

NORTHERN DISTRICT OF ILLINOIS, EASTERN DIVISION

UNITED STATES OF AMERICA,

Plaintiff,

v.

**COOK COUNTY, ILLINOIS;
THOMAS DART, COOK COUNTY
SHERIFF (in his official capacity);
TONI PRECKWINKLE, COOK COUNTY
BOARD PRESIDENT (in her official capacity);
COOK COUNTY BOARD OF
COMMISSIONERS (in their official capacity),**

No. 10 C 2946

Judge Virginia Kendall

Defendants,

Monitor Harry E. Grenawitzke's Report No. 13

Fire, Life Safety, and Environmental Health

December 16, 2016

Harry E. Grenawitzke, RS, MPH, DAAS
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Executive Summary

December 5-8, 2016

This report summarizes the findings from the 13th tour of CCDOC. This tour completes the last of three tours established by the Consent Agreement between Cook County and the US Department of Justice Civil Rights Division that measure whether Cook County Department of Corrections (CCDOC), Department of Facilities Management (DFM) and Cermak Health Services (CHS) are able to sustain all provisions for fire, life safety and environmental health. At the tenth tour all CCDOC and CHS provisions assigned to the fire and life safety monitor were all judged to be substantially compliance. The eight provisions whose responsibility belonged to DFM were concluded in June, 2015 by Judge Virginia Kendall.

As a result of this tour, I conclude that all provisions of the Consent Agreement continue to be substantially compliant and that CCDOC and Cermak have sufficiently demonstrated sustainability of the requirements. It is important to note that CCDOC, DFM, and CHS should and will always have a need for continual improvement of these provisions as well as the operations, programs and services there. In most, if not all provisions, CCDOC, CHS and DFM have exceeded minimum requirements for compliance by continuing to review and improve policies, reviewing and improving effective training for their staff and the others as they apply across departmental responsibilities and implementing appropriate changes. All three continue to monitor practice against policies and procedures to identify non-conformities and ways to improve both effectiveness and efficiency.

CCDOC continues to grow its internal auditing team for policies and procedures and are reviewing audit reports measuring conformance and review and initiate documented corrective actions taken when necessary. This initiative will drive

continual improvement in operations and sustain the initiative and changes made to date.

I recognize and congratulate the hard work of the Cermak Health Services staff and the Cook County Department of Corrections officers, supervisors, command staff and executive leadership for their roles to gain and exceed compliance and making the entire initiative successful for the detainees.

I would be remiss in my responsibilities to not specifically recognize the vision, commitment, dedication and the many hours of time of Executive Director Nneka Jones Tapia, former Executive Directors Cara Smith, John Murphy, Gary Hickerson, and Salvador Godinez, Department of Corrections Chief of Staff, Matthew Burke, Assistant Executive Director Deborah Boecker, and their staff at Cook County Department of Corrections; Bilqis Jacob-El, Director of Facilities Management and former Director James D'Amico and the staff from DFM; Connie Mennella, Chair Department of Correctional Health Services, Linda Follenweider, Interim Chief Operating Officer Cermak Health Services, Chris Wurth, Former Chief Operating Officer Cermak Health Services, and Scott Achterhof, Environmental Services Director from Cermak Health Services for the achievements they earned. This was by no means a simple assignment, but a consistent and cooperative effort of many people to recognize the needs of the detainees and staff within the organizations, change the culture, develop policies and procedures, make the necessary changes to improve operations, and develop a means to continuously measure improvements.

I express my appreciation to Sheriff Thomas Dart for his dedication, leadership skills, drive for excellence and continuous commitment for success to improve conditions of confinement within CCDOC and his expectation to continually assess programs, services and operations and make improvements where and when needed.

I express my gratitude to the US Department of Justice and in particular Ms. Kerry Krentler Dean for her wise counsel, outstanding leadership skills, and her continual willingness to assist not only me, but more importantly Cook County

Department of Corrections, Cermak Health Services and Department of Facilities Management. She always has the right question at the right time for all of us to ponder. She too is a major contributor to the success of the initiative.

