

## **Custody Access Initiative Appendices**

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# APPENDIX 1



**CUSTODY/SECURITY ASSESSMENT FOR ACCESS TO CARE  
AT THE  
CALIFORNIA INSTITUTION FOR MEN**

**PURPOSE:**

A review was conducted at the California Institution for Men (CIM) to determine what custody resources are needed to improve and facilitate the inmate-patient access to health care with a focus on security coverage in the five facility clinics, and the central health building. In addition, information was gathered relating to the current custody staffing needs and requirements to facilitate off-grounds access to medical care, inclusive of specialty care appointments, emergencies, and other medical services.

**REVIEW TEAM MEMBERS:**

Don Meier, John Dovey

**DATE OF REVIEW:**

August 27-31, 2007

**INSTITUTION OVERVIEW:**

The California Institution for Men (CIM) is a very large complex consisting of four physically separate facilities under the administration of one Warden. CIM serves as a Reception Center for parolees returning to custody and male felons that have been newly committed to the California Department of Corrections and Rehabilitation (CDCR). Approximately 500 inmate-patients are received into the institution every week.

Reception Center Central (RC-Central) has a capacity 1470 inmate-patients, most of which are new arrivals and unclassified. RC-Central serves as the main Reception Center and receives intake from several southern California counties including, Orange, Riverside, and San Bernardino, and the Pitchess Detention Center; Los Angeles County. The institutions' administrative segregation housing unit is also located at RC-Central.

Reception Center East (RC-East) has a capacity of 1067medium/maximum custody level inmate-patients and is located approximately 2.5 miles east of RC-Central.

RC-East houses reception center inmate-patients with sensitive needs, Mental Health inmate/patients requiring an Enhanced Out-Patient level of care and a 100 bed HIV/CID unit. RC-East is protected with a lethal electrified perimeter fence.

Reception Center West (RC-West) has a bed capacity of 1482 medium custody inmate-patients. The facility consists of eight dormitory housing units. Each housing unit has a capacity of approximately 200 inmate-patients waiting processing/transfer to programming institutions. RC-West is also protected with a lethal electrified perimeter fence.

The Minimum Support Facility (MSF) is the largest MSF in the State and was being planned as a maximum security prison while under construction. The first Superintendent activated it as the "prison without walls", as he halted construction of a large perimeter wall that was to encircle the housing units. The facility now has a secure fenced perimeter with 4 gun towers. Over the years, various housing units have been added to the sprawling 65 acre facility which now has a bed capacity of 2880. On the first day of the review, the population totaled 2566. In CDCR terminology, CIM-MSF is known as a "Secure Level I" facility.

Located within the MSF, the institution operates an 80 bed infirmary that was previously licensed as a General Acute Care Hospital. The facility continues to provide necessary treatment and care for medical patients requiring sub-acute care as well as those mental health patients requiring temporary crisis care. The institution also provides service to approximately 156 geriatric prisoners in the Elm Hall housing unit located within the MSF.

Overall, the institution is dangerously overcrowded, housing more than twice it's design capacity. The level of overcrowding, juxtaposed against the tremendous amount of inmate movement that must be accomplished every day to meet operational needs and provide medical services requires only the most dedicated and committed staff. Without question, CIM is fortunate to have some of the most committed and hard working custody and health care employees available anywhere. The review has found that systems designed to provide inmate-patient access to care are broken and current staffing levels are insufficient to meet operational needs in a safe, organized and efficient fashion.

### **Institution Statistics**

CIM opened in 1941 and consists of four physically separate facilities situated on a 2600 acre parcel. As of Fiscal Year 2006/2007, the following statistics applied:

Number of custody staff:	1,313	<b>Personal Services &amp; Budget</b>
Number of support services staff:	1,014	
Total number of staff:	2,327	
Annual operating budget:	\$232.2 million	

Security Level	Design Capacity	Count
I	1,484	2,880
RC	1,676	4,020
Total	3,160	6,900

**Inmate  
Security Level,  
Design Capacity  
& Count**

## **REVIEW TEAM ACTIVITIES**

Over the course of the review, the Review Team met with the Warden, Chief Deputy Wardens, Associate Warden Health Care Services, Chief Medical Officer, Chief Physician and Surgeon, Chief Psychologist, Chief of Plant Operations, Custody Captains, Health Records Supervisors, Watch Commanders, Transportation Sergeants, various nursing staff, and numerous other clinical and custody staff throughout the institution. Review Team members made on-site inspections in each facility clinic, the CIM Hospital (now TTA and Infirmary), the Mental Health Services clinics, and other health care delivery points throughout the institution. Inspections were made on both the 1<sup>st</sup>, 2<sup>nd</sup> and 3<sup>rd</sup> Watches. Numerous documents and reports were collected and reviewed.

As a part of this effort, the Review Team reconciled the Post Assignment Schedule against the Master Roster for all Health Care custody positions. They do not have a Correctional Lieutenant for Health Care. Correctional Sergeants positions include a 2<sup>nd</sup> Watch Medical Transportation Sergeant, 2<sup>nd</sup> and 3<sup>rd</sup> Watch Hospital Sergeants, Mental Health Crisis Bed Sergeant, 2<sup>nd</sup> Watch RCC Complex Transportation Sergeant, a 2<sup>nd</sup> Watch MHSDS Sergeant and a Outside Community Hospital Sergeant.

## **CLINIC OPERATIONS**

The Review Team met with the Senior Registered Nurse III (SRN III) to obtain an overview of health care delivery within the CIM complex, the locations of health care delivery points, the hours of operation and a general idea of the number of inmate-patients that are seen each day. Information about clinic operations was also obtained by interviewing the Chief Medical Officer (CMO), Chief Physician and Surgeon (CP&S), Associate Warden Health Care Services, Registered Nurses (RN), Licensed Vocational Nurses (LVN), physicians, supervisors, correctional officers and other individuals. Inspections were made at each clinic and observations were also made of the medication distribution throughout the institution.

**Minimum Support Facility:** There are several areas where services are provided in the Minimum Support Facility (MSF) including the Front Clinic, the TTA/Infirmary, the Elm Hall Housing Unit (an 80 bed "assisted living" unit), Cedar and Oak Hall Housing Units (secure housing units which house new inmate-patients

undergoing orientation), and a Mental Health Building that services the MSF population.

The Front Clinic area includes three buildings that sit opposite the TTA/Infirmary. Two of the buildings are modular office and clinic spaces for mental health clinicians and support staff. One of the buildings is "brick and mortar" construction and is the primary medical clinic for the MSF. Nursing and provider lines are conducted in the Front Clinic. With the exception of mental health medications, all other medication is dispensed from this location. Approximately two hundred inmate-patients receive medication at this location each morning, 7 days a week; however, the authorized coverage is only for 5 days. To remedy this, the Review Team is recommending additional PY authority to provide RDO coverage for the 2<sup>nd</sup> Watch custody positions assigned to provide coverage for the Front Clinic, Posts 1031 and 1032.

The MSF maintains an average of 60 diabetic patients who are serviced in designated insulin lines in the morning and in the afternoon at the Front Clinic. Approximately 200 inmate-patients receive prescription medication twice daily at the Front Clinic Medication line and another 150 – 180 inmate-patients receive "self-carry" medication throughout the day.

Upon entering the TTA/Infirmary entrance, a small medication room is being used to dispense medication to inmate-patients in the mental health program. The mental health medication lines at the MSF are much longer than the regular medication lines, with an average of 300 inmate-patients receiving medication each morning and 450 inmate-patients in the evening. These lines spill out from inside the TTA/Infirmary entrance foyer, down several steps and onto the sidewalk that separates the TTA/Infirmary building from the Front Clinic.

This area was observed to be very congested with inmate-patients. The Custody staff who has been assigned to provide supervision for the Front Clinic should be credited with developing a system to control the flow of inmate-patients going into the TTA/Infirmary area and those that are lining up either for medication or entrance into the Front Clinic. Essentially the correctional officers require all the inmate-patients to check in with them at a makeshift outdoor podium located adjacent to the Front Clinic Entrance. Inmate-patients are confined to an outdoor bleacher area which is covered with a small tarp. Inmate-patients are allowed to enter the TTA/Infirmary in small groups of about 3 inmate-patients at one time. Staging the inmate-patients outside for their medical appointments is certainly less than acceptable; however, given the resources available to the institution, the correctional officers should be credited with making the very best with what they have. Nursing staff in the Front Clinic echoed this sentiment and spoke highly of the Officers assigned to this area.

For the orientation units, Cedar and Oak Hall, approximately 30-50 inmate-patients receive their medication on the unit each morning. Similarly, Elm Hall inmate-patients receive their medication on the unit from an LVN who is assigned to the unit

7 days a week on both 2<sup>nd</sup> and 3<sup>rd</sup> Watch. A physician and an RN augment the clinical care for Elm Hall 5 days a week.

The SRN III explained that medication and clinic schedules are fairly similar throughout the complex. With minor exception the hours of operation are as follows:

4:00 am	Nursing staff arrive to begin setting up for medication lines.
5:00 am – 6:00 am	Insulin line
6:00 am – 10:30 am	Medication line
6:00 am – 11:00 am	Psych Medication line
8:00 am – 11:00 am	Nursing Line
8:00 am – 11:00 am	Provider line
11:00 am – 1:00 pm	Noon medication line
1:00 pm – 4:00 pm	Nurse Triage/Sick call & Walk-in's
4:30 pm – 5:00 pm	Insulin line
4:30 pm – 7:00 pm	Psych Medication line
4:30 pm – 6:30 pm	Medication line
7:30 pm – 9:00 pm	H/S Meds

With nearly 3,000, inmate-patients in the MSF, the Front Clinic, TTA/Infirmary, and Infirmary are extremely busy locations. In addition to the services provided above, 15 – 25 inmate-patients are seen in the clinics daily for blood pressure checks, treatments, inmate/patients seen as a result of the sick call triage process, walk in patients from the Conservation Camps, psychiatrist lines, and various other services such as HIV and TB Clinics. The TTA portion of the TTA/Infirmary building area also provides space for the Specialty Clinic Nurses (both On-Site and Off Site), Medical Appeals, X-Ray, Pharmacy, Lab, Medical Supplies and other offices. To describe the inmate movement in this area as extremely congested would be an understatement.

Up until July 31, 2007, the CIM TTA/Infirmary was licensed as a General Acute Care Hospital (GACH). The license was ordered to be placed "in suspense" by the Receiver who cited, "this action is necessitated by the horrid physical condition of the facility as well as the fact the GACH is out of compliance with, essentially, every licensing requirement articulated in Title 22"<sup>1</sup>. Direction was provided by the Receiver to continue to use the facility as an Infirmary for inmate patients requiring sub-acute medical and mental health needs.

Inconceivably, the inmate movement described above accounts for only part of the work that is conducted in the TTA/Infirmary area. For example, Specialty Clinic appointments for all inmate-patients housed in each of the four CIM facilities occur in the TTA/Infirmary building. There are 11 different specialty clinics scheduled weekly

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<sup>1</sup> July 31, 2007; Robert Sillen, Receiver; Memorandum to Sandra Shewry, Director, California Department of Health Services

in the TTA/Infirmary. Approximately 20 to 25 inmate-patients are seen in each clinic weekly, which translates into another 250 inmate-patients entering the area. Staff estimate more than half of these inmate-patients must be transported by institution transportation teams from the outlining three facilities in order to make their appointments.

The area is further impacted by inmate-patients who are transported to the TTA from the MSF as well as the other yards for emergency treatment. The foyer of the TTA has been retrofitted with large holding cells to accommodate inmate-patients who have been transported from the other CIM facilities for specialty clinic appointments. At any given time, the area will have inmate-patients entering unescorted from the MSF yard for medication or specialty appointments, inmate-patients escorted from the Administrative Segregation Unit (ASU) in RC-Central, inmate-patients transported from one or more of the other facilities for specialty appointments, inmate-patients transported in as "walk-in" patients from surrounding conservation camps, and inmate-patients transported to the TTA for medical emergencies. The Review Team recommended assigning 3 additional custody positions to this area to provide 7 day coverage, based on the inmate movement, even on weekends.

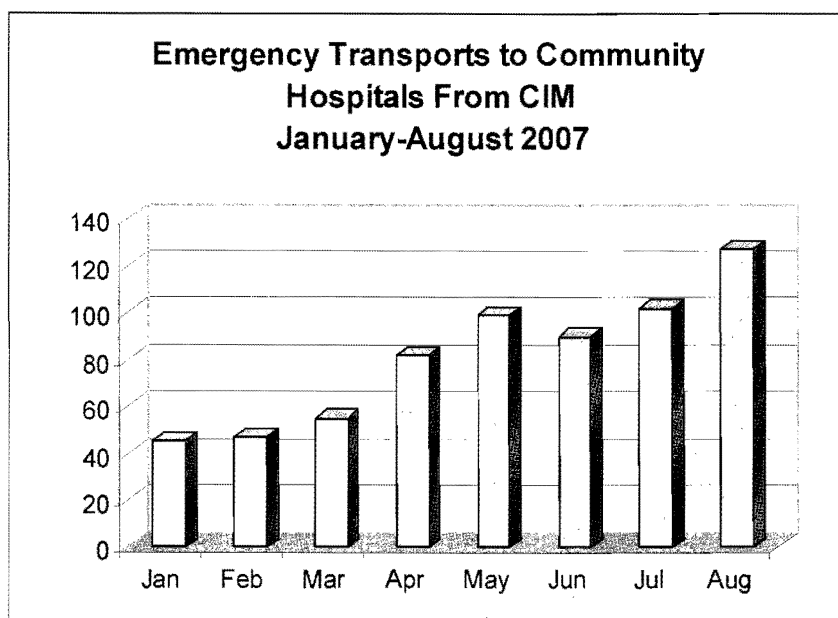
For clarity, the Review Team recommends to the CIM management a name change for CIM Hospital. The areas referred to in this report as "Infirmary" and "TTA" have been historically referred to as the CIM Hospital. Since technically, there is not a licensed hospital being operated at CIM, the 80-bed ward comprised of 4 separate nursing stations should be referred to as the CIM Infirmary. Access to the Infirmary is gained through an electronically operated door. All of the office areas, clinic spaces and the emergency treatment area (formerly referred to as the "Emergency Room" should be referred to as the "TTA". In other words everything on the west side of the electronic door should be called the Infirmary; everything else located on the east side of the electronic door should be called the TTA.

From a custody perspective, both the Infirmary and TTA are understaffed. For example, the institution has been hiring two additional officers on 1<sup>st</sup> Watch to provide coverage for well over one year. The Review Team identified other resources already allocated to the TTA area on 1<sup>st</sup> Watch that, when deployed differently, would enable the institution to eliminate the overtime altogether with only one additional PY being recommended by the Review Team. For the 2<sup>nd</sup> Watch, there is one Officer posted in each of the 4 wings in the unit, however, 2 additional officers are needed 7 days a week to provide custody supervision for higher security inmates housed in the wings. The nursing stations are sufficiently staffed with clinical personnel, enabling each of the 4 wings to operate independently from the other wings. Because nursing functions are similar on both 2<sup>nd</sup> and 3<sup>rd</sup> Watch, and because of the varying custody levels of the inmate-patients admitted to any of the wings, one officer is also needed on each wing during 3<sup>rd</sup> Watch as well. The review team is recommending 2 additional officers be authorized to augment existing staff that collectively, will provide 3<sup>rd</sup> Watch coverage in each station, 7 days a week.



Using existing resources already assigned to the TTA and Infirmary, the Review Team has recommended that the title and duties of the existing 2<sup>nd</sup> and 3<sup>rd</sup> Watch "Hospital" Sergeants be renamed to MSF Infirmary Sergeants. Similarly, the Review Team has recommended the existing 2<sup>nd</sup> and 3<sup>rd</sup> Watch Mental Health Crisis Bed Sergeants be re-titled to the MSF Clinic Sergeants.

For emergency medical care, CIM has staffed the TTA as well as the medical clinics at each of the other 3 facilities with Registered Nurses working an alternate work schedule with 12 hour shifts (6:00 am – 6:00 pm; 6:00 pm – 6:00 am). Staff reported the institution averages between 8-10 medical emergencies each day. During the review, numerous staff throughout the institution expressed a common belief among custody staff that since the license for the GACH was pulled; nearly every medical emergency response has resulted in a Code 2 medical emergency transport to a community hospital. This perception was fueled by an increased number of admissions to outside community hospitals which has generated a marked increase in the amount of unscheduled custody overtime coverage required for medical guarding.



Custody supervisors at CIM have been assigned to meticulously track all overtime expenditures and were readily able to share Daily Activity Reports that support the perception community hospital guarding costs have escalated in the last couple of months. For instance, the Daily Activity Report for August 27, 2007, revealed the 17 correctional officers

had been hired to cover 10 inmate-patients at four different community hospitals – and this was just one 8-hour shift. In the next 24-hour period, the institution would hire a total of 54 correctional officers to cover these inmate-patients. When asked, the Warden was fully aware of this recent trend, and indicated the Chief Medical Officer and the Chief Physician & Surgeon have reviewed the case factors of each and every medical emergency transport, and was satisfied that the medical response in each case was appropriate. The Chief Medical Officer and Chief Physician and Surgeon were also asked about the increase in emergency medical transports and admissions to local hospitals. Rather than a response to the change from GACH to Infirmary, or a response to a recent health care disciplinary case (as

some staff believed), the CMO suggested the increase is attributable to health care staff paying more attention to their patients and to providing appropriate care than was done previously. The CMO stated he had in fact reviewed each case and with little exception, he concurred with the actions taken by staff. The Review Team was impressed with the CMO's understanding of the situation and the work he has undertaken to ensure these cases were handled appropriately. The chart further demonstrates the exorbitant rise in emergency transports. The impact on the institution has been significant in that the institution is obviously not funded for this increase in workload for custody personnel. The ongoing overtime is also a burden on the correctional officers who must be ordered over on overtime shifts to provide the required medical guarding coverage. The Review Team will be addressing additional transportation coverage later in this report, however, Medical Guarding at all institutions will be the subject of a separate analysis after preliminary reviews have been completed at all institutions.

