

***Central California
Women's Facility
Assessment Report***

California Department of Corrections and Rehabilitation

The Moss Group, Inc.

June 2017

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Introduction

The Moss Group, Inc. (TMG), a Washington, DC-based criminal justice consulting firm, was contracted by the California Department of Corrections and Rehabilitation (CDCR) to assess safety and gender-responsive practice at the Central California Women’s Facility (CCWF). This report reflects the policies reviewed, operational practices observed and reported, and themes that emerged as of the date of this assessment. It is designed to address agency- and facility-specific strengths and challenges. This report provides recommendations to assist in continued implementation of gender-informed practice and strategies to enhance safety. See **Attachment A** for the *Summary of Recommendations*. This assessment will serve as a baseline against which to measure next steps; much of the success of this process is illuminated as response to the work is implemented and sustained.

It is important to note that one component of this assessment process was to review key Prison Rape Elimination Act (PREA) standards. This report provides feedback related to the ongoing enhancement of sexual safety; however, this process is not designed to determine compliance or non-compliance with the PREA standards. Only a formal PREA audit can determine compliance.

Methodology

The TMG assessment model has been shaped by research and evidence-based literature, practitioner experience, knowledge of organizational culture dynamics, and collaborative partnerships with federal, state, and private entities. TMG’s approach is built on nationally accepted best practice related to safety and gender-responsive practice.¹ The assessment protocol was customized to meet the needs of CCWF and provides a review of the following:

- Management and operational practice
- Formal and informal cultural norms supporting gender-responsive practice
- Alignment of practice with national standards, including selected American Correctional Association (ACA) Standards for Adult Correctional Facilities, selected PREA Standards for Prisons and Jails², and key DOJ Guidance in Restrictive Housing³.
- Alignment with federal guidance in gender-responsive practice (e.g., National Institute of Corrections (NIC), Bureau of Justice Assistance (BJA), National Resource Center for Justice Involved Women (NRCJIW))

The assessment protocol includes a review of policy, procedure, and practice in 12 domains outlined below.

Leadership and Culture	Community Engagement	Operational Practice	Human Resources	Inmate Orientation	Inmate Classification
Medical and Mental Health Services	Programming	Staff Training	Investigations	Targeted PREA Standards	After Action and Data Review

¹ Gender responsiveness has been defined by Bloom and Covington as “creating an environment . . . that reflects an understanding of the realities of women’s lives and addresses the issues of the women.”

² In this report, PREA standards are noted parenthetically, (§115.XX) when discussion is specific to requirements.

³ US Department of Justice Report and Recommendations Concerning the use of Restrictive Housing.

<https://www.justice.gov/dag/file/815551/download>

The assessment was accomplished through the following process:

- Comprehensive review of select agency and facility documents, policies, and procedures (See **Attachment B** for the *Assessment Document Request*)
- 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 a random sample of custody and non-custody staff members
 - Individual and group discussions with a random sample of inmates
- An anonymous, online staff survey sent to every staff person working in the facility

The assessment kicked off in February 2017 with a meeting between TMG and CDCR Secretary of Corrections Scott Kernan; Undersecretary of Operations Ralph Diaz, and Director of the Division of Adult Institutions Kathleen Allison, followed by a meeting of key personnel from CDCR and CCWF to introduce the assessment process and initiate the document review phase. TMG also conducted meetings and interviews with key stakeholders in March 2017. The onsite assessment was completed April 3-8, 2017, with a follow-up operational visit May 10, 2017. All CCWF staff were offered the opportunity to participate in an anonymous survey designed to measure perceptions related to safety and gender-responsive practice in the facility. The survey was distributed to all staff on April 17 and closed on May 12. Of the 1,195 staff that were provided with the survey link, 91, or approximately 7.6 percent, staff members responded. Of the responses, more than 50 percent were non-custody, non-supervisory staff⁴. Despite these challenges, the qualitative data gathered in open-ended survey questions was integrated into the thematic analysis from staff discussion groups. Due to the low response rate, conclusions may not reflect overall staff perceptions; therefore, quantitative data from this survey has not been incorporated into this report. It is notable, however, that this early data are reflective of discussions that the assessment team had onsite with staff focus groups.

TMG selects members of an assessment team from our 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
- Wendy Leach, TMG senior consultant and certified PREA auditor
- Carol Porter, TMG consultant
- Angel Quiros, TMG consultant

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

⁴ It was reported that a union survey had been distributed just prior to the TMG survey; therefore, it is possible that the representation of custody staff is low because they believed that they had already taken the survey. Re-opening the survey to increase staff response would provide valuable data.

- Tom Faust, TMG director for local government strategic partnerships
- Katy Cummings, TMG project manager
- Simone Greene, TMG project coordinator

See **Attachment C** for *Assessment Team Biographies*.

All 12 domains referenced above were assessed. The report is organized into four parts as outlined below.

- Part I: Leadership and culture
- Part II: Operational practice and training
- Part III: Intake, classification, case management, programs, and appeals
- Part IV: Sexual safety and preparation for the upcoming CCWF PREA compliance audit

Facility Description

CCWF is the state's largest women's facility. It opened in 1990 with a design capacity of 2,004 offenders on 640 acres. Statistics provided during the assessment indicated that the current total offender population was 2,924 inmates with 1,195 staff members. Approximately half of the non-custody staff are female and one-third of the custody staff are female. The facility includes four distinct yards, known as Facility A, B, C, and D, with approximately 42 acres inside the secure perimeter.

Influencing Factors

It is TMG's practice to consider major influencing factors that affect daily operations of a facility. With this information, TMG tailors the assessment approach to navigate those factors and expand methodology. Influencing factors at CCWF are outlined below. While not an exhaustive list these primary areas were raised as important considerations in successfully implementing any proposed recommendations.

Female Offender Programs and Services Mission. In July 2005 CDCR was reorganized to effectively address inmate rehabilitative and reentry needs. As a part of this effort, the Female Offender Programs and Services (FOPS) office was established to oversee programming for adult female programs designed to reduce recidivism for incarcerated women in the CDCR system. Along with the Gender-responsive Strategies Commission, the *Master Plan for Female Offenders: A Blueprint for Gender-responsive Rehabilitation* was developed and published in 2008.⁵ Key strategies in this blueprint are discussed in Figure 1. Since that time FOPS has expanded beyond its original mission.

Master Plan Strategies

5.3.1 Create and distribute a female offender master plan that provides the framework for programming and managing female offenders.

5.3.2 Design and begin implementation of a mandatory, specialized, gender-responsive training for all staff who work with female offenders.

5.3.3 Establish community-based beds to house non-violent offenders in a treatment environment that provides wraparound services.

5.3.4 Create a gender-responsive classification system for female offenders.

5.3.5 Create an Individualized Treatment and Rehabilitative Plan for female offenders that combines risk needs assessment with an individualized case management plan.

Figure 1

⁵ *Master Plan for Female Offenders: A Blueprint for Gender-responsive Rehabilitation*

In addition to oversight of programs for female facilities, the FOPS mission includes selected male facilities,⁶ three female conservation/forestry camps, community correctional facilities, and selected specialized services, such as the administration of PREA.

Since 2008, training consistent with Master Plan Strategy 5.3.2 has been designed and implemented⁷ and community beds have been expanded consistent with strategy 5.3.3⁸. CDCR continues to work toward individualized assessment driven planning using the Northpointe COMPAS, and is exploring the development of a gender-responsive classification system. This assessment report is designed to inform a new set of goals and strategies to support the department in continuing to move forward in enhancement of gender-responsive practice.

Realignment. In 2011, the governor of California enacted legislation designed to reduce the number of inmates in the state's 33 prisons to 137.5 percent of design capacity by June 2013. This initiative was seeking, in part, to stop the cycle of recidivism of low-level offenders.⁹

Prior to realignment, the CDCR women's prison population was made up of primarily non-violent offenders. The realignment required that those convicted of specific felonies that had previously been sentenced to state prison facilities be confined in local jails. Since this policy change, the male population decreased in number; however, the female population decreased more dramatically in number, and equally important, the population composition changed.

The overall female CDCR population decreased from 10,260 in June 2010 to just under 6,000 in April 2017. The charts below compare the CDCR female population from June 2010 to April 2017 by the type of crime committed: crimes against persons, property crimes, drug crimes, or other crimes. As shown below in Figures 2 and 3, the change in the female population has resulted in a shift of the proportion of women serving a sentence for a violent crime increasing from 38 percent in June 2010 to 75 percent in April 2017.

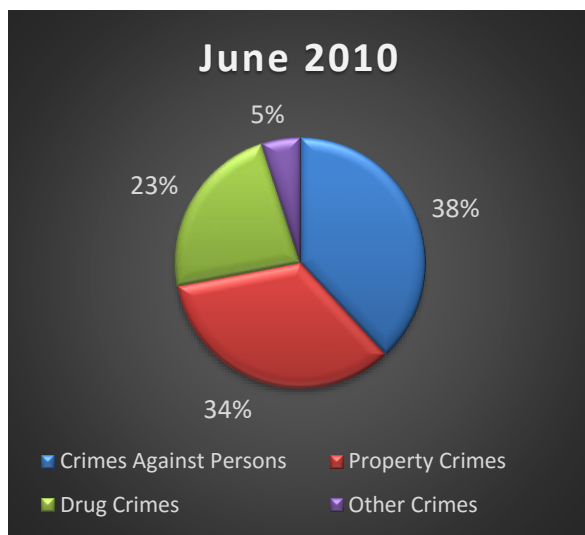


Figure 2 Crime Type 2010

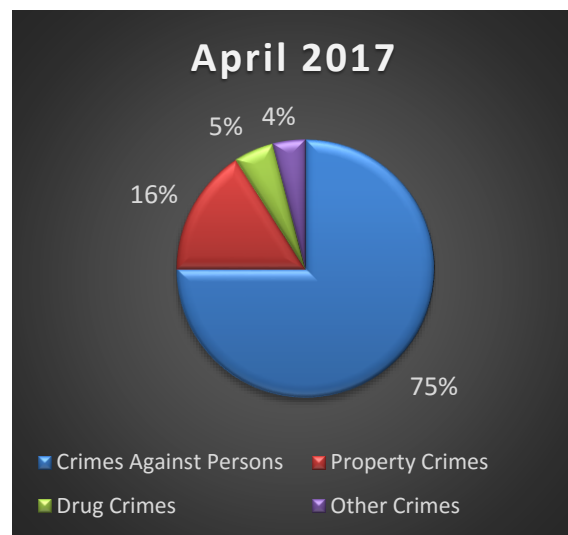


Figure 3 Crime Type 2017

⁶ Folsom State Prison, California Medical Facility, California Health Care Facility, and out of state beds.

⁷ At the time of assessment, CDCR was working to revise, update and expand training.

⁸ Alternative Custody Program, Enhanced Alternative Custody Program, and Community Prisoner Mother program.

⁹ www.cdcr.ca.gov/realignment/

The data patterns are similar at CCWF with 75 percent convicted of crimes against persons, 15 percent convicted of property crimes, and 10 percent convicted of drug and other crimes as of April 2017.

These data could have significant implications for classification procedures and programming needs of the female population housed at CCWF. However, being incarcerated for a violent crime may not result in violence while incarcerated¹⁰. Revisiting risk need assessment data would support understanding how the shift in the composition of the population impacts the resources needed to manage effectively the population. See *Inmate Classification, Case Management and Programming* for more information.

As the population numbers declined, facilities housing female offenders faced operational constraints. For example, Valley State Prison (VSP) was converted from a women's facility to a men's facility, resulting in the transfer of woman inmates from VSP to CCWF. This shift limited the housing options available for the women in CDCR custody. In addition, the agency shifted to a system of standardized staffing that did not at the time of assessment consider gender of inmates in the facility when formulating staffing complement or deployment.

Changes in Leadership. CDCR and CCWF have undergone significant changes in leadership in recent years. For instance, the governor of California appointed a new CDCR secretary in January 2016 and the associate director of FOPS was going through confirmation proceedings at the time of this assessment. The warden of CCWF retired in August 2016, accompanied by several other changes in key staff members. A new warden and chief deputy warden were appointed at CCWF approximately six months prior to the assessment and several new captains were hired. Finally, it was reported that in the last 20 years there have been 14 wardens at CCWF.

Strong Union Presence. The union has been reported to be supportive of changes that have come with the new facility administration; however, some staff remain unconvinced the changes are positive. Based on discussion with union leadership, relationship and morale with the new leadership has been among the best in the recent past, which can be largely attributed to the open-door policy of the warden and good communication and collaboration between the management team and the union.

Prison Law Office Report. On August 19, 2016, the Prison Law Office (PLO) provided a summary report of findings from interviews of woman inmates at CCWF in the context of *Armstrong v Brown* conducted between June 20 and 29, 2016. The report identified systemic problems and concluded that reforms were needed, including a gender-responsive culture change initiative, increased numbers of female line staff, a reduction in overcrowding, an independent investigation of all allegations, more programming opportunities, and more frequent random searches of staff to prevent drugs and alcohol from entering the facility.

Drug Currency. A significant drug issue within the facility was reported by staff and inmates during the assessment, which staff and inmates identified as the root of most violent incidents. The reported presence of drugs within the facility is viewed as a significant contribution to collateral problems, such as medical problems, debts, fights and aggressive behavior, psychosis

¹⁰ Van Voorhis, 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.

and withdrawal, supervision challenges, and an unstable climate. The agency and facility are aware of this challenge and actively working to address the issue. This report contains recommendations to support these efforts.

Upcoming PREA Audit. Several CDCR facilities successfully completed PREA compliance audits and are working to address ongoing compliance challenges. CCWF is preparing for an audit with the shared goal of compliance between facility leadership and CDCR FOPS.

Litigation and Legislative Outcomes. Over the last 30 years, CDCR has had court rulings upheld pertaining to violations of constitutional rights of inmates. While full review of litigation was not within the scope of the current assessment, we urge FOPS to consider implementation of related policy and practice changes through a gender-responsive lens. Notable litigation includes the following:

- *Coleman v Wilson*¹¹: A federal class action lawsuit filed in 1990 against CDCR regarding inadequate mental healthcare at CDCR institutions. This case is still ongoing and is focused on six areas: screening, treatment programs, staffing, records, medication distribution, and suicide prevention. Since the court ruling, CDCR has set forth a *Mental Health Services Delivery System Program Guide* and is provided a court-appointed special master who monitors and reports on CDCR's compliance with the guide.
- *Armstrong v Wilson*¹²: A federal class action lawsuit filed in 1994 that contested the treatment of inmates with disabilities and compliance with the Americans with Disabilities Act (ADA) standards in state prison facilities. In 2001, a remedial plan was developed to address the violations, and in 2003, a permanent injunction was placed that directed the enforcement of the remedial plan. As part of this plan, each facility is required to be compliant with federal accessibility standards, provide equal access to programs and activities, and ensure that appropriate auxiliary aids and services are provided to inmates with disabilities.
- *Plata v Davis*¹³: A federal class action lawsuit filed in 2001 against CDCR regarding inadequate medical care in institutions. The monitoring of the *Plata* and *Coleman* cases were consolidated in 2006. *Plata* and *Coleman* cited overcrowding as a primary cause of the inability to provide adequate healthcare. The response to this case led to the realignment initiative to reduce the number of inmates in the state's prisons. The courts removed medical care from prison control and appointed a federal receiver to oversee medical care reform efforts until the standard level of medical care no longer violates Eighth Amendment Rights.

CDCR Regulation Changes. Changes to inmate classification and discipline regulations went into effect Feb 20, 2017. Additionally, in November 2016, California voters passed Proposition 57 that emphasizes rehabilitation and prevents recidivism. These new regulations are outlined below.

- *Classification changes:* During an inmate's classification review process, inmate behavior and programming will be considered to determine appropriateness of placement in a lower security level facility. This change is designed to incentivize participation in programming. This new regulation also allows for a classification

¹¹ *Coleman v Wilson* 912 F Supp. 1282; No. Civ. S-90-0520 LKK JFM.

¹² *Armstrong v Wilson*; 942 F Supp. 1252; No. C-9402307 CW.

¹³ *Plata v Davis*; NO. C-01351-TEH.

committee to have discretion when reviewing violent or potentially violent offenses to allow for removal of administrative determinants if deemed appropriate.

- *Proposition 57*: The Public Safety and Rehabilitation Act of 2016 establishes new parole considerations, offers good conduct credits, and allows for additional credits for participation in programs. This initiative seeks to prepare inmates for reentry, decrease the potential to re-offend, and increase public safety.

These influencing factors have a continuing impact on culture, policy, overall operations, and inmate classification. The strengths and challenges outlined in this report at times are attributable to these factors, and ultimately can best be understood in the context of these factors.

Part I: Leadership and Culture

Leadership and Culture

Leadership. As outlined in the *Influencing Factors* section, there have been recent personnel changes in CDCR, including within the FOPS division and at CCWF. It was reported that the focus on gender-responsive women's services had lost continuity for a few years, given the variety of responsibilities of the FOPS mission¹⁴ and the priorities of the prior CCWF leadership. This seemed to be changing with renewed commitment to the philosophy at all levels.

FOPS Leadership. This renewed commitment is demonstrated by FOPS leadership working to promote engagement and collaboration among the women's facilities. The first step in this engagement was organizing key stakeholders, such as wardens, chief deputy wardens, mental health directors, and medical executives, to visit other facilities to build familiarity and understanding throughout the FOPS mission. Following these visits, the stakeholders have begun quarterly meetings to allow the subject matter experts on the women's facilities to work together to plan advancements and problem solve challenges.

These quarterly meetings provide a solid foundation for cross-facility collaboration to promote consistency and innovation in practice throughout CDCR women's services. FOPS has also committed to attending and then expanding key trainings, such as the NIC *Operational Practices in Women's Facilities* training and was recently accepted to attend a workshop sponsored by NIC and The National Resource Center for Justice Involved Women on ensuring disciplinary systems are designed with women's needs in mind. TMG supported CDCR's application to the disciplinary workshop, which was accepted, and looks forward to collaborating to identify other national opportunities to support the momentum created by recent changes.

Enhanced cross-facility collaboration is already evident in the commitment to weekly phone calls, including system stakeholders, to determine solutions for difficult to place inmates.

CCWF leadership approach. Overall, staff reported feeling confident in the new CCWF administration. The level of visibility of the warden and chief deputy were often noted strengths, as was the accessibility of these leaders when in the facility or in their offices. It was also clear that the warden's familiarity with the facility and staff enhanced the credibility of the new administration. Many staff reported that for the first time in years they believe their concerns are heard and there is interest in their perspectives. Some staff who spoke with the assessment team were quick to note that the focus groups conducted during this assessment were further indications of a change in leadership's interest in their input on challenges and solutions. The new leadership team continues to invest significant time in building trust with staff and empowering them in their roles by problem solving together and encouraging critical thinking. This is apparent in the morning meetings—characterized by a tone of collaboration and support—and through reports from managers concerning the coaching efforts by facility leadership. At the time of assessment, this approach was beginning to integrate into the supervisory ranks; however, wholesale change will take time and continued attention.

¹⁴ While out of the scope of the current assessment, TMG can provide information on the way agencies around the country structure women's services leadership and management at the headquarters level.

Relationship with medical and mental health. Another notable area of improvement is the relationship between facility leadership and medical and mental health facility leadership. The assessment team saw first-hand examples of leadership from these divisions working closely

An often-noted challenge in clinical and custody relationships is the impact of priority medical ducats and difficulties in meeting timelines being interpreted as personal insults instead of systemic challenges, as well as a lack of cross training.

to problem solve challenges and plan facility change. Leaders in both medical and mental health said they are prioritizing trust building and are working with staff to identify solutions to challenges in day-to-day communications and processes. Relationships between direct service clinical and custody staff are also reported to have improved; however, the road to improvement on the front line is a longer one, with ongoing work needed in this area. When talking with leadership and staff, it was reported that relationships varied based on facility location. Again, this is indicative that while changes are solidifying in the top levels of the facility leadership structure, ongoing efforts will be required to reach the same level of integration facility wide.

Inmate perceptions. Many inmates also noted the positive changes in leadership. But many of the inmate population felt less engaged and less informed about the changes that were occurring than in the past. The Inmate Advisory Council (IAC) has a well-developed structure and will be an important vehicle for cultural change among inmates. While engaging and empowering staff is a key component of cultural change, the actual or perceived disengagement with inmates will work against change. This is especially true when a significant portion of the population would also support and work toward positive change.

Culture. TMG uses the National Institute of Corrections' definition of culture, which defines it as "the sum of the organization's attitudes, beliefs, values, norms, and prejudices that cause an organization to do what it does." Our methodology of assessment is inclusive of those norms, leadership at all levels as well as staff, and inmate behavior we either observe through onsite work or review of written material. TMG has a long history of using organizational cultural instrumentation, such as that included in the recent assessment at the High Desert facility. However, for the purposes of this assessment, the intersection of cultural norms with the implementation of gender-responsive practice was best assessed through analysis of the data gathered through the focus group and observational data described in the section on methodology. This analysis allows for direct consideration of behaviors and practices that support effective work with woman inmates and allows for the development of practical recommendations. Culture at CCWF is outlined in four main categories: gender-responsive implementation and approach, policy implications, respectful environment, and reporting culture.

Gender-responsive Implementation and Approach. It was clear throughout the assessment that over the years, the meaning and intent of gender-responsive practice has been met with varying degrees of success and understanding. Over time, for some staff, "gender-responsive practice" has come to equate to a reduction in accountability and structure. This contributes to confusion and ineffective practice among staff. For example, to better understand a trauma informed approach—one aspect of being gender responsive—one staff person reported receiving feedback that staff should not bang on the windows in the middle of the night to get women to take down window coverings or sheets draped over bunks. While this staff member

vaguely understood that this guidance was related to being gender responsive there was little depth in understanding that past trauma for many women occurred during disrupted sleeping hours. It created a reluctance to address the issue of the coverings. In all, not fully understanding why it was important to modify this security practice, or receiving coaching on other approaches, the staff member became reluctant to engage in good security practice, which ultimately reinforced the belief that staff are unable to hold women accountable.

When asked about gender-responsive practice, most staff were skeptical at the idea that practice should be different in women's facilities than men's; however, many, if not most, were open to the idea, if someone could demonstrate that it made the facility safer and their jobs easier.

The challenge facing the new leadership team will be to navigate the careful balance between tightening up operations to create structure and accountability and increase safety for staff and inmates, while not shifting back to a gender-neutral approach to operating the facility. For a women's facility to be well run, operational practice should reflect the different risks and needs inherent in managing a female population. While leadership is appropriately focused on helping staff do the right thing, the right thing has not yet been defined operationally as it relates to woman offenders.

Policy Implications. CDCR correctional practices are governed by three main legislative or policy documents: Title 15, Department Operations Manual (DOM), and the Inmate Medical Services Policies and Procedures (IMSP&P). Each facility has DOM Supplements and IMSP&P Supplements for facility-specific policy and procedure guidelines. Implementation of policy has a daily impact on the expected behavior and norms of the facility order and of creating of a culture of safety.

CDCR has several policies related to medical services that demonstrate best practice, which include but are not limited to the following:

- DOM 54045.5 requires arrangements for women to give birth in the community and outlined proactive planning to expedite transport.
- DOM 51020.6 prohibits the use of mechanical restraints on an inmate during labor, including transport, delivery, and while in recovery after giving birth, unless circumstances exist that require the immediate application of mechanical restraints to avoid the imminent threat of death, escape, or great bodily injury.
- DOM 54045.11 indicates that restraints for pregnant women—confirmed or suspected— is restricted to handcuffs in the front; any other restraint use is required to be in consultation with a clinician.

Many staff expressed concern about gender-responsive practice because they did not feel what they were being asked to do for women was consistent with policy. "There is not a pink DOM and a blue DOM," was a phrase that the assessment team heard frequently. Some staff were frustrated by the lack of gender-specific policy, while others thought that policies should be the same for men and women. Many feared repercussions for not appearing to follow policy and voiced a desire for more coaching to implement new practices rather than receiving initial write-ups and discipline for mistakes. CDCR and CCWF demonstrate a strong value of compliance with policy. This is likely elevated due to both the reliance of correctional systems on audits, and the amount of litigation that the department has faced resulting in significant

monitoring requirements. While many staff feel overwhelmed with paperwork and documentation requirements, they are clear on the level of priority associated with these tasks.

A key component of practice that leadership has implemented at CCWF is the ongoing review of policy with input from managers and staff. This both ensures staff feel heard and builds ownership among staff, and offers opportunities to enhance consistency with best practice in women's facilities. System-level collaboration to ensure that key agency and facility policies are gender responsive and that training from the academy to the facility contains practical information about working with women are key elements of ensuring staff success. It is important that staff feel professionally guided and comfortable with policy that, where appropriate, is distinctly gender responsive. The correctional foundation of good policy is just as critical in a women's prison as in a men's. It's often a misunderstood area of implementation with staff and can create frustration and a misguided understanding of gender-responsive practice if not communicated well. While many policies remain gender-neutral, staff need to understand the policies that have guidance more specific to working with women. Throughout this report policy will be discussed in key areas where gender-responsive considerations are paramount to safety.

Both staff and inmates report a desire for consistency and accountability, which are perceived to be lacking across shifts and yards and contribute to safety concerns for all. Culturally, most who live and work at CCWF define accountability as punishment rather than responsibility.