Since the tour in June, 2016, CCDOC continues to make significant strides in growing and in the number of internal audits completed that measure staff accountability for all CCDOC policies and procedures and a valuable tool to demonstrate “continuous improvement” in the management of Corrections. CCDOC leadership wants to know what is going well, what can be done to identify improvement opportunities and make effective changes to operations and services

Since that previous site visit, the most significant progress occurred in the following areas:

1. Improved analysis of pest control records and trending reports to reduce insect and rodent issues throughout the complex;
2. Improvements in new and replacement equipment for the food service operation including replacement of two well-used warewashers, replacement of all refrigeration compressors and condensers, new hot food transport carts, and significant repairs to the floor surfaces;
3. Significant improvements in the cleanliness and maintenance of housing areas, showers, exam rooms, and storage areas throughout the Cermak Health Care Facility and a development and implementation of a new electronic information system to continually monitor timely completion of housekeeping tasks;
4. A new and significantly improved cloud-based DFM work order system (FAMIS) that will provide useful and timely reports for both DFM and CCDOC to further improve response time;
5. CCDOC completed two internal audits training courses for over 60 staff and have another one planned. They have trained five lead auditors and

- are beginning the process to add ten to fifteen new auditors as they ramp up their internal audits of policies and procedures;
6. Revised fire safety policy, conducting much improved fire and smoke investigations, having less fires throughout all divisions, completing significantly more thorough fire and evacuation drill assessments, and significantly reducing combustibles allowed in housing units;
 7. Completion of revised sanitation plans for all divisions, including robust schedules, specified cleaning frequencies housing units, common areas, hallways, offices and storage areas etc.;
 8. Improved laundry usage by inmates for personal clothing. Implanting a robust tracking system and completing trend analysis for monitoring laundry use;
 9. Implementation of a toll free inmate hotline to report living condition issues, thereby reducing lag time for submission of work orders, reduce number of grievances related to housing conditions, and allowing inmates the opportunity to initiate needed improvements. The new system is currently implemented in Divisions 2 dorm 4, Divisions, 4, 6 10 and 11. Future expansion will be in remaining Divisions 8, 9, 14, and Division 2 Dorms 1, 2, and 3; and
 10. Continued reduction in detainees housed at CCDOC thus allowing the demolition of old, outdated, and costly to maintain buildings. That said there continues to be a need to identify replacement facilities as remaining buildings there are becoming very costly to maintain.

For this tour I again assessed implementation of policies and procedures established to address the fire and life safety and environmental health provisions for CCDOC and CHS Medical and Mental Health Facilities. As part of the tours I interviewed inmates, correction staff, supervisors, and management; held meetings with the fire safety committee, Department of Facilities Management staff, and Cermak management staff. I toured Divisions 3-Annex, 4, 6, 9, 10 and

Cermak; laundries in Division 4 and 5, chemical distribution room in Division 5 and the Central Kitchen. Time did not permit me to visit every housing unit in the Division's toured. However, the observations of the tiers visited provide the basis for this report.

Throughout the tour I identified and discussed with staff and management issues where improvements can be made for the fire, life safety, and environmental health provisions. However no systemic issues were identified. As a result, all provisions continue to remain substantially compliant with the Consent Agreement.

I will continue to be available to assist the Department of Justice and CCDOC, DFM and CHS management and staff to discuss and help resolve issues as they arise.

It has been a pleasure to work with all three organizations and monitor the progress throughout the six plus years.

Sincerely,

Harry F. Grenawitzke, RS, MPH, DAAS

Monitor for Fire, Life Safety and Environmental Health

Summary June 29, 2016

Section	Language	Substantial Compliance	Partial Compliance	Non-compliance
C.	Medical Care			
C. 53	Treatment and Management of Communicable Disease			
C. 53e	Cermak shall ensure that the negative pressure and ventilation systems function properly. Following CDC guidelines, Cermak shall test daily for rooms in-use and monthly for rooms not currently in-use. Cermak shall document results of such testing.	3/11 8/11 12/11 2/13 9/13 3/14 10/14 4/15 3/16 6/16 12/16	9/10 7/12	
C. 53f	Cermak shall notify DFM, in a timely manner, of routine and emergency maintenance needs, including plumbing, lighting and ventilation problems.	7/12 2/13 9/13 3/14 10/14 4/15 3/16 6/16 12/16	3/11 8/11 12/11	9/10
F.	Fire and Life Safety			
F. 71	CCDOC and DFM shall work together to develop and implement a fire safety program and ensure compliance is appropriately documented. The initial Fire Safety Plan shall be approved by the fire prevention authority having jurisdiction. The Fire Safety Plan shall be reviewed thereafter by the appropriate fire prevention authority at least every two years, or within six months of any revisions to the plan, whichever is sooner. Fire safety and emergency procedures shall be standardized across divisions, to the	12/11 7/12 2/13 9/13 3/14 10/14 4/15	9/10 3/11 8/11	