**RC-West Clinic:** The RC-West clinic hours of operation paralleled the MSF Clinic. One RN is on duty 24-7 to provide emergency medical response to the facility. Medication lines begin at 6:00 am for insulin, followed shortly thereafter by all other medication. Between 6:00 am -10:30 am, there are generally 2 provider lines, an LVN line, and an RN line. There are about 18-25 inmate-patients scheduled for each line. There is one Correctional Officer on the 2nd and 3rd Watches. These positions are not budgeted for weekend coverage which has required the institution to hire the needed coverage on an overtime basis.

Several days prior to the site visit, an inmate became disruptive in the RC-West examination room and the physician needed assistance. The single correctional officer assigned to the area was just outside the clinic door, staging inmate-patients who had been ducated for service and was not aware there was a problem. While the incident did not require an alarm response, the amount of inmate-patient movement into this area on 2<sup>nd</sup> Watch necessitates additional staffing. The RC-West mission also now includes providing services to approximately 200 inmate-patients in the mental health services delivery program, which is relatively new. As a result, there has been a direct impact to the medication lines, which have substantially increased the number of inmate-patients who now receive medication. The Review Team believes this will address the security concerns on 2<sup>nd</sup> Watch and provides RDO relief for weekend coverage. RDO coverage is also recommended for the 3<sup>rd</sup> Watch Clinic Officer to supervise medication lines, because medication lines run 7 days a week.

From a physical plant perspective, the clinic itself is undersized and completely inadequate for the services which staff are working hard to provide. Because of the limited space available, sometimes a provider will be seeing patients in the same room and at the same time as a nursing line is being conducted. One nurse stated she was running a clinic line recently while the primary care provider was seeing patients. The inmate-patient she was treating was able to observe the provider as he administered a rectal examination to another inmate-patient in the same room

and told the nurse he would prefer to refuse further service if he had to see the provider next. The RC-West Captain pointed out there is space available in an area formerly occupied by the inmate weight pile to build new clinical space. Like all of the older institutions, the lack of space at CIM, particularly space that is clinically appropriate, presents an enormous barrier to providing adequate health care. The Health Care Facility Improvement Program has been initiated by the Receiver to address these very issues. The Receiver has assembled a team which includes his own staff and Vanir Construction Management. The team is tentatively scheduled to begin work at CIM in the Spring, 2008.

**RC-West Medical Hub:** There is another major health care activity that occurs at RC-West on the 2<sup>nd</sup> Watch. Approximately 12 years ago, the department converted the RC-West gymnasium into a "Transportation Hub" for the Departmental Transportation Unit. The "Hub" as it is now referred to by CIM staff, failed to achieve the operational benefits the department had envisioned and sat vacant. More recently, the institution has set up a makeshift medical clinic in the Hub specifically designed to complete physical examinations on all newly arrived inmate-patients received into the Reception Center.

The process involves transporting inmate-patients from RC-East and RC-Central (and escorting inmate-patients from RC-West) to the Hub in RC-West. Various nursing staff, physicians, dentists, medical assistants and other health care providers report to the hub and approximately 100 inmate-patients each day are processed through each station within the hub. Staff report that approximately 500 inmate-patients are received into the CIM Reception Center each week. Completion of inmate-patient physicals has long been a difficult task to complete. Ideally, physical exams on all newly arriving prisoners should be completed at RC-Central, which acts as the main point of entry through which all new arrivals are processed before housing is assigned in one of the four facilities. Given the lack of bed space, clinic space and other space needed to support these activities, completion of all the physical examinations at RC-Central is unrealistic. As a result, inmate-patients are transferred to either RC-East or RC-West before the physicals can be completed.

CIM staff should be credited with identifying a unique solution to this ongoing issue which historically has prevented case managers from processing inmate-patients through the reception center in a timely fashion. Use of the Hub for this purpose will enable staff to keep pace with the weekly intake of new arrivals and to plan the work in a concerted and organized institution strategy. It was the Review Team's observation the process was working very well and the institution indicated they would very much like the new process to continue. Establishing this process at CIM is an outstanding achievement and should be supported by all parties.

There are resource needs the institution will require in order to sustain this activity. Custody coverage has been provided on an overtime basis consisting of 2-3 Correctional Officers each day and the Review Team is recommending these positions be established permanently. Secondly, the building will require significant

physical plant improvements to transform it into a "clinically appropriate" space. The building is not air conditioned, and while there are some offices inside, additional plant modifications must be completed as soon as possible. It is recommended this project be reviewed as soon as possible as part of the Receiver's Health Care Facility Improvement Program previously mentioned in this report.

**RC-Central:** The clinic hours of operation at RC-Central were consistent with MSF and RC-West. Distribution of medication for diabetics begins at 6:00 am, followed by the normal medication distribution at about 7:00 am. At RC-Central, all medication is distributed at cell front and takes several hours in the morning and in the evening. Staff related approximately 600 medications are distributed on each shift (2<sup>nd</sup> and 3<sup>rd</sup> Watch). All of the nursing staff reported that custody staff assist with the medication and they are never left down the tier alone.

Between 6:00 am and 4:00 pm, there are various clinic and provider lines conducted in the RC-Central Clinic, including the following:

6:00 am – 2:00 pm	LVN Line
7:30 am – 3:30 pm	Provider Line (3 lines daily)
6:00 am – 2:00 pm	RN Triage
6:00 am – 2:00 pm	HIV Clinic (scheduled every other week)
7:00 am – 3:00 pm	TB Nurse Line
7:00 am – 3:00 pm	Dental Line
7:30 am – 3:30 pm	Physical Exams (scheduled as needed)

While the number of inmate patient in the each line can vary from day to day, the average is about 20 patients per day per clinician. In speaking with the CMO about this subject, he has made his expectations clear to everyone, that he expects the physicians to see at a minimum, 15 inmate-patients scheduled each day, and expects there to be sufficient time in the clinician's schedule to also accommodate 5 "walk-in" patients each day as well.

A small number of physicals are also conducted at RC-Central, namely for those inmate-patients placed in the ASU upon arrival to the Reception Center and for those inmate-patients who are mobility impaired and confined to a wheelchair.

The Review Team observed the Mental Health Clinic at RC-Central and found 2 Clinic Officers to be working very hard in order to minimize the amount of time clinicians wait to see patients. One of the two officers remained at the Clinic to check the ducat list and to control inmate movement back and forth between the waiting area and the clinician's offices. The second position, which is unbudgeted, was responsible for escorting inmate-patients from their housing units, as well as from the holding tanks located in the main corridor, to the clinic office and back again.

Inmate movement within RC-Central has evolved over the years as a very complex operation. Because of the old physical plant design, all of the housing units as well as all of the service areas branch off of one long centralized corridor, which is why this design has been referred to as a "telephone pole" design. In more recent years, the department has adopted a "Sensitive Needs" labeling criteria, based on specific inmate case factors. Because of this, the department attempts not to mix General Population inmate-patients with Sensitive Needs inmate-patients. With only one main corridor through which all inmate-patients must pass, it becomes increasingly difficult for housing unit officers to release inmate-patients at the times they are ducated for because of the security concerns in allowing unrestricted movement within the corridor. This situation is further exacerbated when ASU inmate-patients are escorted down the corridor, which temporarily suspends all other movement as well.

The Chief Psychologist confirmed the problems with inmate movement at RC-Central when the Review Team met with him. Although he indicated that custody staff were working extremely hard to provide access to patients, the restrictions on inmate movement and the lack of custody resources has been an ongoing barrier to making full use of the mental health resources that are available. The Review Team is recommending permanently establishing the second medical/mental health escort position and has further recommended the institution initiate data collection to determine if an additional position is needed to ensure clinicians are not waiting for their patients.

According to the RC-Central Watch Commander, the numerous transports to the TTA and outside hospitals has depleted staffing levels to the point that yard and other programs cannot be provided to the remaining inmate-patients. The Review Team examined documentation that reflected numerous instances where the institution was forced to go into modified program status due to medical escort or transport functions, based solely on the lack of custody staff who remained. To address these issues, the Review Team recommended adding RDO relief to the Clinic and Plata Officers on 2<sup>nd</sup> Watch and adding a 3<sup>rd</sup> Watch Medical Clinic Officer in RC-Central.

**RC-East Clinic:** The clinic schedule at RC-East Facility mirrors the other operations at the other CIM clinics. The East Facility also maintains a small clinic for HIV inmate-patients in the Del Norte Housing unit. Medication distribution is accomplished in each housing unit at a medication room allocated for this purpose. The lines vary in size from 40 to 80 inmate-patients who line up at the medication room after being released from their cell by custody staff. There are 3 existing Plata Officers (2 on 2<sup>nd</sup> Watch; 1 on 3<sup>rd</sup> Watch) who provide custody coverage, escorts and supervision for mental health groups. Because of the 7 day operation, the Review Team has recommended these positions be augmented with RDO coverage.

While at the East Facility, the issue of how refusals for service were being handled came to the Review Team's attention. The Clinic Officers expressed a good understanding of the process and indicated they now require the inmate-patient to respond to the clinic to personally sign the refusal, which is a fairly recent change in procedure. The staff indicated that sometimes, inmate-patients with specialty clinic appointments at the MSF are cancelled by transportation team officers and occasionally by other health care staff. It is recommended the Associate Warden, Health Care Services monitor this process carefully to ensure that inmate-patients are required to respond to all medical ducats and that staff are not signing refusals "on behalf of" the inmate-patients. The custody staff also expressed concern about double and even triple ducats being issued for the same inmate to see different clinicians at the same time. The staff indicated that this happens on a regular basis and they are concerned about which ducat the inmate should be responding to. The Review Team agrees this is a potentially serious matter and recommends the Associate Warden, Health Care Services meet with the respective health care managers in both medical and mental health to eliminate overbooking inmate-patients for more than one health care appointment at a time. Custody staff should be provided with clear direction to follow should this continue to happen.

The Review Team also observed the amount of inmate movement into and out of the Receiving and Release area at RC-East. More than 100 inmate-patients each day are funneled through this area, with the majority of the movement generated by medical appointments. Only one officer is available, and this was clearly inadequate to meet the demands of processing this many patients through the area. One Access to Care Officer is being recommended to process these large numbers of inmate-patients.

**Chief Medical Officer (CMO):** The CMO was very articulate and presented a clear vision of the direction he was pointing the Health Care team toward. His efforts to raise the bar in health care delivery were evident. It was also clear to the Review Team that based on interviews and direct observation, the organizational culture at CIM has been somewhat resistive to the CMO's leadership, as well as the making of operational changes to improve the delivery of services for inmate-patients.

**Administrative Segregation Unit:** The CIM ASU comprises two housing units located directly across from one another located along the east side of the RC-Central main corridor. The first is Palm Hall and the second unit is Cypress Hall. Each has a capacity of 170; however the Review Team noted the count sheet of August 26, which reflected the Palm Hall count at 180. The Review Team had been informed that inmate-patients from ASU are not always escorted to specialty clinic appointments which are held in the TTA area at the MSF. The ASU Lieutenant confirmed there has been an ongoing problem with getting ASU inmate-patients to specialty clinic appointments at the MSF. He indicated there were two primary reasons for the problem. First, the ASU lacks the dedicated medical escort officers that are needed. Secondly, there is a shortage of vehicles available to make the

transport. The ASU is also providing services to inmate-patients in the mental health program and have implemented group therapy on weekdays and psych lines on the weekends – all of which require dedicated escort personnel. After reviewing all of the existing inmate movement workload against the budgeted ASU staff, the Review Team has recommended the addition of 3.48 PY for an ASU Medical Escort team. This team would be comprised of 2 Correctional Officers assigned 7 days a week on 2<sup>nd</sup> Watch specifically to address the issue of escorting inmate-patients to specialty clinic appointments. The Review Team has also recommended additional vehicle resources, which are discussed further in this report.

**CIM Complex Transportation Sergeant:** The CIM Complex Transportation Team was established as a resource to move prisoners from one facility to another. The team is comprised on one Sergeant who supervises 8 Correctional Officers who are deployed in two teams on both 2<sup>nd</sup> and 3<sup>rd</sup> Watch.

Unlike most of the other institutions, CIM is comprised of four physically separated facilities, each with a separate perimeter fence and vehicle sallyport. In many other states, CIM would be considered as four separate prisons. Because of the physical plant, the distance between the facilities, (RC-East is located 2 ½ miles from the other three), the additional time that is required to exit/enter a sallyport every time inmate-patients are transported to/from one of the facilities, inter-facility movement of prisoners at CIM is a long, staff-intensive and meticulous process. In addition to making daily compaction moves (re-housing inmates to make more cells available by double-celling), the Complex Transportation team transports inmate-patients from the 3 reception centers to specialty clinic appointments at the MSF, as well as transporting inmate-patients from RC-East and RC-Central to the Medical Hub at RC-West to complete new arrival physical exams. Over the years, the Complex Transportation has also undertaken many other roles. The Team transports all the inmates endorsed for transfer from CIM to permanent housing at the California Rehabilitation Center. The team also transports CIM prisoners for their court appearances. Finally, the team is called upon to effect medical transports to the California Medical Facility, Salinas Valley State Prison, Atascadero State Hospital, California Medical Facility, California Substance Abuse Treatment Facility, and others. Additional officers are routinely hired on an overtime basis to meet these needs.

The vehicles assigned to the Complex transportation team consist of 2 aging Bluebird busses (1990; 1998), 1 sedan and 2 vans. The Complex Transportation Sergeant indicated that these vehicles were constantly in for service. Recently, one of the vans broke down on the Grapevine and the other caught fire. The Sergeant added that she does not have enough vehicles to meet all of the transports that are required, and often, trips are cancelled or postponed. In addition to securing 4 additional transportation vans, the staff from the office of the Receiver are pursuing a contract to purchase CIM 2 additional busses.



**On-Site Specialty Clinic Nurse:** The Review Team met with the Registered Nurse (RN) responsible for scheduling the on-site specialty clinics. Eleven separate clinics are scheduled weekly with each clinic accommodating between 20-26 appointments. Because of extremely limited space, the clinics are conducted in the RN's office at the MSF. It was incredulous to learn the specialty clinic RN was also assigned to assist the outside specialty providers manage each of the specialty clinic lines. Clearly, the RN is doing the work of two and an additional nurse is needed as well as an office dedicated to planning, organizing and scheduling the work. There is also an issue concerning the lack of a personal alarm system for this area. The RN's were advised they would be added to the alarm system recently installed for the dental clinic, but nothing has ever transpired. It is recommended the A/W HCS review this issue and take action as may be required. In the meantime, it is imperative that all clinical staff carry personal whistles to signal alarm.

While current space limitations at CIM preclude further expansion of on-site specialty clinics, the RN was confident that if appropriate space was available, 5 additional clinics could be scheduled weekly, with each handling approximately 20 inmate-patients. The clinics the RN recommended included Audiology, Dermatology, MRI, Orthodontics, and Ultra Sound.

The RN advised the Review Team of an ongoing problem in getting patients transported from the other facilities to make their scheduled appointments, and from the ASU in particular. As recent as the Friday preceding the on-site review, inmate-patients were escorted for only one of 16 scheduled appointments. As of about 10:00 am on the day the RN was interviewed, 7 inmate-patients had been scheduled for appointments, however, none had been seen.

**Off-Site Specialty Clinic RN:** There are 2 RN's and one Licensed Vocational Nurse (LVN) assigned to facilitate off-site specialty clinic appointments. CIM uses providers at Riverside Community Regional Medical Center, Loma Linda University, Alvarado Hospital and Vantage Radiology. There are anywhere from 15 to 25 inmate-patients being transported for outside appointments each day with an average of 75 per week.

The RN stated she has an excellent working relationship with the CIM Complex Transportation Sergeant and they communicate well together. There have been occasions, however, when appointments have had to be rescheduled because of other competing priorities. The week prior to the site review, one of the facilities would not release inmate-patients to the Complex Transportation Team because of a training drill that precluded the inmate-patients from being released. The respective Captain at the affected facility was made aware of this concern, and indicated he would follow-up.

Another concern expressed by the RN is that inmate-patients are not being seen by their primary care provider with 14 days of their return from specialty clinic appointments. The impact of this is that essential follow-up on orders that were



made by the specialty clinic physicians are not being completed, which causes backlogs and duplicate work. This issue was brought to the attention of the CMO, who stated he was aware of the problem and confirmed that less than 10% of the returning inmate-patients are being seen for follow-up by their provider. The CMO also stated he was addressing this shortcoming with the appropriate staff.

**Health Records Technician II:** The Review Team met with the 3 Supervising Health Record Technician's II. Each of the three is assigned to perform different functions. One supervises the evening shift in medical records, one supervises the support staff assigned to the mental health programs and the third supervises the support staff assigned to the medical clinics and the latter 2 co-supervise the medical records on the day shift.