Reporting Culture. Recent research by Allen Beck indicates that staff sexual misconduct is correlated with measures of disorder (fights, fear, weapons, gang activity, lack of staff, possessions stole, excessive use of force, lack of rule enforcement) in a facility¹⁵; this disorder is not only a barrier to trust but also reporting. In facilities with high levels of disorder, emotional, physical, and sexual safety are not believed to be valued, eroding trust in systems designed to support safety. The assessment team identified a variety of themes around factors of disorder and see leadership working both to address the disorder and build trust. The lack of outlets to report issues of safety to staff and resulting misuse of existing mechanisms is an opportunity for continued trust building.

From the outset of assessment activities, stakeholders at all levels noted concern about the rise in reports of sexual abuse and harassment, known as "PREA reports"—and the sharp increase in the number of women on one-on-one observation because of self-harm or risk of suicide. There are a variety of reasons that women appear to report sexual abuse, harassment, or risk of harm to self at CCWF. Overall, it appears that women use these reporting mechanisms not only when they are a risk to themselves or experience sexual abuse or harassment but also when they feel unsafe because of physical threats, emotional threats, economic threats, to get out of a situation where they feel unsafe, or to maintain or end a relationship.

While sexual safety is always a topic that we must be concerned about in populations of women, due to their histories of dangerous and dysfunctional relationships and use of their bodies for survival, among women at CCWF, issues of physical safety and economic safety or debts seemed more pressing. The need to address issues of unhealthy relationships and domestic violence exist, and fears of verbal and physical abuse, bullying, extortion, physical

¹⁵ Beck, A. J. (2015) Staff sexual misconduct: Implications for women working in corrections. *Justice Research and Policy*, Vol 16(1), p. 8-36.

violence and victimization were additional themes in inmate discussion groups. For some, it is likely that sex is a currency; however, the more significant currencies in the facility seem to be drugs, canteen, and aggression or enforcement. Overall, women report feeling powerless to stop the violence and many do not feel that staff will protect them. This theme was apparent in staff and inmate focus groups, discussion of disciplinary practice, and reviews of grievance data. “PREA reports” and reports of being a risk to oneself are effective ways to find safety because they elicit an immediate response and attention from leadership when use of the appeals system, directly asking for help, or trying to protect oneself fails.

At the time of assessment, there were many women on one-to-one suicide watch. While not part of the assessment protocol, assessors onsite were concerned about the facility’s practices related to suicide prevention. For example, assessors observed staff sleeping and inappropriately documenting required checks during one-on-one suicide watches. While our team included an expert in this area, a thorough review was outside the scope of this initiative. For these reasons, TMG will recommend a review of policy, procedures, and practices in this area. Specific to reporting culture, while every report of suicidality must be taken seriously, our observations indicated that some women may report that they are a risk to themselves to address safety concerns other than suicidal ideation (e.g., drug debt, unhealthy relationship) because the facility response is perceived to be more timely.

This component of culture indicates that other systems in the facility intended to promote safety are not working, and for that reason women must find other ways to survive. The longer this persists, the less women trust facility staff and systems to keep them safe, and the more likely staff at all levels and even leadership are to become suspicious of the validity of reports of sexual abuse or harassment and reports that one is a danger to herself. Drug and alcohol abuse and the associated problems (debts, instability, tension, violence, withdrawal) are widespread and appear to be the root cause of many of CCWF’s challenges. For example, when an inmate was asked what would happen if a woman reported that she owed a drug debt and was afraid and needed help, her belief was that she would be drug tested and placed in C/C. While accountability for violations is important, this does not resolve the safety issue. The methods that elicit the quickest and most substantive response are reports of sexual abuse, sexual harassment, or risk of harm to self. Focus groups, onsite discussions, and preliminary staff survey data all indicated that while the code of silence among staff is reported to vary from person to person, it is strong among the inmate population. Many staff also recognize that women do not feel safe due to issues related to drugs or bad relationships and note that women fear retaliation and therefore often will not seek help.

Understanding the root problems that lead women to use certain mechanisms for safety concerns other than that which they were intended for through collaborative and focused problem solving would promote safety, build trust with the women, and help to alleviate staffing concerns.

Overall, staff were not observed to engage productively with the women. Several factors may play into this, including reluctance to interact due to a lack of understanding of how to engage appropriately, lack of staffing resources, or lack of expectation that such interaction happens. To create safety and a reporting culture, inmates must be willing and able to talk with staff about concerns whether those concerns entail a need for sanitary products, extortion through cellmates “charging rent,” sexual abuse or harassment, or issues with drugs. Throughout the

course of the assessment, very few woman inmates could identify a staff person they could talk with if they were concerned for their safety.

Respectful Environment. Respect was a key topic of discussion for staff and inmates. It was reported that leadership has demonstrated more respect for staff since the transition. Many staff report that interactions with other staff are respectful; however, there were some challenges between clinical and custody staff, as well as pockets of other staff. Some staff are less trusting of each other, which contributes to a culture of disrespect. Respect between staff and inmates appears to be challenging in both directions. Many staff report that inmates are disrespectful to them and to other inmates, and many inmates report that staff are disrespectful to them. Some inmates reported concerns of disrespect among inmates. Assessors observed this disrespect many times throughout the course of the assessment. For instance, profanity was rampant among staff, among inmates, and between staff and inmates. Neither inmates nor staff appeared to be held accountable for this language, which contributes to a less professional and more tension-filled environment. While the current leadership values a strong reporting culture, and changes are evident at the top levels of the facility, it will take time and intentional action to anchor an environment more responsive to women.

Leadership and Culture Recommendations

Agency

- Revisit the FOPS Strategic Planning process and implement a structured approach to updating or developing short-, mid-, and long-range goals through a facilitated large and small group process. A dynamic and “working” strategic plan can be an effective tool to organize all the recommendations accepted in this report and additional priorities of the FOPS. We recommend a model of strategic planning that is action oriented with a mechanism to document progress and that builds on current goals of the FOPS.
 - Engage stakeholders from CDCR women’s facilities to update the FOPS mission and vision statements.
 - Establish a small working group within a strategic plan, or collaborate with facility stakeholders, to identify opportunities to revise policy at all levels by addressing at minimum policy related to the following:

▪ Intake	▪ Staffing
▪ Orientation	▪ Transportation
▪ Classification	▪ Training
▪ Use of Force	▪ Cross-gender Supervision
▪ Searches	▪ After-action Reviews
▪ Property	▪ Medical and Mental Health
 - The following contacts have undertaken strategic planning processes, such as that described above and are available to share their experiences should you want more information on practical implementation.
 - Dr. Wendy Williams, deputy commissioner, Women’s Services, Alabama Department of Corrections, Wendy.Williams@doc.alabama.gov
 - Gwen Norville, deputy secretary, Division of Adult Correction and Juvenile Justice, gwen.norville@ncdps.gov
 - Jane Marquardt, J. D., vice chair, Management and Training Corporation, Jane.Marquardt@mtctrains.com
- Consider adding representatives from the Division of Rehabilitative Programs (DRP), CDCR mental health, CDCR parole, and The Women’s Health Initiative to the quarterly

FOPS meetings to promote integration with FOPS and collaborative, cross-division problem solving.

Facility

- Re-open the staff survey to gather additional data so that the results of the survey may be analyzed.
- Update the facility mission and vision and create an implementation plan consistent with the FOPS strategic plan for ongoing improvement of gender-responsive practice and safety to ensure that both staff and inmates are clear on facility priorities and direction.
- Continue trust building between clinical and custody staff by providing opportunities for cross-division collaboration, training, and problem solving.
- Consider supporting facility leadership team development through shared reading and discussing key resources in organizational change and transition management to support ongoing development of trust and consistency. Facilities that TMG has worked with on culture change have found value in resources such as the following:
 - *Managing Transitions, Making the Most of Change* by William Bridges
 - *The Five Dysfunctions of a Team* by Patrick Lencioni
 - *Leading Change* by John Kotter
- Engage facility leadership in creating a deliberate strategy for professional development of supervisors to enhance their coaching and mentoring skills. See *Gender-responsive Training* for more information.
- Ensure that changes to policy or practice are formally communicated and reinforced informally through routine meetings, informal interactions, posters in staff and inmate areas, coaching, and follow-up to ensure implementation for staff and inmates.
- Continue to create a culture of inclusion, collaboration, and respect among clinical and custody staff, through cross training and continued relationship building through Interdisciplinary Treatment Teams.¹⁶
- Identify strategies to engage women productively through the IAC, when appropriate, regarding changes to policy, including gathering feedback on proposed changes prior to the changes taking effect, providing information on decisions, and engaging the IAC in understanding the effect of the changes after implementation.
- Formally articulate how changes related to gender-responsive practice and PREA standards enhance safety and represent good correctional practice.¹⁷
- Provide clear expectations to staff and inmates regarding professionalism and respectful language and actions through staff training, supervisory development, inmate orientation, and day-to-day interactions.

¹⁶ While all sections can benefit from this work, the agency and facility specifically asked for recommendations in this area. Models for promoting this interaction could be repeated with other sections.

¹⁷ Methods may include the following: a) leadership attendance at shift briefing, b) presence at inmate orientation to share expectations for safety, c) targeted discussion and observation of sexual safety and PREA practice during rounds, d) provision of information through skill-based scenario trainings that allow the opportunity for facility leadership to clarify what implementation of gender-responsive best practice involves for all staff members, e) using the IAC as a vehicle to obtain feedback on strengths and challenges specific to gender-responsive practices and inmate reporting, f) convening a staff workgroup to obtain feedback on strengths and challenges specific to safety practices and reporting.

- Identify clear consequences for behaviors that demonstrate a lack of respect and clear avenues of reinforcement for behaviors that are respectful.
- Engage inmates and staff members in identifying and resolving barriers to reporting through surveys, informal conversation, and discussion groups.
- Revise post orders to include expectations specific to ongoing positive interaction with the inmate population.
- Convene a multidisciplinary team to review cases referred for sexual abuse, sexual harassment, or concern of suicidality or self-harm to determine if there were other presenting safety concerns that could have been managed to prevent elevation to these levels.
- Institute a comprehensive contraband control plan to address the drug problem and resulting currency and safety issues. The plan should include the following at a minimum:
 - Enhancement of random and purposeful searches of persons entering the facility to include staff, contractors, and volunteers
 - Review of mail procedures and effectiveness of mail searches
 - Enhancement of random searches of inmates, inmate property, and housing units
 - Review of the amount of property inmates may possess
 - Frequent and random K-9 usage, including walk-throughs near inmate property, staff vehicles, housing units, programming areas, and inmates and staff
 - Change in facility response to drug use and admission and how safety concerns related to drugs are managed
 - Substantive and accessible drug treatment for women as a priority program
 - Use of investigative reports on drug interdiction to assess points of entry and preventive task assignments
 - Creation of a drug team task force to meet regularly, create focused plans based on data and intel, and follow up on plan execution
- Conduct a procedural review of suicide prevention, detection, supervision, and continuity of care practices that addresses the following at a minimum:
 - Staff awareness and understanding of triggers, such as after receiving bad news, court appearances, or anniversaries or event dates
 - Education that inmates receive on how to reach out for help, including inmates in segregated housing
 - Prevention methods, such as considering hanging hazards; bed tents or other barriers to viewing and supervision; drug trade ramifications, such as hoarding for overdose; significant amounts of property that are difficult to search; mental health screening processes and on-going check-ins with inmates; and staff awareness of behaviors that indicate concern
 - Programming and clinical interventions to address suicidality and self-harm
 - Multidisciplinary team management of suicidal inmates
 - Suicide watch procedures that include appropriate documentation of checks
 - Policy and training specific to prevention, detection, and response of suicide and self-harm

Part II: Operations and Training

For a women's facility to accomplish its mission effectively, operational practice and training should reflect the different risks and needs inherent in managing a female population. Since August 2016, CCWF leadership has had to focus on tightening up operational practice and enhancing the alignment of practice with policy. It is a careful balance to enhance accountability without losing sight of the elements needed to ensure a women's facility promotes safety, dignity, and respect for both staff and inmates.

Operational Practices to Enhance Safety

The term operational practice as used in this report refers to processes that are critical to the day-to-day safety and security of the facility that are grounded primarily in security functions. For example, medical care represents a service provided to inmates, while the transportation of inmates to medical appointments would be an operational practice. There are many processes that are gender neutral but some are best implemented with specific gender-responsive consideration. There are six major areas in which the facility would benefit from enhanced focus as leadership and staff work to continue to implement gender-informed strategies to enhance safety, as shown in Figure 4.

- Continued attention to mitigate overcrowding and design issues inherent to the physical plant of the facility
- Ensuring adequate staffing and supervision strategies are consistent with promoting safety for a female population
- Safely and appropriately employing use of force procedures with a female population
- Management of property and searches to promote safety, dignity, and respect within established security procedures
- Employing fair and consistent discipline and sanctions
- Continuing to formalize the facility schedule to ensure smooth daily operations for staff and inmates



Figure 4

Physical Plant. The facility physical plant design relative to sightlines and effective supervision, as well as modifications that have been made to accommodate the population size, such as housing eight women per dorm cell, were often noted safety concerns by both staff and inmates. The physical plant issues at CCWF are further outlined below and include discussion of blind spots and isolated areas, housing unit design, privacy and personal space, and environment.

Blind Spots and Isolated Areas. At the time of assessment, there were few cameras at CCWF.¹⁸ CDCR was pursuing funding to install a comprehensive system of cameras, which would be a

¹⁸ Eight cameras within CCWF and 18 cameras within Prison Industry Area.

significant enhancement to security practices, preventing sexual abuse and violent acts, and promoting positive cultural change and accountability. There are several interim solutions that can enhance safety and security until the camera system can be installed. Additionally, there are important considerations to prepare for installing cameras. Engaging staff to identify and document all blind spots and isolated areas throughout the facility will help ensure that cameras are used where they are needed and other less expensive solutions are used as appropriate (i.e., mirrors, ensuring that doors are secured, rearranging equipment and furniture, adding windows to solid doors, and providing direct staff supervision). See **Attachment D, Operational Photographs**, for recommendations related to isolated areas and blind spots in the facility.

Blind Spots and Isolated Area Recommendations

Agency and Facility

- Long Term: Equip the facility with a comprehensive video surveillance system and set camera installation up for success through the following:
 - Engage facility staff in identifying areas where cameras are needed to mitigate security concerns and ideal sight lines for cameras.
 - Communicate the purpose of camera installation to both staff and inmates as a tool to enhance safety. This is an important and often overlooked opportunity when installing a new comprehensive camera system throughout the facility. A good communication plan in rolling out this practice will save hours of time in explaining how and why the cameras are being installed, how they will be used, and who the staff will be who monitors the cameras.
 - Provide training and coaching for staff to adequately monitor cameras and assist leadership in incident reviews and review of footage for unusual or concerning events.
 - Consider privacy concerns for woman inmates, such as privacy in bathroom, changing, and shower areas. Communicate the privacy practices to the population consistent with PREA standard §115.15.
 - Ensure that policy supports the effective use of cameras by addressing the following:
 - Monitor and frame per second settings that reasonably allow for effective monitoring
 - Understanding of recording and review capabilities and strategies for use of cameras, such as real-time monitoring, recording for investigatory purposes, and ongoing review
 - Privacy implications for woman inmates that include reasonable expectations of privacy in bathroom, shower, and changing areas, as well as prohibiting cross-gender viewing via camera monitoring
 - Defining who has the authority to
 - Set placements, presents, camera definition, and ongoing review
 - Review video
 - Authorize video use for training purposes
 - Ensure maintenance work orders are prioritized and completed
 - Outlining maintenance considerations, such as testing for operability and preventative maintenance monthly or weekly and logging results
 - Maintaining camera inventory for temporary replacements

Facility

- Short Term: Identify and photograph all blind spots and isolated areas. Some systems find it helpful to create a binder for each building, containing pictures of all blind spots to educate staff on areas of concern to be closely monitored. In addition to providing an immediate resource identifying areas for enhanced staff monitoring, these binders will allow facility leadership to prioritize camera resources as they become available and identify areas where mirrors or other measures, such as putting windows in solid doors, re-arranging furniture or equipment, or increasing staff rounds in vulnerable areas.
- Ensure windows throughout the facility in rooms, cells, offices, classrooms, and day rooms are not covered with blinds, postings, or furniture.

Housing Unit Design. Overall, the physical design of the housing units allowed for continuous personal contact and interaction between staff and inmates in common areas. However, supervision of women in the rooms in the wings of general population housing units made ongoing interaction and supervision challenging, if not impossible. The photo in Figure 5 depicts the difficulties in viewing dorm cells, laundry rooms, and day rooms from the officer's station.

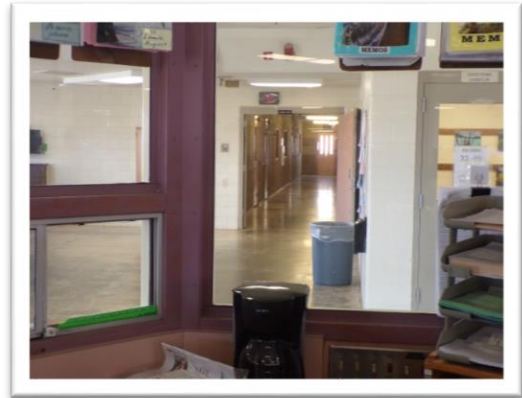


Figure 5

Units 503 and 504 presented different challenges. The populations in these units represent inmates in reception or are designated special population inmates and consist of cells. While the layout does promote interaction between inmates and officers on the floor, review of the level of security of these units, including weapons assigned to the control officer, is warranted given the general overall risk level of female offenders, and the level of trauma and mental health concerns in the population.

Many housing units at CCWF are composed of dorm cells housing eight women. A consistent theme throughout the assessment is that the close quarters and lack of privacy in these spaces pose challenges to physical, emotional, and sexual safety. The amount of property and existing storage solutions also raise concern about the potential to hide contraband and hanging hazards, as shown in Figure 6.



Figure 6

Some challenges were present in dorm cells related to privacy. Toilet and shower doors are designed to provide adequate privacy while allowing for viewing of inmates' heads and feet to ensure basic safety and security. However, it was observed that women often covered bathroom door windows and openings, as shown in Figure 7.

Tenting of beds was another often-observed practice, as shown in Figure 8, that presents safety concerns by making supervision difficult. While the covering may be related to concerns about viewing while using the toilet or showering, as some incidental viewing may occur, it may also indicate that women are looking for solutions to find personal space. Staff reported that women will often ask to come out of the dorm cell and spend time in the day room to get some space from the closeness in the room. Many staff stated that giving that space can often prevent escalation of conflict.

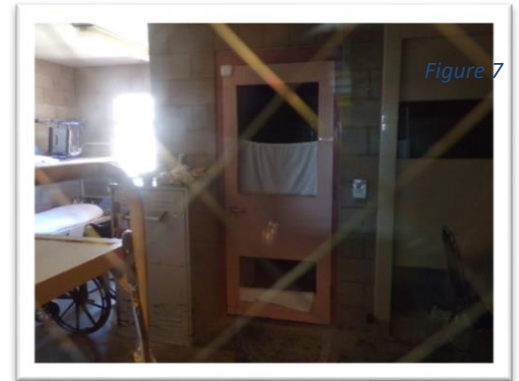


Figure 7

Housing Unit Design Recommendations

Facility

- Mitigate blind spots by securing doors when areas are not in use, such as closets and laundry areas, and adding windows to solid doors.
- Review security patterns of checking hallways, bathrooms and rooms or beds in areas with visual barriers.
- Review use of convex mirrors to mitigate blind spots.
- Increase security by ensuring that women do not cover windows and doors or tent bunks.
- Consider creating space within housing units to be designated as de-escalation areas where women can access a quiet and private space, within good security parameters to decompress, prevent conflict escalation, and allow women space to process information from treatment or groups.



Figure 8

Figure 8

Environment. In addition to physical design, the environment within the housing unit is important for reasons of security and promoting a culture of hope, pride, and responsibility for maintaining the space among staff and inmates. Addressing the following could positively impact safety and facility culture:

- The level of cleanliness of the facility varied widely. Building 805 was clean and well maintained while the housing units were often not clean or well maintained. A-Yard appeared to have the most significant sanitation challenges; however, women throughout the facility noted a desire for more and better cleaning supplies. See Figure 9.
- Paint throughout the facility was chipping or peeling, and graffiti was apparent on walls and in cells.
- The facility varied in the degree to which space included murals¹⁹ and motivational messages.



Figure 9

¹⁹ There are reportedly concerns about having inmates create murals due to the potential for gang symbols to be integrated. Review of designs prior to creation or purchasing posters are two ways to mitigate that concern.

Environment Recommendations

Facility

- Evaluate the cleanliness of the facility by unit and engage staff and inmates living and working there in improving sanitation.²⁰
- Consider a weekly review of housing unit cleanliness by an assistant warden or captain and providing an incentive to the cleanest unit.
- Consider repainting in necessary areas and removing graffiti.
- Ensure woman inmates have access to effective cleaning supplies and the time available to use them.
- Identify ways to display positive and motivational messages for women throughout the facility.

Staffing and Supervision Strategies. At the time of assessment, CCWF operated under a system of standardized staffing that set the number of posts and post locations. Local administration is not authorized to deviate from the standardized staffing plan without approval by CDCR headquarters. Reviews of the current model may be requested in response to changes in standardized staffing pattern factors, such as facility design, security level, mission, and programs. At the time of assessment, approximately one-third the custody staff were female. The limited number of female staff compared to the number of gender-specific posts can make it challenging to meet the basic expectations of privacy for a female facility.²¹ At the time of assessment, CCWF had 26 BFOQ posts as outlined below.

- Visitation: 4
- Segregation: 2
- Education and Vocational Services: 2
- Work Change: 5
- Transportation: 6
- Work Crew Escort: 1
- Receiving and Release: 6

It is a clear strength that BFOQ posts are identified to monitor women when transported offsite and areas where women are to undress. Further, DOM and CCWF supplements require female officers to conduct searches, consistent with PREA standard §115.15. Generally, clothed body searches were reported to be conducted by female officers and this was observed.

At the time of assessment, CCWF did not have enough female staff to allow for deployment of one female officer to each unit on each shift and one female supervisor on each shift. This negatively affects the ability of custody staff to provide supervision in a way that is appropriate to the needs of woman inmates during sensitive times, such as when women are showering, changing clothes, performing bodily functions, or addressing hygiene.

At the time of assessment, concern about staffing was reported at all levels. Staff and inmates agreed that staffing levels were too low to safely manage programs, medical appointments, movement, searches, and yard time, as scheduled. Often recreation, programs, yard, or laundry time are cancelled without notice, resulting in enhanced tension on the units. Generally, staffing plan models used by prisons and jails were developed for male facilities and account

²⁰ ACA Standards for Adult Correctional Facilities 4-4218, 4132, 4136, and 4333.

²¹ The union bargaining agreement requires 70 percent of the officer position as bid posts; 30 percent of the posts are administration placement; however, the union is also involved in placement decisions. The bid system, along with the low number of female staff, makes it difficult to ensure female staff in all housing units on all shifts.

only for custody staffing needs. Traditional gender-neutral models neither take advantage of full staffing resources available to a facility nor consider the needs of housing women (See **Attachment G**, *Gender-responsive Staffing Considerations*, for further discussion).

Women are relational and effective management mandates ongoing interaction. They typically use medical, mental health, and program services more intensively than male offenders, and their program, privacy, and parenting needs differ from their male counterparts. Woman inmates often require more one-to-one time with staff to process events and resolve conflicts. For a staffing plan to be useful, it should reflect all staffing resources required to operate a facility that promotes safety, dignity, and respect, while encouraging positive outcomes for the women.

The standardized staffing model for CDCR does not include consideration of gender differences or trauma in staffing plan development. However, there was a clear openness to understanding how to incorporate gender-responsive considerations. Historically around the country, it has been assumed that because women are less violent, women's facilities need fewer staff than men's facilities.

While there did appear to be challenges with the current staffing pattern, without a full and formal analysis it is not possible to determine what proportion of the challenges is due to number of staff and what proportion is due to deployment of staff. It is likely that challenges attributable to both exist. Example staffing challenges observed and reported at CCWF include the following:

- In the housing units, staff do not have time to interact proactively with inmates, post orders do not direct ongoing positive engagement with the population, and staff seemed overwhelmed by the number of inmates in the units to manage with the current staffing pattern.
- Staff did not appear to have clear zones of responsibility on the yards, leading to congregation of staff and a lack of movement around the yards and units to ensure appropriate supervision.
- Staff were often "re-directed" to a different area to meet staffing concerns or needs, which disrupts time for inmates to do laundry and attend yard time, which raises tensions on the unit.
- Supervisors report being overwhelmed by paperwork, which results in rounds being conducted more frequently on first shift than on second or third, and contributing to rounds being conducted less frequently.
- Concerns were reported by both clinical and custody staff. Some clinical staff suggested a job task analysis to understand current workload issues related to their own daily work.

It is important to note that in 2009, TMG conducted an NIC-supported, gender-responsive staffing analysis. Due to the realignment and resulting changes, updating this analysis would be beneficial in ensuring that staffing is gender responsive in all CDCR women's facilities.

Staffing and Supervision Strategies Recommendations

Agency and Facility

- In the context of a strategic planning process, include a complete staffing analysis, including the gender-responsive considerations outlined in **Attachment G, Gender-responsive Staffing Considerations**, to determine both needs related to number of staff and staff deployment for both custody and non-custody staff.²² Include a review of posts to determine where same-gender staffing is a necessity to comply with PREA standards, such as cross-gender viewing and supervision and camera viewing, best practices in transportation, and practices to maintain inmate dignity and privacy within necessary security parameters. Ensure that any changes in staffing enacted coincide with the relief factor.
- Update CDCR standardized staffing models for women's facilities based on this analysis.
- Explore recruitment strategies, consistent with union agreements, for female staff and consider opportunities to promote professional development among female staff. National experts consistently recommend staffing composed of at minimum 50 to 60 percent female and 40 to 50 percent male staff.