Section	Language	Substantial Compliance	Partial Compliance	Non-compliance
	extent possible given differences in physical plant and security levels.	3/16 6/16 12/16		
F. 72	CCDOC shall develop and implement an evacuation plan for inmates and staff and ensure that comprehensive fire drills are conducted every three months on each shift. CCDOC shall document these drills, including start and stop times and the number and location of inmates who were moved as part of the drills.	12/11 7/12 2/13 9/13 3/14 10/14 4/15 3/16 6/16 12/16	Not Assessed 9/10 3/11 8/11	
F. 73	DFM shall ensure that the Facility has adequate fire and life safety equipment, including installation and maintenance of fire alarms and smoke detectors in all housing areas according to applicable fire codes. Maintenance and storage areas shall be equipped with sprinklers or fire resistant enclosures in accordance with City of Chicago Fire Code (13-76-010). CONCLUDED BY ORDER OF JUDGE KENDALL 6/22/15			
F. 74	DFM shall ensure that all fire and life safety equipment is properly maintained and routinely inspected. DFM shall develop and implement a program related to the testing, maintenance and inspection of the Life Safety Equipment. CONCLUDED BY ORDER OF JUDGE KENDALL 6/22/15			
F. 75	CCDOC shall continue to ensure that emergency keys are appropriately marked and identifiable by touch and consistently stored in a quickly accessible location, and that staff are adequately trained in use of the emergency keys.	2/13 9/13 3/14 10/14 4/15 3/16 6/16	9/10 3/11 8/11 12/11 7/12	

Section	Language	Substantial Compliance	Partial Compliance	Non-compliance
		12/16		
F. 76	CCDOC shall ensure that staff are able to manually unlock all doors (without use of the manual override in the event of an emergency in which the manual override is broken), including in the event of a power outage or smoke buildup where visual examination of keys is generally impossible. CCDOC shall conduct and document random audits to test staff proficiency in performing this task on all shifts, a minimum of three times per year. CCDOC shall conduct regular security inspections of all locking mechanisms. CCDOC shall communicate with DFM via the Work Order System regarding lock-related issues and maintenance.	2/13 9/13 3/14 10/14 4/15 3/16 6/16 12/16	9/10 3/11 8/11 12/11 7/12	
F. 77	DFM shall develop and implement an annual preventative maintenance program concerning security devices such as doors locks, fire and smoke barrier doors, and manual unlocking mechanisms to ensure these devices function properly in the event of an emergency. CONCLUDED BY ORDER OF JUDGE KENDALL 6/22/15			
F. 78	CCDOC shall implement competency-based testing for staff regarding fire and emergency procedures.	8/11 12/11 7/12 2/13 9/13 3/14 10/14 4/15 3/16 6/16 12/16	Not assessed 9/10 X3/11	
F. 79	CCDOC shall promptly notify DFM of all electrical hazards, including maintenance and repair of electrical outlets, devices, and exposed electrical wires.	7/12 2/13 9/13 3/14 10/14	9/10 3/11 8/11 12/11	