The HRT II's indicated they have a significant backlog of medical filing. While recent efforts (overtime) have resulted in a reduction, the backlog continues to exceed their resources to keep current. One of the problems they have experienced is the high turnover of staff. They indicated that they no sooner are able to get someone hired and on board when the person transfers to a better position in the institution. The Review Team has recommended the institution evaluate reclassifying the medical records Office Assistants to Health Records Technicians in order to improve the monetary compensation and stabilize the high turnover.

The HRT II's also explained the chaotic working environment at CIM. Because the institution has been without a Correctional Health Services Administrator (CHSA) or a Director of Nursing, they have been receiving their instructions directly from the Chief Medical Officer. They also receive instructions from many other administrators in the CIM complex, and often, the instructions are at odds with the direction given to them by the CMO. In addition, various Associate Wardens, Captains, and even Correctional Counselors have directed Medical Records Office Assistants who work in the satellite facilities to ducat inmate-patients for medical services within the reception centers at the last moment – without the HRT II's knowledge. On other occasions, they are directed to ducat inmate-patients for multiple provider lines, knowing that only one physician will be available to see patients. Ducating inmate-patients in numbers that reasonably exceed the amount of patients that will be seen spawns unnecessary inmate movement, congestion and poses unneeded security risks. In summary, the HRT's felt like they were being tugged in many directions by "many chiefs".

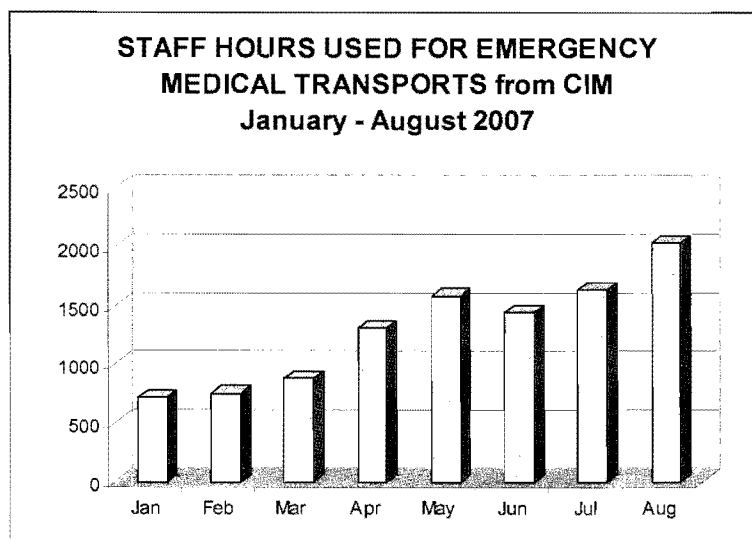
In discussing these concerns with the CMO, he confirmed that there was indeed a leadership void with mid-managers within the Health Care Division at CIM. He shared that because there were no other managers on board, he does in fact provide direction to the HRT II's and even to the Office Assistants. The CMO advised interviews for the CHSA position were recently completed, and the new appointee will be reporting shortly. As a recommendation, the Review Team strongly urges the new CHSA and the Associate Warden, Health Care Services to

meet and ensure that custody supervisors, managers and administrators become more familiar with health care processes as they exist and are intended to operate. While the HRT-II's should be a resource and helpful to the entire institution, there are systems that should be followed and the unit as a whole should be receiving their guidance and support from the CHSA. Correctional Counselors should not be attempting to schedule new arrival medical exams at East Facility as was reported to the Review Team. More over, the CHSA should take an active role in the inmate movement process. The Review Team found that the RC-West Custody Captain has attempted to fill some of the leadership void in the Health Care Division by advising the HRT II's to schedule the new arrival physical exams in the Medical Hub. Scheduling provider lines should not be delegated to the Captain. Rather, this is a medical administrative function that should be made by health care management in coordination with custody management representatives. Failure to establish, follow and rely upon established procedures only adds to the "crisis operating environment" that permeates daily operations at CIM.

**Medical Appeals:** The Review Team met with the Staff Services Analyst assigned to answer Medical Appeals. The SSA indicated she has seen a marked decrease in the number of ADA complaints, especially since the institution has received additional staff to focus on this issue specifically. She stated the prison receives approximately 250-300 medical appeals each month and acknowledged she has received appeals from inmate-patients who have missed their specialty clinic appointments because they were not transported to the appointment.

**Medical Supplies:** The review team met with the Materials and Stores Supervisor I (MS&S I) assigned to deliver medical supplies throughout the institution. The MS&S I advised she is the only position allocated for this purpose for the entire complex. A small room located at the MSF TTA/Clinic area is used as a staging area to store medical supplies for the entire institution. Clearly, one MS&S I is insufficient given the size and complexity of the institution, which in this case should be considered as four separate facilities. Additional medical warehouse space will be addressed by the Receiver's Health Care Facilities Improvement Project later this year and staffing requirements should be more thoroughly vetted at that time.

**Medical Transportation Sergeant:** The Review Team met with the CIM Medical Transportation Sergeant who supervises 7 medical transportation officers assigned to the 2<sup>nd</sup> Watch. The impact to the dramatic increase in the number of inmate-patients transported to outside community hospitals as previously described in this report has had a corresponding impact on the custody staff requirements. In August 2007, the hours had escalated to 4226 hours, over 6 times the January total of 720 hours. Over the last 8 months, the Medical Transportation Team has averaged 1294 hours, a projected annual monthly average of 15,528 hours for custody transports. In terms of staffing resources, it is estimated that an additional 8 Correctional Officers are needed to absorb all of the off-grounds transports CIM is required to make each month.



In addition to the recommending additional correctional officers, the Review Team has recommended the institution rearrange the workload assigned to the Complex Transportation Team and the Medical Transportation Team. Simply put, the Complex Transportation Team should not be pulled in so many different directions. The team should be dedicated to moving prisoners from

facility to facility on both 2<sup>nd</sup> and 3<sup>rd</sup> Watch. All other inmate-patients requiring transportation to any destination off grounds should be assigned to the Medical Transportation Sergeant. Both teams are currently overlapping some what in their responsibilities, and neither team has the staffing or vehicle resources necessary to accomplish the mission. By devoting one team to inter-facility moves only, staff can focus more clearly on these two functions with the goal of improving patient care, eliminating cancelled appointments to off grounds providers or expensive specialty clinic physicians coming into the institution and waiting to see patients. There are so many demands being placed on both Sergeants that the institution operates in "crisis mode" on a regular bases with various administrators, supervisors, and other staff requesting transports, often without having all of the information available to understand the impact of their individual requests on the entire system. Unfortunately, this system is broken.

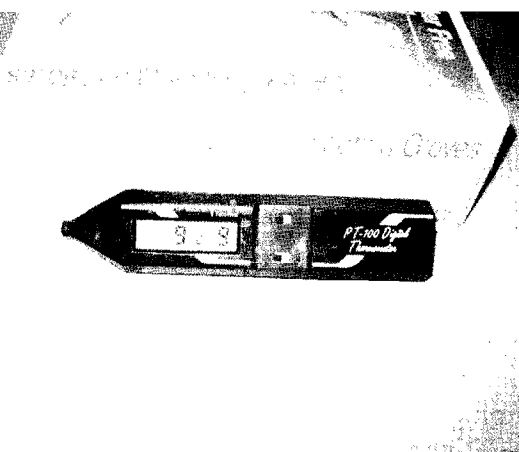
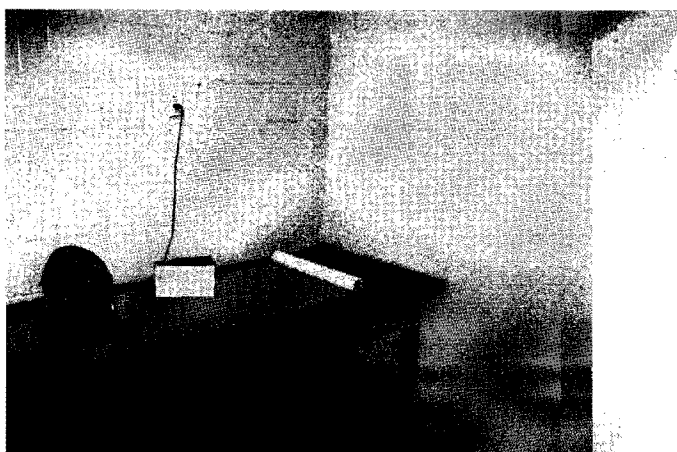
A lack of medical transportation vehicles is also contributing to the crisis in health care access at CIM. The week prior to the Review Team's arrival, a Code 3 ambulance was required to wait for over one hour before transporting the patient to the outside community hospital because there were no other vehicles to provide security coverage in a chase vehicle. Fortunately this delay did not compromise the patients' health; however, the consequences could have been fatal. On one afternoon during the review, the Review Team observed another ambulance leaving the institution and an institution Para-transit van was being utilized as the chase vehicle because there were no other vehicles available. The institution simply lacks the resources needed to meet the operational needs. The Review Team has recommended the purchase of two sedans as an emergency measure to address the immediate needs. Although the institution has access to a guarding unit at Riverside Community Regional Medical Center (RCRMC), the hospital is 35 miles from the institution, about 1½ hours in traffic and this is only one of several hospitals that accept patients from the institution. Other hospitals include Arrowhead Regional

Medical Center is 22 miles away and Loma Linda University Hospital, about 31 miles away – both of which are more than an hour's drive from the prison. Closer, the prison also has patients transported to Pomona Valley Hospital, Doctor's Hospital in Montclair and Chino Valley Medical Center. While much closer, transports to these locations tie up the staff and vehicles for long periods of time because the surrounding community is highly developed and very congested.

Patients being transported to outside hospitals on an emergency basis cannot be held up while custody supervisors scramble to find a chase vehicle. Four other transportation vans have been purchased for CIM. A para-transit van was received at the institution before the Review Team completed the review and delivery of the 3 remaining transportation vans is forthcoming within the next 30 days.

**Clinical Space and Employee Working Conditions:**

When considering the working conditions for the staff at CIM, with some minor exceptions, the space issues at CIM are among some of the worst conditions the Review Team has encountered while conducting these preliminary reviews. It was common for several staff members to be jammed into a space meant for one. The Review Team observed the Cypress Hall clinic and while it may have been freshly painted, there was an overpowering odor of mold. The temperature inside the clinic at 6:30 am was found to be in excess of 90 degrees (*See photos below*). Clearly the working conditions for staff must be improved in order to fully implement the vision shared by the CMO and the Warden for their employees.



Employees must be made to understand that their basic needs are every bit as important as the inmate-patients they are charged with serving.

In one clinic, the Review team noted the floors, walls and ceiling were filthy, with cobwebs hanging in the corners and from the air vents. With the exception of the clinic at the East Facility, it did not appear any of the health care access points were cleaned on a regular basis. One of the Supervising RN's attempted to minimize the shoddy cleaning efforts of the inmate assigned to clean the clinic. The Review Team advised the RN, that just as the CMO was raising the expectations for health care staff, expectations should also be raised for the inmates assigned to clean clinical areas. Even though the Receiver's Health Care Facility Improvement Plan will be addressing the lack of appropriate clinical space at CIM, staff should not have to work in such an unclean work environment.

**Other Matters:** It also came to the Review Team's attention that inmate-patients were performing clerical functions in the medical clinics at the three reception centers and the Review Team confirmed this practice at each of the three reception center clinics. At the exit interview with the Chief Medical Officer and the Warden, the Review Team advised the management staff that Office Assistants were allocated to each institution specifically to perform clerical functions and to immediately discontinue the use of inmates for clerical support. Should the workload exhaust the resources previously allocated, the institution was asked to provide a written justification for additional resources.

## **ORGANIZATIONAL AND SYSTEM RECOMMENDATIONS**

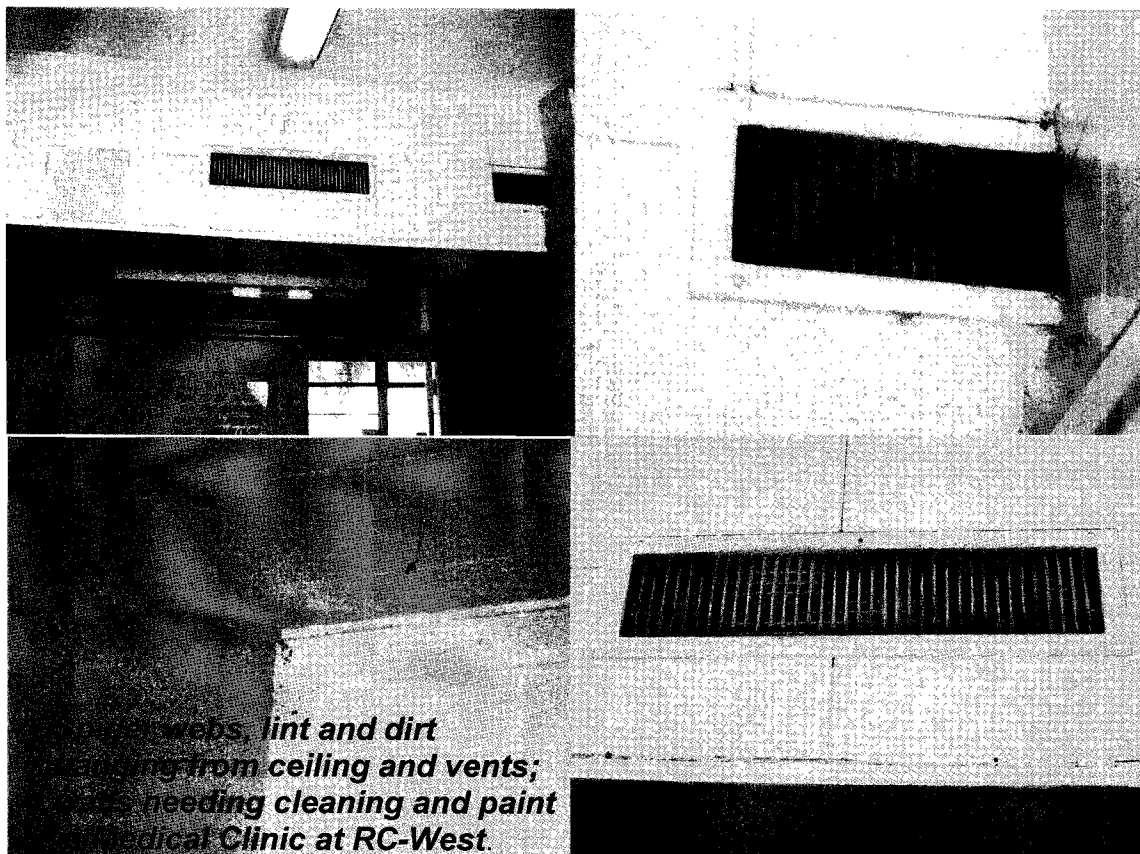
**Re-define role of Associate Warden – Health Care Services:** Currently, the Associate Warden, Health Care Services at CIM is located in an office at RC-West Facility. Although the incumbent is involved in access issues to some degree, there are no resources assigned to this position to make the impact which is necessary for access to care. The position is also responsible for managing other non-health care related workload. Accordingly, the Warden is requested to reevaluate administrative assignments as position should be allocated solely for providing oversight to a new "Access to Care" division which is to be created from new and existing resources. In addition, the Associate Warden, Health Care Services office at RC-West has been effective in removing him from contact with other health care administrative staff. The Review Team is recommending the Warden reevaluate this manager's office location with the goal of moving him to a location that will place him in closer proximity to the primary areas he has been assigned to manage.

**Create Clinically Appropriate Work Space:** The Review Team met briefly with the Chief of Plant Operations regarding the condition of the physical plant. CIM is an old institution, and certainly it would be realistic to anticipate more than the usual challenges for the plant operations staff. The Review Team observed a physical plant that is deteriorating faster than the resources can sustain. As previously mentioned all of the medical spaces at CIM are in urgent need of repairs and maintenance; peeling paint, poor lighting and floor coverings, water leaks, and other issues were obvious. For the most part, none of the areas are clinically appropriate.

The temperature in the medication room in ASU (Cypress Hall) was over 90 degrees at 6:30 am in the morning. While the room had been painted, there was strong overpowering odor of mold that permeated the air. The walls in the medical clinic at RC-W had peeling paint and the air vents were clogged with debris.

The Chief of Plant Operations was very candid with the Review Team, and acknowledged the general conditions of the buildings and the grounds were "embarrassing." He is fighting an uphill battle, however, in addressing the workload and pointed to the long history within the CDCR of making unallocated budget reductions. During past years, Wardens were directed to reduce operating costs by making unallocated position cuts from one of three areas – Plant Operations, Food Services and Education. The CDCR headquarters is aware of the current staffing deficiency at CIM. A Resource Review completed by the current Undersecretary in May 2005 recommended an augmentation of 25 staff of various classifications for CIM Plant Operations. The staffing request was never authorized. The Review Team recommends the Receiver authorize funding to hire causal laborers that would be assigned by the CIM Chief of Plant to make the necessary repairs and maintenance to the clinic areas within the institution as was done at San Quentin.

**Improve cleanliness in health care access areas:** Simultaneously, the Review Team recommends the Associate Warden, Health Care Services review the cleanliness of all health care delivery areas within the entire institution.



**CALIFORNIA  
PRISON HEALTH CARE  
RECEIVERSHIP CORP.**

Robert Sillen  
Receiver

November 8, 2007

TO: Muhammad Farooq, M.D.  
Health Care Manager  
California Institution for Men

Mike Ponlos  
Warden  
California Institution for Men

FROM: Robert Sillen  
Receiver

SUBJECT: Approval of Additional Custody Positions at California Institution for Men

As you are aware, staff from the California Prison Health Care Receivership (CPR) conducted a review of your immediate custody needs to support the medical operations at your institution. As a result of this review, the team has recommended an additional 56.70 Personnel Years (PYs) for your institution. I have attached a copy of the team's report for your information and use.