Use of Force. It is a strength that both Title 15, the DOM, and DOM supplements require staff to use the least amount of force necessary to resolve a situation and verbal commands are listed as a de-escalation tool. CDCR has integrated training and guidance in the use of verbal de-escalation tactics as a priority; continuing to enhance this focus is a key to promoting safety. Further, the practice of engaging a licensed healthcare worker if the inmate is involved with mental health services to attempt to gain compliance is another clear strength.

While women do not have the corner on having histories of physical and sexual abuse, many of the women have pathways into the criminal justice system that reflect this personal violence often being overpowered by males physically. Every effort to implement preventative measures through de-escalation is always key to promoting a trauma-informed approach²³.

It was a notable concern that over the last three years all uses of force incidents at CCWF were the result of a situation rising to "the level of emergent danger" resulting in no video documentation of the incidents.

At the time of assessment, use of force incidents had risen sharply per reports from the facility and agency COMPSTAT. The review of use of force policy, practice, and reports resulted in the identification of the following concerns:

- Clear guidance is not provided to staff regarding appropriate use of force and de-escalation techniques for use with a female population.
- Many of the incidents requiring use of force were fights. Woman inmates indicated difficulty obtaining help to prevent fights, sometimes reporting that staff stated that to intervene they needed to see "action."

²² Such an analysis would be consistent with the requirements of Penal Code 3430 to conduct "a staffing analysis of all current job classifications assigned to each prison that houses only females."

²³ 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.

- Based on a review of use of force reports provided (Units 503 and 504), use of force often inflicts injury to non-involved inmates who happen to be in the vicinity when equipment such as OC spray or weapons with wooden projectiles are used.
- The way holding cells,²⁴ as shown in Figure 10, were reported to be used has significant potential to retraumatize and escalate women based on their histories of abuse. In addition, the use of these cells creates the belief that requests for help might result in confinement in small spaces, which are at times next to the person they fear. While 15-minute checks were reported to be conducted and documented, it was also reported that women could be held in these cells for extended periods of time for a variety of reasons, such as temporary holding prior to a move, holding of alleged victims or perpetrators of sexual abuse, and de-escalation and separation of women who had been fighting.
- The department requires a detailed review of all incidents involving uses of force. A sampling showed that in each case, CCWF found appropriate force was used;²⁵ however, these reviews did not document why the incident escalated to the need for use of force, why staff chose the actions they did, nor what led up to the incident that might have allowed earlier preventive measures by staff. It is particularly important that incidents are carefully reviewed to understand the cause of the escalation. This level of review will inform corrective action where necessary and give staff an opportunity to share ideas for more preventative measures.



Figure 10

Use of Force Recommendations Agency and Women's Facilities

- Revise policy and training to explicitly outline appropriate use of force and de-escalation techniques for woman inmates.
- Revise the review process for the use of force reports and videos to include consideration of the following:
 - Requiring a detailed determination of the cause of the incident to inform leadership and supervisory staff on strengthening preventative measures to assist line staff in similar incidents in the future
 - Using information to analyze trends in shift, location, time of day, staff involved, and inmate and classification level involved to determine whether staffing, physical plant, policy, or other changes are needed for prevention and more proactive supervision

Facility

- Engage an internal or external subject matter expert, with expertise in both use of force and gender-responsive and trauma-informed practices, to conduct a thorough review

²⁴ Holding cells were approximately three feet by four feet, composed of wire metal mesh, with no place for women to sit, located near another holding cell.

²⁵ At the time of assessment there was no video available for review to determine the appropriateness of the level of force used.

on use of force practices and holding cell use. Include a review of incidents in buildings 503 and 504 to determine if weapons assigned in these units are warranted.

- Limit the use of holding cells to those situations where woman inmates are an active threat to others and work with clinical staff to establish policy and procedure to address issues such as the following:
 - Guidelines in the use of these cells
 - Consultation with mental health in cases where cells do promote de-escalation
 - Appropriate time frames for use of these cells

Property and Searches. Clothing that fits appropriately, opportunities for maintenance of hygiene, and adequate storage of items that are personal, such as tampons, make-up, or letters from home, significantly affects women's well-being. Overall, property and commissary were not reported to be problematic among the inmate population. The commissary items and types of property allowed are appropriate for the needs of diverse women, make-up is allowed, items for maintenance of personal hygiene are available for indigent women, and undergarments are available in a variety of sizes. This is an area many women's facilities struggle with because of the differences in property items that the male system approves. CDCR is commended for demonstrating a sensitivity to indigent women and the diversity of the population.

The following observations warrant further review and potential review of policy, training, or practice:

- While not a widespread concern, some women report difficulty in obtaining personal hygiene supplies, such as sanitary napkins or tampons.
- The property list has not been customized for transgender inmates, though this process is currently being considered at the CDCR and FOPS level.
- Women can purchase large amounts of commissary and receive large quarterly packages, which appeared to lead to storage problems, difficulty for staff in properly searching property, and the potential for commissary items to become a currency for "rent," to engage in sexual activity, or bargain for drugs.
- Searches, while designed to promote safety, are often powerful reminders of trauma. While facilities must carry out these procedures, doing so with the three key standards of professionalism, consistency, and being trauma informed can maximize feelings of physical, sexual, emotional, and relational safety for women. Overall, policy is consistent with best practice related to cross-gender search requirements and outlines requirements for clothed and unclothed searches. Clothed searches performed by female officers were observed to be conducted professionally. The facility now uses the low dose scanner to assist with body searches, which shows contraband more readily than a clothed pat search. There were no random pat searches observed or reported to be conducted.

Property and Search Recommendations

Facility

- Consider limiting inmate property to that which can fit in the locker and a reasonable number of photographs posted on the wall.²⁶

²⁶ Reductions in property should not include restriction of essential items, such as clothing, undergarments, make-up, or hygiene items that represent a strength in CDCR gender-responsive practice. Shopping and food packages appear to negatively impact safety and security by inhibiting searches and most likely creating a currency.

- Consider reductions in commissary and quarterly package allotments as a standard sanction for drugs and sexual activity.
- Review the frequency of searches and adjust as needed to be consistent with the risk and security needs of the population. For example, there was reported to be a significant drug problem in the facility. More frequent, respectful, and random pat searches and property searches are strategies that can assist in combatting this problem.
- Address search strategies for women and how to locate contraband, as well as respectful and trauma-informed communication techniques.²⁷
- Develop a process for supervisors to routinely observe staffs' searches and provide feedback and coaching on quality based on revised policy and procedure.

Discipline and Sanctions. The area of disciplinary practice and sanctions specific to patterns of behavior in women's facilities has been one of significant focus in the last few years by both the National Institute of Corrections and the U.S. Bureau of Justice-funded National Resource Center of Justice Involved Women. The model of analysis and action steps offered by the National Institute of Corrections training in this area is based on research and practical development of meaningful strategies and sanctions for behavior that is specific to trends in women's facilities. It is very positive that a team from FOPS has been selected to attend the upcoming national program, which will be timely to continue the review of this very critical area of practice at CDCR.

Reviewing the system of discipline and sanctions at CCWF, including Title 15 and the DOM and CCWF supplements, indicated that there are both strengths and challenges. Among the strengths, it was reported that decisions are based on individual circumstances and comparable incidents within the facility, and that, per policy and by practice, a staff assistant is assigned to non-English speaking, illiterate, and mentally or physically disabled inmates.

A high-level review of the system indicated significant challenges as it related to gender-responsive practice. The following are areas that are recommended for further review and consideration as the FOPS team prepares for the NIC workshop and action moving forward to inform change.

- The rules, expectations, and sanctions reviewed were all gender neutral. For example, visitation was restricted without consideration of the effect on the inmates' children. National best practice recommends that visitation as a sanction should be rarely considered because of the impact on children and families.²⁸
- Staff are provided with training on the disciplinary process; however, staff and inmates report inconsistency in how rules are enforced, which leads to a lack of clarity regarding what behaviors will result in sanctions and how privileges can be regained.
- Positive, pro-social, and safe behaviors did not appear to be routinely and consistently recognized or reinforced.
- It did not appear that any review of trends or themes in disciplinary data specific to population behavior were routinely conducted.

²⁷ Techniques may include but are not limited to telling woman inmates what needs to happen and why, describing what the procedure entails, allowing women to ask questions before the procedure, using verbal cues through the process, and using trauma-informed language, such as "bend slightly at the waist" or "widen your stance" instead of "bend over" or "spread your legs."

²⁸ 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.

Discipline and Sanctions Recommendations

Agency and Facility

- Prepare for attendance at the NIC workshop specific to gender-responsive discipline and sanctions. NIC will provide further guidance.
- Integrate the work on disciplinary analysis and practice emerging from the upcoming NIC workshop on gender-responsive discipline and sanctions.
- Revise policy outlining a disciplinary system focused on prevention, creating safety, and motivating safe, healthy, and effective behavior in which women who lose privileges understand how to regain them through positive behavior.²⁹
- Revise policy to prohibit placement in restrictive housing women who are pregnant, post-partum, recently had a miscarriage, or recently terminated a pregnancy, except in rare circumstances.³⁰
- Through work in the NIC workshop, define strategies to ensure through policy, training, coaching, and monitoring the following:
 - Violation codes accurately describe behaviors and sanctions are commensurate with violation behaviors.³¹
 - Sanctions restricting visitation are avoided unless there are safety or security concerns.
 - There is recognition and reinforcement of safe, healthy, and effective behavior.
 - Restrictive housing is only used when women cannot be safety managed in general population.²³
- Provide staff training on the disciplinary process³² and options to shape behavior outside of the disciplinary process to include interventions, such as behavior contracts or thinking reports that are conducted collaboratively among custody, non-custody, and clinical staff.
- Ensure that rules prohibiting consensual sexual behavior are consistently enforced to help prevent relationships that become sexually coercive.
- Implement a process to routinely review disciplinary reports for trends that will allow proactive resolution of identified problems. In reviews, consider the following:
 - Top two reasons women are disciplined
 - Top two reasons that women are placed in restrictive housing and length of stay
 - Violation codes that accurately describe the behavior
 - Sanctions that restrict visitation or program attendance
 - Consistent application of the rules
 - Themes around relationships or sexual activity

Facility Schedule. Prior to the current facility leadership, it was reported that no clear facility schedule existed in recent memory. At the time of assessment, there were schedules posted in each housing unit, which were a blend of items related to staff and inmates. While this posting is a significant improvement, the schedule did not fully inform inmates of the expectations throughout the day as it is largely restricted to meals, yard, work or school, and counts. A daily schedule is helpful to all parties, as staff and inmates can be aware of expectations without unnecessary interaction that would free up staff time to deal with more

²⁹ Benedict, A (2016). Jail Tip #3: Review discipline policies and practices. Silver Spring, MD: National Resource Center on Justice-Involved Women.

³⁰ U.S. Department of Justice Report and Recommendations Concerning the Use of Restrictive Housing.

³¹ ACA Standards for Adult Correctional Facilities 4-4226.

³² ACA Standards for Adult Correctional Facilities 4-4229.

critical issues. Unit-based schedules focused on inmate activities rather than staff duties are generally the most useful to providing structure to the day.

Schedule Recommendations

Facility

- Develop and post unit-based schedules designed to replicate life in the community, outlining what inmates can expect throughout their day. Consider elements outlined below, and include group and individual time to attend to or process any difficult or unplanned events or news by conversing with other inmates. Key considerations include the following:
 - Work
 - School
 - Recreation time
 - Visitation
 - Counts
 - Hygiene
 - Laundry
 - Movement opportunities
 - Productive leisure time
 - Mail delivery
 - Time for religious or spiritual development
 - Programming time
 - Time to make requests to officers for supplies or to address questions or concerns

Gender-responsive Staff Training

Commitment to a shared goal. With new leadership in key positions throughout the agency and facility, there were clear indications that there is a renewed commitment to succession planning, leadership development, supervisory professional development, and practical skill-based training that is gender responsive. This commitment is evident in the approach of CCWF leadership to shift focus to scenario-based training with emphasis on de-escalation and operational basics.³³ This commitment is also evident in FOPS' intention to incorporate operational practice training for sergeants and gender-specific topics for block training and alarm training that is specific to women's facilities.

Mandatory staff training. CDCR and FOPS have a history of commitment to gender-responsive training. CA Penal Code 3430 mandates training for all staff who work with women and the *Master Plan for Female Offenders: A Blueprint for Gender-responsive Rehabilitation*, promulgated in 2008, includes a key strategy to design and implement a mandatory, specialized gender-responsive training for all staff who work with female populations³⁴. In the early implementation of the plan, NIC provided a 16-hour training and curriculum to begin the work on training. Ultimately, the *Working Effectively with Female Offenders* (WEFO) curriculum was developed. WEFO introduces a foundation for work with woman inmates and begins important discussions of professional boundaries, trauma-informed practice, and de-escalation and communication techniques that are continued into the annual, eight-hour WEFO refresher training. More recently, NIC has trained 30 senior managers on operational practice. These national technical assistance events while helpful, according to participants, did not support ongoing training by the department.

TRAINING CHALLENGES

- Misunderstanding of the purpose of gender-responsive practice
- Agency and facility policy overall that are not written to be gender responsive, leading staff to question the importance of gender in defining best practice
- Inconsistent fidelity to the WEFO curriculum in training delivery and variable instructor quality have reportedly contributed to staff development, or reinforcement, of harmful stereotypes about woman inmates.
- Lack of skill-based or scenario-driven practice that purposefully connects trained information to daily operational practice
- Lack of systematic follow-up coaching by supervisors on how to incorporate trained information and skills in daily operational practice
- Lack of clear accountability mechanisms specific to incorporation of trained information into daily operational practice
- Ongoing use of WEFO curriculum, which has not been updated since 2014, leading to staff frustration with the repetitive material
- Lack of clear understanding of how to translate gender-responsive theory into practice to create and sustain best practice for a well-run women's facility

³³ CDCR FOPS leadership and CCWF leadership, including the warden through captain level, attended the NIC Operational Practices in Women's Facilities training.

³⁴ In the early implementation of the plan, NIC provided a 16-hour training and curriculum to begin the work on training.

Staff Training Recommendations

Agency

- Conduct a strategic planning activity to develop a training plan to outline an approach to supplementing existing trainings and obtaining or creating new training to address the range of necessary operational best practices and skills to contribute to a well-run women's facility. Use this "training plan" to prioritize training recommendations within this report and to include training commitments and requirements for the facility.
 - Consider engaging the CCWF Training Advisory Committee³⁵ to seek staff input periodically about training and coaching needs, as well as training effectiveness.
 - Address key levels and types of staff, such as agency leadership, facility leadership, custody staff, and non-custody staff.
 - See **Attachment E** for a list of recommended training topics by staff classification.
 - Update the DOM by adding gender-responsive training requirements to support and reflect Penal Code 3430.
- Ensure that training supplements and newly developed trainings are designed for adult learners by creating training that is explanatory, relates to participants' immediate needs and surroundings, includes case studies or real-life examples, as well as opportunity for small group discussion, role playing, scenario practice, and case review.
- Ensure that all staff training at the academy reflects the difference in male and female inmates and operational best practices for male and female facilities to set the tone and expectations for work in women's facilities as different but legitimate.
- Provide CCWF leadership ongoing training and assistance to ensure that improvements do not revert to gender-neutral best practice.³⁶
- Capitalize on in-service training as an opportunity to ensure operational training addresses well-run women's facilities. For example, the following represent opportunities to discuss gender-specific operational practice:
 - Contraband
 - Holding cell procedures
 - Searches
 - Count
 - Disciplinary
 - Property
 - Effective communication/UA
- Provide facility leadership and management staff ongoing training and information on operational best practice in women's facilities and implementation of gender-responsive strategies.
- Engage facility leadership in creating a deliberate strategy for professional development for lieutenants and sergeants to enhance their coaching and mentoring skills and abilities related to promoting respectful interaction and gender-responsive practice.
- Ensure that key staff are trained in effective camera management.

³⁵ The committee is composed of the chief deputy warden (chair), in-service training manager (vice chair), and representatives from medical, mental health, supervisors, and local bargaining units.

³⁶ A good example of ongoing training and information is the upcoming National Institute of Corrections-sponsored training on gender-responsive discipline and sanctions. This training, for which TMG supported the CDCR application, is a key component of developing systems, structures, and front-line practice that is tailored to the needs of woman inmates.

- Collaborate with the Women’s Health Initiative and CDCR mental health partners to capitalize on the trainings they have conducted for select staff to create a training for all staff in women’s facilities specific to effective communication with LGBTI inmates.
- Provide custody staff training in basic motivational interviewing skills³⁷ and strategies for supporting behavior change, such as effective reinforcement, effective disapproval, effective use of authority, and managing relationships.³⁸
- Consider applying to attend NIC Safety Matters training, which focuses on enhancement of sexual safety in women’s facilities through effective communication. Training opportunities are anticipated to be available late in 2017 and in 2018.

Facility

- Ensure that trainers who deliver any curriculum related to women's services are selected for characteristics and skills known to support success in delivering this specialized training.³⁹
- Enhance the WEFO training to connect it to operational concerns.
- Operationalize training into clear expectations for staff to ensure accountability to trained concepts and skills.
- Consider providing training for supervisors on staff coaching and accountability for gender-responsive practices.
- Consider providing key custody staff crisis intervention team training to strengthen communication and intervention approaches.
- Create training for non-clinical staff who work in clinical settings to address such issues as confidentiality, interaction, and special topics, such as refresher training regarding restraints on pregnant women.
- Create security training specific to non-custody staff that specifically discusses clinically relevant practice and explains why some procedures are different in a confinement setting than a community setting.
- Ensure that staff responsible for apprenticeships and OTJ training are knowledgeable about work with women and proficient in gender-responsive approaches.

³⁷ Open ended questions, affirmations, reflective listening, and summarizations (OARS)

³⁸ The National Institute of Corrections in collaboration with TMG created a training on enhancing sexual safety through respectful communication to address issues of relationships in women's facilities titled *Safety Matters: Relationships in Women's Facilities*.

³⁹ Characteristics and skills may include the following: credibility with staff, demonstrated ability to successfully integrate trained information and skills into daily operational practice, demonstrated training and group facilitation proficiency, demonstrated ability to coach staff in implementation of trained material, and expertise and understanding of gender-responsive research and operational practice.

Part III: Intake, Classification, Case Management, Programs, and Appeals

This section discusses key areas of practice that are foundational to good practice, such as inmate intake and orientation, classification, case management, programming, and inmate appeals process.

Inmate Intake and Orientation

Intake and orientation are critical times for expressing the facility's commitment to safety, dignity, and respect; outlining expectations; answering questions; and discussing resources.

Intake. Overall, supervisors and staff in intake were observed to be personable and professional, which provides a strong foundation to build an intake process that is consistent with women's needs. While held in Tank 4, information is provided in English (via video monitor) related to filling out forms and general operations information, which is an effective use of time and space during intake. Staff, however, were largely unaware of the content or purpose of the video. Notable areas of review that would support further enhancement to the intake process are outlined below and include process dynamics and issued materials.

Providing information and promoting safety, dignity, and respect during intake and orientation is vital to establishing confident facility staff, systems, and processes.

Upon entry to the Receiving and Release area, custody staff confirm court commitment paperwork at a desk near to where women are asked to line up and wait, which causes some concern about confidentiality and privacy related to offense and sentence information. Women are then moved through the intake process with little to no information on the overall intake process, such as the sequence, procedures, expectations, or length of time. It was also reported that women are strip searched in groups upon arrival. This practice is not consistent with trauma-informed practice or reasonable expectations of privacy in the context of safety and security procedures.

Women are assigned one-size-fits-all mumus that allow for undergarments to be viewed, do not always fit properly, and do not promote dignity, especially for transgender or intersex inmates. Women are also provided an inmate handbook⁴⁰ and a copy of the Title 15 upon intake. Provision of this information in written form is positive; however, both documents have the potential to be difficult to comprehend due to the complexity of the information, the reading level at which information is presented, and an apparent lack of clear and useful mechanisms for disabled inmates, such as low vision, deaf, intellectually disabled, or inmates who speak a language other than English or Spanish.⁴¹

Intake Recommendations

Facility

- Create a system to ensure that women know what to expect during the intake process.⁴²
- Ensure that there are provisions in place to protect privacy related to information specific to sentence and crime.
- Conduct a multi-disciplinary review (leadership, custody, medical, mental health) of the current video that is played during intake to ensure the message is current and consistent with practice.

⁴⁰ The handbook is available in English and Spanish.

⁴¹ Posters throughout the facility evidence these same challenges.

⁴² For example, some facilities have created posters to outline the steps of the intake process in simple language, sometimes using pictures, and placed them in the initial holding area to supplement staff discussion of the process.

- Ensure that the information provided on the intake video is available to women who are not fluent in English.
- Discontinue the practice of strip searching women in groups as they arrive at Receiving and Release and ensure, using privacy barriers, consistency with trauma-informed practice.
- Consider discontinuing the practice of issuing women uniforms upon intake in favor of two-piece uniforms.
- Consistent with the internal appeals audit, simplify the language in the inmate handbook to be more readable and understandable by working with education staff to revise content to be consistent with the assessed reading and comprehension abilities of the population.
- Verify that staff explain to women processes and procedures, such as searches, property assignment, and interviews, before they are conducted and provide coaching or training as needed to ensure consistency.

Orientation. Prior to the current facility leadership, there was no recent memory that formal orientation was provided by staff to new inmates. At the time of assessment, a new process was in place to provide women information specific to custody requirements. Staff report seeing benefit to this process and consultants observed inmates having the opportunity to interact with staff and ask questions, which sets a positive tone. Areas that would support further enhancement to the orientation process are outlined below and include delivery and content and PREA education.

Delivery and content. Orientation does not yet appear to occur on a regularly scheduled basis and space has not yet been identified where the orientation can occur free of interruption. During the observed orientation, women could ask questions; however, it was reported broadly that if women have questions after orientation it can be difficult to obtain answers. Ensuring that women leave orientation with a reliable contact for further questions will enhance trust in the process. Orientation was provided in English. While staff indicated that there were staff and online translator services available at intake, it was unclear what, if any, solutions were in place to ensure that the orientation process is accessible to all women, regardless of disability or English proficiency consistent with PREA standard §115.16. Orientation covered a variety of topics, including procedures when officers call “prone down” and disadvantages of using drugs and engaging in sexual activity. There are additional topics outlined below that would be helpful to include.

Orientation materials are most effective when they include images and information relevant and reflective of the lives of diverse woman inmates.

PREA education. PREA education, a separate component of orientation, is provided in the chapel, which is a comfortable environment free from distraction. The session is facilitated by inmates, supervised by staff. New inmates are provided with copies of the sexual violence awareness pamphlet and two pages of PREA information from the handbook. The facilitators are skilled in their performance, relatable for the women, engage the audience, use appropriate descriptive terms, acknowledge the topic is sensitive, and state the facility is serious about sexual safety. The department and facility is to be commended for the use of peer trainers for this orientation.

Orientation Recommendations

Agency

- Consider developing a video specific to CCWF women's facilities that incorporates voices of woman inmates, staff, and leadership to provide a clear statement of the agency and facility commitment to safety and information relevant to doing time safely from the perspective of their peers.⁴³

Facility

- Ensure that orientation is completed within seven days of arrival, except in unusual circumstances, conducted in a setting free from distractions, and tracked to ensure that all offenders or detainees receive orientation.⁴⁴
- Include a representative of facility leadership and other staff, including specialized services, such as mental health or the grievance coordinator, to supplement PREA education currently delivered by inmate peer facilitators to discuss expectations and the facility commitment to safety.
- Expand, as staffing allows, use of peer facilitators who have experience with the facility in the orientation process to supplement the discussion with their experience as is done with PREA education. Ensure that all are appropriately screened, trained, and supervised by staff.
- Create a formal orientation presentation to ensure all relevant areas are reviewed, there is consistency in information, and time is allowed for questions.
- Discuss key topics, such as visitation, grievances, telephones, property, discipline, and indigent packs, during orientation to supplement written material.

Inmate Classification, Case Management, and Programming

Custody classification and risk/need assessments are important tools to promote safety in the facility. Specifically, when the purpose is clear and the system is appropriate for woman inmates, custody and risk/need classification can ensure that women are supervised at a level appropriate to their risk and provided programming appropriate to their needs. Women have unique criminogenic needs and risk factors, such as housing safety, anger, abuse and trauma histories, family conflict, parental stress, and relationship dysfunction.⁴⁵

Classification. Approximately 75 percent of the female population is incarcerated for a violent offense—a shift that occurred because of realignment. The *Master Plan for Female Offenders: A Blueprint for Gender-responsive Rehabilitation* was published in 2008 and included a strategy to create a gender-responsive classification system for woman inmates. In creating this system, CDCR has an opportunity to revisit the purpose of the custody classification process for women, discuss assessment options, and validate and calibrate a system appropriate to the new composition of the female population. This is important because current systems may not accurately classify this population, which makes it difficult to identify the portion of women who represent serious risk to the facility and community safety.

