREA STANDARDS**

PREA standards require a number of operational practices with the goal of preventing sexual abuse and harassment and enhancing sexual safety. For that reason, it is important that the facility consider what is necessary to

- Restrict cross-gender viewing
- Restrict cross-gender searches
- Promote privacy within appropriate security considerations
- Ensure female-specific posts are considered in places where pat searches occur regularly, where privacy is needed, in visitation, restricted housing, and for transport of women
- Consider roving female staff that can be available to perform emergency searches and provide support as needed

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### ***Additional Resource***

*The PREA Resource Center, in collaboration with The Moss Group Inc., developed a webinar titled:*

### ***Developing and Implementing a PREA Compliant Staffing Plan***

*This webinar can be accessed at [www.prearesourcecenter.org](http://www.prearesourcecenter.org) in Archived Webinars.*

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## **PROGRAMMING NEEDS**

Women tend to have more intensive program needs than their male counterparts. For that reason, it is important that facilities consider the following:

- How many people are actively engaged in programs or jobs at the facility
- The level of incarcerated persons' idleness and the negative impact on safety and security
- The length of waiting lists for programming that are required by the courts or assessed need
- The length of waiting lists for programming that is desired by the women
- What program needs exist that are not being addressed and what are the accompanying staffing requirements
- Provision of programming opportunities specifically related to addressing trauma, healthy relationships, and parenting skills
- Provision of programming in restricted housing
- Criteria for the ideal program plan and the staff needed to run current and new programs to develop an accurate program staffing model

## Attachment H: Training Matrix

<b>Women's Services Training Matrix</b>	<i>Headquarters Executive Staff</i>	<i>Captain</i>	<i>Lieutenant</i>	<i>Sargent</i>	<i>Officer</i>	<i>Counselor</i>	<i>Non-Custody</i>	<i>Investigators</i>	<i>Chief Executive Officer</i>	<i>Medical Director</i>	<i>Mental Health Director</i>	<i>Clinical Supervisors</i>	<i>Clinical Staff</i>	<i>Contractors</i>	<i>Volunteers</i>
<i>Women's Services for Agency Executives</i>															
<i>Managing a Women's Facility</i>															
<i>Supervisory Practices in Women's Facilities</i>															
<i>Gender-responsive Practice in Women's Facilities<sup>1</sup></i>															
<i>Coaching Staff for Successful Work with Women</i>															
<i>What you Need to Know: PREA and Creating Safety for Women Offenders</i>															
<i>PREA and Working with Women Offenders: Building on your Knowledge to Enhance Safety (Refresher training)</i>															

<sup>1</sup> This curriculum would be an introductory training on gender responsive practice. Consider contractors and volunteers for inclusion or a modified and shortened curriculum that is customized to their role.

<b>Women's Services Training Matrix</b>	<i>Headquarters Executive Staff</i>	<i>Captain</i>	<i>Lieutenant</i>	<i>Sargent</i>	<i>Officer</i>	<i>Counselor</i>	<i>Non-Custody</i>	<i>Investigators</i>	<i>Chief Executive Officer</i>	<i>Medical Director</i>	<i>Mental Health Director</i>	<i>Clinical Supervisors</i>	<i>Clinical Staff</i>	<i>Contractors</i>	<i>Volunteers</i>
<i>Trauma Informed Practice<sup>2</sup></i>															
<i>Gender-Responsive Practice in Women's Facilities Advanced Training</i>		<i>Suggested attendees are noted below; agency specific training requirements should be incorporated.</i>													
<ul style="list-style-type: none"> <li><i>Intake and Orientation</i></li> </ul>		<i>Staff and supervisors assigned to intake and orientation.</i>													
<ul style="list-style-type: none"> <li><i>Camera Management</i></li> </ul>															
<ul style="list-style-type: none"> <li><i>Disciplinary Practice</i></li> </ul>															
<ul style="list-style-type: none"> <li><i>Use of Force</i></li> </ul>															
<ul style="list-style-type: none"> <li><i>Cross-gender Supervision</i></li> </ul>															
<ul style="list-style-type: none"> <li><i>Trauma Informed Searches (clothed, unclothed, room)</i></li> </ul>															
<ul style="list-style-type: none"> <li><i>Visitation</i></li> </ul>		<i>Staff and supervisors assigned to visitation.</i>													
<i>Basic Communication Strategies for Working with Women<sup>3</sup></i>															
<i>Advanced Communication</i>															

<sup>2</sup> Consider contractors and volunteers for inclusion or a modified and shortened curriculum that is customized to their role.

<sup>3</sup> Consider contractors and volunteers for inclusion or a modified and shortened curriculum that is customized to their role.

<i>Strategies for Working with Justice Involved Women</i>															
<b>Women's Services Training Matrix</b>	<i>Headquarters Executive Staff</i>	<i>Captain</i>	<i>Lieutenant</i>	<i>Sargent</i>	<i>Officer</i>	<i>Counselor</i>	<i>Non-Custody</i>	<i>Investigators</i>	<i>Chief Executive Officer</i>	<i>Medical Director</i>	<i>Mental Health Director</i>	<i>Clinical Supervisors</i>	<i>Clinical Staff</i>	<i>Contractors</i>	<i>Volunteers</i>
<i>Respectful and Safe Management of Relationships in a Women's Facility</i>															
<i>Strategies for Supporting Behavior Change</i>															
<b>Specialized Trainings</b>															
<i>Specialized PREA Investigations for Women's Facilities</i>															
<i>Medical and Mental Health Considerations for Working in Women's Facilities</i>															
<i>Critical Response Team Training for Women's Facilities</i>															
<i>Gender-responsive Case Management</i>															
<i>Gender-responsive Reentry</i>															

## **Attachment I: Key Discussion Points for Staff Members Conducting Intake and/or Orientation Process**

- Tell women what activity or procedure needs to take place and why.
- Briefly describe what the procedure entails.
- Reassure women that they will conduct the procedure in a way that maximizes their safety and comfort.
- Invite women to ask questions and answer them before beginning.
- Let women know when they would like to begin.
- Conduct the procedure with trauma in mind and use verbal clues throughout.
- Use words such as “bend slightly at the waist” or “widen your stance” instead of “bend over” or “spread your legs”.
- Remain aware of body language and verbal cues from the women.
- Ask women how they are doing.
- Thank women for their cooperation.
- Conduct searches in a professional manner.
- Conduct searches in a consistent manner.