Approval of these additional PYs is contingent on the following:

1. Write or revise institution post orders for the positions recommend in the attached detailed report.
2. Submit the post orders to Joe McGrath, Director, Custody Support Services, located in my Sacramento office for review and approval.
3. The post orders shall clearly state the positions will not be redirected to any other duties, except in a serious emergency situation. Redirections of these positions require a letter to my office as to the reason, the length of the redirection and an explanation of how medical services will be accommodated in the absence of the officer(s). This requirement is not for a temporary redirection during a serious emergency situation, but for any redirection lasting longer than the immediate emergency or 12 hours, whichever is shorter.

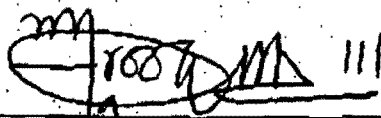
These positions, the additional PYs, as well as any redirected or renamed PYs, shall be identified in the Institution Personnel Office as being exempt from unallocated budget cuts, or reclassification/redirection, without the advanced written permission by my office. These positions will be allocated to and budgeted within the Program 50 budget.


Additionally, I anticipate these positions will be administered consistent with the Unit 6 collective bargaining agreement, including application of post and bid provisions. To the extent that additional negotiations impacting these positions are required neither CDCR headquarters nor the local institution may enter into any agreement impacting these positions until the proposed agreement is reviewed by my office.

Upon receipt and approval of the post orders, a memorandum will be sent to you authorizing you to initiate the activation of the necessary PY authority. You may do this in conjunction with the Plata Support Services Division in our Sacramento office.

If you are in agreement with the requirements as stated herein, please sign and date below, and fax this letter to my Sacramento Office, attention Jennifer Cravenho at (916) 323-1257. Please contact Joe McGrath at (916) 494-2130 with any questions.

Thank you.

 11/9/07  
Muhammad Farooq, M.D. (date)  
Health Care Manager, CIM

 11/9/07  
Mike Poulos (date)  
Warden, CIM

- c: Joe McGrath, Director, Custody Support Services  
Rich Kirkland, Director, Plata Support Services  
Yulanda Mynhier, Deputy Director, Health Care Administrative Operations  
Steven Ritter, D.O., Regional Medical Director-South  
Susan Scott, R.N., Regional Director of Nursing  
Mary Jo Bruns, Regional Administrator-South  
Scott Kernan, Deputy Chief Secretary, Adult Operations



# APPENDIX 2

## SUMMARY OF NEW POSITIONS APPROVED BY THE RECEIVER

The following augmentations were based on analysis and recommendations made on-site Preliminary Operational Reviews conducted by Office of Receiver – Custody Support Division.

### CALIFORNIA CORRECTIONAL CENTER

Post	2 <sup>nd</sup> Watch	3 <sup>rd</sup> Watch	Comments
Health Care Lieutenant	1.00		New PY Authority
Access to Care Sergeant	(1.20) (.56)		(Redirect 1.20 Coleman Sergeant) (Identify and redirect .56 PY for relief.)
Medical Clinical Sergeant	(.56)		(Identify and redirect .56 PY for relief.)
Lassen Medical On-Grounds Transport officers	1.08	3.48	
Infirmery Rover Officer	1.74	1.74	
Cascade Medical Escort Officer	1.74		
Sierra Medical Escort Officer	1.74		
Office Technician for Lieutenant/Transportation	1.0		
Office Technician Scheduling Office	1.0		
Medical Transportation	(3.48)		(Redirect the 1 <sup>st</sup> and 2 <sup>nd</sup> watch Coleman Officer posts. No existing Coleman caseload
<b>Total New PY Authority</b>	<b>9.30</b>	<b>5.22</b>	
<b>Combined Total of New PY's = 14.52</b>			

#### CCC Recap:

Correctional Officer	12.52
Correctional Lieutenant	1.0
Office Technician	1.0

## HIGH DESERT STATE PRISON

Post	2 <sup>nd</sup> Watch	3 <sup>rd</sup> Watch	Comments
Correctional Lieutenant	1.26*		* Varied Hours
Yard Clinic Sergeant	.56*	1.76	* .56 PY to augment 1.20 PY redirected from the Coleman Sergeant
CTC Sergeant		1.26*	* 1.26 PY to offset PY redirected from Voc Sergeant to establish CTC Sergeant in 2003.
Facility A Clinic Officer	.56 *	1.74	
Facility B Clinic Officer	.56 *	1.74	* .56 PY to augment current staffing to provide 7 day a week coverage within the clinic
Facility C Clinic Officer	.56 *	1.74	* .56 PY to augment current staffing to provide 7 day a week coverage within the clinic
Facility D Clinic Officer	.56 *	1.74	* .56 PY to augment current staffing to provide 7 day a week coverage within the clinic
Complex I Medical Escort Officer	1.74	1.74	
Complex II Medical Escort Officer	1.74	1.74	
CTC Rover Officer	1.74	1.74	
Facility D Medical Escort Officer	1.18		
<b>Total New PY Authority</b>	<b>10.46</b>	<b>15.20</b>	
<b>Combined Total of New PY's = 25.66</b>			

### HDSP Recap:

Correctional Officers	22.58
Correctional Sergeants	1.82
Correctional Lieutenants	1.26

**CSP- SOLANO**

<b>Post</b>	<b>2<sup>nd</sup> Watch</b>	<b>3<sup>rd</sup> Watch</b>	<b>Comments</b>
Coleman Sgt., Post #0312		.56	Re-title to Medical Services Sergeant as reflected in the Master Roster. Add new PY authority .56 relief to cover weekend clinic operation. Position is to report to the Access to Care Lieutenant.
Medical Services Sgt. Post #0329	.56		Add new PY authority for .56 relief to cover weekend clinic operation. Position is to report to the Access to Care Lieutenant.
Medical Services S&E Post #1553	.56		Re-title to Primary Care Center S&E. Needs new PY authority for .56 relief to cover weekends. Change hours on M.R. to 0700-1500 hrs. Position is to report to the 2 <sup>nd</sup> Watch Medical Services Sergeant.
Medical Services S&E Post #1552	.56		Re-title to Primary Care Center C/O and change hours to 0700-1500 hrs. Need new PY authority .56 relief to cover weekends. Position is to report to the 2 <sup>nd</sup> Watch Medical Services Sergeant.
Medical Services S&E C/O Post #1555	.56		Re-title to Primary Care Center S&E. Needs new PY authority for .56 relief to cover weekends. Change hours to 0700-1500 hrs. Position is to report to the 2 <sup>nd</sup> Watch Medical Services Sergeant.
Medical Services S&E C/O Post #1560		.56	Re-title to Primary Care Center S&E. Needs new PY authority for .56 relief to cover weekends. Position reports to the 3 <sup>rd</sup> Watch Medical Services Sergeant.

Post	2 <sup>nd</sup> Watch	3 <sup>rd</sup> Watch	Comments
(New Post) Access to Care Lieutenant	1.0		Need new PY authority 1.0 Correctional Lieutenant to work under supervision of AW, HCS, Post #0005, to provide second line supervision of custody personnel. Hours of work are to be varied – both 2 <sup>nd</sup> and 3 <sup>rd</sup> Watch.
(New Post) Medical Annex S&E C/O	1.18		Need new PY authority 1.18 Correctional Officer to provide escorts for inmate patients from the facilities to the Medical Annex during 0700-1500 hrs. Position is to report to the 2 <sup>nd</sup> Watch Medical Services Sergeant.
(New Post) Medical Annex S&E C/O		1.18	Need new P.Y. authority 1.18 Correctional Officer to provide escorts for inmate patients from the facilities to the Medical Annex during 1400-2200 hrs. Position is to report to the 3 <sup>rd</sup> Watch Medical Services Sergeant.
(New Post) Primary Care Center S&E C/O		1.74	Need New P.Y. authority 1.74 Correctional Officer to provide escorts, supervision and accountability for inmate patients scheduled for medical appointments during 1300-2100 hrs. Position is to report to the 3 <sup>rd</sup> Watch Medical Services Sergeant.
(New Post) Satellite Clinic S&E C/O	1.18		Need new PY authority 1.18 Correctional Officer to provide escorts for inmate patients from the facilities to the Satellite Clinic during 0700-1500 hrs. Position is to report to the 2 <sup>nd</sup> Watch Medical Services Sergeant.

Post	2 <sup>nd</sup> Watch	3 <sup>rd</sup> Watch	Comments
(New Post) Satellite Clinic S&E C/O		1.18	Need new P.Y. authority 1.18 Correctional Officer to provide escorts for inmate patients from the facilities to the Satellite Clinic during 0700-1500 hrs. Position is to report to the 3 <sup>rd</sup> Watch Medical Services Sergeant.
(New Post) Specialty Clinic S&E C/O	1.18		Need new P.Y. authority 1.18 Correctional Officer to provide escorts for inmate patients from the facilities to the specialty clinics during 0700-1500 hrs. Position is to report to the 2 <sup>nd</sup> Watch Medical Services Sergeant.
(New Post) MRI and CT Scan Trailers S&E.	1.18		Need new P.Y. authority 1.18 Correctional Officer to provide escorts for inmates patients to the MRI and CT Scan Trailers during 0700-1500 hrs. Position is to report to the 2 <sup>nd</sup> Watch Medical Services Sergeant.
<b>Total New PY Authority</b>	<b>7.96</b>	<b>5.22</b>	
<b>Combined Total of New PY's = 13.18</b>			

**CSP-Solano Recap:**

Correctional Officers	11.62
Correctional Sergeants	.56
Correctional Lieutenants	1.0

# RJ DONOVAN CORRECTIONAL FACILITY

Post	2 <sup>nd</sup> Watch	3 <sup>rd</sup> Watch	Comments
New Post Health Care Access Lieutenant	1.0		Need new P.Y. Authority, 1.0 Correctional Lieutenant to work under the supervision of the Associate Warden, Health Care Services Post # 0005, to provide second line supervision of custody personnel in the Health Care Access Division. Hours of work to vary to cover workload.
Staff Services Analyst "New Post"	1.0		Need new P.Y. Authority, 1.0 Staff Services Analyst position to complete medical appeals in a timely manner as the workload has more than doubled with the level IV SMI mission change.
New Post Facility V Clinic C/O	1.18		Need new P.Y. Authority, 1.18 Correctional Officer to provide security coverage of the facility V clinic during the hours of operation Monday through Friday.
New Post CTC C/O	1.74		Need new P.Y. Authority, 1.74 Correctional Officer to provide additional custody support in the CTC to accomplish the existing workload.
New Post CTC C/O		1.74	Need new P.Y. Authority, 1.74 Correctional Officer to provide additional custody support in the CTC to accomplish the existing workload.

Post	2 <sup>nd</sup> Watch	3 <sup>rd</sup> Watch	Comments
New Post Transportations C/Os	12.44		Need new PY Authority, 10 Correctional Officers to accomplish the medical transports to outside hospitals and specialty clinics. These transports are presently being covered with Correctional Officer overtime which is the least efficient and effective use of resources. P.Y. authority for each position with relief factor=1.243
<b>Total New PY Authority</b>	<b>17.36</b>	<b>1.74</b>	
<b>Combined Total of New PY's = 19.10</b>			

**RJD Recap:**

Correctional Officers	17.10
Correctional Lieutenants	1.0
Staff Services Analyst	1.0



# FOLSOM STATE PRISON

Post	1 <sup>st</sup> Watch	2 <sup>nd</sup> Watch	3 <sup>rd</sup> Watch	Comments
Health Care Access Lieutenant		1.0		Varied Hours; provides second level supervision for Health Care Access Team. Reports to AW, HCS
Health Care Access Sergeant			1.76	Provides supervision for custody staff working in TTA and Building Clinics
Office Technician		1.0		Assign to assist the Off-Site Specialty Clinic Nurse.
Office Technician		1.0		Assign to assist nursing staff at the FTTF (CSP-SAC).
Post 271401 Plata Officer #1*		0.56		Augment existing PY authority for 7 day a week coverage.
Post 271402 Plata Officer #2*		0.56		Augment existing PY authority for 7 day a week coverage.
Post 271403 Plata Officer #3*		0.56		Augment existing PY authority for 7 day a week coverage.
Post 271404 Plata Officer #4*		0.56		Augment existing PY authority for 7 day a week coverage.
Post 271405 Plata Officer No. 5*		0.56		Augment existing PY authority for 7 day a week coverage.
Post 271406 Plata Officer No. 6*		0.56		Augment existing PY authority for 7 day a week coverage.
Post 221258 Med Unit-Clinic Sec #1*		0.56		Augment existing PY authority for 7 day a week coverage.
Post 221259 Med Unit-Clinic Sec #2*		0.56		Augment existing PY authority for 7 day a week coverage.
Health Care TTA Security	1.74			New post coverage for 1 <sup>st</sup> Watch.
Health Care TTA Security			1.74	Provides budget authority for previously established post on 3 <sup>rd</sup> Watch.

Post	1 <sup>st</sup> Watch	2 <sup>nd</sup> Watch	3 <sup>rd</sup> Watch	Comments
Health Care Building #1 Clinic Officer			1.74	Provides dedicated custody coverage for 3 <sup>rd</sup> Watch clinic and medication functions.
Health Care Building #2 Clinic Officer			1.74	Provides dedicated custody coverage for 3 <sup>rd</sup> Watch clinic and medication functions.
Health Care Building #3 Clinic Officer			1.74	Provides dedicated custody coverage for 3 <sup>rd</sup> Watch clinic and medication functions.
Health Care Building #5 Clinic Officer			1.74	Provides dedicated custody coverage for 3 <sup>rd</sup> Watch clinic and medication functions.
Transportation Officer		1.18		Medical Transportation
Transportation Officer		1.18		Medical Transportation
Transportation Officer		1.18		Medical/Court Transportation
Transportation Officer		1.18		Medical/Court Transportation
Building IV Access to Care Officer		1.18		Provides dedicated medical escort coverage for 2 <sup>nd</sup> Watch.
Building IV Access to Care Officer		1.18		Provides dedicated medical escort coverage for 2 <sup>nd</sup> Watch.
Building IV Access to Care Officer		1.18		Provides dedicated medical escort coverage for 2 <sup>nd</sup> Watch.
Building IV Access to Care Officer			1.74	Provides dedicated custody coverage for 3 <sup>rd</sup> Watch clinic and medication functions 7 days per week.
Building IV Access to Care Officer			1.18	Provides dedicated custody coverage for 3 <sup>rd</sup> Watch clinic and medication functions.
<b>Total New PY Authority</b>	<b>1.74</b>	<b>15.74</b>	<b>13.38</b>	
<b>Combined Total of New PY's = 30.86</b>				

#### FSP Recap:

Correctional Officers	26.10
Correctional Sergeants	1.76
Correctional Lieutenants	1.0
Office Technicians	2.0

# CALIFORNIA INSTITUTION FOR MEN

Post	1 <sup>st</sup> Watch	2 <sup>nd</sup> Watch	3 <sup>rd</sup> Watch	Comments
Health Care Access Captain		1.00		Provides first level management for the Health Care Access Team
Health Care Access Lieutenant		1.00	1.00	Provides second level supervision for the Health Care Access Team
Inter-Facility Transportation Sergeant			1.76	Provide first level supervision for custody staff working within the Inter Facility Transportation
RCC Transportation Sergeant Post #220123		.56		Re-Title post to Inter-Facility Transportation Sergeant – augment existing PY authority to provide 7 day coverage
Medical Hub / Clinical Sergeant (Varied Hours)		1.76		Provides first level supervision of the RCW and RCC clinics as well as supervision of the Medical Hub with the West Facility.
Infirmary Officer	1.74			Provides roving custody coverage within the Infirmary. Prepare post order with direct supervision to the Watch Sergeant.
Post #120330 Reception Desk Officer		.56		Re-Title the post to Infirmary Entrance Door officer, augment existing PY authority to provide 7 day coverage
Post #120393 Medical S&E		.50		Augment existing PY authority to provide 7 day coverage
Post #120394 Medical S&E		.50		Augment existing PY authority to provide 7 day coverage
Infirmary Officer Station #3			1.74	Provide custody coverage within the infirmary specifically within the Station 3 zone

Post	1 <sup>st</sup> Watch	2 <sup>nd</sup> Watch	3 <sup>rd</sup> Watch	Comments
Infirmery Officer Station #4			1.74	Provide custody coverage within the infirmery specifically with the Station 4 zone.
Post #121031 Plata S&E		.50		Re-Title post to Access to Care Escort Officer, augment existing PY authority to provide 7 day coverage
Post #13032 Plata S&E			.50	Re-Title post to Access to Care Escort Officer, augment existing PY authority to provide 7 day coverage
Post #220457 Medical/Dental Officer		.50		Re-Title post to RCC Clinic Officer, augment existing PY authority to provide 7 day coverage
RCC Medical Clinic Officer		1.74		Provides custody coverage and supervision of inmate-patients within the RCC clinic area. Prepare Post Order with direct supervision by the Medical Hub/Clinical Sergeant
Medical / Mental Health Officer		1.18		Provides escorts for inmate-patients within RCC to medical appointment to include mental health. Prepare Post Order with direct supervision by the Medical Hub/Clinical Sergeant
Post #220576 Plata S&E		.56		Re-Title post to Access to Care Escort Officer, augment existing PY authority to provide 7 day coverage
Post #220577 Plata S&E		.56		Re-Title post to Access to Care Escort Officer, augment existing PY authority to provide 7 day coverage
Post #230578 Plata S&E			.56	Re-Title post to Access to Care Escort Officer, augment existing PY authority to provide 7 day coverage