The implementation of the Northpoint COMPAS assessments for women and women serving life sentences is a clear strength for CCWF and CDCR. The assessments include scales that are relevant to a

⁴³ TMG can connect CDCR with national examples and resources for developing facility-specific inmate orientation videos.

⁴⁴ ACA Standards for Adult Correctional Facilities 4-4291.

⁴⁵ Wright, E., Van Voorhis, P., Salisbury, E., & Bauman, A. (2012). Gender Responsive Lessons Learned and Policy Implications for Women in Prison: A Review. *Criminal Justice and Behavior*, 30(12), 1612-1632.

female population, such as economic marginalization, trauma, victimization and abuse, and dysfunctional intimate relationships. With this tool, CDCR has an opportunity to validate the COMPAS for the current population of women to ensure that the cut-points are appropriate, expand the use of the COMPAS data to inform program offerings, and begin to understand the operational implications of the shift in population because of realignment. Women who are incarcerated for a violent crime may not necessarily engage in violent behavior while incarcerated. COMPAS data can be used to clarify how the shift will affect the resources needed to effectively manage the population. In addition, expanding the use of this data can have a significant cultural benefit. Specifically, many staff did not see the value in gender-responsive training or practice due to the belief that women are all “violent” now due to their crimes and must be treated like a violent male population. Moving beyond the crime to understand the population will not only inform facility resource needs but also will increase staff ability to manage the population effectively and safely.

Custody classification developed specifically for women is an important resource in safe housing placement. At the time of assessment, the following challenges were noted:

- Custody level and classification scores are not primary factors in determining housing or program placement, which results in mixing risk levels and making it difficult to target service and supervision based on risk.
- Beyond clear enemy concerns and medical need, such as a lower bunk restriction, there did not appear to be a consistent process for considering variables important to safe placement. Placement appears to be made largely based on space, and by some indications inmate request or preference. See Part IV PREA and Sexual Safety for specific information regarding challenges to compliance with standards §115.41 and 42.
- Bed moves can be requested through any staff member and it is reported that some officers will make “courtesy moves” on the weekend. Many officers, however, report being unwilling to make these moves because they do not know the population well or have the information to ensure safe placement. The system flags enemy concerns, but there are not flags for other key safety considerations, such as sexual risk or vulnerability consistent with PREA standard §115.42. The process is inconsistent and relies heavily on judgment in the absence of data.
- In addition to the potential effects of the changing population, operational restrictions make placement difficult. It was reported that over 50 percent⁴⁶ of inmates had a violent classification and over 50 percent were classified as level three or level four. Because the custody classification systems were not designed for women, it is difficult to assess the accuracy of these classification levels without further research. Practically speaking, with the closure of Valley State Prison, CCWF and CIW remain to be the only two options for housing women at level 4, leaving few options available for women with enemy concerns beyond segregation or A-Yard general population, which entails restrictions on access to yard, movement, programs, and activities. It is important to note that staff at all levels reported segregation reviews⁴⁷ to be consistently completed and taken seriously.
- Transgender inmates do not appear to be discriminated against in program or bed placement. Placements and programming, however, are reviewed only during routine annual program reviews and it does not appear that safety is considered in program placement for these inmates. This is inconsistent with PREA standard §115.42.

⁴⁶ These data are specific to violence classification rather than custody level.

⁴⁷ Initial review within 24 hours and ongoing reviews every 30 days.

Classification Recommendations

Agency

- Consider developing a gender-responsive custody classification system that will ensure the following:
 - Predictive validity and accuracy of cut-points that differentiate custody levels for woman inmates
 - Assignment to housing units based on custody level and sexual safety consistent with PREA standard §115.42.
 - Appropriate access to program and employment opportunities
- Consider validating the COMPAS to ensure that the cut-points are appropriate to the current post-realignment population.
- Consider strategies to ensure safe placement of transgender inmates, including individualized placement reviews biannually, consistent with §115.42. CDCR reported that it was in the process of developing policy to promote safety of this population

Agency and Women's Facilities

- Consideration of the questions listed below will support CDCR in determining next steps to develop an integrated classification process that will support safe management in the facility by matching women to resources and reentry services based on risk and need. A quarterly FOPS meeting may represent an opportunity to ensure broad multi-disciplinary collaboration in the development of potential solutions.
 - What is the purpose of custody assessment?
 - How is custody classification information used in housing placement?
 - Who is going into segregation and why? How and when do they leave?
 - Who is assigned to A-yard general population and why?
 - How and when do they leave?
 - Who is going into C/C and why? How and when do they leave?
 - How is risk of recidivism incorporated into case planning and prioritization of inmates for services?
- Provide clear operational guidance regarding how classification should affect housing and bed placement decisions, program placement, work placement, and job placement to include the requirements of §115.42.
- Identify opportunities to use COMPAS data to begin to understand operational implications of the shift in population due to realignment and educate key stakeholders on the characteristics of the population beyond the crime.

Assessment-based Case Management. In addition to implementing gender-responsive COMPAS assessments, CDCR should be commended for developing the Rehabilitative Case Plan, which interfaces with COMPAS and the Strategic Offender Management System (SOMS). At the time of assessment, this process of assessment-driven case planning appeared to be new to the facility—by some accounts, implementation occurred last fall; by others, implementation is pending. It is important to develop consistent and competent practice to assist in the transition.

Discussions with a variety of staff revealed excitement about assessment and planning tools, but some hesitancy to trust the tools and their own skill sets and those of their colleagues. For this reason, while many of the elements are in place for assessment-driven case planning, the effectiveness of the tool to target programming—right person, right program, right time—is likely to vary. The reported strong

working relationship between FOPS and the DRP, as well as the collaborative CCWF classification committee represent important strengths to developing innovative solutions and next steps.

Assessment-based Case Management Recommendations

Agency

- Provide staff who are responsible for training reentry case planning, in conjunction with parole staff, to address the purpose of joint case management and assessment-driven case management; using the risk, need, responsivity model for women; addressing basic needs and safety in release planning for women; connecting needs to specific goals and tasks for women; key programs and resources; and supporting change.

Agency and Women's Facilities

- Consider the questions below to determine next steps in the full implementation of matching women to resources and reentry based on both risk and need through systems and staff empowerment. A joint meeting including both FOPS and DRP may represent an opportunity to ensure broad multi-disciplinary collaboration in the development of next steps.
 - How do we ensure that the women in programs are those that need it the most?
 - How is risk of recidivism incorporated into case planning and prioritization of inmates for program admission?
 - How might the case management process be better structured by adherence to assessment-based criteria?
 - What are the implications of CDCR efforts to develop the skillsets of counselors specific to women's facilities?
 - What are expectations for how these skills will translate into the new system of assessment and case management?
 - Are we appropriately staffed to meaningfully engage women in case planning?
 - What quality assurance and coaching needs to be in place for assessment administration, case planning, and motivational interviewing?
 - How is the COMPAS and Rehabilitative Case Plan facilitating the transition from prison to parole?
 - What new opportunities do these tools open new for collaboration with Parole?
 - What new opportunities do these tools open new for between FOPS and DRP to most effectively reduce risk and meet needs in the female population?

Inmate Programming. Accessible comprehensive programming and supervision that is coordinated to promote inmate participation supports facility safety. This helps structure inmates' time and reduce idleness, promoting success and teaching coping skills that support healthy responses to stress and issues related to incarceration. Programming also enhances positive interactions with staff members to build trust in facility systems, such as reporting and grievances. The post-realignment population includes a different proportional distribution of crime type. It is likely that this population also has different program needs, which need to be understood to manage the population effectively and safely.

While many opportunities exist in the facility, ensuring success requires purposeful matching of women to programs and actively engaging participation. This requires that program offerings be appropriate to the population based on assessed risk and need.

At the time of assessment, CCWF offered a variety of programming, services, and activities, as show in Figure 11. DRP and the Office of Community Resources are largely responsible for delivery of program and activity services, as well as education-administered recreation opportunities.

While programming delivered by the DRP⁴⁸ have defined admission criteria, including length of time to serve and assessed need, inmate leisure time activity groups (ILTAG) and self-help groups are more broadly accessible and vary based on where women are housed—general population, honor dorms, or senior living. Inmate peer mentoring, inmate tutoring, and ILTAG facilitation provide women with important positive opportunities to discover purpose and a way to give back to the community.

The programming system is complex and engagement in programs is reported to be largely voluntary, which relies on the inmate being internally motivated to participate in programming. DRP continues to work to address this by formalizing placement through case planning and has expanded offerings to address the C/C population, which exhibits consistent behavioral problems. While the programming is in early stages, CCWF and DRP are to be commended for seeing programmatic solutions to disciplinary challenges.

Community resources include self-help groups and ILTAGS that are facilitated by inmates and administered by staff sponsors. These programs are overseen by the Community Resource Manager (CRM). The CRM team is working to bring structure to ILTAG and self-help group sponsorship by clarifying the appropriate job functions of sponsors specifically "supervise, assist, and guide inmates while sponsoring such inmate group activities to promote acceptable attitudes and behavior of inmates supervised."⁴⁹ Sponsors are reported to be provided training to address tasks, such as entrance memos, special events, assignments at special events, donations, clearances, volunteer applications, ducating, timesheets, and calendars. Staff sponsorship seems to be beneficial not only to program provision but also to engaging staff in understanding the importance of programming.

While ILTAGS and self-help groups are a strength for helping women use their time well and combat idleness, some concerns were raised about a culture of exclusivity and power in these groups that may prevent access to all women. In addition, the materials of some of these groups reinforced cultural norms that do not promote safety. For example, in one group, members have a "dos and don'ts" handout and presentation. As outlined in orientation, perspectives of peers during orientation is important, and some perspective were helpful, such as,

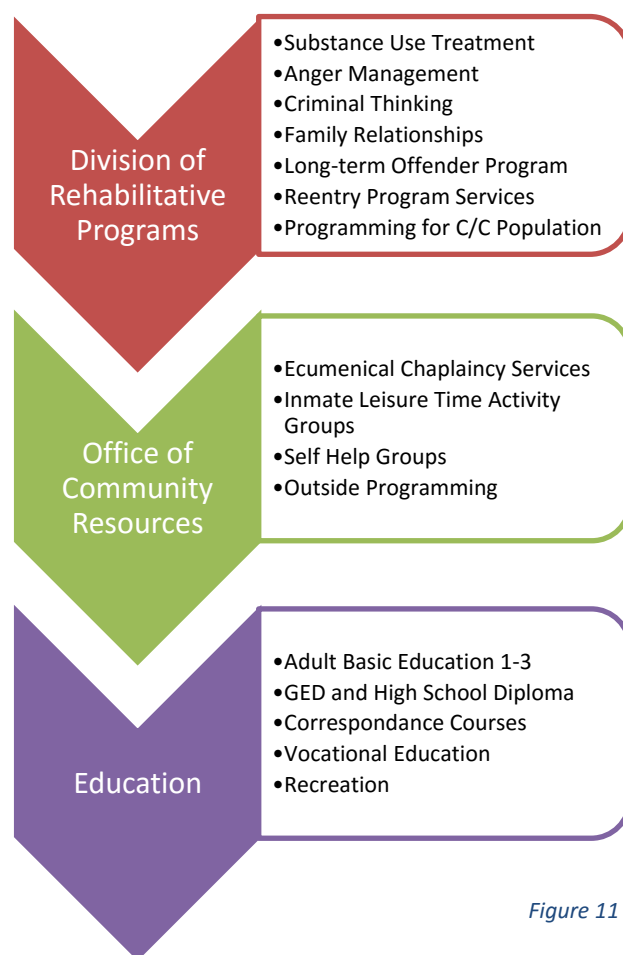


Figure 11

⁴⁸ DRP administers formal programs designed to address risk to recidivate. These programs are conducted by contractors selected through an RFP process that requires programs to be gender responsive and trauma informed. No specific curriculum is required to be delivered if it meets the RFP criteria.

⁴⁹ DOM Supplement Chapter 10, Article 3, Section 101030

"Learn how to say no." However, other perspectives were less encouraging, such as, "Don't bring the cops to your room. If the room is hit by a search it is on you. If your roommates lose property because of it, it is on you." and, "The cops are not your new best friend. If they are listening to you, it is because they are curious or nosy and messy." The latter promotes a code of silence and mistrust of staff. These groups and the peer mentoring components are overall positive and should not be eliminated. They should, however, be guided and monitored and recent changes in the Office of Community Resources provides a strong foundation for this.

At the time of assessment, programming was at a premium. There was a variety of programs and activities—some were hard to fill while others had waiting lists. Understanding what was available to whom was difficult to determine given the complexity of the system. Overall, it appeared that some women were deeply engaged and others are only minimally engaged, which creates idleness among sections of the population, which can contribute to a full range of disciplinary problems.

Inmate Programming Recommendations

Agency

- Continue to use COMPAS data to determine program offerings through a partnership with FOPS and DRP.
- Within programming, emphasize and model characteristics of relationships with healthy boundaries among the women and with staff.
- Expand offerings related to development of practical skills for coping with past trauma.
- Expand offerings, in partnership with Mental Health, to address issues of domestic violence in the facility.
- Expand offerings to include vocational programs that engage women's interest and employability for women returning to the community.

Agency and Women's Facilities

- Consider the questions below to determine next steps in developing a system of programming to reduce risk and need for the post-realignment population. A joint meeting including both FOPS and DRP may represent an opportunity to ensure broad multi-disciplinary collaboration in developing next steps.
 - Do the DRP program offerings mirror the assessed needs of the population?
 - What are the agreed-upon and well-communicated program selection criteria based on risk/needs assessment considering community risk?
 - How do women know what programming is available to them and what might support change for them specifically?
 - How are ILTAGS monitored and supported for success?
 - How are the ILTAGS and self-help groups integrated into an overall approach to supporting resilience and reducing risk and need?
 - How are women meaningfully engaged in programming by staff as a component of case management?
 - How are women placed in programming to ensure engagement throughout their sentence? What programming occurs at the beginning? In the middle? At the end?
 - Are programs being evaluated against objective criteria to determine if they are gender responsive and trauma informed? Is there fidelity to the criteria in the review?

Facility

- Conduct a review of the curriculum delivered in the C/C program to ensure that programs are evidence based or, at a minimum, promising practice and demonstrating effectiveness and fidelity to the treatment model.
- Expand program offerings to the C/C population to provide more than two hours of programming hours per day to structure their time more productively.
- Consider relocating the C/C program to a more contained space where the women can focus on regaining privileges and engage in more structured interaction and programming, and ensure coordination of programming and disciplinary sanctions to promote behavior change.
- Consider broadening the role of staff sponsorship to include a mandatory review of group materials to ensure that they promote safe guidelines.
- Consider developing a catalog or handbook describing the variety of programs across divisions, including eligibility criteria to serve as a reference for staff in program placement and a tool to engage inmate interest in programming.
- In addition to engaging women in programming through case management, develop strategies to discuss benefits of programming, available programs, and how to get involved during inmate orientation.

Inmate Appeals

At CCWF the appeals process,⁵⁰ governed by Title 15 and DOM policy, is composed of four types of written inmate communications:

- Inmate Request for Interview half sheet
- Form 22 Inmate/Parolee Request for Interview, Item or Service
- Form 602 Inmate/ Parolee Appeal
- Form 602-HC Pilot, which is specific to healthcare grievances

While the process has serious challenges, the cooperation and professionalism of the current appeals office staff in interactions with the TMG team were exceptional. A clear commitment to handling

CHALLENGES

- The appeals process is complex in the number of forms and detailed requirements.
- The grievance process is not well explained during inmate orientation.⁴⁹
- Information provided in the handbook is complex.⁵⁰
- The information provided on posters about appeals was not consistent with policy.
- Appeals forms were not consistently available across all units and appeals not on correct forms with required signatures are rejected.
- Women in segregation cannot move without being handcuffed and must rely on staff to provide a form and place it in the box on the unit.
- Appeals are rejected for a variety of reasons—some for small anomalies outlined in policy, some for apparent misinterpretations of policy—regardless of the content of the complaint.
- Staff vary in their perception of the importance of the system to facility safety and promoting a culture of cooperation.
- Sexual abuse and harassment complaints are forwarded to the Investigative Services Unit and managed as an allegation rather than an appeal; however, policy does not specify that grievances are not an administrative remedy to address issues related to sexual abuse.

⁵⁰ DOM Section 54090.1

matters correctly and following policy was evident. In the months prior to the assessment, there were significant changes made to the structure of the appeals process. The Inmate Appeals Audit report dated September 12-16, 2016, confirmed a host of problems were present. Important changes, such as installing locked grievances boxes and enhancing structure and process had been made at the time of assessment and the current staff are well-positioned to continue improvements.

Based on a review of appeals⁵¹ the top five categories of complaints were related to the ADA, staff complaints, property, disciplinary, and living conditions. A review of a random sample of grievances in these categories indicates that the inmate population perceives or experiences there to be threats to safety, dignity, and respect in the facility. Themes that emerged include appeals related to sexual harassment, physical and sexual abuse, threats, staff cursing and name calling, housing placement, and difficulty obtaining accommodations, such as bunk placement, equipment, and property.

The inmate handbook (p. 20) indicates that appeals must be filed within 30 days of occurrence unless it is an ADA claim. PREA appeals may have no such time limitation placed in them per §115.52(b). The handbook also states the following:

“[if] you are being sexually harassed or discriminated against by a staff member, you have a right to seek relief through the appeal process. However, it is strongly suggested that you bring this matter to the attention of a non-involved staff member as soon as possible for immediate resolution. Knowingly making false statements may result in a disciplinary charge...”

While it is positive to encourage inmates to trust non-involved staff to immediately respond, many woman indicated that they would not likely report directly to staff. As trust builds through improved processes there will be greater likelihood that this will be a more viable path for reporting. The appeals process, though a method of reporting, is not designed to be an administrative remedy for a sexual harassment complaint. Inmates are not seeking relief via an appeal; they are reporting so that ISU can handle the matter. The immediate threat of disciplinary action may unnecessarily dissuade an inmate from reporting. The DOM outlines requirements of the appeal system; however, it is long, complex, and difficult to understand. A review of Title 15 of the California Code helped explain why the lengthy explanation is necessary, as the rules are extensive. After document review (DOM, example appeals, and the appeals audit report) inmate interviews, and staff interviews, it is apparent that the current system, with its complexity and onerous rules, is providing more barriers for inmates than access, which is affecting the CCWF reporting culture.

Nearly every inmate interviewed by the TMG team reported confusion about how to use the appeals system.

One staff member gave an example of misuse of Form 22 and indicated that inmates should use inmate request half sheets for requests for certain jobs. Another staff member indicated that Form 22 is being frequently misused for issues that may lead to an appeal. This use is not mentioned in the inmate instruction poster that is placed next to it. It also states the requests that are “informational” should go on inmate request half sheets. A request for a job does not seem to be “informational” and does seem to be a “request for an item or service.” This kind of confusion may lead to inmates asking other inmates what they should do, who also may not know, and the submission of incorrect or likely rejected forms becomes even more widespread. It is obvious from the two additional posters that

⁵¹ Appeals submitted between October 1, 2016, and March 13, 2017, were reviewed due to significant procedural and staffing changes prior to this date, which will impact management of appeals.

attempt to explain the use of the forms, that the process may be unnecessarily complicated. The audit of the appeals process completed in September 2016 also concluded this by saying that, “It was evident that many inmates did not know how to utilize the appeals process.”

Both inmates and staff indicated that anomalies often result in an appeal rejection—known as “screen outs⁵²”—and request to resubmit due to errors, such as writing in incorrect spaces, signatures in the wrong place, or using the incorrect ink on the form. The top reasons for appeal screen outs are shown in Figure 12.

In one case, the inmate’s appeal was rejected for three reasons, one of which indicated “your appeal needs to be completed in entirety using a 12-point ball point pen” consistent with Title 15. This requirement seems to represent a minor anomaly when considering the effect on processing. The message sent to the population with requirements such as these does not appear to encourage a culture of community or working together for safety and rehabilitation.

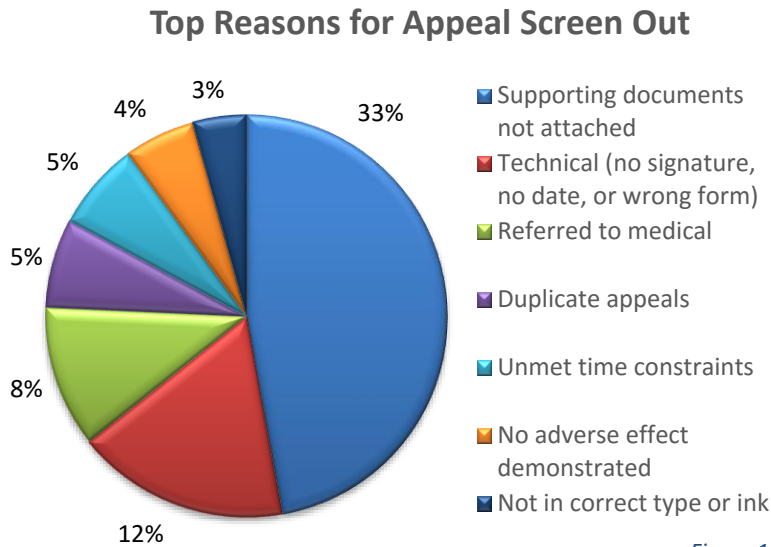


Figure 12

One requirement outlined in the DOM related to Form 22 submission is that inmates obtain a staff signature prior to submission. While the DOM does not require a Form 22 submission for all issues, due to the complexity of the system, many inmates believe they are required to start with this form, even with serious issues, such as harassment, abuse, or other safety concerns. The recent addition of locked boxes that only the appeals coordinator has the key to is an important step in protecting confidentiality and enhancing trust in the system. However, this requirement for signature, which is intended as a record of the inmate contacting staff about an issue, may be unnecessarily exposing an inmate’s complaint about a staff member to another staff member. The DOM indicates a Form 22 may be delivered “to any staff member who is able to respond to the issue,” which raises two concerns: (1) it may inadvertently lead to an inmate to believe that she must submit it to the staff she is sharing the issue with; and (2) it requires an inmate to know who on staff is “able to respond.” The likelihood of an inmate making an error and choosing the wrong staff causes more work on the staff member, delays the process, and creates barriers for trust in the system and efficient processing.

The DOM also indicates that the Form 22 process “does not state the time constraints for filing an appeal (Form 602);” however, it also states that the appeal “may be rejected by the appeals coordinator or designee and an extension granted to complete the request (Form 22) before resubmitting the appeal.” The complexity of the system specific to the number of distinct forms undoubtedly contributes to the number of screen outs and significant staff time in processing.

⁵² The top three reasons account for approximately 70 percent of appeals screened out; the remaining reasons occur between 1 and 4 percent of screen outs.

The current system appears to be unnecessarily causing time-consuming administrative work for staff and frustrating the woman inmates. Staff spend a significant, and costly, amount of time rejecting forms, sending letters to inmates, and re-processing the same matter on a new form. With this system, the complaint, if legitimate, does not appear to be addressed in a consistent and timely way, which creates anger and frustration and damages trust in staff, prison structures, and the utility of rules for ensuring safety.

The DOM in Section 54040.7.1 indicates that any healthcare staff receiving an appeal that alleges staff misconduct must immediately notify facility leadership. All staff indicated that any abuse allegation on any form, or even on a plain piece of paper, would lead to an immediate report to leadership and that it would be investigated. Even with the difficulties of the use of the system now in place, this is a clear strength. The process, however, is further complicated by the separate appeals process for healthcare.

Inmate Appeals Recommendations

Agency

- Revise the inmate handbook to add the appeals process as a confidential method of reporting abuse and harassment.
- Consider requesting authorization⁵⁴ to pilot a streamlined appeal system at CCWF. Upon approval, develop a multi-disciplinary workgroup to consider, at minimum, the questions below to shape recommended revisions and design the pilot with the goals of enhanced process efficiency and trust in the system.
 - How can we engage the inmate population to understand and solve barriers to the use of the system?
 - How can the instructions and forms be streamlined and simplified? What is the appropriate reading level for the materials?
 - How can we enhance trust in the system (i.e., rely on submission via locked boxes rather than requirements to engage staff signatures)?
 - What is the schedule for appeal collection?
 - What is the process for distributing appeals for response by staff, maintaining requirements to respond within three days, track the responses, and ensure discussion by inmates with staff is encouraged on the unit to resolve smaller complaints without the need for a written grievance?
 - What training will help ensure that staff working in a women's facility grievance office understands that their role is one that requires advocacy, diligence, and persistence to alleviate a concern?
 - How can we ensure that staff hired in these roles are suited for the position in women's facilities?

Facility

- Revise information related to the appeals system in the inmate handbook to be more consistent with the reading level of the population, more clearly outline the requirements of the process, and revise language on p. 20 to be consistent with §115.52(b) and ensure that anonymous reporting is not discouraged.
- Ensure that the grievance system is verbally reviewed with inmates during orientation and that time is allowed for questions on this topic.

⁵⁴ TMG understands that because the appeals system requirements are rooted in Title 15, that CCWF cannot initiate a project of this nature on its own accord but believe it to be a worthwhile target for review and revision.

- Consider a review of the process for inmates at the point when they are reassessed for risk within 30 days (§115.42(f)) to ensure full understanding.
- Simplify the posters explaining inmate grievances and ensure that the information is presented at a reading level consistent with the needs of the population and remove the supplemental posters.
- Ensure that inmates in all housing units, including segregation, have access to grievance forms and develop a system to ensure the forms are stocked.
- Develop a process⁵⁵ to monitor grievance information with the goal of proactively addressing challenges that emerge as themes or trends.