Section	Language	Substantial Compliance	Partial Compliance	Non-compliance
		4/15 3/16 6/16 12/16		
F. 80	DFM shall promptly repair all known electrical hazards, including maintenance and repair of electrical outlets, devices, and exposed electrical wires and will document repairs by the Work Order System. CONCLUDED BY ORDER OF JUDGE KENDALL 6/22/15			
F. 81	CCDOC shall ensure that combustibles are controlled and eliminate highly flammable materials throughout the facility and inmate living areas (e.g., inmates 'use of paper bags as trash receptacles, ripped fire-retardant mattress covers, improvised cell light covers, blankets on cell floors, and improperly stored and labeled flammable liquids and other chemicals).	9/13 3/14 10/14 4/15 3/16 6/16 12/16	3/11 8/11 12/11 7/12 2/13	9/10
F. 82	CCDOC shall ensure that fire safety officers are trained in fire safety and have knowledge in basic housekeeping, emergency preparedness, basic applicable codes, and use of fire extinguishers and other emergency equipment.	7/12 2/13 9/13 3/14 10/14 4/15 3/16 6/16 12/16	Not Assessed 9/10 3/11 8/11	
G	SANITATION AND ENVIRONMENTAL CONDITIONS			
G. 83	Sanitation and Maintenance of Facilities			
G. 83a	DFM shall maintain an adequate written staffing plan and sufficient staffing levels to provide for adequate maintenance of the Facility. CONCLUDED BY ORDER OF JUDGE KENDALL 6/22/15			

Section	Language	Substantial Compliance	Partial Compliance	Non-compliance
G. 83b	CCDOC shall revise and implement written housekeeping and sanitation plans to ensure the proper routine cleaning of housing, shower, and medical areas, in accordance with generally accepted correctional standards. Such policies should include oversight and supervision, including meaningful inspection processes and documentation, as well as establish routine cleaning requirements for toilets, showers, and housing units.	4/15 3/16 6/16 12/16	9/10 3/11 8/11 12/11 7/12 2/13 9/13 3/14 10/14	
G.83c	DFM shall implement a preventive maintenance plan to respond to routine and emergency maintenance needs, including ensuring that shower, toilet, and sink units are adequately maintained and installed. CONCLUDED BY ORDER OF JUDGE KENDALL 6/22/15			
G. 83d	CCDOC shall notify DFM, in a timely manner, of routine and emergency maintenance needs, including plumbing, lighting, and ventilation problems.	7/12 2/13 9/13 3/14 10/14 4/15 3/16 6/16 12/16	8/11 12/11	9/10 3/11
G.83e	DFM shall ensure adequate ventilation throughout the Facility to ensure that inmates receive an adequate supply of air flow and reasonable levels of heating and cooling. DFM staff shall review and assess compliance with this requirement on a daily basis for automated systems and on an annual basis for non-automated systems. CONCLUDED BY ORDER OF JUDGE KENDALL 6/22/15			
G. 83f	CCDOC shall notify DFM of any visible obstructions to the ventilation system.	7/12 2/13	3/11 8/11	9/10

Section	Language	Substantial Compliance	Partial Compliance	Non-compliance
		9/13 3/14 10/14 4/15 3/16 6/16 12/16	12/11	
G. 83g	Cook County shall ensure adequate lighting in all inmate housing and work areas.	2/13 9/13 3/14 10/14 4/15 3/16 6/16 12/16	9/10 3/11 8/11 12/11 7/12	
G. 83h	CCDOC shall ensure adequate pest control throughout the housing units, medical units, RCDC, RTU, and food storage areas. CCDOC shall maintain a contract for professional exterminator services for each division, food services areas, and the Cermak hospital. Services should provide for routine pest control spraying and additional spraying as needed.	2/13 9/13 3/14 10/14 4/15 3/16 6/16 12/16	9/10 3/11 8/11 X12/11 X 7/12	
G. 83i	CCDOC shall ensure that all inmates have access to needed hygiene supplies.	4/15 3/16 6/16 12/16	Not Assessed 9/10 or 3/11 8/11 12/11 7/12 2/13 9/13 3/14 10/14	
G. 83j	CCDOC shall develop and implement policies and procedures for	2/13	Not	

Section	Language	Substantial Compliance	Partial Compliance	Non-compliance
	cleaning, handling, storing, and disposing of biohazardous materials, in accordance with generally accepted correction standards. CCDOC shall ensure that any inmate or staff utilized to clean a biohazardous area are properly trained in universal precautions, are outfitted with protective materials, and receive proper supervision when cleaning a biohazardous area.	9/13 3/14 10/14 4/15 3/16 6/16 12/16	Assessed 9/10 3/11 8/11 12/11 7/12	
G. 83k	DFM shall develop a policy on hazardous materials, in accordance with generally accepted correctional standards, and insure that all DFM staff is properly trained on the procedure. CONCLUDED BY ORDER OF JUDGE KENDALL 6/22/15			
G. 83l	CCDOC shall provide and ensure the use of cleaning chemicals that sufficiently destroy the pathogens and organisms in biohazard spills.	8/11 12/11 7/12 2/13 9/13 3/14 10/14 4/15 3/16 6/16 12/16	Not Assessed 9/10 3/11	
G. 83m	CCDOC shall inspect and replace as often as needed all frayed and cracked mattresses. CCDOC shall destroy any mattress that cannot be sanitized sufficiently to kill any possible bacteria. CCDOC shall ensure that mattresses are properly sanitized between uses.	8/11 2/11 7/12 2/13 9/13 10/14 4/15 3/16 6/16 12/16	3/11	9/10