Post	1 <sup>st</sup> Watch	2 <sup>nd</sup> Watch	3 <sup>rd</sup> Watch	Comments
RCC Clinic Officer			1.74	Provides custody coverage and supervision of inmate-patients within the RCC clinic area.
ASU Medical Escort		1.74		Provides escorts for ASU inmate-patients to medical appointments within the ASU and to appointments outside the unit. Prepare Post Order with direct supervision by the Medical Hub/Clinical Sergeant
ASU Medical Escort		1.74		Provides escorts for ASU inmate-patients to medical appointments within the ASU and to appointments outside the unit. Prepare Post Order with direct supervision by the Medical Hub/Clinical Sergeant
Post #420885 Plata S&E		.56		Re-Title post to Access to Care Escort Officer, augment existing PY authority to provide 7 day coverage
Post #420886 Plata S&E		.50		Re-Title post to Access to Care Escort Officer, augment existing PY authority to provide 7 day coverage
Post #430887 Plata S&E			.50	Re-Title post to Access to Care Escort Officer, augment existing PY authority to provide 7 day coverage
Access to Care Officer R&R/RCE		1.24		Facilitates the movement of all inmate-patients for medical issues into and out of RC-East through R&R.
RCW Clinic Officer		1.74		Provides custody coverage and supervision of inmate-patients within the RCW clinic area. Prepare Post Order with direct supervision by the Medical Hub/Clinical Sergeant

Post	1 <sup>st</sup> Watch	2 <sup>nd</sup> Watch	3 <sup>rd</sup> Watch	Comments
RCW Medical Hub		1.18		Provides custody coverage and supervision of inmate-patients within the RCW Medical Hub area. Prepare Post Order with direct supervision by the Medical Hub/Clinical Sergeant
RCW Medical Hub		1.18		Provides custody coverage and supervision of inmate-patients within the RCW Medical Hub area. Prepare Post Order with direct supervision by the Medical Hub/Clinical Sergeant
Post #330711 Plata S&E			.50	Re-Title post to Access to Care Escort Officer, augment existing PY authority to provide 7 day coverage
Medical Transportation Officer		1.18		Facilitate the movement of inmate-patients to outside medical appointments as well as inter- institutional transports. Prepare post order with direct supervision by the Medical Transportation Sergeant
Medical Transportation Officer		1.18		Facilitate the movement of inmate-patients to outside medical appointments as well as inter- institutional transports. Prepare post order with direct supervision by the Medical Transportation Sergeant
Medical Transportation Officer		1.18		Facilitate the movement of inmate-patients to outside medical appointments as well as inter- institutional transports. Prepare post order with direct supervision by the Medical Transportation Sergeant

Post	1 <sup>st</sup> Watch	2 <sup>nd</sup> Watch	3 <sup>rd</sup> Watch	Comments
Medical Transportation Officer		1.18		Facilitate the movement of inmate-patients to outside medical appointments as well as inter- institutional transports. Prepare post order with direct supervision by the Medical Transportation Sergeant
Medical Transportation Officer		1.18		Facilitate the movement of inmate-patients to outside medical appointments as well as inter- institutional transports. Prepare post order with direct supervision by the Medical Transportation Sergeant
Medical Transportation Officer		1.18		Facilitate the movement of inmate-patients to outside medical appointments as well as inter- institutional transports. Prepare post order with direct supervision by the Medical Transportation Sergeant
Medical Transportation Officer		1.18		Facilitate the movement of inmate-patients to outside medical appointments as well as inter- institutional transports. Prepare post order with direct supervision by the Medical Transportation Sergeant
Post #131028 Medical Transportation		.68		Augment existing PY authority to provide 7 day coverage
Post #120402 Medical Transportation			.68	Augment existing PY authority to provide 7 day coverage
Post #220467 Trans/Complex Officer		.56		Re-Title post to Inter Facility Transportation Officer, augment existing PY authority to provide 7 day coverage

Post	1 <sup>st</sup> Watch	2 <sup>nd</sup> Watch	3 <sup>rd</sup> Watch	Comments
Post #220530 Trans/Complex Officer		.56		Re-Title post to Inter Facility Transportation Officer, augment existing PY authority to provide 7 day coverage
Post #220531 Trans/Complex Officer		.56		Re-Title post to Inter Facility Transportation Officer, augment existing PY authority to provide 7 day coverage
Post #220532 Trans/Complex Officer		.56		Re-Title post to Inter Facility Transportation Officer, augment existing PY authority to provide 7 day coverage
Post #220468 Trans/Complex Officer		.56		Re-Title post to Inter Facility Transportation Officer, augment existing PY authority to provide 7 day coverage
Post #230534 Trans/Complex Officer		.56		Re-Title post to Inter Facility Transportation Officer, augment existing PY authority to provide 7 day coverage
Post #230535 Trans/Complex Officer			.56	Re-Title post to Inter Facility Transportation Officer, augment existing PY authority to provide 7 day coverage
Post #230536 Trans/Complex Officer			.56	Re-Title post to Inter Facility Transportation Officer, augment existing PY authority to provide 7 day coverage
Inter Facility Transportation Officer		1.74		Provide transportation for Inter Facility movement of inmate-patients. Prepare post order with direct supervision by the Inter Facility Transportation Sergeant



Post	1 <sup>st</sup> Watch	2 <sup>nd</sup> Watch	3 <sup>rd</sup> Watch	Comments
Inter Facility Transportation Officer		1.74		Provide transportation for Inter Facility movement of inmate-patients. Prepare post order with direct supervision by the Inter Facility Transportation Sergeant
Office Technician – Medical Transportation		1.00		Provides support services to the Health Care Captain.
Registered Nurse – On- sight Specialty Clinic		1.00		Assists the outside providers who provide on-site specialty clinics.
Office Technician		1.00		Assign to assist the Off-Site Specialty Clinic Nurse.
<b>Total New PY Authority</b>	<b>1.74</b>	<b>39.58</b>	<b>11.90</b>	
<b>Combined Total of New PY's = 53.22</b>				

#### CIM Recap:

Correctional Officers	43.14
Correctional Sergeants	4.08
Correctional Lieutenants	2.0
Custody Captain	1.0
Registered Nurses	1.0
Office Technicians	2.0

## KERN VALLEY STATE PRISON (Dialysis Review)

Post	1 <sup>st</sup> Watch	2 <sup>nd</sup> Watch	3 <sup>rd</sup> Watch	Comments
Correctional Officer Transportation		2.36	2.36	
Correctional Sergeant			1.76	
Correctional Lieutenant		1.0		
<b>Total New PY Authority</b>		<b>3.36</b>	<b>4.12</b>	
<b>Combined Total of New PY's = 7.48</b>				

### KVSP Recap:

Correctional Officers	4.72
Correctional Sergeants	1.76
Correctional Lieutenants	1.0

# CALIFORNIA STATE PRISON & SUBSTANCE ABUSE FACILITY (Dialysis Review)

Post	1 <sup>st</sup> Watch	2 <sup>nd</sup> Watch	3 <sup>rd</sup> Watch	Comments
<b>6 CHAIR UNIT</b>				
Floor Officer		1.74	1.74	
Escort/Transportation		3.48	3.48	
<b>19 Chair Unit</b>				
<b>Phase I:</b>				
Correctional Sergeant		1.76		
Floor Officer		1.74	3.48	
Escort/Transportation		3.48	3.48	
<b>Phase II:</b>				
Floor Officer		1.74	1.74	
Escort/Transportation		1.74	1.74	
<b>Phase III:</b>				
Correctional Sergeant			1.76	
Floor Officer		1.74		
Escort/Transportation		1.74	1.74	
<b>Transportation Unit</b>				
Transportation Officers		15.34		
<b>Total New PY Authority</b>		<b>34.5</b>	<b>19.16</b>	
<b>Combined Total of New PY's = 53.66</b>				

## SATF Recap:

Correctional Officers	50.14
Correctional Sergeants	3.52

# APPENDIX 3

<p align="center"><b>CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION</b></p> <p align="center">Plata Support Division Procurement and Purchasing Unit</p>	Policy and Procedure # ____: Approval Date:
	<p align="center"><b>Medical Vehicle Procurement</b></p>

**POLICY:**

The Procurement and Purchasing Unit (PPU) shall ensure that each institution has and maintains an adequate number of usable vehicles in order to transport inmates who require access to medical care.

**REFERENCES:**

- Management Memo 02-02 – Vehicle Replacement Policy
- Engineering documents

**APPROVAL AND REVIEW:**

This procedure shall be reviewed annually by the Plata Policy Unit.

**RESPONSIBILITY:**

The Director, Plata Support Division (PSD) and Staff Services Manager III, PPU shall ensure compliance with this policy and procedure.

**DEFINITION and TIMEFRAMES:**

**CDC Form 954 - IntraOffice Requisition (IOR)** - Form used to request the purchase of goods.

**STD. 65 – Purchasing Authority Purchase Order (PO)** - Form used to purchase goods from vendors.

**PROCEDURE:**

**A. Vehicle Request Process**

1. Director, Plata Custody Support requests/approves additional non-replacement vehicles based on the vehicle survey process.
  - a. Identify institution requesting vehicles.
  - b. Identify vehicles requiring add-on features.
  - c. Attach a complete listing of add-on features including but not limited to the following:
    1. security build-out
    2. medical decals
    3. gun racks
    4. van cell inserts
    5. radios
    6. van colors

7. specify "Mobility Van" (incorporates ADA requirements)

**B. Vehicle Purchase Procedure**

1. PPU to prepare a separate IOR for each vendor (i.e. dealership, Van Cell, security build-out, etc.)
  - a. Attach a listing of dealerships for the vehicle purchase and vendors to complete add-on features.
  - b. Identify the method of transportation and costs from the dealer to the vendors performing add-on work.
  - c. Obtain approval from the Director, PSD.
  - d. Stamp the approved IOR with the "Receiver" stamp to ensure expedited processing.
  - e. Submit completed IOR to the California Department of Corrections and Rehabilitation (CDCR) Procurement Office.
2. The CDCR Procurement Office to prepare PO.
  - a. Forward to the PPU to obtain approval from the Director, PSD.
  - b. Stamp the approved PO with the "Receiver" stamp to ensure expedited processing.
  - c. The PPU forwards the approved and stamped copies to CDCR Procurement Office and CDCR Accounting Office.
  - d. Accounting Office encumbers funds.
  - e. The Procurement Office issues the PO.
3. PPU analyst to forward copies of PO to each respective vendor.
  - a. Obtain vendor listing from file and contact vendors to schedule the work.
  - b. Schedule vehicles for transport from dealership to vendors performing add-on work.
  - c. Track vehicle shipment dates to dealership for changes and update any scheduling as necessary.

**C. Vehicles Received Procedure**

1. Dealer notifies PPU that vehicles have arrived.
2. Analyst obtains shipping documents from the dealer.
3. Analyst retrieves the PO, from the "Open" file and compares to documents received from vendor. Notify the dealer if there are any discrepancies.
  - a. Analyst assigns a Stock Received Report (SRR) Number.
  - b. Analyst and/or dealer contacts Department of General Services (DGS) Inspectors and forwards copy of PO.
4. DGS schedules inspection at dealership within 24 hours.

5. DGS signs off on correct items and forwards along with any discrepancies.
6. Analyst contacts dealership if there are any incorrect items.

**D. Vehicle Add-ons**

1. Medical Decals
  - a. Medical decals are ordered from Prison Industry Authority during the vehicle purchase process and stocked at headquarters (HQ) until vehicles arrive.
  - b. Arrange for delivery of the decals from HQ to the security build-out vendor.
2. Radios
  - a. Radios are purchased thru CDCR Telecommunications Branch via the state contract.
  - b. CDCR Telecommunications Branch coordinates with DGS to program the radio frequency before the radios are shipped to the institutions for installation.
  - c. Arrange for delivery of the radios from HQ to the institution.
  - d. Institutions arrange for installment of the radios by local DGS approved vendors.
3. Van Cells
  - a. Van Cells are ordered from an approved vendor during the vehicle purchase process.
  - b. Arrange for Van Cell transport to the identified vendors for installation.
4. Security Build-out
  - a. Security inserts are ordered from an identified vendor during the vehicle purchase process.
  - b. The vendor also installs the inserts once the vehicles are delivered.
5. Schedule vehicles for transport from dealership to the vendor.
6. Analyst should get a schedule from the vendor of when work is to be completed and follow-up as necessary.
7. Vendor notifies PPU that add-on work has been completed.
  - a. Analyst contacts institution by e-mail - vehicle is ready.
    1. Associate Warden (AW) of Healthcare.
    2. AW of Business Services.
  - b. Analyst to fax/mail documents to Institution.
    1. PO
    2. Dealer Invoice

3. If mobility van; vendor invoice (i.e. Mobility Works)
  4. DMV Application for New Car Registration (original signed by dealer is mailed to Institution; transfers ownership to institution)
- c. Arrange for Institution to pick-up vehicle.

**E. Process Invoice for Payment**

1. Obtain invoice from vendor.
2. Process payment.

**F. Close out File**

1. Generate SRR
2. Attach SRR to PO and place in closed file.
3. Complete the Accounts Payable process.

**Reviewed and Approved By:**

**Director, Plata Support Division:**

Richard Kirkland

\_\_\_\_\_  
Date



# APPENDIX 4

Vehicle Tracking Report  
By Vehicle  
11/15/2007

#	Van Type VIN # Purchased From	Insert or Build Out Vendor Name Date In/Out	Institution Contact Date Released	Radio: Released w/ Vehicle or Shipped to Institution	Gun Rack: Released w/ Vehicle or Shipped to Institution	Invoices: Received and Paid
<u>1</u>	Paratransit 1FTNS24W77DA13583 Folsom Lake Ford -193	Build Out Joe's Alpha & Subaru n/a 6/14/2007	CCI Carolyn Steadman 6/19/2007	Ship to Institution (7/25/2007)	Already had gun rack, shipped timer 9/27/07	Paid
<u>2</u>	Paratransit 1FTNS24W86DB42320 Folsom Lake Ford -155	Build Out Joe's Alpha & Subaru n/a 6/19/2007	CMF Liz Mitchel 6/27/2007	Ship to Institution (Date?)	Ship to Institution 10/15/07	Paid
<u>3</u>	Paratransit 1FTNS24W76DB42325 Folsom Lake Ford - 154	Build Out Joe's Alpha & Subaru n/a 7/6/2007	CTF Daymond Slaten 7/12/2007	Ship to Institution (Date?)	Ship to Institution 10/25/07	Paid
<u>4</u>	Paratransit 1FTNS24W26DB33015 Folsom Lake Ford - 149	Build Out Joe's Alpha & Subaru n/a 6/19/2007	SQ Tabatha Butler 6/26/2007	Ship to Institution (Date?)	Hand delivered 10/22/07	Paid
<u>5</u>	Paratransit/Gureny 1FTNS24W56DA86014 Folsom Lake Ford - 123	Build Out Joe's Alpha & Subaru n/a 7/27/2007	CEN Lorenzo Calderon 8/1/2007	Ship to Institution (Date?)	Ship to Institution 10/25/07	Paid
<u>6</u>	Paratransit/Gurney 1FTNS24L66HA51285 Folsom Lake Ford - 7069	Build Out Joe's Alpha & Subaru n/a 8/2/2007	CMF Liz Mitchel/Cassie 8/6/2007	Ship to Institution (Date?)	Hand delivered 10/24/07	Paid
<u>7</u>	Paratransit/Gurney 1FTNS24 LX6HA48275 Folsom Lake Ford - 7068	Build Out Joe's Alpha & Subaru n/a 7/23/2007	CCC Sherry Flatter 7/24/2007	Ship to Institution (Date?)	Ship to Institution 10/15/07	Paid
<u>8</u>	Paratransit 1FTNS24W86DB37487 Folsom Lake Ford - 156	Build Out Joe's Alpha & Subaru n/a 7/13/2006	HDSP  7/19/2007	Ship to Institution (Date?)	Ship to Institution 10/17/07	Paid
<u>9</u>	Paratransit 1FTNS24W37DA13550 Folsom Lake Ford - 197	Build Out Joe's Alpha & Subaru n/a 7/23/2007	CCWF Beverly Simon/Ron Casswell 8/6/2007	Ship to Institution (Date?)	Ship to Institution 10/16/07	Paid
<u>10</u>	Paratransit 1FTNS24W37DA13586 Folsom Lake Ford - 191	Build Out Joe's Alpha & Subaru n/a 6/27/2007	CIW John Dixon 7/11/2007	Ship to Institution (Date?)	Ship to Institution 10/12/07	Paid
<u>11</u>	Paratransit 1FTNS24W17DA13580 Folsom Lake Ford - 190	Build Out Joe's Alpha & Subaru n/a 7/30/2007	CMC Patti Dunlap 8/3/2007	Ship to Institution (Date?)	Ship to Institution 9/19/07	Paid