⁵⁵ Consider top appeal categories and themes around persons, places, and times of day, as well as challenges to safety, dignity, respect, and program or service access.

Part IV: PREA and Sexual Safety

As one component of an overall review of safety and gender-responsive operational practice, the TMG team reviewed selected PREA standards. The assessment team included a PREA certified auditor; however, as emphasized in the earlier discussion of methodology, the purpose of this section is to provide recommendations to help CCWF continue to work toward PREA compliance audit readiness and continue the process of enhancing sexual safety. This assessment process is not designed to determine compliance or non-compliance with the PREA standards. Only a formal PREA audit can determine compliance.

At the time of assessment, several CDCR facilities had reported successful completion of PREA compliance audits in several facilities. The agency was working to remedy challenges identified during audits. It is important to note that PREA auditors have discretion in the interpretation of each PREA standard; therefore, it is possible that items noted as recommendations in this section will vary from prior audits. TMG adheres to the strictest interpretation of standards to support sexual safety and the TMG PREA certified auditor assessment team member is often called on as a subject matter resource for the U.S. DOJ Attorney General's PREA Working Group—the vehicle for all PREA compliance interpretation. This section will address standards related to policy, screening and follow-up, inmate reporting, first-responder duties, sexual assault response teams (SART), investigations, training, PREA incident reviews, and medical and mental health response. This is not an exhaustive list of potential strengths and challenges; however, it will provide information on key elements of practice and provide recommendations for enhancing practice.

PREA Policy and Overall Recommendations. As discussed throughout this report, the CDCR policy structure is complex and at times requirements or definitions are included in a variety of sources—Title 15, the DOM and supplements, and IMSP&P and supplements and are not always consistent with PREA or as complete as they could be. Further examination of the following elements of policy will support aligning policy and practice with PREA standards and best practice:

- The definitions provided in DOM Article 44, 54040.3 specific to PREA do not appear to be consistent with definitions set out in PREA standards and are not consistent with California Penal Code 3401.5 Employee Sexual Misconduct.
- Current policy language in DOM 54040.7 requires staff to immediately and confidentially report to a supervisor any information that indicates an offender is or has been the victim of sexual violence, staff sexual misconduct, or sexual harassment. PREA standards require that any suspicion of abuse, retaliation, or violation of responsibilities that contribute to such incidents be reported (§115.61).
- No private staff reporting mechanism was identified for reporting inmate abuse and harassment consistent with §115.51(d).
- Administrative staff, at a minimum, must increase the indicators that demonstrate a commitment to sexual safety and reduce a sexually charged environment. Examples of strategies include developing a CCWF PREA prevention video, frequently addressing this topic at town halls with staff and the inmate council, and requiring staff to investigate the root cause of fights between inmates.

PREA Policy and Overall Recommendations

Agency

- Commit to a mock audit, including both careful standard-based review and coaching to prepare for the upcoming audit and ensure that implementation of standard best practices is handled in a manner that enhances the culture of sexual safety.

- Revise all definitions related to PREA in policy to be consistent with PREA standard definitions.
- Consider developing a series of brief quick reference guides that outline policy and practice requirements across all sources (e.g., Title 15, DOM, IMSP&P, Mental Health Program Guide) to promote understanding of both individual and multidisciplinary roles in simple language for ease of staff use. Many agencies have found response checklists to be useful; TMG can provide example resources upon request.
- Consider revising language specific to reporting in the DOM and IMSP&P, as well as any accompanying supplements, to address all staff reporting responsibilities per §115.61.
- Ensure the availability of a private staff reporting mechanism consistent with §115.51(d).⁵⁶ Potential avenues to strengthen practice in this area include creating and publicizing a hotline as a staff reporting option or creating a locked warden's box at the facility.

PREA Screening. At the time of assessment, there was no objective screening tool consistent with §115.41 and 42; however, CDCR was working to identify an appropriate tool. In the absence of the screening tool, risk of victimization or perpetration of sexual abuse was not specifically considered in placement of inmates in rooms, beds, programs, or jobs. Without screening information regarding a history of sexual victimization or perpetration, mental health referrals for follow-up can't be made as required by §115.61 and 81⁵⁷.

PREA Screening Recommendations

Agency

- Implement an objective screening tool consistent with §115.41.
- Ensure a clear policy and procedure is developed to allow staff to consider screening information in placement decisions that are consistent with §115.42.
- Ensure a clear policy and procedure is developed (or revised) to facilitate clinical follow-up screening consistent with §115.61 and 81. For example, revise DOM article 44, 54040.7 and the Mental Health Program Guide Chapter 1, C to reflect the requirements for mental health follow-up for PREA screening endorsements of sexual victimization or perpetration (§115.81) within 14 days, as well as the follow-up mental health evaluation for known inmate-on-inmate abusers within 60 days of learning of such history and offering appropriate treatment (§115.83).

Inmate Reporting. Varied, functioning, and accessible inmate reporting mechanisms support inmate safety and lessen agency liability by identifying problems a facility may not have known. There are several methods for inmates to report sexual abuse and sexual harassment available at CCWF, such as reporting to a staff member, asking a family member or a third party to report on her behalf, filing a Form 22 or 602 or 602-HC, making a free call or mailing a letter to the external reporting agency, which is the PREA Ombudsman's office at the Office of the Inspector General (OIG), or making a free call to the Department's Office of Internal Affairs (OIA) Central California phone number (§115.54 and 51). Tests of these systems for function yielded positive result. The OIG office responded promptly to both test phone calls and letters. The appeals office responded quickly to a test grievance. And, though

⁵⁶Per the preamble of the PREA standards Notice of Final Rule, this means that agencies must enable staff to report abuse or harassment directly to an investigator, administrator, or other agency entity without the knowledge of the staff member's direct colleagues or immediate supervisor (Vol. 77, Federal Register, No 119).

⁵⁷ It is important to note that TMG is collaborating on forthcoming research designed to identify gender-specific risk and vulnerability factors. While this work is not yet completed, TMG can provide information as it is available to support ensuring that the screening process and tool is appropriate to the needs of women and sufficient for PREA compliance.

the OIA responded promptly to a call, it failed to give indications regarding what it would do to respond to an inmate report and only referred the test caller to the website.

In response to a test report, the OIG response was prompt and professional; however, the written response was long, complex, and would likely be difficult for the average inmate to understand. There were two specific challenges of note that follow:

- For any vague PREA allegation that was received, the OIG simply sent a letter to the inmate stating that it had to report it to the facility. It did not send the allegation to the facility. Even vague allegations, and the one test reported was not vague in nature, must be reported and investigated. The external agency is not fulfilling its mission to be a reporting mechanism if it does not report all allegations it receives (§115.51).
- In the case of a more specific allegation, the OIG written response included a statement that it is “not the appropriate entity to initially address the allegation you describe,” instructed the reporter to notify the PREA compliance manager at the facility, and concluded with a paragraph describing statutory mandates (§115.51). Though the letter indicated that the OIG would report the allegation, the wording of the letter may lead an inmate to believe that the OIG would not report it.

The inmate handbook contained information on PREA and reporting, which is a clear strength. Overall, the information on PREA and how to report in the handbook is thorough and appropriate. Page 40 informs how to report sexual abuse, such as telling a staff or family member, or using the internal or external phone numbers set up to handle such reports. However, this section omits the written appeal option and could be confusing since reporting information is in more than one section. In addition, the handbook (p. 12) states that “all regular, non-confidential inmate mail is subject to being read entirely or in part by designated employees of the correctional facility before it is mailed for an inmate or is delivered to an inmate.” This conflicts with CDCR policy that indicates that mail to any reporting addresses, such as the OIG, rape crisis center, or OIA, is considered confidential mail and will not be opened. Additional barriers to reporting may include the following:

- Though the handbook and some posters and signs are available in Spanish, there did not appear to be clear and useful mechanisms for disabled inmates, such as low vision, intellectually disabled, or those who spoke a language other than Spanish, to report abuse (§115.16). Staff mentioned translator services; however, inmates who are living on a unit with no way to communicate directly can be targets for predatory inmates.
- Woman inmates in segregation have difficulty accessing the phones or written appeals system to make a report (§115.51). Women in administrative segregation cannot move without being handcuffed and must rely on a staff member to drop a grievance in a box. They also are phone-limited, with many women only having access to a phone only once a month.

Inmate Reporting Recommendations

Agency

- Revise the OIG response letters to simplify the language and footnote required statutory and regulatory language to ensure the focus is on informing the reporter that the allegation was heard, taken seriously, and will be investigated.
- Consider enhancing the confidentiality of the reporting hotlines by ensuring no inmate pin is required to place the call.

Facility

- Revise the inmate handbook to address the following:
 - The option to report via written appeal
 - A merge of the reporting information on page 40 with the reporting information on page 42 and 43
 - CDCR policy on confidential mail to reporting addresses such as the OIG, rape crisis centers, or OIA
- Ensure that posters identifying CDCR and CCWF commitment to zero tolerance of sexual abuse and how to report sexual abuse are available in all living units and placed where they can easily be seen by a phone, including segregation and condemned row, and other areas, such as classrooms, worksites, all housing units, chapels, and visitation, that are frequented by inmates per §115.33. Place them near phones where possible.
- Consider an alternative method of private reporting for women in segregation, such as appeals staff conducting daily rounds after picking up appeals from the locked box to ask if any woman inmates have reports to provide, providing an envelope to woman inmates that can be sealed to ensure privacy, or an additional procedure for allowing phone calls upon request to the hotlines to ensure three methods—at least one external and two internal—are provided consistent with PREA §115.51.

First-responder Duties. First-response efforts by staff when alerted of an assault is crucial to the safety of the victim and success of potential prosecution. Most of the custody and clinical staff that assessors spoke with could describe the basic responsibilities associated with their role.

The DOM in Sections 54040.8 and 54040.9 delineates responses by first-response staff and custody supervisors. It is a clear strength that staff are directed to realize the severity of the event to the victim, to interact sensitively and professionally, and to treat the information securely and on a “need to know” basis to protect the victim. Though policy correctly states the victim should be moved to a private secure location, there are three concerns of note:

- It does not indicate the critical importance of ensuring the alleged abuser does not destroy evidence on herself.
- It relies on the custody supervisor to come and establish a crime scene.
- It lists duties of the custody supervisor in various steps; however, those steps did not appear to be in order creating the potential for confusion.

Lack of direction in these areas creates the potential for the abuser to remove evidence and for others, once staff have left with the victim, to contaminate or remove evidence from the scene.

Additionally, there is not clear direction on collaboration between custody and clinical staff. Specifically, DOM section 54040.8.3 discusses healthcare staff responsibilities but never indicates that

FIRST-RESPONDER DUTIES

Upon learning that an inmate has allegedly been sexually abused, the first security staff member on site is required to (§115.64)

- Separate the alleged victim and abuser
- Protect and preserve the crime scene
- Request that the alleged victim not take actions that could destroy physical evidence (if applicable)
- Ensure that the alleged abuser not take actions that could destroy physical evidence (if applicable)

the custody supervisor or first-response staff should immediately take the victim to medical, though by practice this seems to occur.

Related to healthcare policy, as outlined in California Correctional Healthcare Services (CCHCS) and the IMSP&P Volume 1, Chapter 16, 1.16.2, healthcare staff are responsible for the following (§115.82, 83):

- Providing emergency care until the inmate can be sent to a local SART and hospital for stabilization
- Determining and reporting if injuries sustained qualify as serious bodily injury
- Administering follow-up testing for pregnancy, STDs, and HIV as indicated

This policy statement has clear strengths such as the following:

- It addresses the requirement that treatment services be provided to victims without financial cost, regardless of cooperation with an investigation (§115.83). Staff believed woman inmates understand this requirement; however, providing this information in orientation would enhance practice.
- It requires consideration of the gender of staff, and preference of gender of the victim, be considered when selecting hospital custody escorts.

A significant challenge is that while mental health staff reported that inmate victims of sexual abuse would receive care and that their clinical judgment would be respected, the Mental Health Program Guide outlines the responsibility specific to these reports as conducting a suicide risk assessment within four hours of return from a visit to the hospital related to sexual abuse. DOM section 54040.10 references provision of services related to sexual violence and staff sexual misconduct as outlined in the program guide. DOM also requires monitoring for self-harm, PTSD, depression, and other consequences; however, these responsibilities are not outlined in the Mental Health Program Guide. Staff did not report this kind of monitoring specific to sexual abuse, although this kind of monitoring is in the scope of the work that they routinely do. Finally, staff reported that follow-up services, treatment plans, and referrals for continued care would happen, but policy statements are unclear and conflicting.

First-responder Recommendations

Agency

- Revise DOM section 54040.8 to include first-responder duties outlined above and in §115.64.

Facility

- Create small laminated cards for staff that fit in a pocket, or an identification lanyard, that lists all four required first-responder steps, and any steps specific to CCWF, such as calling a custody supervisor and ensuring a visit to medical.⁵⁸ Quiz staff on occasion to be sure they have their card and know what to do.
- Add a statement to the inmate handbook in the PREA section beginning on p. 41 that ensures explicit understanding that treatment services provided to victims are without financial cost, regardless of whether the victim names the abuser or cooperates with the investigation (§115.83).

⁵⁸ These cards are both helpful resources for staff and demonstrate to auditors that staff know their duties and have easily accessible references.

Sexual Assault Response Team. A SART is a multi-disciplinary team of professionals working in and with the facility to respond to and provide support to a victim of a sexual assault in a coordinated manner. SART is defined in the DOM Article 44, Section 54040.3 as the hospital-based personnel and activities that the victims' services staff provide to sexual abuse victims once they are sent out to a Sexual Assault Nurse Examiner (SANE) for a Sexual Assault Forensic Exam (SAFE) and police and prosecutor activities if needed later. It does not include the facility's personnel and their roles in the response to an assault. SAFEs are provided at Community Regional Medical Center (§115.21), with advocacy services via Community Action Partnership Victim Services of Madera County. DOM Supplement Chapter 5, Article 44, Section 54040, within 52040.9 describes the SAFE process. Refusals are required to be documented. Evidence collection is outlined as the responsibility of CRMC.

PREA standards require a response plan to coordinate staff, first responders, medical and mental health practitioners, and facility leadership (§115.65,) which is typically carried out by a facility-based team. The current SART at the hospital can only be helpful at the point where the inmate arrives for assistance. At the time of assessment, the DOM policy language on response did not qualify as a coordinated response plan consistent with §115.65. A separate coordinated response plan that lays out the team's responsibilities step-by-step to ensure a coordinated and victim-centered effort is required. Both clinical and custody staff believed development of subject matter experts in sexual abuse response would be a positive enhancement to the process.

Sexual Assault Response Team Recommendations **Facility**

- Create a clear coordinated response plan for CCWF, as required in §115.65. Ensure it includes a step-by-step plan for any sexual abuse incident and lays out the responsibilities of line staff, supervisors, leadership, medical, mental health, victim advocates, SANEs, and any other relevant staff. Post it in areas where staff have access to it so they are aware of the team and required steps.
- Ensure a facility-based response team is assembled and all are aware of their duties in the coordinated response plan to ensure an efficient and expedient response to incidents.
- Consider providing staff who interact with inmates prior to transport for a SAFE with training on how to support the alleged victim in preparing for the assessment.

Both victim advocates and rape crisis centers addresses and phone numbers appear to be in place. There were fliers for the Madera Community Action Partnership, which is a rape crisis center that included a phone number to call and an address to write. Victim advocates are welcome not only through the forensic examination process but also are permitted to come into the facility as well.

Investigations. Objective, prompt, and thorough investigations of sexual abuse and harassment of inmates are crucial to the support of a sexually safe facility. The investigations team at CCWF is housed in the ISU; the lead investigator reports to the warden and the investigators have powers to arrest and handle a wide variety of matters. Investigators responsible for PREA cases report having had specialized investigations training that addressed all PREA standard requirements outlined in §115.34 and additional areas such as communication with traumatized victims, appropriate resources to pursue allegations, collaboration with other departments, and avoidance of multiple interviews. It did not, however, seem to include anything specific to investigations with woman inmates, which is a best practice. The office has five female investigators who are assigned to work on women's cases if there is indication they feel a female investigator would be more effective. This is also a best practice and will be enhanced by additional training for investigators on the impact of past trauma and gender on investigations of a sexual nature. Based on policy review, interviews, and focus groups, the following

warrant further examination or policy or practice changes to ensure alignment with PREA standards and best practice:

- The facility does not currently track sexual allegations for oversight and review nor does it track “hot spots” or other trends for review of needed changes in policy or staff allocation or supervision.⁵⁹
- Inmates are notified of the outcome of an investigation but not the status of the accused staff or inmate, such as if the perpetrator was indicted, moved to another housing unit, or is no longer at the facility, as required in PREA §115.73(c) and (d).
- In some cases, when a sexual allegation is made against staff, if the inmate account does not appear consistent with facts, or if a witness does not back the report, the staff is not interviewed and the case is closed. PREA §115.71(c) requires all alleged perpetrators be interviewed. Only by interviewing the alleged perpetrator and getting his or her account and using investigative techniques to confirm or question truthfulness can a fair and complete investigation be presented. Unless staff are interviewed, there may be some question as to whether the full story is known, calling into question compliance with §115.71(e), which requires that investigators not assess credibility based on a person’s status as inmate or staff.

At the time of assessment, no investigations were available for review. The practice of mapping the investigative process from allegation to disposition to include decision points and responsibilities of each professional involved can be very valuable. Additionally, use of a thorough analysis of the trends within the investigations that indicates locations, persons involved and specific nature of the allegation can provide for a wealth of information that can inform prevention and practice. A review to identify strengths and gaps in process, as well as themes in incidents is a vital component of supporting sexual safety.

Investigations Recommendations

Agency

- Consider a review of investigations and a comprehensive investigations mapping process to identify strengths, gaps, and themes in practices and reports.
- Add to the notice given to inmates of the closure of the investigation any status of the accused inmate or staff as delineated in §115.73(c) and (d).
- Formally change policy, procedure, and practice to interview every staff accused of a sexual incident to comply with §115.71(c).
- Add trauma-informed and gender-informed training for specialized training of investigators.

60

Facility

- Work with investigators and use current facility incident data to track where, when, with whom, on what shift, at what time, and other useful data points to get a sense of trends in PREA allegations. Use this information to take preventive action and contribute to mapping exercise above.

⁵⁹ Anecdotally, investigations staff believe over half of the allegations in 2017 have been from the Enhanced Outpatient (EOP) building for the mentally ill population, but no formal tracking is done. These kinds of trends would be useful to track for preventive action.

⁶⁰ <https://www.prearesourcecenter.org/ec-item/1910/specialized-training-investigating-sexual-abuse-in-confinement-settings>

PREA Incident Reviews. At the time of assessment, CCWF conducted sexual abuse incident reviews; however, while DOM Section 54040.17 and §115.86 requires the review to be done after the investigation for substantiated and unsubstantiated allegations, in practice they are done before the case is closed. The incident review form meets many standard requirements, but there are some concerns with the process. For instance, examples reviewed do not reveal that the form walks the team through a process that looks in enough depth at who, when, where, and includes specific recommendations for change and documented follow up.

PREA Incident Review Recommendations

Agency and Women's Facilities

- Ensure incident review meetings are being driven toward understanding the details of the incident and why it occurred and include all relevant staff, a copy of the investigation, incident report, and any other relevant information.
- Ensure the review includes consideration of women's pathways to the facility; trauma history, including physical, sexual, and emotional abuse; and relational orientation in the events leading up to the incident, the response, and follow-up.
- Engage the team in developing strategies to analyze each PREA incident to improve the prevention, detection, and response to sexual abuse.
- Develop a strategy to track and monitor the implementation of recommendations for improvement.

Medical and Mental Health. While this assessment did not review issues related to provision of clinical care, staff who were interviewed about processes related to provision of care related to sexual abuse seemed committed and knowledgeable of their role as outlined in current policy. Many voiced frustrations regarding the high number of PREA allegations that appeared to be false allegations; however, they seemed to remain committed to completing the necessary tasks. At the time of assessment, several potential barriers to effective practice and alignment with PREA standards were identified and are outlined below.

- Policy is unclear, fragmented, and confusing and the current DOM, DOM supplements, and IMSP&P did not clearly address all key elements related to PREA standards. This results in staff understanding their role but the role not being fully consistent with PREA standard requirements.
- DOM Supplement Chapter 5, Article 44, Section 54040, or IMSP Volume 1, Chapter 16, 1.16.2. specific to the management of reports of sexual abuse with mental health and medical is fragmented. For example, in the DOM supplement there is extensive information in 54040.12.1 regarding evidence collection and contamination. IMSP&P III,A,5 states that staff should ensure that inmates not shower, remove clothing, or use restroom facilities, but it does not provide the practical guidance of the DOM supplement. Streamlining this information will help ensure consistency of practice.
- Medical and mental health staff did not receive specialized PREA training, delivered by clinical professionals, consistent with §115.35, and at the time of assessment some had not received basic PREA training.
- There seemed to be some confusion about when informed consent and limits to confidentiality should be discussed and what incidents required a report to officials outside of the CDCR system.
- The Mental Health Program Guide referenced the wrong DOM chapter specific to PREA.
- There was consensus about the role of mental health to conduct suicide screenings with potential victims of sexual abuse. While mental health provides treatment planning, follow-up

and referrals were not components of practice that were identified as part of their role specific to managing incidents of sexual abuse.

Medical and Mental Health Recommendations

Agency

- Ensure medical and mental health staff receive specialized PREA training, delivered by clinical professionals, consistent with §115.35 addressing how to detect and assess signs of sexual abuse and harassment; preserving physical evidence of sexual abuse; how to respond effectively and professionally to victims of sexual abuse or harassment; and how, and to whom, to report allegations or suspicions of sexual abuse or harassment. One option would be using the curriculum⁶¹ developed by The National Commission on Correctional Healthcare (NCCHC) and approved by BJA to meet PREA training requirements per §115.35.
- Revise the references in the Mental Health Program Guide to reference DOM Chapter 44 instead of DOM Chapter 41, the latter of which is inaccurate.
- Revise applicable policy, such as CCHCS Volume 1, Chapter 16, 1.16.1 and 2, forms and practices to ensure the following:
 - Inmates are informed as early as possible about limits of confidentiality and that confidentiality is limited not only to child, elder, or dependent abuse or commission of abuse, but also any known or suspected incidents (§115.81).
 - If an alleged victim is under 18 or considered vulnerable by statute, the agency reports to the designated state or local agencies under applicable mandatory reporting laws (§115.61).
 - Informed consent is obtained before reporting prior sexual abuse that did not occur in an institutional setting unless the inmate is under 18 (§115.81).
 - There is an explicit statement that evaluation and treatment be provided to inmates who have been victims of abuse in any facility.
- Consider including screening items in the mental health intake process to identify symptoms associated with trauma and abuse to support proactive coping.
- Revise DOM Article 44 and the Mental Health Program Guide to reflect the full role of mental health to include emergency care (§115.82), follow up, treatment planning, and referrals (§115.83).

Staff Training. Ensuring staff are trained in sexual safety and the zero-tolerance policy are mandatory under both the PREA standards (§115.31) and the CDCR policy. The DOM specifically indicates in Section 54040.4 that PREA training must be completed by all new staff and then in-service PREA training is completed annually. It also requires that the training be gender responsive. Training is two hours initially and two hours during block training that is scheduled for all staff a year in advance. There is also one hour of PREA on-the-job (OJT) training. In reviewing the in-service training and the OJT materials, a significant number of challenges, outlined in **Attachment E**, were identified indicating that training materials need significant revision or replacement to be useful to staff and ensure compliance with PREA standards (§115.31).

There are ten areas required to be covered in training per §115.31. From a review of the materials, about five are included in the two-hour curriculum. Of the five not covered, three were not included at all and two were only briefly touched on, but not enough to give the staff a sense of what they needed to know. An example is the topic of retaliation for reporting misconduct. Based on training material review there is no information provided about why retaliation happens, the inmate's right to be free

⁶¹ <https://www.prearesourcecenter.org/ec-item/1921/specialized-training-prea-medical-and-mental-care-standards>

from it, how it contributes to a negative and destructive culture, or staff role in preventing and reporting it. It simply says the PCM will assign a supervisor to track it on PAR forms, which was not consistent with facility practice at the time of the assessment

It is a strength that the training addresses state law regarding sexual misconduct. Training states that there cannot be consensual sex between an inmate and staff, and individuals will be prosecuted and terminated if they engage in these behaviors. Another strength is that the training addresses cross-gender viewing that appears to be practical and useful. The training did not appear to be specific to work in a women's facility. While the WEFO training does address issues of abuse in women's lives, it is important that the PREA training for women's facilities be customized to the work that staff do daily. Revising the training will help ensure that the content is explanatory and practical. The addition of scenarios to the training will help promote connection to the work, build on what is currently included, address a variety of common occurrences, and be used to conduct brief skill-building activities that will ensure usefulness of the trained material.

Staff Training Recommendations

Agency

- Consider dedicating additional time to the initial PREA training to allow adequate coverage of standard requirements, staff questions, and engagement of staff in understanding and practicing trained material. One option would be using the curriculum⁶² developed by TMG and approved by BJA to meet PREA training requirements per §115.31.
- Review and revise the PREA OJT training to ensure that it is up to date, includes the most relevant information, and that the first-responder duties are accurate and consistent (§115.31).
- Review and ensure that changes made to either PREA training or the OJT manual are consistent throughout all materials.
- Review both the initial and in-service training to ensure each includes all PREA-required areas and that the curriculum's content and delivery are effective at teaching staff what they need to know.
- Include realistic and varied scenarios in the revised training to engage staff and demonstrate relevance of the training to their daily work.