Section	Language	Substantial Compliance	Partial Compliance	Non-compliance
G. 83n	CCDOC shall ensure adequate control and observation of all housing units, including distribution and collection of razors and cleaning supplies. All cleaning tools and hazardous chemical shall be removed from housing areas after use.	8/11 12/11 7/12 2/13 9/13 3/14 10/14 4/15 3/16 6/16 12/16	9/10 3/11	
G. 83o	CCDOC shall ensure that Facility sanitarians receive training from a relevant state, national, or professional association with emphasis on assessment of environmental health practices and emerging environmental issues in correctional settings. Facility sanitarians should also have training on and access to testing equipment to ensure sanitary conditions.	12/11 7/12 2/13 9/13 3/14 10/14 4/15 3/16 6/16 12/16	9/10 3/11 8/11	
G. 84	Sanitary Laundry Procedures			
G. 84a	CCDOC shall develop and implement policies and procedures for laundry procedures to protect inmates from risk of exposure to communicable disease, in accordance with generally accepted correctional standards. To limit the spread of communicable disease, CCDOC shall ensure that clothing and linens returned from off-site laundry facility are clean, sanitized, and dry.	8/11 12/11 7/12 2/13 9/13 3/14 10/14 4/15 3/16 6/16 12/16	9/10 3/11	

Section	Language	Substantial Compliance	Partial Compliance	Non-compliance
G. 84b	CCDOC shall ensure that inmates are provided adequate clean clothing, underclothing and bedding, consistent with generally accepted correctional standards, and that the laundry exchange schedule provides consistent distribution and pickup service to all housing areas.	3/14 10/14 4/15 3/16 6/16 12/16	3/11 8/11 12/11 7/12 2/13 9/13	9/10
G. 84c	CCDOC shall train staff and educate inmates regarding laundry sanitation policies.	3/14 10/14 4/15 3/16 6/16 12/16	8/11 12/11 7/12 2/13 9/13	9/10 3/11
G. 84d	CCDOC shall ensure that laundry delivery procedures protect inmates from exposure to communicable diseases by preventing clean laundry from coming into contact with dirty laundry or contaminated surfaces.	12/11 7/12 2/13 9/13 3/14 10/14 4/15 3/16 6/16 12/16	9/10 3/11 8/11	
G. 84e	CCDOC shall require inmates to provide all clothing and linens for laundering and prohibit inmates from washing and drying laundry outside the formal procedures. (* In the Monitor Report #V dated July 20, 2012; this provision was inadvertently recorded "substantial compliance." The provision should have been recorded "partial compliance.")	9/13 3/14 10/14 4/15 3/16 6/16 12/16	9/10 3/11 8/11 12/11 7/12* 2/13	
G. 85	Food Service			

Section	Language	Substantial Compliance	Partial Compliance	Non-compliance
G. 85a	CCDOC shall ensure that all food service at the Facility is operated in a safe and hygienic manner and that foods are served and maintained at safe temperatures.	9/13 3/14 10/14 4/15 3/16 6/16 12/16	3/11 8/11 12/11 7/12 2/13	9/10
G. 85b	CCDOC shall ensure that all food service staff, including inmate staff, must be trained in food service operations, safe food handling procedures, and appropriate sanitation.	7/12 2/13 9/13 3/14 10/14 4/15 3/16 6/16 12/16	9/10 3/11 8/11 12/11	
G. 85c	CCDOC shall ensure that the Central Kitchen and Division XI kitchen are staffed with a sufficient number of appropriately supervised and trained personnel.	2/13 9/13 3/14 10/14 4/15 3/16 6/16 12/16	9/10 3/11 8/11 12/11 7/12	
G. 85d	CCDOC shall ensure that dishes and utensils, food preparation and storage areas, and vehicles and containers used to transport food are appropriately cleaned and sanitized.	2/13 9/13 3/14 10/14 4/15 3/16 6/16 12/16	9/10 3/11 8/11 12/11 7/12	
G. 85e	CCDOC shall check and record, on a regular basis, the temperatures in the refrigerators, coolers, walk-in-refrigerators, the dishwasher water, and all other kitchen equipment with temperature monitors	7/12 2/13 9/13	9/10 3/11 8/11	