Vehicle Tracking Report  
By Vehicle  
11/15/2007

#	Van Type VIN # Purchased From	Insert or Build Out Vendor Name Date In/Out	Institution Contact Date Released	Radio: Released w/ Vehicle or Shipped to Institution	Gun Rack: Released w/ Vehicle or Shipped to Institution	Invoices: Received and Paid
12	Paratransit 1FTNS24W36DA32453 Folsom Lake Ford - 185	Build Out Joe's Alpha & Subaru n/a 7/3/2007	COR Karen Stewart 7/9/2007	Ship to Institution (Date?)	Ship to Institution 10/17/07	Paid
13	Paratransit 1FTNS24L66DA40732 Folsom Lake Ford - 184	Build Out Joe's Alpha & Subaru n/a 8/3/2007	PBSP Tammy Roos 8/20/2007	Ship to Institution (Date?)	Ship to Institution 10/17/07	Paid
14	Paratransit/Gurney 1FTNS24W46DB05734 Folsom Lake Ford	Build Out Advanced Mobility n/a 6/28/2007	ISP Fidel Martinez 7/3/2007	Ship to Institution (Date?)	Ship to Institution 10/16/07	Paid
15	Paratransit 1FTNS24W57DB04979 Folsom Lake Ford (MS) 220	Build Out Windows Only Joe's Alpha & Subaru n/a 9/18/2007	SAC Bud Suder 9/18/2007	Ship to Institution (Date?)	Released w/vehicle 9/18/07	Paid
16	Paratransit 1FTNS24W17DB04980 Folsom Lake Ford (MS) 222	Build Out Windows Only Joe's Alpha & Subaru n/a 8/24/2007	CAL  9/12/2007	Ship to Institution (Date?)	Released w/vehicle 9/12/07	Paid
17	Paratransit IFTNS24W37DB04981 Folsom Lake Ford (MS) 223	Build Out Windows Only Joe's Alpha & Subaru n/a 9/18/2007	SVSP Belinda Hedrick 9/18/2007	Ship to Institution (Date?)	Released w/vehicle 9/18/07	Paid
18	Paratransit IFTNS24W97DB24815 Folsom Lake Ford (A) 251	Build Out Windows Only Joe's Alpha & Subaru n/a 8/14/2007	MCSP Ray Stanio 8/23/2007	Ship to Institution (Date?)	Ship to Institution 10/25/07	Paid
19	Paratransit IFTNS24W07DB24816 Folsom Lake Ford (A) 252	Build Out Windows Only Joe's Alpha & Subaru n/a 8/20/2007	CIM Wayne Baker 8/30/2007	Ship to Institution (Date?)	Ship to Institution 10/16/07	Paid
20	Paratransit IFTNS24W27DB24817 Folsom Lake Ford (A) 253	Build Out Windows Only Joe's Alpha & Subaru n/a 8/31/2007	RJD M. Hawthorne 9/18/2007	Ship to Institution (Date?)	Released w/vehicle 9/18/07	Paid
21	Paratransit IFTNS24W97DB24818 Folsom Lake Ford (A) 254	Build Out Windows Only Joe's Alpha & Subaru n/a	NKSP Jim Greer 9/28/2007	Ship to Institution (Date?)	Released w/vehicle 9/28/07	Paid
22	Paratransit IFTNS24W27DB24820 Folsom Lake Ford (A) 255	Build Out Windows Only Joe's Alpha & Subaru n/a	WSP Janie Alberti 10/1/2007	Ship to Institution (Date?)	Released w/vehicle 10/1/07	Paid

Vehicle Tracking Report  
By Vehicle  
11/15/2007

#	Van Type VIN # Purchased From	Insert or Build Out Vendor Name Date In/Out	Institution Contact Date Released	Radio: Released w/ Vehicle or Shipped to Institution	Gun Rack: Released w/ Vehicle or Shipped to Institution	Invoices: Received and Paid
23	Paratransit IFTNS24WX7DB24824 Folsom Lake Ford (A) 256	Build Out Windows Only Joe's Alpha & Subaru n/a	DVI			Paid
24	Paratransit IFTNS24W17DB24825 Folsom Lake Ford (A) 257	Build Out Windows Only Joe's Alpha & Subaru n/a	CVSP			Paid
25	Paratransit IFTNS24W77DB24828 Folsom Lake Ford (A) 258	Build Out Windows Only Joe's Alpha & Subaru n/a	SATF			Paid
26	Paratransit IFTNS24W97DB24829 Folsom Lake Ford (A) 259	Build Out Windows Only Joe's Alpha & Subaru n/a	SOL			Paid
27	Paratransit IFTNS24W57DB24830 Folsom Lake Ford (A) 260	Build Out Windows Only Joe's Alpha & Subaru n/a	KVSP			Paid
28	Paratransit IFTNS24W77DB24831 Folsom Lake Ford (A) 261	Build Out Windows Only Joe's Alpha & Subaru n/a	SCC			Paid
29	Paratransit IFTNS24W27DB24834 Folsom Lake Ford (A) 262	Build Out Windows Only Joe's Alpha & Subaru n/a	CRC Michael Huckstep 9/28/2007	Ship to Institution (Date?)	Released w/vehicle 9/28/07	Paid
30	Paratransit IFTNS24W47DB24835 Folsom Lake Ford (A) 263	Build Out Windows Only Joe's Alpha & Subaru n/a 9/5/2007	VSPW Cathy Etchebehere 9/14/2007	Ship to Institution (Date?)	Released w/vehicle 9/14/2007	Paid
31	Passenger  Folsom Chevrolet	Insert LEHR n/a 6/14/2007	CCI Carolyn Steadman 6/15/2007	Ship to Institution (7/25/2007)	Ship to Institution 10/15/07	
32	Passenger  Folsom Chevrolet	Insert LEHR n/a 6/14/2007	CCI Carolyn Steadman 6/15/2007	Ship to Institution (7/25/2007)	Ship to Institution 10/16/07	
33	Passenger  Vermont Chevrolet	Build Out Joe's Alpha & Subaru n/a 6/14/2007	CCI Carolyn Steadman ?	Ship to Institution (7/25/2007)	Ship to Institution 10/16/07	

Vehicle Tracking Report  
By Vehicle  
11/15/2007

#	Van Type VIN # Purchased From	Insert or Build Out Vendor Name Date In/Out	Institution Contact Date Released	Radio: Released w/ Vehicle or Shipped to Institution	Gun Rack: Released w/ Vehicle or Shipped to Institution	Invoices: Received and Paid
<u>34</u>	15-Passenger 1FBSS31L07DB42563 Ford Factory - 439	Insert B&J Body Shop 39325	CMF Steve Pryor 9/21/2007	Ship to Institution (Date?)	Released w/vehicle 9/21/07	Paid 9/10/2007
<u>35</u>	15-Passenger 1FBSS31L27DB42564 Ford Factory - 440	Insert LEHR 39325	CMC Patti Dunlap 10/31/2007	Ship to Institution (Date?)	Released w/vehicle 10/31/07	Paid 9/10/2007
<u>36</u>	15-Passenger 1FBSS31L47DB42565 Ford Factory - 441	Insert LEHR 39325	CVSP John Kell 10/23/2007	Ship to Institution (Date?)	Released w/vehicle 10/23/07	Paid 9/10/2007
<u>37</u>	15-Passenger 1FBSS31L67DB42566 Ford Factory - 442	Insert LEHR 39325	HDSP Barbara Jacobs 39367	Ship to Institution (Date?)	Released w/vehicle 10/12/07	Paid 9/10/2007
<u>38</u>	15-Passenger 1FBSS31L87DB42567 Ford Factory - 443	Insert B&J Body Shop 39325	CMF Steve Pryor 9/21/2007	Ship to Institution (Date?)	Released w/vehicle 9/21/07	Paid 9/10/2007
<u>39</u>	15-Passenger 1FBSS31LX7DB42568 Ford Factory - 444	Insert LEHR 39325	CRC Michael Huckstep 10/25/2007	Ship to Institution (Date?)	Released w/vehicle 10/25/07	Paid 9/10/2007
<u>40</u>	15-Passenger 1FBSS31L17DB42569 Ford Factory - 445	Insert LEHR 8/31/2007	CVSP John Kell 10/23/2007	Ship to Institution (Date?)	Released w/vehicle 10/23/07	Paid 9/10/2007
<u>41</u>	15-Passenger 1FBSS31L87DB42570 Ford Factory - 446	Insert LEHR 39325	CCC Byron Frazier 10/4/2007	Ship to Institution (Date?)	Released w/vehicle 10/4/07	Paid 9/10/2007
<u>42</u>	15-Passenger 1FBSS31LX7DB42571 Ford Factory - 447	Insert LEHR 39325	CCWF Bruce Hubble 10/26/2007	Ship to Institution (Date?)	Released w/vehicle 10/26/07	Paid 9/10/2007
<u>43</u>	15-Passenger 1FBSS31L17DB42572 Ford Factory - 448	Insert LEHR 39325	HDSP Barbara Jacobs 10/12/2007	Ship to Institution (Date?)	Released w/vehicle 10/12/07	Paid 9/10/2007
<u>44</u>	15-Passenger 1FBSS31L37DB42573 Ford Factory - 449	Insert LEHR 39325	CRC Michael Huckstep 10/25/2007	Ship to Institution (Date?)	Released w/vehicle 10/25/07	Paid 9/10/2007

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#	Van Type VIN # Purchased From	Insert or Build Out Vendor Name Date In/Out	Institution Contact Date Released	Radio: Released w/ Vehicle or Shipped to Institution	Gun Rack: Released w/ Vehicle or Shipped to Institution	Invoices: Received and Paid
45	15-Passenger 1FBSS31L57DB42574 Ford Factory - 450	Insert LEHR 39325	PBSP Jim Moore 11/6/2007	Ship to Institution (Date?)	Released w/vehicle 11/6/07	Paid 9/10/2007
46	15-Passenger 1FBSS31L77DB42575 Ford Factory -451	Insert LEHR 9/4/2007				Paid 9/10/2007
47	15-Passenger 1FBSS31L97DB42576 Ford Factory - 452	Insert LEHR 9/4/2007	CMC Patti Dunlap 10/31/2007	Ship to Institution (Date?)	Released w/vehicle 10/31/07	Paid 9/10/2007
48	15-Passenger 1FBSS31L07DB42577 Ford Factory - 453	Insert LEHR 9/4/2007	CVSP John Kell 10/23/2007	Ship to Institution (Date?)	Released w/vehicle 10/23/07	Paid 9/10/2007
49	15-Passenger 1FBSS31L27DB42578 Ford Factory - 454	Insert LEHR 9/4/2007	PBSP Jim Moore 11/6/2007	Ship to Institution (Date?)	Released w/vehicle 11/6/07	Paid 9/10/2007
50	15-Passenger 1FBSS31L47DB42579 Ford Factory -455	Insert LEHR 9/19/2007	FOL Pedro Reyes 10/1/2007	Ship to Institution (Date?)	Released w/vehicle 10/1/07	Paid 9/10/2007
51	15-Passenger 1FBSS31L07DB42580 Ford Factory - 456	Insert LEHR 9/4/2007				Paid 9/10/2007
52	15-Passenger 1FBSS31L27DB42581 Ford Factory - 457	Insert LEHR 39329	CCC Byron Frazier 10/4/2007	Ship to Institution (Date?)	Released w/vehicle 10/1/07	Paid 9/10/2007
53	15-Passenger 1FBSS31L47DB42582 Ford Factory - 458	Insert LEHR 39329	CMC Patti Dunlap 10/31/2007	Ship to Institution (Date?)	Released w/vehicle 10/31/07	Paid 9/10/2007
54	15-Passenger 1FBSS31L67DB42583 Ford Factory - 459	Insert LEHR 39329	CRC Michael Huckstep 10/25/2007	Ship to Institution (Date?)	Released w/vehicle 10/25/07	Paid 9/10/2007
55	15-Passenger 1FBSS31L87DB42584 Ford Factory - 460	Insert LEHR 39329	PBSP Jim Moore 11/6/2007	Ship to Institution (Date?)	Released w/vehicle 11/6/07	Paid 9/10/2007

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56	15-Passenger 1FBSS31LX7DB42585 Ford Factory - 461	Insert B&J Body Shop 9/4/2007	SOLANO Linda Longmire 10/1/2007	Ship to Institution (Date?)	Released w/vehicle 10/1/07	Paid 9/10/2007
57	15-Passenger 1FBSS31L17DB42586 Ford Factory -462	Insert LEHR 9/4/2007	HDSP Barbara Jacobs 10/12/2007	Ship to Institution (Date?)	Released w/vehicle 10/12/07	Paid 9/10/2007
58	15-Passenger 1FBSS31L37DB42587 Ford Factory - 463	Insert LEHR 9/4/2007	CIM Brian Pahel 9/20/2007	Ship to Institution (Date?)	Released w/vehicle 9/20/07	Paid 9/10/2007
59	15-Passenger 1FBSS31L57DB42588 Ford Factory - 464	Insert LEHR 9/4/2007	CIM Brian Pahel 9/20/2007	Ship to Institution (Date?)	Released w/vehicle 9/20/07	Paid 9/10/2007
60	15-Passenger 1FBSS31L77DB42589 Ford Factory - 465	Insert LEHR 9/4/2007	SAC Bud Suder 10/1/2007	Ship to Institution (Date?)	Released w/vehicle 10/1/07	Paid 9/10/2007
61	15-Passenger 1FBSS31L37DB42590 Ford Factory - 466	Insert LEHR 9/4/2007	CIM Brian Pahel 9/20/2007	Ship to Institution (Date?)	Released w/vehicle 9/20/07	Paid 9/10/2007
62	15-Passenger 1FBSS31L57DB42591 Ford Factory - 467	Insert LEHR 9/4/2007	CCC Byron Frazier 10/4/2007	Ship to Institution (Date?)	Released w/vehicle 10/4/07	Paid 9/10/2007
63	15-Passenger 1FBSS31L77DB42592 Ford Factory - 468	Insert Joe's Alpha & Subaru 9/5/2007				Paid 9/10/2007
64	15-Passenger 1FBSS31L97DB42593 Ford Factory - 469	Insert Joe's Alpha & Subaru 9/5/2007	SQ Gigi Matteson 9/27/2007	Ship to Institution (Date?)	Released w/vehicle 9/27/07	Paid 9/10/2007
65	15-Passenger 1FBSS31L07DB42594 Ford Factory - 470	Insert Joe's Alpha & Subaru 9/5/2007	DVI Melba Starr 10/3/2007	Ship to Institution (Date?)	Released w/vehicle 10/3/07	Paid 9/10/2007
66	15-Passenger 1FBSS31L27DB42595 Ford Factory - 471	Insert Joe's Alpha & Subaru 9/5/2007				Paid 9/10/2007

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#	Van Type VIN # Purchased From	Insert or Build Out Vendor Name Date In/Out	Institution Contact Date Released	Radio: Released w/ Vehicle or Shipped to Institution	Gun Rack: Released w/ Vehicle or Shipped to Institution	Invoices: Received and Paid
67	15-Passenger 1FBSS31L47DB42596 Ford Factory - 472	Insert Joe's Alpha & Subaru 9/5/2007				Paid 9/10/2007
68	15-Passenger 1FBSS31L67DB42597 Ford Factory - 473	Insert Joe's Alpha & Subaru 9/5/2007				Paid 9/10/2007
69	15-Passenger 1FBSS31L87DB42598 Ford Factory - 474	Insert Joe's Alpha & Subaru 9/5/2007				Paid 9/10/2007
70	15-Passenger 1FBSS31LX7DB42599 Ford Factory - 475	Insert Joe's Alpha & Subaru 9/5/2007	SQ Gigi Matteson 9/27/2007	Ship to Institution (Date?)	Released w/vehicle 9/27/07	Paid 9/10/2007
71	15-Passenger 1FBSS31L27DB42600 Ford Factory - 476	Insert Joe's Alpha & Subaru 9/5/2007				Paid 9/10/2007
72	15-Passenger 1FBSS31L47DB42601 Ford Factory - 477	Insert Joe's Alpha & Subaru 9/5/2007				Paid 9/10/2007
73	15-Passenger 1FBSS31L67DB42602 Ford Factory - 478	Insert Joe's Alpha & Subaru 9/6/2007				Paid 9/10/2007
74	15-Passenger 1FBSS31L87DB42603 Ford Factory - 479	Insert Joe's Alpha & Subaru 9/6/2007				Paid 9/10/2007
75	15-Passenger 1FBSS31LX7DB42604 Ford Factory - 480	Insert Joe's Alpha & Subaru 9/6/2007				Paid 9/10/2007
76	15-Passenger 1FBSS31L17DB42605 Ford Factory - 481	Insert Joe's Alpha & Subaru 9/6/2007	DVI Melba Starr 10/3/2007	Ship to Institution (Date?)	Released w/vehicle 10/3/07	Paid 9/10/2007
77	15-Passenger 1FBSS31L37DB42606 Ford Factory - 482	Insert Joe's Alpha & Subaru 9/6/2007				Paid 9/10/2007