Facility

- Ensure staff in need of coaching or additional training specific to a PREA-related policy area are coached by the PREA compliance manager or someone with solid knowledge of that area or issue, rather than relying on a one-hour OJT that may or may not cover the area in need of coaching.

Contractor and Volunteer Training. PREA standards require contractors and volunteers to be provided with training that educates them on the zero-tolerance policy for sexual abuse and harassment, how to report, and how they should fulfill their responsibilities under agency policy and procedure. This training is required to be supplemented with additional training based on the services they provide and their level of contact with the inmates. For contractors, it was reported that contractors are often hired and trained by the agency prior to beginning work at the facility. Both volunteers and contractors receive a two-page information sheet containing basic information about PREA that they must read and sign. Staff report some concern about how well the informational sheet

⁶² <https://www.prearesourcecenter.org/ec-item/1919/employee-training>

is understood prior to being signed. Staff also reported that if these individuals engaged in abusive contact with inmates that they would be banned from the facility.

In addition, it did not appear that the training was tailored to the population or level of contact these individuals had with the inmate population. Those with more frequent inmate contact or the likelihood of unsupervised contact are receiving the same amount of training, via the informational sheet, as those who almost never see an inmate in their daily work at the facility. Finally, understanding work with women is a vital component of promoting sexual safety within the facility and neither contractors nor volunteers appeared to receive training in gender-responsive practice.

Contractor and Volunteer Training Recommendations

Agency

- Add current PREA audits for contracted facilities to the agency website under a “contracted facilities” or include a link from the contracted facility website to the CDCR website to ensure that they are available on the CDCR website.
- Revise both contractor and volunteer PREA training to be tailored to their role and level of contact with the inmate population (§115.32).
- Consider creating a step-by-step role and reporting guide specific to volunteers and contractors as a training resource to supplement the stated requirements to report.
- Provide gender-responsive training for contractors and volunteers that is consistent with their role and level of contact with the inmate population to support an understanding of the population.

Human Resources. Human resources best practice specific to PREA standards and women’s services includes two major components: background and records checks, and staff selection and performance management.

Background and Records Checks. The newest version of the 1951 form, the supplemental application for employees revised in July 2016, contains all required questions from PREA §115.17 that ask about prior sexual misconduct. This form was in use at CCWF at the time of assessment.

The DOM in section 31060.16 discusses the requirement that all staff have a criminal records background check and this was confirmed to be a requirement by staff at the facility. Staff are purportedly required to have the initial background check. They do not currently have another background check every five years as required in PREA 115.17(e). A new arrest does trigger an automatic notification to the agency, but it was not clear if this trigger is only effective for an arrest in the state of California. If an arrest of a current CCWF staff for a violent or sex crime occurred in the state of Florida, for example, and the employee did not report it, it was not known if this arrest would ever be found out by the agency. In addition, cases of prior domestic violence or other violence against women that are discovered in the initial background check were reported to be considered, but were not exclusionary criteria for working at CCWF.

The agency indicates that prior employers are asked about substantiated abuse cases and inquiries of other facilities to which the employee has applied to work are answered when an abuse case has been substantiated. This is solid practice and prevents abusive staff from moving from facility to facility and being permitted access to inmates.

Staff Selection and Performance Management. Correctional staff typically come to the CCWF already vetted and having been interviewed by the CDCR and are ready to begin work. The types of questions staff were asked was unknown by the facility. It believed that specific questions about this

area were likely not asked since staff might be assigned to a men's or women's facility. The CCWF did ask a question of all of those being considered for promotion at CCWF about woman offenders specifically, which is a positive practice. It indicated a panel of three interviewers used a set of four to six questions decided by the warden and one was typically about working with woman offenders. At the time of assessment, however, job descriptions did not reflect expectations regarding effective work with women nor did performance plans or reviews allow for discussion of the staff's effectiveness in working with women.

Human Resources Recommendations

Agency

- Add to the outside facility contract language that incidents of sexual harassment will be considered in deciding whether to enlist the services of a contractor (§115.17).
- Add to the outside facility contract language that a background check is required every five years for any contractor (§115.67).
- Complete criminal records background checks for all staff and contractors every five years as required by PREA 115.17(e).

Summary Statement

In recent years, there have been several influencing factors in CDCR and CCWF that have had significant implications on culture and safety within the facility and throughout the agency. While there are risk indicators and areas for improvement, agency and facility leadership demonstrate a noticeable commitment to a safer culture and facility based on gender-responsive best practices, as evident in the voluntary decision to participate in this assessment process.

The recommendations provided with this report will assist CDCR and CCWF with taking next steps to ensure policy and practice are aligned with national standards, that it is a safe environment for staff to work in, and a culture exists that is focused in respect and dignity for inmates and staff to live and work in. CCWF can capitalize on its current momentum by revisiting a commitment to an updated strategic plan for FOPS with both long- and short-term goals with a process that will prioritize and guide the recommendations provided to enhance gender-responsive practice and gender-informed safety considerations.

The concerns shared by the department and its stakeholders for addressing operational practices that impede safety, create barriers to positive outcomes for inmates, and limit staff effectiveness are identified within this report based on the assessment activities within the scope of the work. Strengths of facility operations and the leadership direction of the facility are also highlighted to demonstrate the positive opportunities that are present in continuing to build a healthy environment for staff and inmates.

The assessment team offers a menu of many recommendations while also acknowledging that a process of planning is necessary to prioritize and build a realistic and sequenced approach to improved practice. We believe CDCR is prepared to continue an initiative for FOPS aligned with the mission of the department and its commitment to staff and inmate safety.

Attachments

Attachment A: Summary of Recommendations

Attachment B: Document Request

Attachment C: Consultant Biographies

Attachment D: Operational Photographs

Attachment E: Training Matrix Topics

Attachment F: PREA Training Challenges

Attachment G: Gender-responsive Staffing Considerations

Attachment A: Summary of Recommendations

Part I: Leadership and Culture

Leadership and Culture

Agency

- Revisit the FOPS Strategic Planning process and implement a structured approach to updating or developing short-, mid-, and long-range goals through a facilitated large and small group process. A dynamic and “working” strategic plan can be an effective tool to organize all the recommendations accepted in this report and additional priorities of the FOPS. We recommend a model of strategic planning that is action oriented with a mechanism to document progress and that builds on current goals of the FOPS.
 - Engage stakeholders from CDCR women’s facilities to update the FOPS mission and vision statements.
 - Establish a small working group within a strategic plan, or collaborate with facility stakeholders, to identify opportunities to revise policy at all levels by addressing at minimum policy related to the following:
 - Intake
 - Orientation
 - Classification
 - Use of Force
 - Searches
 - Property
 - Staffing
 - Transportation
 - Training
 - Cross-gender Supervision
 - After-action Reviews
 - Medical and Mental Health
 - The following contacts have undertaken strategic planning processes, such as that described above and are available to share their experiences should you want more information on practical implementation.
 - Dr. Wendy Williams, deputy commissioner, Women’s Services, Alabama Department of Corrections, Wendy.Williams@doc.alabama.gov
 - Gwen Norville, deputy secretary, Division of Adult Correction and Juvenile Justice, gwen.norville@ncdps.gov
 - Jane Marquardt, J. D., vice chair, Management and Training Corporation, jane.Marquardt@mtctrains.com
- Consider adding representatives from the Division of Rehabilitative Programs (DRP), CDCR mental health, CDCR parole, and The Women’s Health Initiative to the quarterly FOPS meetings to promote integration with FOPS and collaborative, cross-division problem solving.

Facility

- Re-open the staff survey to gather additional data so that the results of the survey may be analyzed.
- Update the facility mission and vision and create an implementation plan consistent with the FOPS strategic plan for ongoing improvement of gender-responsive practice and safety to ensure that both staff and inmates are clear on facility priorities and direction.
- Continue trust building between clinical and custody staff by providing opportunities for cross-division collaboration, training, and problem solving.
- Consider supporting facility leadership team development through shared reading and discussing key resources in organizational change and transition management to support ongoing development of trust and consistency. Facilities that TMG has worked with on culture change have found value in resources such as the following:
 - *Managing Transitions, Making the Most of Change* by William Bridges

- *The Five Dysfunctions of a Team* by Patrick Lencioni
- *Leading Change* by John Kotter
- Engage facility leadership in creating a deliberate strategy for professional development of supervisors to enhance their coaching and mentoring skills. See *Gender-responsive Training* for more information.
- Ensure that changes to policy or practice are formally communicated and reinforced informally through routine meetings, informal interactions, posters in staff and inmate areas, coaching, and follow-up to ensure implementation for staff and inmates.
- Continue to create a culture of inclusion, collaboration, and respect among clinical and custody staff, through cross training and continued relationship building through Interdisciplinary Treatment Teams.
- Identify strategies to engage women productively through the IAC, when appropriate, regarding changes to policy, including gathering feedback on proposed changes prior to the changes taking effect, providing information on decisions, and engaging the IAC in understanding the effect of the changes after implementation.
- Formally articulate how changes related to gender-responsive practice and PREA standards enhance safety and represent good correctional practice.
- Provide clear expectations to staff and inmates regarding professionalism and respectful language and actions through staff training, supervisory development, inmate orientation, and day-to-day interactions.

Part II: Operations and Training

Operational Practices to Enhance Safety

Physical Plant

Blind Spots and Isolated Areas

- Long Term: Equip the facility with a comprehensive video surveillance system and set camera installation up for success through the following:
 - Engage facility staff in identifying areas where cameras are needed to mitigate security concerns and ideal sight lines for cameras.
 - Communicate the purpose of camera installation to both staff and inmates as a tool to enhance safety. This is an important and often overlooked opportunity when installing a new comprehensive camera system throughout the facility. A good communication plan in rolling out this practice will save hours of time in explaining how and why the cameras are being installed, how they will be used, and who the staff will be who monitors the cameras.
 - Provide training and coaching for staff to adequately monitor cameras and assist leadership in incident reviews and review of footage for unusual or concerning events.
 - Consider privacy concerns for woman inmates, such as privacy in bathroom, changing, and shower areas. Communicate the privacy practices to the population consistent with PREA standard §115.15.
 - Ensure that policy supports the effective use of cameras by addressing the following:
 - Monitor and frame per second settings that reasonably allow for effective monitoring
 - Understanding of recording and review capabilities and strategies for use of cameras, such as real-time monitoring, recording for investigatory purposes, and ongoing review

- Privacy implications for woman inmates that include reasonable expectations of privacy in bathroom, shower, and changing areas, as well as prohibiting cross-gender viewing via camera monitoring
- Defining who has the authority to
 - Set placements, presents, camera definition, and ongoing review
 - Review video
 - Authorize video use for training purposes
 - Ensure maintenance work orders are prioritized and completed
- Outlining maintenance considerations, such as testing for operability and preventative maintenance monthly or weekly and logging results
- Maintaining camera inventory for temporary replacements

Facility

- Short Term: Identify and photograph all blind spots and isolated areas. Some systems find it helpful to create a binder for each building, containing pictures of all blind spots to educate staff on areas of concern to be closely monitored. In addition to providing an immediate resource identifying areas for enhanced staff monitoring, these binders will allow facility leadership to prioritize camera resources as they become available and identify areas where mirrors or other measures, such as putting windows in solid doors, re-arranging furniture or equipment, or increasing staff rounds in vulnerable areas.
- Ensure windows throughout the facility in rooms, cells, offices, classrooms, and day rooms are not covered with blinds, postings, or furniture.

Housing Unit Design

Facility

- Mitigate blind spots by securing doors when areas are not in use, such as closets and laundry areas, and adding windows to solid doors.
- Review security patterns of checking hallways, bathrooms and rooms or beds in areas with visual barriers.
- Review use of convex mirrors to mitigate blind spots.
- Increase security by ensuring that women do not cover windows and doors or tent bunks.
- Consider creating space within housing units to be designated as de-escalation areas where women can access a quiet and private space, within good security parameters to decompress, prevent conflict escalation, and allow women space to process information from treatment or groups.

Environment

Facility

- Evaluate the cleanliness of the facility by unit and engage staff and inmates living and working there in improving sanitation.
- Consider a weekly review of housing unit cleanliness by an assistant warden or captain and providing an incentive to the cleanest unit.
- Consider repainting in necessary areas and removing graffiti.
- Ensure woman inmates have access to effective cleaning supplies and the time available to use them.
- Identify ways to display positive and motivational messages for women throughout the facility.

Staffing and Supervision Strategies

Agency and Facility

- In the context of a strategic planning process, include a complete staffing analysis, including the gender-responsive considerations outlined in **Attachment G, Gender-responsive Staffing Considerations**, to determine both needs related to number of staff and staff deployment for both custody and non-custody staff. Include a review of posts to determine where same-gender staffing is a necessity to comply with PREA standards, such as cross-gender viewing and supervision and camera viewing, best practices in transportation, and practices to maintain inmate dignity and privacy within necessary security parameters. Ensure that any changes in staffing enacted coincide with the relief factor.
- Update CDCR standardized staffing models for women's facilities based on this analysis.
- Ensure staff understand what qualifies as an "exigent circumstance," which is the only condition under which a cross-gender pat search can occur, and that as a matter of practice cross-gender pat searches are not conducted per §115.15
- Explore recruitment strategies, consistent with union agreements, for female staff and consider opportunities to promote professional development among female staff. National experts consistently recommend staffing composed of at minimum 50 to 60 percent female and 40 to 50 percent male staff.

Use of Force

Agency and Women's Facilities

- Revise policy and training to explicitly outline appropriate use of force and de-escalation techniques for woman inmates.
- Revise the review process for the use of force reports and videos to include consideration of the following:
 - Requiring a detailed determination of the cause of the incident to inform leadership and supervisory staff on strengthening preventative measures to assist line staff in similar incidents in the future
 - Using information to analyze trends in shift, location, time of day, staff involved, and inmate and classification level involved to determine whether staffing, physical plant, policy, or other changes are needed for prevention and more proactive supervision

Facility

- Engage an internal or external subject matter expert, with expertise in both use of force and gender-responsive and trauma-informed practices, to conduct a thorough review on use of force practices and holding cell use. Include a review of incidents in buildings 503 and 504 to determine if weapons assigned in these units are warranted.
- Limit the use of holding cells to those situations where woman inmates are an active threat to others and work with clinical staff to establish policy and procedure to address issues such as the following:
 - Guidelines in the use of these cells
 - Consultation with mental health in cases where cells do promote de-escalation
 - Appropriate time frames for use of these cells

Property and Searches

Facility

- Consider limiting inmate property to that which can fit in the locker and a reasonable number of photographs posted on the wall.

- Consider reductions in commissary and quarterly package allotments as a standard sanction for drugs and sexual activity.
- Review the frequency of searches and adjust as needed to be consistent with the risk and security needs of the population. For example, there was reported to be a significant drug problem in the facility. More frequent, respectful, and random pat searches and property searches are strategies that can assist in combatting this problem.
- Address search strategies for women and how to locate contraband, as well as respectful and trauma-informed communication techniques.
- Develop a process for supervisors to routinely observe staffs' searches and provide feedback and coaching on quality based on revised policy and procedure.

Discipline and Sanctions

Agency and Facility

- Prepare for attendance at the NIC workshop specific to gender-responsive discipline and sanctions. NIC will provide further guidance.
- Integrate the work on disciplinary analysis and practice emerging from the upcoming NIC workshop on gender-responsive discipline and sanctions.
- Revise policy outlining a disciplinary system focused on prevention, creating safety, and motivating safe, healthy, and effective behavior in which women who lose privileges understand how to regain them through positive behavior.
- Revise policy to prohibit placement in restrictive housing women who are pregnant, post-partum, recently had a miscarriage, or recently terminated a pregnancy, except in rare circumstances.
- Through work in the NIC workshop, define strategies to ensure through policy, training, coaching, and monitoring the following:
 - Violation codes accurately describe behaviors and sanctions are commensurate with violation behaviors.
 - Sanctions restricting visitation are avoided unless there are safety or security concerns.
 - There is recognition and reinforcement of safe, healthy, and effective behavior.
 - Restrictive housing is only used when women cannot be safely managed in general population.
- Provide staff training on the disciplinary process and options to shape behavior outside of the disciplinary process to include interventions, such as behavior contracts or thinking reports that are conducted collaboratively among custody, non-custody, and clinical staff.
- Ensure that rules prohibiting consensual sexual behavior are consistently enforced to help prevent relationships that become sexually coercive.
- Implement a process to routinely review disciplinary reports for trends that will allow proactive resolution of identified problems. In reviews, consider the following:
 - Top two reasons women are disciplined
 - Top two reasons that women are placed in restrictive housing and length of stay
 - Violation codes that accurately describe the behavior
 - Sanctions that restrict visitation or program attendance
 - Consistent application of the rules
 - Themes around relationships or sexual activity

Facility Schedule

Facility

- Develop and post unit-based schedules designed to replicate life in the community, outlining what inmates can expect throughout their day. Consider elements outlined below, and include

group and individual time to attend to or process any difficult or unplanned events or news by conversing with other inmates. Key considerations include the following:

- Work
- School
- Recreation time
- Visitation
- Counts
- Hygiene
- Laundry
- Movement opportunities
- Productive leisure time
- Mail delivery
- Time for religious or spiritual development
- Programming time
- Time to make requests to officers for supplies or to address questions or concerns

Gender-responsive Staff Training

Staff Training

Agency

- Conduct a strategic planning activity to develop a training plan to outline an approach to supplementing existing trainings and obtaining or creating new training to address the range of necessary operational best practices and skills to contribute to a well-run women's facility. Use this "training plan" to prioritize training recommendations within this report and to include training commitments and requirements for the facility.
 - Consider engaging the CCWF Training Advisory Committee to seek staff input periodically about training and coaching needs, as well as training effectiveness.
 - Address key levels and types of staff, such as agency leadership, facility leadership, custody staff, and non-custody staff.
 - See **Attachment E** for a list of recommended training topics by staff classification.
 - Update the DOM by adding gender-responsive training requirements to support and reflect Penal Code 3430.
- Ensure that training supplements and newly developed trainings are designed for adult learners by creating training that is explanatory, relates to participants' immediate needs and surroundings, includes case studies or real-life examples, as well as opportunity for small group discussion, role playing, scenario practice, and case review.
- Ensure that all staff training at the academy reflects the difference in male and female inmates and operational best practices for male and female facilities to set the tone and expectations for work in women's facilities as different but legitimate.
- Provide CCWF leadership ongoing training and assistance to ensure that improvements do not revert to gender-neutral best practice.
- Capitalize on in-service training as an opportunity to ensure operational training addresses well-run women's facilities. For example, the following represent opportunities to discuss gender-specific operational practice:
 - Contraband
 - Holding cell procedures
 - Searches
 - Count
 - Disciplinary
 - Property
 - Effective communication/UA

- Provide facility leadership and management staff ongoing training and information on operational best practice in women's facilities and implementation of gender-responsive strategies.
- Engage facility leadership in creating a deliberate strategy for professional development for lieutenants and sergeants to enhance their coaching and mentoring skills and abilities related to promoting respectful interaction and gender-responsive practice.
- Ensure that key staff are trained in effective camera management.
- Collaborate with the Women's Health Initiative and CDCR mental health partners to capitalize on the trainings they have conducted for select staff to create a training for all staff in women's facilities specific to effective communication with LGBTI inmates.
- Provide custody staff training in basic motivational interviewing skills and strategies for supporting behavior change, such as effective reinforcement, effective disapproval, effective use of authority, and managing relationships.
- Consider applying to attend NIC Safety Matters training, which focuses on enhancement of sexual safety in women's facilities through effective communication. Training opportunities are anticipated to be available late in 2017 and in 2018.

Facility

- Ensure that trainers who deliver any curriculum related to women's services are selected for characteristics and skills known to support success in delivering this specialized training.
- Enhance the WEFO training to connect it to operational concerns.
- Operationalize training into clear expectations for staff to ensure accountability to trained concepts and skills.
- Consider providing training for supervisors on staff coaching and accountability for gender-responsive practices.
- Consider providing key custody staff crisis intervention team training to strengthen communication and intervention approaches.
- Create training for non-clinical staff who work in clinical settings to address such issues as confidentiality, interaction, and special topics, such as refresher training regarding restraints on pregnant women.
- Create security training specific to non-custody staff that specifically discusses clinically relevant practice and explains why some procedures are different in a confinement setting than a community setting.
- Ensure that staff responsible for apprenticeships and OTJ training are knowledgeable about work with women and proficient in gender-responsive approaches.

Part III: Intake, Classification, Case Management, Programs, and Appeals

Inmate Intake and Orientation

Intake

Facility

- Create a system to ensure that women know what to expect during the intake process.
- Ensure that there are provisions in place to protect privacy related to information specific to sentence and crime.
- Conduct a multi-disciplinary review (leadership, custody, medical, mental health) of the current video that is played during intake to ensure the message is current and consistent with practice.

- Ensure that the information provided on the intake video is available to women who are not fluent in English.
- Discontinue the practice of strip searching women in groups as they arrive at Receiving and Release and ensure, using privacy barriers, consistency with trauma-informed practice.
- Consider discontinuing the practice of issuing women mums upon intake in favor of two-piece uniforms.
- Consistent with the internal appeals audit, simplify the language in the inmate handbook to be more readable and understandable by working with education staff to revise content to be consistent with the assessed reading and comprehension abilities of the population.
- Verify that staff explain to women processes and procedures, such as searches, property assignment, and interviews, before they are conducted and provide coaching or training as needed to ensure consistency.

Orientation

Agency

- Consider developing a video specific to CCWF women's facilities that incorporates voices of woman inmates, staff, and leadership to provide a clear statement of the agency and facility commitment to safety and information relevant to doing time safely from the perspective of their peers.

Facility

- Ensure that orientation is completed within seven days of arrival, except in unusual circumstances, conducted in a setting free from distractions, and tracked to ensure that all offenders or detainees receive orientation.
- Include a representative of facility leadership and other staff, including specialized services, such as mental health or the grievance coordinator, to supplement PREA education currently delivered by inmate peer facilitators to discuss expectations and the facility commitment to safety.
- Expand, as staffing allows, use of peer facilitators who have experience with the facility in the orientation process to supplement the discussion with their experience as is done with PREA education. Ensure that all are appropriately screened, trained, and supervised by staff.
- Create a formal orientation presentation to ensure all relevant areas are reviewed, there is consistency in information, and time is allowed for questions.
- Discuss key topics, such as visitation, grievances, telephones, property, discipline, and indigent packs, during orientation to supplement written material.

Inmate Classification, Case Management, and Programming

Classification

Agency

- Consider developing a gender-responsive custody classification system that will ensure the following:
 - Predictive validity and accuracy of cut-points that differentiate custody levels for woman inmates
 - Assignment to housing units based on custody level and sexual safety consistent with PREA standard §115.42.
 - Appropriate access to program and employment opportunities
- Consider validating the COMPAS to ensure that the cut-points are appropriate to the current post-realignment population.

- Consider strategies to ensure safe placement of transgender inmates, including individualized placement reviews biannually, consistent with §115.42. CDCR reported that it was in the process of developing policy to promote safety of this population

Agency and Women's Facilities

- Consideration of the questions listed below will support CDCR in determining next steps to develop an integrated classification process that will support safe management in the facility by matching women to resources and reentry services based on risk and need. A quarterly FOPS meeting may represent an opportunity to ensure broad multi-disciplinary collaboration in the development of potential solutions.
 - What is the purpose of custody assessment?
 - How is custody classification information used in housing placement?
 - Who is going into segregation and why? How and when do they leave?
 - Who is assigned to A-yard general population and why?
 - How and when do they leave?
 - Who is going into C/C and why? How and when do they leave?
 - How is risk of recidivism incorporated into case planning and prioritization of inmates for services?
- Provide clear operational guidance regarding how classification should affect housing and bed placement decisions, program placement, work placement, and job placement to include the requirements of §115.42.
- Identify opportunities to use COMPAS data to begin to understand operational implications of the shift in population due to realignment and educate key stakeholders on the characteristics of the population beyond the crime.

Assessment-based Case Management

Agency

- Provide staff who are responsible for training reentry case planning, in conjunction with parole staff, to address the purpose of joint case management and assessment-driven case management; using the risk, need, responsivity model for women; addressing basic needs and safety in release planning for women; connecting needs to specific goals and tasks for women; key programs and resources; and supporting change.

Agency and Women's Facilities

- Consider the questions below to determine next steps in the full implementation of matching women to resources and reentry based on both risk and need through systems and staff empowerment. A joint meeting including both FOPS and DRP may represent an opportunity to ensure broad multi-disciplinary collaboration in the development of next steps.
 - How do we ensure that the women in programs are those that need it the most?
 - How is risk of recidivism incorporated into case planning and prioritization of inmates for program admission?
 - How might the case management process be better structured by adherence to assessment-based criteria?
 - What are the implications of CDCR efforts to develop the skillsets of counselors specific to women's facilities?
 - What are expectations for how these skills will translate into the new system of assessment and case management?
 - Are we appropriately staffed to meaningfully engage women in case planning?
 - What quality assurance and coaching needs to be in place for assessment administration, case planning, and motivational interviewing?

- How is the COMPAS and Rehabilitative Case Plan facilitating the transition from prison to parole?
- What new opportunities do these tools open new for collaboration with Parole?
- What new opportunities do these tools open new for between FOPS and DRP to most effectively reduce risk and meet needs in the female population?