Section	Language	Substantial Compliance	Partial Compliance	Non-compliance
	to ensure proper maintenance of food service equipment.	3/14 10/14 4/15 3/16 6/16 12/16	12/11	

STATUS REPORT

DATE OF STATUS REPORT: 6/28/16

PROVISION: C. MEDICAL CARE

53. Treatment and Management of Communicable Disease

e. Cermak shall ensure that the negative pressure and ventilation systems function properly. Following CDC guidelines, Cermak shall test daily for rooms in-use and monthly for rooms not currently in-use. Cermak shall document results of such testing.

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

The Department of Facilities Management (DFM) monitors and record the results of the negative pressure testing for the 18 isolation cells located on the third floor (3-E) of Cermak, along with the enunciator panel once each shift. The documentation is maintained in the DFM office located in the Cook County Courthouse. Work orders are submitted and appropriate repairs made anytime monitoring demonstrates non-compliance. Occupational and Environmental Hygiene Services at the Great Lakes Center for Occupational and Environmental Safety and Health at the University of Illinois, Chicago, conducts a full testing of the ventilation system annually. Copies of those reports are provided to the Chief Medical Officer of Cermak.

Monitor's Assessment: No change from the previous report. The pressure monitoring by DFM is included in their Preventative Maintenance Schedule and completed as required. This provision continues to be in substantial compliance.

Monitor's Recommendations:

1. No further recommendations.

PROVISION: C. MEDICAL CARE

53. Treatment and Management of Communicable Disease

f. Cermak shall notify DFM, in a timely manner, of routine and emergency maintenance needs, including plumbing, lighting and ventilation problems.

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

In mid-October DFM transitioned from the “Facility Wizard” work order processing system to the new cloud based work order management information system which is named “FAMIS”. The new system provides all users including Cermak real time tracking of work order completion and backlog. Cermak submits work order requests using the new system for both emergency and routine repairs. Scheduled preventive Maintenance is in the process of being loaded into the new system. Cermak’s Environmental Services Director and supervisory staff are trained and authorized to enter work order requests to DFM electronically. They continue to monitor the status of all Cermak’s work orders daily to assure timely completion of work orders.

Monitor’s Assessment:

Because of the transition to the new Environmental Services Director, the Monitor did not tour Cermak on the previous visit. The Monitor did tour Cermak on this visit and found it to be clean, with no maintenance issues for which a work order had not been submitted. As stated in the previous report, the new Environmental Services Director who began in late June formerly worked in a management role with DFM at the CCDOC complex and is very familiar with the work order system and the responsibilities for this position. Management staff at Cermak continues to report excellent response from DFM to quickly resolve any outstanding preventive and emergency work orders.

Monitor’s Recommendations:

1. No recommendations.

PROVISION: F. FIRE AND LIFE SAFETY

71. CCDOC and DFM shall work together to develop and implement a fire safety program and ensure compliance is appropriately documented. The initial Fire Safety Plan shall be approved by the fire prevention authority having jurisdiction. The Fire Safety Plan shall be reviewed thereafter by the appropriate fire prevention authority at least every two years, or within six months of any revisions to the plan, whichever is sooner. Fire safety and emergency procedures shall be standardized across divisions, to the extent possible given differences in physical plant and security levels.

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

The interagency Fire Safety Committee, established shortly after the start of the monitoring, continues to meet monthly discuss and monitor implementation all fire and life safety policies and procedures. They review and assess all the fire safety and prevention systems including monthly safety inspections, fire investigations, elimination of flammables in housing units, fire drills, policies and procedures. They develop fire and emergency evacuation training material and conduct training.