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#	Van Type VIN # Purchased From	Insert or Build Out Vendor Name Date In/Out	Institution Contact Date Released	Radio: Released w/ Vehicle or Shipped to Institution	Gun Rack: Released w/ Vehicle or Shipped to Institution	Invoices: Received and Paid
78	15-Passenger 1FBSS31L57DB42607 Ford Factory - 483	Insert Joe's Alpha & Subaru 9/6/2007				Paid 9/10/2007
79	15-Passenger 1FBSS31L77DB42608 Ford Factory - 484	Insert Joe's Alpha & Subaru 9/6/2007				Paid 9/10/2007
80	15-Passenger 1FBSS31L97DB42609 Ford Factory - 485	Insert Joe's Alpha & Subaru 9/6/2007				Paid 9/10/2007
81	15-Passenger 1FBSS31L57DB42610 Ford Factory - 486	Insert Joe's Alpha & Subaru 9/6/2007				Paid 9/10/2007
82	15-Passenger 1FBSS31L77DB42611 Ford Factory - 487	Insert Joe's Alpha & Subaru 9/6/2007				Paid 9/10/2007
83	15-Passenger 1FBSS31L97DB42612 Ford Factory - 488	Insert Joe's Alpha & Subaru 9/6/2007	FSP Pedro Reyes 11/8/2007	Ship to Institution (Date?)	Released w/vehicle 11/8/07	Paid 9/10/2007
84	15-Passenger 1FBSS31L07DB42613 Ford Factory - 489	Insert Joe's Alpha & Subaru 9/6/2007				Paid 9/10/2007
85	15-Passenger 1FBSS31L27DB42614 Ford Factory - 490	Insert Joe's Alpha & Subaru 9/6/2007				Paid 9/10/2007
86	15-Passenger 1FBSS31L47DB42615 Ford Factory - 491	Insert Joe's Alpha & Subaru 9/6/2007				Paid 9/10/2007
87	15-Passenger 1FBSS31L67DB42616 Ford Factory - 492	Insert Joe's Alpha & Subaru 9/6/2007				Paid 9/10/2007
88	15-Passenger 1FBSS31L87DB42617 Ford Factory - 493	Insert Joe's Alpha & Subaru 9/6/2007				Paid 9/10/2007

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#	Van Type VIN # Purchased From	Insert or Build Out Vendor Name Date In/Out	Institution Contact Date Released	Radio: Released w/ Vehicle or Shipped to Institution	Gun Rack: Released w/ Vehicle or Shipped to Institution	Invoices: Received and Paid
89	15-Passenger 1FBSS31LX7DB42618 Ford Factory - 494	Insert Joe's Alpha & Subaru 9/6/2007				Paid 9/10/2007
90	15-Passenger 1FBSS31L17DB42619 Ford Factory - 495	Insert Joe's Alpha & Subaru 9/6/2007				Paid 9/10/2007
91	15-Passenger 1FBSS31L87DB42620 Ford Factory - 496	Insert Joe's Alpha & Subaru 9/6/2007				Paid 9/10/2007
92	15-Passenger 1FBSS31LX7DB42621 Ford Factory - 497	Insert Joe's Alpha & Subaru 9/6/2007				Paid 9/10/2007
93	15-Passenger 1FBSS31L17DB42622 Ford Factory - 498	Insert Joe's Alpha & Subaru 9/6/2007				9/7/2007 Act. 9/10
94	15-Passenger 1FBSS31L37DB42623 Ford Factory - 499	Insert Joe's Alpha & Subaru 9/6/2007				9/7/2007 Act. 9/10
95	15-Passenger 1FBSS31L57DB42624 Ford Factory - 500	Insert Joe's Alpha & Subaru 9/6/2007				9/7/2007 Act. 9/10
96	15-Passenger 1FBSS31L77DB42625 Ford Factory - 501	Insert Driving Spec. Fresno 9/10/2007	ISP Mark Razo 10/10/2007	Ship to Institution (Date?)	Released w/vehicle 10/10/07	9/10/2007 Act. 9/11
97	15-Passenger 1FBSS31L97DB42626 Ford Factory - 502	Insert Driving Spec. Fresno 9/10/2007	ISP Mark Razo 10/10/2007	Ship to Institution (Date?)	Released w/vehicle 10/10/07	9/10/2007 Act. 9/11
98	15-Passenger 1FBSS31L07DB42627 Ford Factory - 503	Insert Driving Spec. Fresno 9/10/2007	NKSP Jim Greer 10/2/2007	Ship to Institution (Date?)	Released w/vehicle 10/2/07	9/10/2007 Act. 9/11
99	15-Passenger 1FBSS31L27DB42628 Ford Factory - 504	Insert Driving Spec. Fresno 9/10/2007	COR Dan Leon 10/4/2007	Ship to Institution (Date?)	Released w/vehicle 10/4/07	9/10/2007 Act. 9/12

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#	Van Type VIN # Purchased From	Insert or Build Out Vendor Name Date In/Out	Institution Contact Date Released	Radio: Released w/ Vehicle or Shipped to Institution	Gun Rack: Released w/ Vehicle or Shipped to Institution	Invoices: Received and Paid
100	15-Passenger 1FBSS31L47DB42629 Ford Factory - 505	Insert Driving Spec. Fresno 9/10/2007	NKSP Jim Greer 10/2/2007	Ship to Institution (Date?)	Released w/vehicle 10/2/07	9/10/2007 Act. 9/11
101	15-Passenger 1FBSS31L07DB42630 Ford Factory - 506	Insert Driving Spec. Fresno 9/10/2007	COR Dan Leon 10/4/2007	Ship to Institution (Date?)	Released w/vehicle 10/4/07	9/10/2007 Act. 9/11
102	15-Passenger 1FBSS31L27DB42631 Ford Factory - 507	Insert Driving Spec. Vallejo 9/11/2007	SQ Gigi Matteson 9/27/2007	Ship to Institution (Date?)	Released w/vehicle 9/26/07	9/11/2007 Act. 9/12
103	15-Passenger 1FBSS31L47DB42632 Ford Factory - 508	Insert Driving Spec. Vallejo 9/11/2007	DVI Melba Starr 10/5/2007	Ship to Institution (Date?)	Released w/vehicle 10/5/07	9/11/2007 Act. 9/12
104	15-Passenger 1FBSS31L67DB42633 Ford Factory - 509	Insert Driving Spec. Vallejo 9/11/2007				9/11/2007 Act. 9/12
105	15-Passenger 1FBSS31L87DB42634 Ford Factory - 510	Insert Driving Spec. Vallejo 9/11/2007	MCSP Ray Stanio contacted 10/10/2007	Ship to Institution (Date?)	Released w/vehicle 10/10/07	9/11/2007 Act. 9/12
106	15-Passenger 1FBSS31LX7DB42635 Ford Factory - 511	Insert Driving Spec. Vallejo 9/11/2007				9/11/2007 Act. 9/12
107	15-Passenger 1FBSS31L17DB42636 Ford Factory - 512	Insert Driving Spec. Vallejo 9/11/2007	MCSP Ray Stanio contacted 10/17/2007	Ship to Institution (Date?)	Released w/vehicle 10/17/07	9/11/2007 Act. 9/12
108	15-Passenger 1FBSS31L37DB42637 Ford Factory - 513	Insert DS Watsonville 9/12/2007	CTF Jerry Olmstead 10/25/2007	Ship to Institution (Date?)	Released w/vehicle 10/25/07	9/12/2007 Act. 9/14
109	15-Passenger 1FBSS31L57DB42638 Ford Factory - 514	Insert DS Watsonville 9/12/2007	SVSP Belinda Hedrick 10/3/2007	Ship to Institution (Date?)	Released w/vehicle 10/3/07	9/12/2007 Act. 9/14
110	15-Passenger 1FBSS31L77DB42639 Ford Factory - 515	Insert DS Watsonville 9/12/2007	CTF Jerry Olmstead 10/25/2007	Ship to Institution (Date?)	Released w/vehicle 10/25/07	9/12/2007 Act. 9/14

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111	15-Passenger 1FBSS31L37DB42640 Ford Factory - 516	Insert DS Watsonville 9/12/2007	CTF Jerry Olmstead 10/25/2007	Ship to Institution (Date?)	Released w/vehicle 10/25/07	9/12/2007 Act. 9/14
112	15-Passenger 1FBSS31L57DB42641 Ford Factory - 517	Insert DS Watsonville 9/12/2007	SVSP Belinda Hedrick 10/3/2007	Ship to Institution (Date?)	Released w/vehicle 10/3/07	9/12/2007 Act. 9/14
113	15-Passenger 1FBSS31L77DB42642 Ford Factory - 518	Insert DS Watsonville 9/12/2007	CTF Jerry Olmstead 10/25/2007	Ship to Institution (Date?)	Released w/vehicle 10/25/07	9/12/2007 Act. 9/14
114	15-Passenger 1FBSS31L97DB42643 Ford Factory - 519	Insert VSPW for DS Fresno 9/13/2007	ISP Mark Razo 10/10/2007	Ship to Institution (Date?)	Released w/vehicle 10/10/07	9/13/2007 Act 9/14
115	15-Passenger 1FBSS31L07DB42644 Ford Factory - 520	Insert VSPW for DS Fresno 9/13/2007	RJD Alan Marrow 10/23/2007	Ship to Institution (Date?)	Released w/vehicle 10/23/07	9/13/2007 Act 9/14
116	15-Passenger 1FBSS31L27DB42645 Ford Factory - 521	Insert VSPW for DS Fresno 9/13/2007	RJD Alan Marrow 10/23/2007	Ship to Institution (Date?)	Released w/vehicle 10/23/07	9/13/2007 Act 9/14
117	15-Passenger 1FBSS31L47DB42646 Ford Factory - 522	Insert VSPW for DS Fresno 9/13/2007	RJD Alan Marrow 10/23/2007	Ship to Institution (Date?)	Released w/vehicle 10/23/07	9/13/2007 Act 9/14
118	15-Passenger 1FBSS31L67DB42647 Ford Factory -523	Insert VSPW for DS Fresno 9/13/2007				9/13/2007 Act 9/14
119	15-Passenger 1FBSS31L87DB42648 Ford Factory -524	Insert VSPW for DS Fresno 9/13/2007				9/13/2007 Act 9/14
120	Passenger 1GNFG15Z771219133 Coalinga Motors - Chevy	Insert Joe's Alpha & Subaru 6/4/2007	ASP R.Wishlist/Ordered by Inst.			
121	Passenger 1GNFG15Z471221633 Coalinga Motors - Chevy	Insert Joe Brazil 6/4/2007	ASP R.Wishlist/Ordered by Inst.			

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<u>122</u>	Passenger 1GNFG15Z371221199 Coalinga Motors - Chevy	Insert Joe's Alpha & Subaru 6/11/2007	ASP R.Wishlist/Ordered by Inst.			
<u>123</u>	Passenger 1GNFG15Z171219760 Coalinga Motors - Chevy	Insert Joe's Alpha & Subaru 6/11/2007	ASP R.Wishlist/Ordered by Inst.			
<u>124</u>	Passenger 1GNFG15Z371221638 Coalinga Motors - Chevy	Insert Joe's Alpha & Subaru 6/11/2007	ASP R.Wishlist/Ordered by Inst.			
<u>125</u>	Paratransit  Creative Bus Cells		ASP R.Wishlist/Ordered by Inst. ETA 11/07			
<u>126</u>	Paratransit  Creative Bus Cells		LAC R.Wishlist/Ordered by Inst. ETA Late October			
<u>127</u>	Paratransit  Creative Bus Cells		LAC R.Wishlist/Ordered by Inst. ETA Late October			
<u>128</u>	Paratransit  Creative Bus Cells		LAC R.Wishlist/Ordered by Inst. ETA Late October			
<u>129</u>	Paratransit  Creative Bus Cells		LAC R.Wishlist/Ordered by Inst. ETA Late October			
<u>130</u>	Paratransit  Bus West Fresno		PVSP R.Wishlist/Ordered by Inst. ETA Late October			
<u>131</u>	Paratransit  Bus West Fresno		PVSP R.Wishlist/Ordered by Inst. ETA Late October			
<u>132</u>	Paratransit  Bus West Fresno		PVSP R.Wishlist/Ordered by Inst. ETA Late October			

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<u>133</u>	Paratransit  Creative Bus Cells	Build Out Joe's Alpha & Subaru	SQ (Receiver Wishlist)			
<u>134</u>	Paratransit  Creative Bus Cells	Build Out Joe's Alpha & Subaru	SQ (Receiver Wishlist)			

# APPENDIX 5

Date : October 03, 2007

To : Mr. John Hagar  
Chief of Staff  
California Prison Health Care Receivership Corp.

Subject: **CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION'S RESPONSE  
TO THE RECEIVERS REQUEST FOR INFORMATION**

This memorandum is in response to the August 21, 2007 letter regarding the California Department of Corrections and Rehabilitation's (CDCR) Correctional Officer Hiring status. The following are CDCR's responses to the questions asked regarding CDCR's plan to meet California's total Correctional Officer (CO) needs.

1: The name and title of the individual responsible for implementing the overall CO hiring plan.

**Response:** Nancy Bither, Deputy Director of Human Resources, is responsible for implementing the overall hiring plan.

2. What is the total need statewide for COs [i.e. vacancies by location including projected turnover rate and projected increase/decrease in Personnel Years (PYs) (inmate population, Budget Change Proposals, etc.)]?

**Response:** See Attachment A for vacancy and projected information, effective July 1, 2007. This chart displays both budgeted and unbudgeted vacancy information, along with graduates assigned to the various institutions through December 2007. In addition to identification of current vacancy information, the CDCR prepares estimated CO projection data (see Attachment B); taking into account anticipated retirements, separations, promotions and other anticipated staffing needs. CDCR's Fiscal Year (FY) 2007/2008 CO hiring need for budgeted positions is estimated to be approximately 2,846 cadets. However, that number is not an accurate depiction as it doesn't include the staffing needed to support medical guarding, medical transportation, administrative overflow and other positions currently covered by overtime. The total FY 2007/2008 CO hiring need, including the 'unbudgeted' need is actually 4,332. It is important to note that activations and deactivations occur on a continuous basis, depending on the needs of the Department. Therefore, while it may appear at a given time that a particular institution is overstaffed or understaffed, an upcoming activation or deactivation will change the vacancy number.

3. What is the overall timeframe in which the total need shall be met (i.e. one year, two years)?

**Response:** The overall timeframe in which CDCR feels that the need may be met varies. Attachment B provides timeframes associated with the different options.



4. What are the current Academy capacity(s), locations, and scheduled Academy start dates?

**Response:** The current capacity of the CO Academy is 3,720 cadets per year. There is an approximate 9 percent attrition rate for each academy. Currently, CO cadets are trained at either the Correctional Training Center (CTC) in Galt or the Correctional Training Center Annex (CTCA) in Stockton. Attachment C details the schedule of upcoming academies, including the expansion described in Question 5.

5. What is the status of the current expansion plans?

**Response:** CDCR is currently authorized to train 3,720 CO cadets per year. In order to speed up the filling of vacancies, CDCR has identified plans to increase the total number of cadets selected and trained. These plans are contingent pending the availability of resources, space and funding, as follows:

- CTC and CTCA – Increase capacity to train. Plans include utilizing modular buildings; utilizing hotels to house additional cadets; relocating the Parole Agent Academy to a suitable local site.
- Satellite Academy – CDCR will conduct one academy training session at a satellite location (up to 120 cadets in the Salinas area). CDCR anticipates the satellite academy to begin in March 2008.
- Partner with Community Colleges – Dependent on union challenge. CDCR could increase the cadet numbers by 240 by June 2009, if needed. Academy training would be delivered in three training modules:
- Module I – approximately eight weeks of academic/foundation curricula at a Community College; Module II – approximately six weeks of tactical/advanced training provided by CDCR; and Module III – two weeks of hands-on training at the institution of hire. CDCR anticipates Community College instruction could begin Spring 2008.

In order to accomplish this expansion in order to fill CO vacancies, including having the ability to clear the existing candidate backlog and provide a 'shelf' of eligible candidates, the following activities are underway:

- Staffing and funding authority are being requested through the budget process.
- Establishment of a contract to increase the number of background investigations that can be conducted. The contract has been executed and CDCR anticipates the contractor starting mid October 2007, for 12 months, expiring October 31, 2008.
- Amendment of the Interagency Agreement and transfer of funding to secure additional positions with the State Personnel Board (SPB) to increase the number of psychological screenings of applicants that can be conducted each month. CDCR has met with the State Personnel Board's (SPB) Psychological Screening Unit (PSU), stated expectations, and secured a commitment from the SPB to obtain additional decisions per month. CDCR is seeking funding to support additional efforts.

- The Pre-Employment Medical (PEM) contractor has been notified of the additional medical evaluations that must be completed each month. A secondary PEM contract is being finalized to supplement the number of medical evaluations to be conducted monthly. CDCR is seeking funding to support additional efforts.

6. What is the status of meeting current Academy capacity (CO pipeline status)?

**Response:** For the last three academies, CDCR has successfully hired 100 percent or more of the people needed to fill the available academy cadet slots. For the July 2, 2007 academy there were 400 available slots and 408 cadets checked in. For the July 30, 2007 academy there were 200 available slots and 216 cadets checked in. For the August 27, 2007 academy there were 400 available slots and 411 cadets checked in. For the October 1, 2007 academy there are 200 slots and more than 200 cadets are expected to check in. CDCR anticipates being able to fill each upcoming academy to full capacity.

7. Is the Academy or pipeline expansion necessary/adequate to meet the need within specified timeframes?

**Response:** Yes, the pipeline expansion is adequate to meet the need within the timeframes, as shown in Attachment B.

8. What is the plan to fill high vacancy institutions first?

**Response:** CDCR has instituted priority processing for CO candidates selecting to work at institutions identified as having a critical vacancy need. "Critical" is generally defined as having a budgeted position vacancy rate of 10 percent or higher, along with taking into account activations and deactivations. Therefore, as hiring occurs, the needs change. Candidates indicating a willingness to work at a critical need institution immediately start the selection process, whereby applicants selecting a location not considered as a critical need will be processed once the critical need institutions have been filled – or such time that there is no longer a need to focus hiring only on critical need institutions.