Inmate Programming

Agency

- Continue to use COMPAS data to determine program offerings through a partnership with FOPS and DRP.
- Within programming, emphasize and model characteristics of relationships with healthy boundaries among the women and with staff.
- Expand offerings related to development of practical skills for coping with past trauma.
- Expand offerings, in partnership with Mental Health, to address issues of domestic violence in the facility.
- Expand offerings to include vocational programs that engage women's interest and employability for women returning to the community.

Agency and Women's Facilities

- Consider the questions below to determine next steps in developing a system of programming to reduce risk and need for the post-realignment population. A joint meeting including both FOPS and DRP may represent an opportunity to ensure broad multi-disciplinary collaboration in developing next steps.
 - Do the DRP program offerings mirror the assessed needs of the population?
 - What are the agreed-upon and well-communicated program selection criteria based on risk/needs assessment considering community risk?
 - How do women know what programming is available to them and what might support change for them specifically?
 - How are ILTAGS monitored and supported for success?
 - How are the ILTAGS and self-help groups integrated into an overall approach to supporting resilience and reducing risk and need?
 - How are women meaningfully engaged in programming by staff as a component of case management?
 - How are women placed in programming to ensure engagement throughout their sentence? What programming occurs at the beginning? In the middle? At the end?
 - Are programs being evaluated against objective criteria to determine if they are gender responsive and trauma informed? Is there fidelity to the criteria in the review?

Facility

- Conduct a review of the curriculum delivered in the C/C program to ensure that programs are evidence based or, at a minimum, promising practice and demonstrating effectiveness and fidelity to the treatment model.
- Expand program offerings to the C/C population to provide more than two hours of programming hours per day to structure their time more productively.
- Consider relocating the C/C program to a more contained space where the women can focus on regaining privileges and engage in more structured interaction and programming, and ensure coordination of programming and disciplinary sanctions to promote behavior change.
- Consider broadening the role of staff sponsorship to include a mandatory review of group materials to ensure that they promote safe guidelines.

- Consider developing a catalog or handbook describing the variety of programs across divisions, including eligibility criteria to serve as a reference for staff in program placement and a tool to engage inmate interest in programming.
- In addition to engaging women in programming through case management, develop strategies to discuss benefits of programming, available programs, and how to get involved during inmate orientation.

Inmate Appeals

Inmate Appeals

Agency

- Revise the inmate handbook to add the appeals process as a confidential method of reporting abuse and harassment.
- Consider requesting authorization to pilot a streamlined appeal system at CCWF. Upon approval, develop a multi-disciplinary workgroup to consider, at minimum, the questions below to shape recommended revisions and design the pilot with the goals of enhanced process efficiency and trust in the system.
 - How can we engage the inmate population to understand and solve barriers to the use of the system?
 - How can the instructions and forms be streamlined and simplified? What is the appropriate reading level for the materials?
 - How can we enhance trust in the system (i.e., rely on submission via locked boxes rather than requirements to engage staff signatures)?
 - What is the schedule for appeal collection?
 - What is the process for distributing appeals for response by staff, maintaining requirements to respond within three days, track the responses, and ensure discussion by inmates with staff is encouraged on the unit to resolve smaller complaints without the need for a written grievance?
 - What training will help ensure that staff working in a women's facility grievance office understands that their role is one that requires advocacy, diligence, and persistence to alleviate a concern?
 - How can we ensure that staff hired in these roles are suited for the position in women's facilities?

Facility

- Revise information related to the appeals system in the inmate handbook to be more consistent with the reading level of the population, more clearly outline the requirements of the process, and revise language on p. 20 to be consistent with §115.52(b) and ensure that anonymous reporting is not discouraged.
- Ensure that the grievance system is verbally reviewed with inmates during orientation and that time is allowed for questions on this topic.
- Consider a review of the process for inmates at the point when they are reassessed for risk within 30 days (§115.42(f)) to ensure full understanding.
- Simplify the posters explaining inmate grievances and ensure that the information is presented at a reading level consistent with the needs of the population and remove the supplemental posters.
- Ensure that inmates in all housing units, including segregation, have access to grievance forms and develop a system to ensure the forms are stocked.
- Develop a process to monitor grievance information with the goal of proactively addressing challenges that emerge as themes or trends.

Part IV: PREA and Sexual Safety

PREA Policy and Overall Recommendations

Agency

- Commit to a mock audit, including both careful standard-based review and coaching to prepare for the upcoming audit and ensure that implementation of standard best practices is handled in a manner that enhances the culture of sexual safety.
- Revise all definitions related to PREA in policy to be consistent with PREA standard definitions.
- Consider developing a series of brief quick reference guides that outline policy and practice requirements across all sources (e.g., Title 15, DOM, IMSP&P, Mental Health Program Guide) to promote understanding of both individual and multidisciplinary roles in simple language for ease of staff use. Many agencies have found response checklists to be useful; TMG can provide example resources upon request.
- Consider revising language specific to reporting in the DOM and IMSP&P, as well as any accompanying supplements, to address all staff reporting responsibilities per §115.61.
- Ensure the availability of a private staff reporting mechanism consistent with §115.51(d). Potential avenues to strengthen practice in this area include creating and publicizing a hotline as a staff reporting option or creating a locked warden's box at the facility.

PREA Screening

Agency

- Implement an objective screening tool consistent with §115.41.
- Ensure a clear policy and procedure is developed to allow staff to consider screening information in placement decisions that are consistent with §115.42.
- Ensure a clear policy and procedure is developed (or revised) to facilitate clinical follow-up screening consistent with §115.61 and 81. For example, revise DOM article 44, 54040.7 and the Mental Health Program Guide Chapter 1, C to reflect the requirements for mental health follow-up for PREA screening endorsements of sexual victimization or perpetration (§115.81) within 14 days, as well as the follow-up mental health evaluation for known inmate-on-inmate abusers within 60 days of learning of such history and offering appropriate treatment (§115.83).

Inmate Reporting

Agency

- Revise the OIG response letters to simplify the language and footnote required statutory and regulatory language to ensure the focus is on informing the reporter that the allegation was heard, taken seriously, and will be investigated.
- Consider enhancing the confidentiality of the reporting hotlines by ensuring no inmate pin is required to place the call.

Facility

- Revise the inmate handbook to address the following:
 - The option to report via written appeal
 - A merge of the reporting information on page 40 with the reporting information on page 42 and 43
 - CDCR policy on confidential mail to reporting addresses such as the OIG, rape crisis centers, or OIA

- Ensure that posters identifying CDCR and CCWF commitment to zero tolerance of sexual abuse and how to report sexual abuse are available in all living units and placed where they can easily be seen by a phone, including segregation and condemned row, and other areas, such as classrooms, worksites, all housing units, chapels, and visitation, that are frequented by inmates per §115.33. Place them near phones where possible.
- Consider an alternative method of private reporting for women in segregation, such as appeals staff conducting daily rounds after picking up appeals from the locked box to ask if any woman inmates have reports to provide, providing an envelope to woman inmates that can be sealed to ensure privacy, or an additional procedure for allowing phone calls upon request to the hotlines to ensure three methods—at least one external and two internal—are provided consistent with PREA §115.51.

First-responder Duties

Agency

- Revise DOM section 54040.8 to include first-responder duties outlined above and in §115.64.

Facility

- Create small laminated cards for staff that fit in a pocket, or an identification lanyard, that lists all four required first-responder steps, and any steps specific to CCWF, such as calling a custody supervisor and ensuring a visit to medical. Quiz staff on occasion to be sure they have their card and know what to do.
- Add a statement to the inmate handbook in the PREA section beginning on p. 41 that ensures explicit understanding that treatment services provided to victims are without financial cost, regardless of whether the victim names the abuser or cooperates with the investigation (§115.83).

Sexual Assault Response Team

Facility

- Create a clear coordinated response plan for CCWF, as required in §115.65. Ensure it includes a step-by-step plan for any sexual abuse incident and lays out the responsibilities of line staff, supervisors, leadership, medical, mental health, victim advocates, SANEs, and any other relevant staff. Post it in areas where staff have access to it so they are aware of the team and required steps.
- Ensure a facility-based response team is assembled and all are aware of their duties in the coordinated response plan to ensure an efficient and expedient response to incidents.
- Consider providing staff who interact with inmates prior to transport for a SAFE with training on how to support the alleged victim in preparing for the assessment.

Investigations

Agency

- Consider an external review of investigations and a comprehensive investigations mapping process to identify strengths, gaps, and themes in practices and reports.
- Add to the notice given to inmates of the closure of the investigation any status of the accused inmate or staff as delineated in §115.73(c) and (d).
- Formally change policy, procedure, and practice to interview every staff accused of a sexual incident to comply with §115.71(c).
- Add trauma-informed and gender-informed training for specialized training of investigators. One option would be using the curriculum developed by TMG and approved by BJA to meet PREA training requirements per §115.34.

Facility

- Work with investigators and use current facility incident data to track where, when, with whom, on what shift, at what time, and other useful data points to get a sense of trends in PREA allegations. Use this information to take preventive action.

PREA Incident Review***Agency and Women's Facilities***

- Ensure incident review meetings are being driven toward understanding the details of the incident and why it occurred and include all relevant staff, a copy of the investigation, incident report, and any other relevant information.
- Ensure the review includes consideration of women's pathways to the facility; trauma history, including physical, sexual, and emotional abuse; and relational orientation in the events leading up to the incident, the response, and follow-up.
- Engage the team in developing strategies to analyze each PREA incident to improve the prevention, detection, and response to sexual abuse.
- Develop a strategy to track and monitor the implementation of recommendations for improvement.

Medical and Mental Health***Agency***

- Ensure medical and mental health staff receive specialized PREA training, delivered by clinical professionals, consistent with §115.35 addressing how to detect and assess signs of sexual abuse and harassment; preserving physical evidence of sexual abuse; how to respond effectively and professionally to victims of sexual abuse or harassment; and how, and to whom, to report allegations or suspicions of sexual abuse or harassment. One option would be using the curriculum developed by The National Commission on Correctional Healthcare (NCCHC) and approved by BJA to meet PREA training requirements per §115.35.
- Revise the references in the Mental Health Program Guide to reference DOM Chapter 44 instead of DOM Chapter 41, the latter of which is inaccurate.
- Revise applicable policy, such as CCHCS Volume 1, Chapter 16, 1.16.1 and 2, forms and practices to ensure the following:
 - Inmates are informed as early as possible about limits of confidentiality and that confidentiality is limited not only to child, elder, or dependent abuse or commission of abuse, but also any known or suspected incidents (§115.81).
 - If an alleged victim is under 18 or considered vulnerable by statute, the agency reports to the designated state or local agencies under applicable mandatory reporting laws (§115.61).
 - Informed consent is obtained before reporting prior sexual abuse that did not occur in an institutional setting unless the inmate is under 18 (§115.81).
 - There is an explicit statement that evaluation and treatment be provided to inmates who have been victims of abuse in any facility.
- Consider including screening items in the mental health intake process to identify symptoms associated with trauma and abuse to support proactive coping.
- Revise DOM Article 44 and the Mental Health Program Guide to reflect the full role of mental health to include emergency care (§115.82), follow up, treatment planning, and referrals (§115.83).

Staff Training

Agency

- Consider dedicating additional time to the initial PREA training to allow adequate coverage of standard requirements, staff questions, and engagement of staff in understanding and practicing trained material. One option would be using the curriculum developed by TMG and approved by BJA to meet PREA training requirements per §115.31.
- Review and revise the PREA OJT training to ensure that it is up to date, includes the most relevant information, and that the first-responder duties are accurate and consistent (§115.31).
- Review and ensure that changes made to either PREA training or the OJT manual are consistent throughout all materials.
- Review both the initial and in-service training to ensure each includes all PREA-required areas and that the curriculum's content and delivery are effective at teaching staff what they need to know.
- Include realistic and varied scenarios in the revised training to engage staff and demonstrate relevance of the training to their daily work.

Facility

- Ensure staff in need of coaching or additional training specific to a PREA-related policy area are coached by the PREA compliance manager or someone with solid knowledge of that area or issue, rather than relying on a one-hour OJT that may or may not cover the area in need of coaching.

Contractor and Volunteer Training

Agency

- Add current PREA audits for contracted facilities to the agency website under a "contracted facilities" or include a link from the contracted facility website to the CDCR website to ensure that they are available on the CDCR website.
- Revise both contractor and volunteer PREA training to be tailored to their role and level of contact with the inmate population (§115.32).
- Consider creating a step-by-step role and reporting guide specific to volunteers and contractors as a training resource to supplement the stated requirements to report.
- Provide gender-responsive training for contractors and volunteers that is consistent with their role and level of contact with the inmate population to support an understanding of the population. While staff training is a first step, training of contractors, then volunteers, represent important steps forward as feasible.

Human Resources

Agency

- Add to the outside facility contract language that incidents of sexual harassment will be considered in deciding whether to enlist the services of a contractor (§115.17).
- Add to the outside facility contract language that a background check is required every five years for any contractor (§115.67).
- Complete criminal records background checks for all staff and contractors every five years as required by PREA 115.17(e).
- Consider guilty findings for domestic violence or other violence against women in considering staff for work at CCWF or any women's facility.

Attachment B: Assessment Document Request

Assessment Document Request

The following items will assist The Moss Group consulting team in preparation for the on-site sexual safety assessment at Central California Women's Facility. Please send the following materials electronically, if possible, to Katy Cummings at kcummings@mossgroup.us by March 16, 2017. All materials that cannot be sent electronically can be sent in hard copy to the name and address below:

Katy Cummings, Project Manager
The Moss Group, Inc.
1312 Pennsylvania Avenue, SE
Washington, DC 20003

Agency-level Documents:

1. Agency vision, mission, and value statements
2. The agency code of conduct or code of ethics and any other agency guiding principles
3. Copies of memorandums from agency leadership communicating about PREA, safety, or gender-responsive practice to facilities and stakeholders
4. Formal written guidance informing facility operations that would support implementation or sustainment of PREA standards or gender-responsive practice. These may include, but not be limited to, guidance provided in The California Code of Regulations Title 15, the Department Operations Manual (DOM), local operating procedures, DOM supplements, Inmate Medical Services Policy and Procedure (IMSP&P) and IMSP&P supplements addressing the following topics:
 - a. PREA, including zero-tolerance
 - b. Sexual harassment
 - c. Placement or housing of inmates (classification), including instruments related to classification assessment and reassessment, victim/predator assessment, housing assignment, program placement, risk/need assessment, and case planning/release planning
 - d. Gender-specific practice such as cross-gender supervision, cross-gender searches, and safety for LGBTI inmates
 - e. Searches including clothed searches, unclothed searches, and room searches
 - f. Staff and contractor/inmate relationships, volunteer/inmate relationships
 - g. Medical and mental health policy including policies addressing at minimum: healthcare for women, management reports or incidents of sexual abuse or harassment, mandatory

reporting, confidentiality, and the prevention, detection, response, and roles and responsibilities related to PREA

- h. Outside medical or mental health referrals
 - i. Hiring and background checks of staff, contractors, and volunteers
 - j. Staffing to include gender-specific posts or tasks
 - k. First responders to incidents of sexual abuse or Sexual Abuse Response Team (SART) if applicable
 - l. Investigations
 - m. Retaliation monitoring procedures
 - n. Employee discipline procedures
 - o. Employee grievance procedures
 - p. Inmate discipline and sanctions
 - q. Inmate grievance processes
 - r. Inmate transportation and inmate escorts
 - s. Community outreach for services to victims of sexual abuse while in confinement
 - t. Inmates under the age of 18 housed in adult facilities
 - u. Inmate intake and orientation
 - v. Visitation
 - w. Use of force, including the use of chemical agents
 - x. Property, clothing, and storage
 - y. Food service
 - z. Limited English proficient and disabled inmates
4. Organizational chart for agency administration, including both position titles and names of individuals assigned to each key position
5. Training plans and curricula for staff (including those that are available to line staff, supervisors, and middle management) that relate to sexual safety, *professional boundaries, *gender-responsive practice, *PREA, and *working with lesbian, gay, bi-sexual, transgender, intersex (LGBTI) populations. Please include reports indicating at minimum the percentage of staff who have completed these trainings for trainings marked with an asterisk (*)

6. Classification system documentation including the custody classification tool and manual as well as any state specific validation studies; PREA screening and supporting documentation or guidelines for use; risk need assessments including the tool, manual, and state specific validation studies
7. Overview of current data collection methodology and reporting mechanisms (including phone numbers, addresses, third party mechanisms, etc.), as it relates to reporting of sexual abuse and sexual harassment, current analysis of the data collected, and any training (including training plans and/or curricula) provided to supervisory staff on the use of the data
8. Any current memorandum of understanding or agreements with outside agencies that provide services to the facilities (e.g., advocacy, education, medical services, mental health, substance abuse, etc.) statewide as it relates to PREA or sexual safety
9. Major reports relating to sexual safety, including the following:
 - a. PREA audit reports
 - b. Reports resulting from internal agency audits or outside agency audits related to PREA/sexual safety
 - c. Any deliverables from NIC or BJA sexual safety events, initiatives, or participation in grant programs
 - d. Any other reports deemed relevant, including reports applicable to work with woman inmates, the treatment and/or programming for the population, etc.
10. Major incidents or lawsuits related to sexual abuse/sexual safety/PREA, as well as any claims or settlements
11. Inmate population demographics for the population at this facility (e.g., age, race, custody level, sentence length, offense, etc.)

Facility-level Documents

1. Facility specific vision, mission, and value statements
2. Copies of memorandums from leadership communicating about PREA, safety, or gender-responsive practice to facility staff and stakeholders
3. A copy of any risk/need assessment and classification or assessment tools implemented in the facility and any accompanying policy or manuals for assessment administration or data use specific to the facility being assessed not already provided in #6 of the Agency Document Request
4. Offender orientation and education materials, including at minimum an inmate handbook and any relevant presentations. Please include any materials or procedures designed for special populations, such as LGBTI inmates
5. Any current memorandum of understanding or agreements that are facility specific (rather than statewide) with outside agencies that provide services related to PREA or sexual safety (e.g., victim advocacy, medical services, mental health services, etc.)

6. Facility strategic planning documents, or related materials, that highlight facility or agency direction and objectives related to PREA, safety, and gender-responsive practice
7. Organizational chart for the facility, including both position titles and names of individuals assigned to each key position (e.g., management team, department heads, etc.), including lines of supervision. Within this chart, please identify the positions that are considered a part of the facility executive team
8. A flowchart describing the movement of inmates into, through, and out of the facility. If a flow chart cannot be easily provided, a brief paragraph describing the movement of inmates will suffice
9. Current facility staffing plan
10. Bona Fide Occupational Qualification (BFOQ) positions, if applicable
11. List of programming available to inmates with selection criteria and participation level for each program as well as a schedule of current inmate programming
12. Property and commissary list for inmates
13. Commissary schedule and procedures
14. Visitation schedule and any guidelines or eligibility criteria
15. Incident reports for all uses of force between January 1 and February 28, 2017
16. Incident reports related to sexual abuse and sexual harassment of inmates since July 1, 2016. Please indicate any incidents that were referred for criminal prosecution
17. Disciplinary reports for inmates related to sexual abuse or sexual harassment since July 1, 2016
18. Employee grievances related to sexual abuse since July 1, 2016
19. Inmate grievances related to sexual abuse or sexual harassment since July 1, 2016
20. Investigation reports related to sexual abuse or sexual harassment during the past three years
21. Internal audits or quality assurance reports conducted by internal CDCR staff for the last three (3) years
22. Audits or accreditation reports of inspections conducted by professional groups for at least the past three (3) years

Please send the following materials, electronically if possible, to Katy Cummings at kcummings@mossroup.us at least two weeks ahead of the date of the scheduled facility assessment. The facility shift rosters and inmate programming schedules will be used to create the staff focus group rosters and agendas for the on-site work; therefore, TMG will require this information to be accurate and up-to-date as of the date of the assessment period.

23. Facility staff shift rosters, to be provided in a format that includes demographic information such as name, position title, regular days off, gender, race, age, and—if possible—years of service at the facility

Please have the following materials available for the on-site assessment team:

24. Facility schema or map, including footprints of buildings and housing units identified
25. Current camera plan and summary of proposed additional cameras
26. List of inmates in the facility listing at minimum housing location, length of sentence, and indication of any known transgender or intersex inmates as well as any youthful inmates

Attachment C: Consultant Biographies

Anadora (Andie) Moss, TMG President

Andie Moss is founder and president of The Moss Group, Inc., a Washington, DC-based criminal justice consulting firm established in 2002. The Moss Group provides consulting services to federal, state, and local agencies and private organizations, using the expertise of experienced practitioners with a commitment to excellence. Through her organization, Ms. Moss manages multiple strategies to assist the field, including implementing the Prison Rape Elimination Act (PREA), working effectively with woman offenders, providing executive leadership training, delivering investigative trainings, and facilitating strategic planning.

In 2003, The Moss Group 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 presenting at professional conferences. Ms. Moss managed this cooperative agreement for seven years, providing 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.

Her commitment to leadership in the corrections field has also included managing an Executive Women's Program for NIC and working as project director for the development and facilitation of events like the Louisiana Leadership Summit, which with the participation of leaders from four additional states, featured a series of events dedicated to influencing leadership and culture on issues addressing sexual safety. Ms. Moss has also provided a number of agencies with leadership assessment tools and resources to ensure and encourage best practice in the correctional field. She has developed leadership curriculum and led 25 executive leadership programs.

In November 2015, Andie Moss was appointed to a two-year term to the U.S. Immigration and Customs Enforcement (ICE) 15-person Advisory Committee on Family Residential Centers by the U.S. Department of Homeland Security Director. This advisory committee represents the viewpoint of detention management and is developing recommendations to address concerns in the areas of primary education, immigration law, physical and mental health, trauma-informed services, family and youth services, detention management, and detention reform.

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 multiple professional organizations, is the immediate-past chair for the ACA Women Working in Corrections Committee, and is past president of the Association of Women Executives in Corrections. Additionally, Ms. Moss chaired the NIC Institute initiative on woman 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, TMG Project Director

Tina Waldron is a project director with The Moss Group where she provides leadership and expertise in areas such as evidence-based correctional practice, leadership development, reentry, mental health, agency and facility assessments (sexual safety, gender-responsive practice, and culture), and strategic planning. Ms. Waldron's primary responsibilities within The Moss Group include management of assessment, leadership, and strategic planning initiatives. Her work has included, but is not limited to, leading approximately 20 on-site sexual safety assessments in seven adult and juvenile systems, serving as a team member on a systemic assessment process of gender-responsive practice in collaboration with the National Resource Center for Justice Involved Women, providing training and consultation in the area of gender-responsive training and practice for women and girls, and primary management of various strategies (leadership, culture, strategic planning, and training) within BJA PREA Demonstration grants in four systems.

Prior to her current position, she 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 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 re-integrate into the community with the 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 also served as a research analyst at KDOC. She 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.

Wendy Leach, TMG Senior Consultant

Wendy Leach is a full-time senior consultant with TMG, specializing in providing quality assurance reviews and technical assistance and training in PREA. Other areas of expertise include incident reporting, senior management review, suicide prevention, environmental hazards, behavior management, overuse of restraints, child abuse reporting, sexual safety, and isolation practices. She is also a Department of Justice PREA certified auditor.

Ms. Leach was an assistant state's attorney in Baltimore and prosecuted both juveniles and adults, with a docket that focused on handgun-related violent offenses. She was also a War Room prosecutor specializing in targeting new cases of violent repeat offenders.

Maryland's governor tasked Ms. Leach with assisting Maryland in complying with and exiting a U.S. Department of Justice settlement agreement involving the conditions of confinement in three detention facilities. All three facilities reached full compliance and exited federal oversight on time over four years, earning Ms. Leach a Governor's Citation.

Afterwards, Ms. Leach was promoted to be the state's director of quality improvement, where she was responsible for creating a system of facility quality assurance metrics. She has worked

nationwide in both juvenile and adult systems to ensure facilities are prepared for PREA audits and was the first auditor to audit the first PREA compliant juvenile facility in the country. As a senior consultant with The Moss Group, she has worked in numerous jurisdictions providing training and assistance in PREA compliance, performing mock audits, assessing facility operations and completing system-wide policy reviews. She has assessed prisons and jails around the country, has been a faculty member at the national PREA Auditor Training, has spoken at various summits and conferences, and has led multi-member teams in prison and jail assessments. She is a graduate of Albany Law School in Albany, New York.

Carol Porter, TMG Consultant

Carol Porter has been a consultant with The Moss Group since 2009. She provides expertise in correctional leadership development, facility operations and culture, sexual and gender-responsive assessments, and strategic planning for adult and juvenile facilities. She began work with female juvenile offenders where she was instrumental in developing local procedures, offender programs, and new construction design. She became an adult probation officer in Maricopa County Arizona and supervised a specialized caseload of adult male offenders.

Carol had a 31-year career within the Washington State correctional system. During her career, she served as an adult probation and parole officer, specializing in the supervision of sex offenders, supervisor of two cell blocks in a major adult male prison, and manager of a work release facility. Carol served in several high-level leadership positions, including superintendent of a pre-release transitional program for adult male and female inmates, a juvenile male facility, and the Washington Corrections Center for Women.

Ms. Porter received her Bachelor of Science degree from Arizona State University. She received graduate studies through Northern Arizona University. Ms. Porter has received many state recognitions throughout her career, including the Washington State Governor's Management Award.