CCDOC completed the review and issued a revised Fire Safety, Fire Emergency and Fire Evacuation Policy that replaces the Interagency Directive 64.5.30.0 from 2011. It includes the responsibilities for DFM for maintaining compliance with the Chicago Fire Code for smoke detectors, fire alarms, sprinkler systems, chemical storage areas, laundry facilities and maintenance areas/shops and to conduct and respond to all emergency repairs of fire and life safety equipment as outlined in DFM policy within 24 hours. Cermak has responsibilities for training of their employees and to respond to fires and fire alarms in accordance with their policies and to participate in the incident command structure.

The City of Chicago fire safety inspectors complete an inspection of CCDOC facilities annually. Scheduled by the fire safety committee, but unannounced fire drills are conducted regularly on all shifts for all divisions. When available, an inspector from the Fire Prevention Bureau, along with the responding fire station firefighters participates as part of their response training.

CCDOC maintains a designated fire safety administrator and designated fire safety/sanitation officer positions in all divisions on all including weekends and holidays. Fire Safety Training is provided as part of initial correction officer orientation program at the Training Institute located in Moraine Valley Community College.

The Fire Safety Interagency Agreement requires divisional Safety/Sanitation Officers to conduct weekly fire safety inspections of all housing, administrative, medical clinics, storerooms, maintenance rooms, classrooms, and common areas within their respective divisions to identify fire safety hazards and resolve them. CCDOC General Order 24.11.1.0 was revised to require these inspections. General Order 24.11.1.1 was issued on October, 3, 2014

Monitor's Assessment:

As stated above, the new Fire Safety, Fire Emergency and Fire Evacuation Policy 402 is complete and has been authorized. The policy is awaiting review by the Chicago Fire Department and is

expected to be completed before the end of the year, well within the six month requirement specified in the provision.

The Fire Safety Committee continues to provide the Monitor summaries of its meetings. Prior to the tour the Monitor reviewed the meeting summaries from August 17, September 15, October 20, and November 10. The Monitor met with the Committee during the tour to review compliance with the fire and life safety provisions and discussed the fire drill assessments fire investigations, and emergency key system improvements. Cermak is once again actively participating in the Committee.

The Fire Safety Committee continues its formal reviews of all fire investigations. The reviews have resulted in several improvements to eliminate ignition sources as noted in the previous report. The provision continues to be in substantial compliance.

Monitor's Recommendations:

1. Obtain evidence of the review of the new Fire Safety Policy by the Chicago Fire Department as required.
2. Continue investigating all fires and fire drills to identify procedural or training improvements needed.

72. CCDOC shall develop and implement an evacuation plan for inmates and staff and ensure that comprehensive fire drills are conducted every three months on each shift. CCDOC shall document these drills, including start and stop times and the number and location of inmates who were moved as part of the drills.

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

Division specific Fire Safety and Emergency Plans that include detailed evacuation plans are complete and are reviewed by the Chicago Fire Department. It is only the new policy that needs review. The Interagency Fire Safety Committee continues to review the divisional plans, along with the division fire safety/sanitation officers to assure they remain current. The Committee has implemented a division specific fire evacuation and emergency key egress box training program to assure that when officers are assigned to a specific division, they are adequately trained in that division's emergency egress key location, response and evacuation procedures.

As in the previous Interagency Directive for Fire Safety, the new Policy 402 requires a minimum of quarterly fire drills for all divisions on each shift. They are required to be conducted in different locations of the division to practice evacuation procedures. The policy also requires the divisions to simulate obtaining emergency keys and include fire alarm, strobe and speaker activation in coordination with DFM. Drills are to be videotaped for review by the fire safety committee. The provision continues to be substantially compliant.

Monitor's Assessment:

The Monitor did not witness any fire drills during the tour. However, CCDOC provided copies of several fire drill reports, along with the written fire drill analysis for August and September, 2016 completed by the Fire Safety Committee. The reviews were thorough and offered appropriate suggestions for improvements such as additional training.

Monitor's Recommendations:

1. Continue to analyze fire drill videos, reports and summaries.

73. DFM shall ensure that the Facility has adequate fire and life safety equipment, including installation and maintenance of fire alarms and smoke detectors in all housing areas according to applicable fire codes. Maintenance and storage areas shall be equipped with sprinklers or fire resistant enclosures in accordance with City of Chicago Fire Code (13-76-010).