Note – There are currently approximately 30,000 applications within the selection process. While CDCR is focusing on filling the institutions with the most critical need first, there were many applications in the selection process that were already in the final stages of processing, therefore, some hiring into non-critical needs institutions continues. This will decrease over time.

9. How many CO candidates are awaiting an upcoming Academy?

**Response:** As of October 1, 2007, the Office of Peace Officer Selection (OPOS) has made 127 hires for the upcoming October 29, 2007, 400 slot academy, with over 97 percent of those hires assigned to critical needs institutions. CDCR anticipates being able to fully staff this academy. The pipeline is an ongoing linear process with close to 30,000 CO applicants currently in process. As soon as a candidate becomes eligible for hire they are notified of the next available academy date. The goal is to build a 'shelf' of cleared, eligible candidates available to fill vacancies at any time. CDCR does not anticipate having a 'shelf' of cleared candidates for several more months.

10. What is the planned destination by institution for COs following Academy graduation?

**Response:** Once a candidate clears the selection process, they are notified. Critical need institutions are offered to all candidates. Attachment A details cadet institution assignments upon graduation.

11. Are geographical incentives being offered and, if so, for what institutions?

**Response:** Currently, an annual incentive of \$2,400 applies to COs accepting positions at Calipatria State Prison (CAL), Centinela State Prison (CEN), Avenal State Prison (ASP), Ironwood State Prison (ISP) or Chuckawalla Valley State Prison (CVSP). This is an incentive payable after 12 consecutive pay periods at the designated institutions. A monthly incentive of \$175 applies to CO's accepting positions at San Quentin (SQ), Correctional Training Facility (CTF) or Salinas Valley State Prison (SVSP). Additional recruitment incentives have been included within the Administration's "Last, Best and Final Offer" to the California Correctional Peace Officers Association Bargaining Unit 6 contract. These include increasing the recruitment incentives for CO's at SQ, CTF and SVSP. Additionally, the new contract provides for a \$2000 payment to Bargaining Unit 6 employees for each new CO recruited by a current employee who subsequently graduates from the CO academy.

12. Are there any focused recruitment initiatives and what are they?

**Response:** Yes. CDCR recruits, advertises, markets, and brands the Department throughout California and across the United States, with a strong focus on critical need institutions, to help fill Department vacancies. Recruitment activities include, but are not limited to, in-state and out-of-state hiring workshops (which include on-site testing - completing the first 5 major steps of the hiring/selection process); partnership with all 41 adult and juvenile institutional recruitment teams at various recruitment activities, including colleges, and military; media advertising (e.g., sport radio; freeway billboard; television; bus); online advertising (national/local/military/college search engines, banner ads, job postings, resume search/email blasts); newspaper, magazine, free employment publications; shopping mall and college kiosks; dissemination of a new 15-minute Peace Officer recruitment video; mass mailers, promotional flyers, and media inserts to targeted demographic populations and to all State of California employees; creation and release of a standalone recruitment web site ([joinedcr.com](http://joinedcr.com)).

13. Have quarterly staffing goals been identified and what are they?

**Response:** Staff are aware of the need to meet monthly hiring/training goals, meet regularly with representatives from the Division of Adult Institutions to ensure vacancy information is up to date, and that any/all adjustments to the process take place.

14. How many CO candidates are in the selection process (between the submittal of application and certification for hire)?

**Response:** As of September 20, 2007 there are approximately 30,000 CO candidates in the selection process.

The August 21, 2007 letter also requested that CDCR provide a quarterly report based on the fiscal year, which describes progress being made in filling vacancies statewide. The request was to submit the first quarterly report on CO hiring on October 12, 2007 (for the reporting quarter July 1, 2007 through September 30, 2007). Several components for the report were requested, as indicated below:

1. Authorized/budgeted CO positions per the Governor's budget during the reporting quarter – total number statewide, total by institution, total at headquarters, and the increase/decrease during the reporting quarter.
2. Unbudgeted positions or positions pending 607 approval by institution.
3. Number of vacancies – at the start of the reporting quarter, filled during the reporting quarter, and remaining at the end of the reporting quarter.
4. Status of plans to meet total need within designated timeframe – status on academy capacity/expansion, status on pipeline production and status on staffing high vacancy institutions.

**Response:** The attached reports provide the information requested. The CDCR will be able to provide the Receiver's office with updated information, showing increases and decreases, every six months, with the next report transmitted at the end of January 2008.

I believe this captures the information you have requested. Should you have any questions please contact me at (916) 323-6001.



STEPHEN W. KESSLER  
Undersecretary, Program Support  
California Department of Corrections and Rehabilitation

Attachments

cc: Heidi Lackner  
Nancy Bither  
Judy Gelein

MENT OF CORRECTIONS AND REHABILITATION  
REPORT FOR CORRECTIONAL OFFICERS

ATTACHMENT A

Reported by Institution, BCOA Cadet Graduation, FOCUS FY 06/07 Overtime/Temp Help Expenditure Report and FY 08/09 Fall Population IAS

id Vacant (filled)	Estimated Vacant (w/Unbudgeted)	BCOA Graduates July through Dec 2007 (Estimated)						Anticipated Attrition	Estimated Vacant (Established)	Estimated Vacant (w/Unbudgeted)	Sum of Scheduled Activations & Deactivations Converted to Pos (Estimated)
1/07	07/01/07	07/13/07	08/17/07	09/07/07	10/19/07	11/16/07	12/14/07	July - Dec 2007	12/31/07	12/31/07	FY 07/08
3.8	106.0	13.0	6.0	0.0	0.0	8.0	7.0	18.0	27.8	90.0	-43.1
3.6	96.3	1.0	4.0	0.0	1.0	3.0	9.0	16.7	89.2	95.0	0.0
3.9	63.8	1.0	3.0	2.0	3.0	21.0	15.0	26.7	20.6	45.5	-16.7
0.0	8.0							0.0	8.0	8.0	
3.3	116.3	8.0	8.0	4.0	47.0	26.0	6.0	46.7	43.0	64.0	0.0
3.6	86.8	3.0	8.0	5.0	10.0	0.0	8.0	1.3	7.9	54.1	-15.1
3.7	25.0	0.0	7.0	3.0	17.0	3.0	4.0	6.7	-8.6	-2.4	0.0
3.9	55.7	0.0	0.0	0.0	0.0	0.0	0.0	26.7	19.6	82.4	-3.2
5.4	58.5	12.0	9.0	0.0	8.0	0.0	4.0	3.3	15.7	28.6	-43.1
3.4	107.5	7.0	12.0	5.0	20.0	8.0	6.0	13.3	18.7	62.9	-4.4
2.2	89.6	3.0	8.0	2.0	16.0	14.0	45.0	12.0	-53.6	13.6	-5.2
3.4	106.3	21.0	37.0	3.0	6.0	3.0	3.0	3.3	-11.3	36.6	22.9
8.7	-5.5	17.0	4.0	7.0	49.0	9.0	0.0	24.0	-90.7	-67.5	-21.8
2.2	217.0	8.0	11.0	4.0	14.0	8.0	28.0	56.7	155.9	200.7	-44.4
3.6	117.4	1.0	1.0	0.0	1.0	1.0	0.0	5.3	99.9	118.7	102.7
3.1	94.9	6.0	11.0	1.0	12.0	2.0	10.0	13.3	30.4	66.2	0.0
2.4	34.8	2.0	8.0	4.0	2.0	0.0	0.0	18.0	24.4	36.8	0.0
3.2	133.1	0.0	5.0	0.0	5.0	17.0	15.0	26.7	82.9	117.7	-26.7
4.1	89.2	0.0	3.0	0.0	8.0	3.0	28.0	49.3	81.4	96.5	-46.7
1.8	42.2	10.0	10.0	0.0	4.0	21.0	17.0	10.0	-30.2	-9.8	0.0
5.3	112.7	12.0	23.0	0.0	5.0	11.0	57.0	8.0	-64.7	12.7	18.7
1.0	58.9	4.0	15.0	1.0	14.0	1.0	1.0	11.3	-0.7	34.2	-11.2
7.5	77.6	0.0	11.0	4.0	10.0	3.0	2.0	6.7	34.2	54.3	0.0
3.2	67.3	2.0	8.0	1.0	8.0	4.0	2.0	13.3	44.5	55.6	-0.7
3.9	103.3	3.0	10.0	0.0	5.0	10.0	65.0	26.7	-30.4	36.9	-10.0
1.4	49.4	0.0	10.0	7.0	30.0	4.0	0.0	18.0	-21.6	16.4	-16.8
5.4	52.6	11.0	6.0	0.0	1.0	0.0	0.0	20.0	37.4	54.6	-2.1
1.9	30.3	9.0	25.0	2.0	27.0	1.0	0.0	18.0	-49.9	-15.7	-9.9
3.2	32.5	5.0	7.0	2.0	9.0	1.0	0.0	3.8	8.0	12.2	-4.4
0.0	9.0							0.0	9.0	9.0	
1.2	52.5	3.0	5.0	2.0	1.0	3.0	0.0	21.3	31.5	59.6	0.0
3.2	123.6	4.0	2.0	1.0	22.0	12.0	23.0	42.7	24.9	102.2	-0.1
1.9	215.0	2.0	5.0	4.0	20.0	5.0	29.0	27.3	144.2	177.4	-73.3
1.4	65.9	2.0	5.0	1.0	13.0	10.0	1.0	2.7	22.1	36.5	-32.9
3.6	78.7	10.0	15.0	5.0	26.0	0.0	12.0	24.0	11.6	32.7	-10.6
1.0	14.0	0.0	0.0	0.0	0.0	0.0	0.0	0.0	14.0	14.0	0.0
98.4	2,784.1	180.0	302.0	70.0	414.0	212.0	397.0	621.8	745.1	1,830.9	-298.2

**CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION  
ATTACHMENT B**

**Correctional Officer Projections 7/1/07 – 7/1/09**

	7/1/07 Vacancies (not including medical guarding & transportation PYs)	7/1/07 Vacancies, (including Inst. 25 <sup>1</sup> , 30 <sup>2</sup> , 40 <sup>3</sup> and Program 50 <sup>4</sup> PYs) – Includes continued use of NCWF <b>through 8/1/07</b> (or similar training facility) AND increased training (Cadets - 120 satellite and 80 extra on 3/10/08 academy)
<b>a. Estimated Vacancies Effective 7/1/07</b>	<b>1,698</b>	<b>2,784***</b>
b. Anticipated graduates from 7/1/07– 6/30/08	-2,846	-3,294
c. Anticipated increases due to retirements, separations, promotions 7/1/07 – 6/30/08 *	+1,148	+1,148
d. Anticipated CO increase related to OTAP and/or PICO/Reentry		+ 500
e. Anticipated sum of scheduled activations/deactivations		-298
<b>f. Anticipated 7/1/08 vacancies **</b>	<b>0</b>	<b>840</b>
g. Anticipated graduates from 7/1/08 – 12/31/08	-534	-1,128
h. Anticipated increases due to retirements, separations, promotions 7/1/08 – 12/31/08	+534	+534
<b>i. Anticipated 1/1/09 vacancies</b>	<b>0</b>	<b>246</b>
j. Anticipated graduates from 1/1/09 – 6/30/09	-534	-780****
k. Anticipated increases due to retirements, separations, promotions 1/1/09 – 6/30/09	+534	+534
<b>l. Anticipated 7/1/09 vacancies</b>	<b>0</b>	<b>0</b>

used on projected separations, retirements, promotions for FY 2007/08

increase to academy needs to occur

included within this number is anticipated Program 50 staffing of 636 pys (this number could change); 156 Institution 25 staffing pys;

4 Institution 30 staffing pys; and 90 Institution 40 staffing pys

will have capacity to graduate 1,310.

institution 25 – Non-Budgeted (Population – Emergency Institution Activation Schedule (IAS))

institution 30 – Non-Budgeted (Policy – AdSeg Overflow)

**CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION**  
**ATTACHMENT B**

ation 40 – Reimbursable (Reimbursable through local cities or counties for community work crews or special projects)  
am 50 – Non-Budgeted (Medical guarding and temporary help – FY 06/07 average)

Constraints:

provides assumptions identified only with budgeted PYs. Graduate amount equals need.

provides assumptions including filling Institution 25, 30, 40 and Program 50 PYs currently covered by overtime, plus filling up to  
ional positions for OTAP and/or PICO (currently covered by overtime). In addition, assumptions include continued use of NCWF  
training location) as a training facility and increased training.

nt/Separation/Promotional data could change. Retirement projection is based on average age/service eligibility. Actuals have  
be less.

as unknown for medical guarding and transportation - could change.

as could change due to upcoming decisions related to “Three-Judge Panel”

as unknown for re-entry – could change.

Vacancy data provided by DAI – 6/30/07 budgeted PYs compared with 8/31/07 filled PYs (minus 7/13/07 and 8/17/07 BCOA graduates)

Based on BCOA graduation schedule

Retirements based on eligibility of age 55 with 24.9 years of service as of 12/31/06. Separations based on average of FY 2005/2006 actuals and FY  
2006/2007 average of actuals to date (as of 12/31/06). Promotions based on 100% of actual and anticipated retirements and separations for promotional path  
classifications

Anticipated CO increase to staff portion of PYs covered by Overtime

Anticipated sum of projected FY 2007/08 activations/deactivations based on DAI's FY 2008/09 Fall Population IAS

Anticipated 7/1/08 vacancies – budgeted vs. unbudgeted

Based on budgeted need. Academy needs to be downsized

Based on same methodology as d above

Anticipated 1/1/09 vacancies – budgeted vs. unbudgeted

Based on budgeted need

Based on same methodology as d above

Anticipated 1/1/09 vacancies – budgeted vs. unbudgeted



<u>Class</u>	<u>Enrollment</u>	<u>Start Date</u>	<u>Graduation Date</u>
IX-07	400	07/02/07	10/19/07
X-07X	200	07/30/07	11/16/07
XI-07	400	08/27/07	12/14/07
I-08X	200	10/01/07	01/25/08
II-08	400	10/29/07	02/22/08
III-08X	200	12/03/07	03/28/08
IV-08	400	01/07/08	04/25/08
V-08X	200	02/11/08	05/30/08
VI-08S	120	03/03/08	06/20/08
VII-08	480	03/10/08	06/27/08
VIII-08X	280	04/14/08	08/01/08
IX-08	480	05/12/08	08/29/08
X-08X	280	06/16/08	10/03/08
XI-08	480	07/14/08	10/31/08
XII-08X	280	08/18/08	12/05/08
I-09	480	09/15/08	01/09/09



August 21, 2007

Steve Kessler, Undersecretary  
California Department of Corrections and Rehabilitation  
P.O. Box 942883  
Sacramento, CA 94283-0001

Dear Mr. Kessler,

Thank you for your submittal of the proposed monthly report on California Department of Corrections and Rehabilitation (CDCR) correctional officer (CO) hiring. We have reviewed the proposed report format, however, and determined that the Receiver's Office needs additional substance in order to effectively track and monitor this important issue.

Initially, we request review of the CDCR's overall plan to meet total CO needs. We are specifically interested in the following elements of the plan:

1. The name and title of the individual responsible for implementing the overall CO hiring plan.
2. What is the total need statewide for COs [i.e. vacancies by location including projected turnover rate and projected increase/decrease in PYs (inmate population, BCPs, etc.)]?
3. What is the overall timeframe in which the total need shall be met (i.e. one year, two years)?
4. What are the current Academy capacity(s), locations, and scheduled Academy start dates?
5. What is the status of the current expansion plans?
6. What is the status of meeting current Academy capacity (CO pipeline status)?
7. Is Academy or pipeline expansion necessary/adequate to meet need within specified timeframe?
8. What is the plan to fill high vacancy institutions first?
9. How many CO candidates are awaiting an upcoming Academy?
10. What is the planned destination by institution for COs, following Academy graduation?
11. Are geographical incentives being offered and, if so, for which institutions?
12. Are there any focused recruitment initiatives and what are they?
13. Have quarterly staffing goals been identified and what are they?

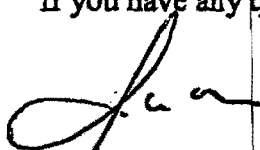
14. How many CO candidates are in the selection process (between the submittal of application and certified for hire)?

Regarding the regular report on CO hiring, we request a quarterly report based on the fiscal year, rather than a monthly report, which describes progress being made in filling vacancies statewide. The quarterly status report should include the following elements:

1. Authorized/budgeted CO positions per the Governor's budget during the reporting quarter
  - Total number statewide
  - Total by institution
  - Total at Headquarters
  - Increase and decrease during the reporting quarter
2. Unbudgeted positions or positions pending 607 approval by institution
3. Number of vacancies
  - At the start of the reporting quarter
  - Filled during the reporting quarter
  - Remaining at the end of the reporting quarter
4. Status of plans to meet total need within designated timeframe
  - Status on Academy capacity/expansion
  - Status on pipeline production
  - Status on staffing high vacancy institutions

It would be helpful to review the CDCR's overall plan to meet total CO needs within the next thirty days. If possible, please submit the first quarterly report on CO hiring on October 12, 2007 (for the reporting quarter July 1, 2007 through September 30, 2007).

If you have any questions, please contact Steve Weston at (916) 213-8600.



John Hagar  
Chief of Staff

c: Robert Sillen, Receiver  
Joe McGrath, Director, Custody Support Services  
Linda Buzzini, Staff Attorney  
Tim Rougeux, Correctional Administrator, CDCR  
Nancy Bither, Deputy Director, Human Resources, CDCR  
Heidi Lackner, Director, Support Services, CDCR