Angel Quiros, Jr, TMG Consultant

Angel Quiros, Jr. has been a consultant with The Moss Group since 2013, specializing in the Prison Rape Elimination Act (PREA). Mr. Quiros also specializes in operational issues consisting of prevention, rules and expectations, reporting, grievances, first-responder duties, referral and notification upon report, protection against retaliation, cross-gender supervision, gender-responsive policy, and procedure and management of youthful offenders.

Mr. Quiros has been employed with the Connecticut Department of Correction since 1989. He has over 26 years of experience in corrections and is considered an expert in the Unit Management Concept. Mr. Quiros started his career with the Connecticut Department of Correction as a correction officer and he has also held the ranks of lieutenant, captain, unit manager, major, deputy warden, and warden. He currently serves in the position of district administrator overseeing the operations of eight correctional facilities for long-term offenders, which consists of adult male and female offenders, juvenile offenders, mental health offenders, security risk groups offenders, and administrative segregation offenders. Mr. Quiros has extensive experience in the development of correctional institutional policy and possess in-depth and hands-on institutional skills developed by serving in a variety of capacities, ranging from minimum to super-maximum security levels. In 2014, the agency commissioner, S. Scott Semple appointed Mr. Quiros to the executive team for the department. In 2015, Mr. Quiros was appointed by Governor Dannel P. Malloy to the Connecticut State Retirement Commission and presently serves in the capacity of a management trustee.

Angel Quiros Jr. holds a Bachelor of Science in Social Work from Springfield College. He has completed a 15-credit college program course for Supervisory Leadership at Tunxis Community College.

Thomas N. Faust, TMG Director, Local Government Strategic Partnerships

Thomas N. Faust served as director of the D.C. Department of Corrections (DOC), a cabinet-level position of the Executive Office of the Mayor. He served in this position from October 2011 to November 2016. DOC, a major component of the District's public safety and justice cluster, is one of the largest local detention systems in the nation with responsibility for administering institutional and community-based correctional services. The department has a \$145M budget and 930 employees.

Mr. Faust joined the District government as an accomplished public safety and business executive with over 34 years of experience in the field of criminal justice and organizational leadership. From 1977 through 1990, he held multiple positions with the Arlington County Sheriff's Office including deputy sheriff, director of Administration, and chief deputy. During this period, Mr. Faust provided leadership to a diverse team of public safety professionals and was involved in all facets of departmental operations, including all functions of law enforcement corrections, court security, and transport.

In 1990, Mr. Faust was elected to his first four-year term as sheriff of Arlington County, Virginia, a highly esteemed position he held for three consecutive terms. As sheriff, he managed a multi-million-dollar budget and was responsible for oversight of county-wide public safety strategies, including corrections, law enforcement, and judicial services. The sworn law enforcement and civilian employees under his supervision successfully carried out essential public safety functions.

As evidenced by his three-time election to the position of sheriff, Mr. Faust was a proactive, inclusive, and innovative public official with a commitment to quality service. He understood the importance of reaching out to residents and viewed his connection with the community, advocacy groups, and other community-based organizations as a critical component of his mission. Staff from the department maintained an ongoing presence in the community with participation in neighborhood-based forums and meetings seen as essential to the effective exchange of information with residents throughout the county.

During his tenure, Mr. Faust implemented several operational and programmatic protocols that led to the detention facility's national accreditation by the American Correctional Association and the National Commission on Correctional Health Care. As sheriff, he was credited with major accomplishments, including the successful planning, design, and opening of the county's new jail facility and court and justice center; creation of the facility's first emergency response team; establishment of a jail-based substance abuse treatment program; implementation of the first jail-based industries program in the state; and creation of a community-based safety program for senior residents.

After leaving the sheriff's office in 2000, Mr. Faust assumed the position of executive director and chief operating officer (COO) of the National Sheriffs' Association (NSA), a non-profit professional association representing over 20,000 members. As executive director and COO, Mr. Faust was responsible for day-to-day operations, finance and revenue generation, legislative and government affairs, policy development, and federal grant administration. He was responsible for planning, directing, and managing a coordinated national strategy for ensuring support for the public safety missions of the Office of Sheriff in the United States. Under his leadership, the organization's assets were doubled, grant funding for law enforcement initiatives was increased, online training programs

for jail-based correctional certification and executive training and leadership development were launched. Direct assistance with Hurricane Katrina recovery was successfully coordinated and supported by sheriff's offices across the country.

Mr. Faust's corporate experience includes work with Aramark Correctional Services as a V.P. from 2007 to 2009 where he developed corporate marketing, outreach, and quality assurance strategies. Most recently he was in private practice as a criminal justice and corporate consultant for organizations offering a range of public safety, corrections, and market related services.

Mr. Faust received a Bachelor of Science degree from Virginia Tech and a Master of Public Administration from George Mason University. He has served on the George Mason University Administration of Justice Advisory Board; the Northern Virginia Community College Criminal Justice Curriculum Advisory Board, and the National Institute of Corrections Large Jail Network. Mr. Faust also served as past president of the American Jail Association.

Katy Cummings, TMG Project Manager

Katy Cummings joined The Moss Group in January 2014 as project manager with both adult and juvenile agencies in relation to Prison Rape Elimination Act standards and implementation, culture enhancement, staff training, inmate orientation, and LGBTI offender supervision and treatments. In this role, Ms. Cummings applies gender-responsive strategies to address and respond to sexual abuse in juvenile and adult confinement settings through training, leadership and mentoring, and strategic planning.

Prior to joining TMG, Ms. Cummings worked with the National Crime Prevention Council on a variety of projects, including national crime prevention campaigns, research and publication development, training and technical assistance, and community outreach. She has also worked in mental health facilities with at-risk youth, as well as out-patient adults with cognitive and psychological disorders. She earned a Bachelor of Arts in Psychology from West Virginia University and a Master's in Community Psychology with emphasis in Forensics from the University of New Haven. She currently resides in Washington, DC.

Simone Greene, TMG Project Coordinator




Simone Greene is joined The Moss Group, Inc. in 2016 as a project coordinator, bringing a strong educational background regarding psychology in forensic setting.


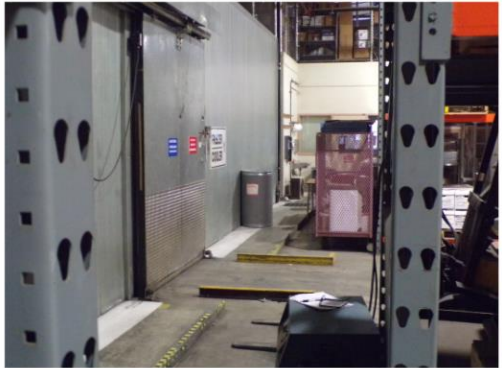

Prior to joining The Moss Group, she served as an administrative assistant at the National Crime Prevention Council. During this time, she assisted the training department in executing crime prevention trainings for police departments and college campuses all over the country. She has held a position as a residential specialist with the Phoenix House, a substance abuse rehabilitation facility for adolescent girls. At the Phoenix House, Ms. Greene helped to counsel girls on the importance of the 12-step programs and making life changes for success in the future. She has also served as an investigator in the Mental Health Division of the DC Public Defender Service.

Simone received her Bachelor's Degree in Psychology from Wesleyan University. During this time, she participated in a research lab analyzing cultural depictions of crime. She also studied criminology in Copenhagen, Denmark, taking time to learn about the Scandinavian criminal justice system in relation to what is commonplace in the United States. She received a Master's Degree in Forensic and Legal Psychology from Marymount University.

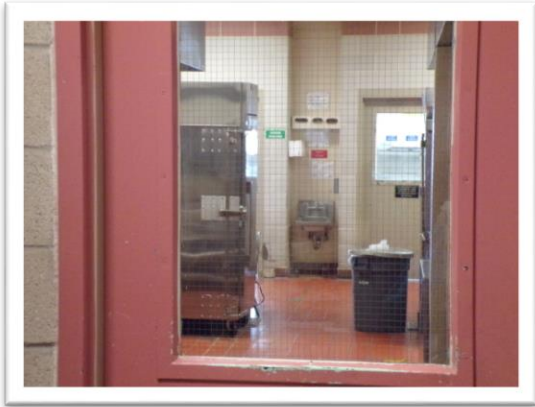
Attachment D: Operational Photographs

The following photographs highlight areas in the facility that represent challenges to supervision. We offer several potential solutions for consideration.

Locks	
	<p>Challenge: The locking mechanism for doors on staff bathrooms when locked from the inside cannot be opened with a key. This would be a significant security concern in the event of a medical emergency while a staff member is in the bathroom or if a staff member is held hostage inside.</p> <p>Potential Solution:</p> <ul style="list-style-type: none"> Replace old locks with new locks that can be operated from inside and outside.
Office Furniture Arrangement and Isolated Areas	
<p>812 RE/EOP Staff Office</p>	<p>Challenge: As depicted, these two spaces—a mental health staff office in 812 and a modular classroom in 806—furniture arrangement inhibits safety by blocking staffs' access to the door.</p> <p>Potential Solution(s):</p> <ul style="list-style-type: none"> Rearrange furniture in all mental health and medical office or treatment rooms and classroom areas to ensure unobstructed access to the door in emergencies. Mental health and education areas are high traffic; staff report and consultants observed a lack of consistent security staff presence in these areas. Review custody staffing patterns for to enhance safety.
	
<p>806 Modular—Main Yard</p>	
	

Building 301 General/PIA Warehouse	
	<p>Challenge: Unobserved and isolated hallway with side exit doors. This poor sight line prevents staff from seeing offenders working in this area. Without video recording of this area, it could be difficult to confirm or deny allegations brought forward by either party during an investigation.</p> <p>Potential Solution(s):</p> <ul style="list-style-type: none"> • Short-term Improvement: Add mirrors to support staff supervision. • Long-term Improvement: Add a camera to supplement staff supervision.
	<p>Challenge: Poor sight lines create blind spots and reduce direct supervision.</p> <p>Potential Solution(s):</p> <ul style="list-style-type: none"> • Short-term Improvement: Add mirrors at each corner to improve the sight lines for staff to properly supervise inmates. • Long-term Improvement: Add cameras to warehouse and PIA spaces to supplement existing resources and ensure that the current PIA system and all PIA cameras are connected to the main CCWF camera system when installed.
Buildings 701 and 702 Support Services and Food Services	
<p><i>Janitorial Supply</i></p>	<p>Challenge: Leaving the janitorial supply door unsecured creates a blind spot and allows inmate kitchen workers unsupervised access to this area. The equipment being stored in this area can easily become a weapon.</p> <p>Potential Solution:</p> <ul style="list-style-type: none"> • Secure janitorial supply doors when not in use. When in use, staff members assigned to the kitchen should supervise the woman inmates using this area.
	

Kitchen



Challenge: Large kitchen equipment obstructs staffs' view of certain areas within the kitchen.

Potential Solution:

- Add additional mirrors in all corners within the kitchen to improve sight lines for staff to monitor inmate's activities in these areas.

Dry Storage

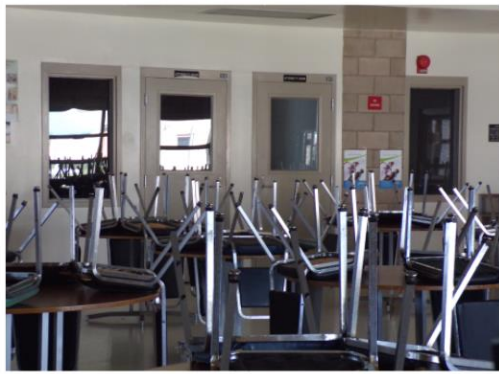


Challenge: The dry storage area has several blind spots.

Potential Solution:

- It is a strength that the door has a window; mitigate blind spots with mirrors. Once you enter the dry storage room, the mirror should be installed on the left corner of the room.

Building 801 General Visiting



Challenge: This is a large space that can be difficult to supervise for such activities as transfer of drugs or unauthorized items.

Potential Solution(s):

- Short-term Improvement: Place mirrors to supplement supervision.
- Long-term Improvement: Add cameras.
- Ensure that staff move around the room during visitation room rather than remain at the officers' station.

Building 802 Library, Gym and Chapel

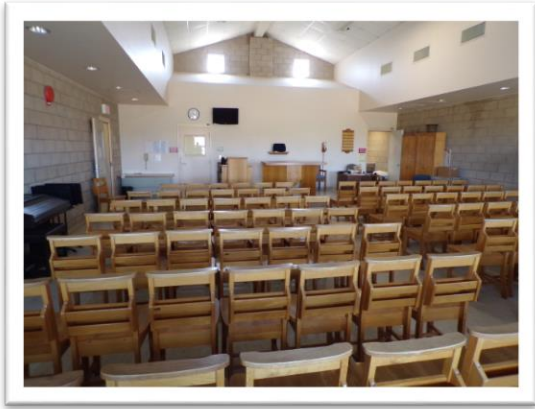


Challenge: The library, gym, and chapel are all locations that would benefit from mirrors to mitigate blind spots and isolated areas, enhanced staff supervision, and eventual camera installation.

Potential Solution:

- Conduct unannounced and routine supervisory rounds on second and third shift in these locations.

Chapel

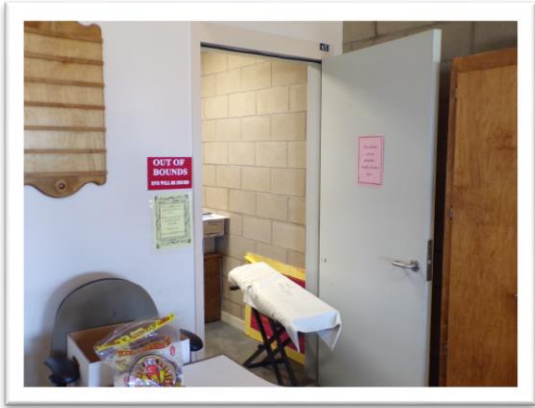


Challenge: Inmate office space is cannot be viewed by staff.

Potential Solution(s):

- Ensure supervisory rounds include Chapel A and B office space for inmate workers which is an area largely isolated from staff.
- Add cameras to cover the inmate office space or add a new office for the inmate workers that can be viewed by staff.

Inmate Work Space



Modular Buildings 806, 807, 809, 810, and 811

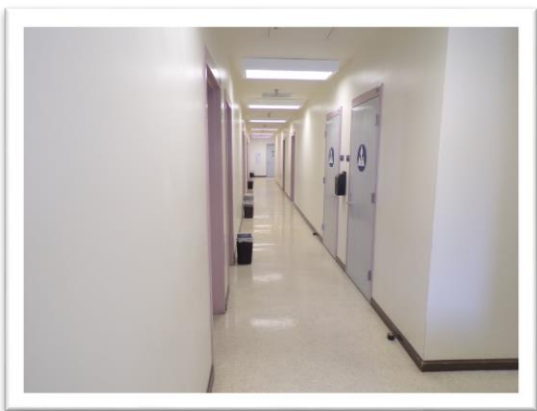


Challenge: Modular buildings have poor sight lines and long hallways with office spaces and classrooms, creating areas with limited custody supervision.

Potential Solution(s):

- Conduct unannounced and routine supervisory rounds on second and third shift in these locations.
- Short-term Solution: Install mirrors at the corners of the hallways to improve sight lines.
- Long-term Solution: Install a camera system with capabilities to record the hallways leading into office space and program areas within each modular building.

Building 812 Mental Health



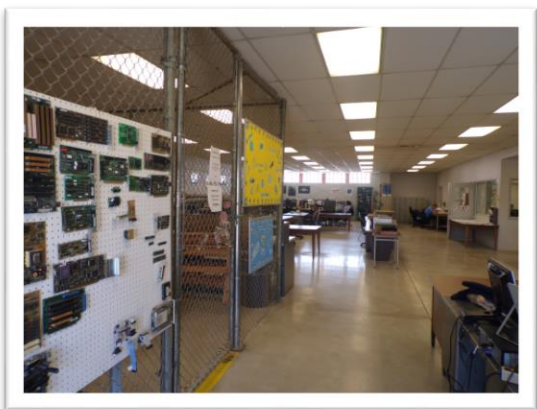
Challenges:

- Due to the size of the holding area, many inmates who are called to mental health appointments—up to 130 per day—appeared to congregate largely unsupervised between the buildings. Inmates come from Yards A, B, C, and D, including inmates from the 503 C/C program. While a rover and sergeant were reported to be assigned to this area, the large number of inmates appeared difficult to manage for the one custody staff member assigned to the building.
- The long hallways with office spaces create isolated areas with limited custody supervision.

Potential Solution(s):

- Re-evaluate custody supervision needs for this area.
- Short-term Solutions: Install mirrors at the corners of each hallway leading to staff offices to improve staff direct sight line.
- Long-term Solutions: Install a camera system with recording capabilities of the hallways leading to staff office space.

Building 901-904 Vocational Training

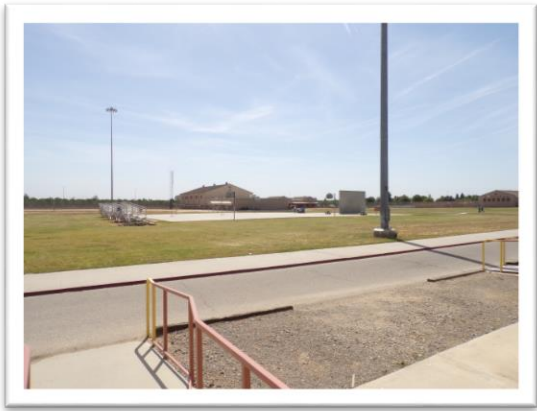


Challenge: The vocational building is a large area for one staff member to supervise. Current equipment, cages, and building structure create blind spots that cannot be properly supervised.

Potential Solution(s):

- Short-term Solution: CCWF has installed some mirrors in these buildings. Additional mirrors should be installed at every corner of the room to provide staff with a direct sight line of supervision for offenders working on site.
- Long-term Solution: CCWF should install a camera system with recording capabilities in all areas within the vocational buildings.

Yard A, B, C, and D



Challenge: The yard areas on the compound are large and difficult to supervise; however, several changes can enhance safety in these areas.

Potential Solution(s):

- Reexamine the current strategy of deploying staff on the yard by defining zones of responsibility for each staff to maximize the amount of coverage and visibility staff have in each yard.
- Enhance the supervisory presence of sergeants, lieutenants, and captains during recreation time to ensure staff cover their zones and reduce staff congregating in one area rather than moving around the yard.
- Stop storing the unit mops and handles outside each housing unit. The mop handles can be potential weapons for offenders to grab during a disturbance in the recreation yard.
- Identify key areas for consistent staff monitoring, to include outdoor bathroom facilities (pictured), which create blind spots and isolated areas.

Attachment E: Training Matrix Topics

Women's Services Training Matrix	<i>Headquarters Executive Staff</i>	<i>Warden</i>	<i>Chief Deputy Warden</i>	<i>Assistant Wardens</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</i> ⁶³																		
<i>Coaching Staff for Successful Work with Women Inmates</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>																		

⁶³ This curriculum would be an *updated* Working Effectively with Women Offenders training. Consider contractors and volunteers for inclusion or a modified and shortened curriculum that is customized to their role.

Women's Services Training Matrix	Headquarters Executive Staff	Warden	Chief Deputy Warden	Assistant Wardens	Captain	Lieutenant	Sargent	Officer	Counselor	Non-Custody	Investigators	Chief Executive Officer	Medical Director	Mental Health Director	Clinical Supervisors	Clinical Staff	Contractors	Volunteers
Trauma Informed Practice⁶⁴																		
Gender-Responsive Practice in Women's Facilities Advanced Training		<i>Suggested training attendees are noted below; agency specific training requirements should be incorporated.</i>																
• Intake and Orientation		<i>Staff and supervisors assigned to intake and orientation.</i>																
• Camera Management																		
• Disciplinary Practice																		
• Use of Force																		
• Cross-gender Supervision																		
• Trauma Informed Searches (clothed, unclothed, room)																		
• Visitation		<i>Staff and supervisors assigned to visitation.</i>																
Basic Communication Strategies for Working with Women Inmates⁶⁵																		
Advanced Communication																		

⁶⁴ Consider contractors and volunteers for inclusion or a modified and shortened curriculum that is customized to their role.

⁶⁵ Consider contractors and volunteers for inclusion or a modified and shortened curriculum that is customized to their role.

<i>Strategies for Working with Women Inmates</i>																		
Women's Services Training Matrix	<i>Headquarters Executive Staff</i>	<i>Warden</i>	<i>Chief Deputy Warden</i>	<i>Assistant Wardens</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>																		
Specialized Trainings																		
<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 F: PREA Training Challenges

At the time of assessment, the PREA on-the-job training manual did not include all necessary training elements and in some sections, the information did not appear to be accurately explained. The purpose of this manual was described to assessors as a resource to re-train or coach staff when their response to reports or incidents was not consistent with policy. While there is an acknowledgments page that staff must sign to indicate understanding, it is a challenge that not all information appeared to be accurate.

Some of the challenges were related to cultural norm setting:

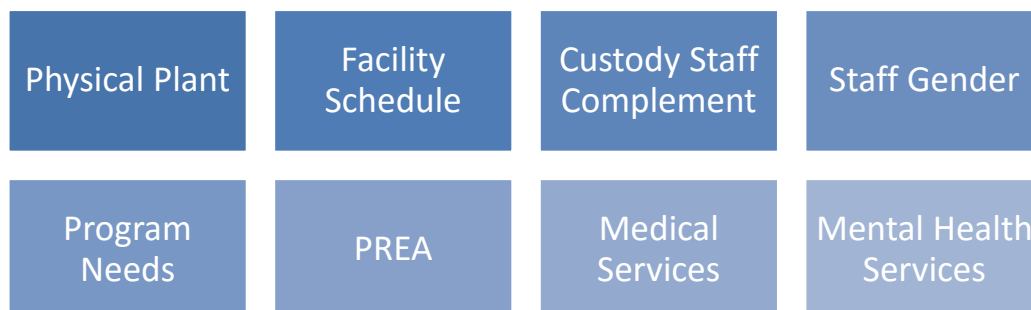
- Curriculum indicates staff may never use this information in their careers, which may diminish the importance of being familiar with policy and procedure related to sexual abuse or harassment. (page 4)
- Curriculum notes that “although offenders need to take responsibility for their behavior and educate themselves on how to conduct themselves while incarcerated, we, as CDCR employees, have an obligation to inform offenders of their rights and responsibilities regarding sexual violence...” This appears to indicate that it is the offender’s role to protect themselves (§115.11). (page 17)

Some of the challenges were specific to consistency with PREA standards, policy, or practice:

- Risk factors for vulnerability need updating (page 12).
- Under Detection the curriculum discusses learning how to respond to allegations, which belongs under Response (page 22).
- Curriculum indicates inmates are screened for victimization upon reception; however, at the time of assessment, screening instruments were not in place (§115.41).
- Information about reporting to other confinement facilities, filling out SSVs, and medical forms used at the facility are not explained in a way that staff understand their roles in each of these areas. This is a recurring challenge throughout the training (page 23 and 27 for examples).
- Training materials indicate that a third-party report must be put in writing, which is not required by PREA standards (§115.51, 54) (page 25).
- Curriculum indicates cross-gender searches should be documented, but does not state that they are prohibited unless there is an emergency (§115.15) (page 21).
- The text indicates that possible sexual victims are placed in segregated housing, as a matter of practice, which is not consistent with PREA §115.43 (page 23).
- The first-responder duties are incomplete. The curriculum does not mention ensuring the aggressor does not remove evidence, mentions the victim can remove clothing with “custody supervision” but not evidence preservation, and does not mention securing the crime scene. It mentions the supervisor has duties but PREA §115.64 indicates this is the first responder’s duty (page 25).
- Text indicates victim and aggressor will be separated “to the extent possible,” which is not in line with PREA §115.64 (page 30).
- Curriculum indicates supervisory staff should secure the alleged crime scene “if feasible.” This is not appropriate direction for supervisors or staff (§115.64) (page 33).
- Curriculum indicates the PCM assigns a supervisor to track retaliation on PAR forms; however, in practice it is reported that this the responsibility of the ISU (page 36).

Attachment G: Gender-responsive Staffing Considerations

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:

- Blind spots
- Isolated areas
- Lack of cameras
- Facility size
- Population size
- Housing configuration
- Access to halls, corridors, and closets
- Offender 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 different 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 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 fewer, 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 contact with 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 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:

- Do grievances indicate a pattern of long wait times or poor service?
- Are mental health caseloads considered appropriate 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 do offenders wait to see a medical provider for specialized care, such as dentists, obstetrician, gynecologist, or optometrists?
- What is anticipated demand for services based on classification, medical, and mental health needs?

Consistency with PREA Standards. PREA standards require several 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

Additional Resource

The PREA Resource Center, in collaboration with The Moss Group Inc., developed the webinar,

Developing and Implementing a PREA Compliant Staffing Plan.

This webinar can be accessed at www.prearesourcecenter.org in Archived Webinars.

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 offenders are actively engaged in programs or jobs at the facility?
- What is the level of offender idleness and the negative impact on safety and security?
- What is the length of waiting lists for programming that are required by the courts or assessed need?
- What is 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?
- Are there programming opportunities specifically related to addressing trauma, healthy relationships, and parenting skills?
- Are there programming opportunities in restricted housing?
- What is the criteria for the ideal program plan and the staff needed to run current and new programs to develop an accurate program staffing model?