6/22/15 Concluded by Order of Judge Kendall

74. DFM shall ensure that all fire and life safety equipment is properly maintained and routinely inspected. DFM shall develop and implement a program related to the testing, maintenance and inspection of the Life Safety Equipment.

6/22/15 Concluded by Order of Judge Kendall

75. CCDOC shall continue to ensure that emergency keys are appropriately marked and identifiable by touch and consistently stored in a quickly accessible location, and that staff are adequately trained in use of the emergency keys.

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

The Security and Key Control Interagency Directive was issued effective January 1, 2012. It requires that each Division have a "red" emergency key access box located in the division's control room. That box contains the key that opens a second box containing all emergency

keys for all housing unit doors. The key box is locked and has a security seal that must be broken to gain access. The policy further requires that any time the seal is broken, including during an emergency, the Watch Commander be notified, an incident report completed, and an email sent to the Fire Safety Officer to replace the seal. Only a member of the Fire Safety Committee can re-seal the box.

All emergency egress keys are color coded and have a two-inch glow stick attached to the key ring. Restricted keys are those specifically assigned to designated personnel with the authority of the respective division superintendent or DFM's Deputy Director/OEIV. The restricted keys are color coded differently than the egress keys and are specifically designated keys for the library, classrooms, recreation rooms, etc. Emergency access keys for DFM shops are stored in the emergency key box in the division where the shop or penthouse is located

CCDOC, as a result of the Fire Safety Committee investigation has recently installed color coded "zip ties" on each of the emergency key ring in addition to the glow sticks. The zip tie colors red, blue, white, black, green, yellow, orange, and lime green are systematically assigned for specific key and locks including exit doors to the outside, cells, stairwell doors, tier doors, dorm rear doors, officer area doors, and tunnel exit. The color scheme is consistent for all Divisions, simplifying officer training. An emergency key color chart is maintained in the emergency key box as an additional resource for staff.

The Fire Safety Officer is investigating the use of the same scheme on each of the locks which should provide even quicker access.

The CCDOC Training Academy is responsible to provide Egress box familiarization training to Correction recruits and for sworn officers during the annual in-service training. The Fire Safety Coordinator sends a quarterly egress key exercise to each division requiring all officers on all shifts to retrieve a set of egress keys from the egress key box and use those keys to open the interlock door, a cell door and an emergency stairwell. The officer then signs a log that they completed the exercise.

Emergency keys are accessed during all fire drills and are tested in the locks for the area of the drill.

Monitor's Assessment:

As of this tour one set of all keys to DFM shops and penthouse rooms are now maintained in the emergency key box in all divisions where DFM maintains a shop. The fire safety committee recently developed an Egress Key Exercise for all correction officers. It was completed in March and April, 2016. CCDOC provided the Monitor with a copy of the memo

dated June 8, 2016 requiring the Division Superintendents to complete the Egress Key Exercise and demonstrate completion through signature sheets requiring each officer to sign that they have completed the exercise in the Division or area they currently work. Prior to this tour CCDOC provided copies of the completed signature confirmation sheets egress key exercise for all divisions demonstrating completion of the exercise and compliance with the training component of the provision. The provision continues to be substantially compliant.

Monitor's Recommendations:

1. Maintain the quarterly emergency egress key training.
2. Consider the same color coding of locks to match the color code scheme of the emergency keys.

76. CCDOC shall ensure that staff are able to manually unlock all doors (without use of the manual override in the event of an emergency in which the manual override is broken), including in the event of a power outage or smoke buildup where visual examination of keys is generally impossible. CCDOC shall conduct and document random audits to test staff proficiency in performing this task on all shifts, at a minimum of three times per year. CCDOC shall conduct regular security inspections of all locking mechanisms. CCDOC shall communicate with DFM via the Work Order System regarding lock-related issues and maintenance.

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

Emergency keys for each division are stored in the division's secured control room. All emergency keys are color coded as described in the previous provision and each ring has a glow stick attached that allows staff to easily identify a specific key when vision may be impaired because of smoke, fire or loss of lighting. The Fire Safety Committee explained that on every shift, the officer assigned to the unit or tier inspects all locking mechanisms and reports any issues through the DFM work order system. The Fire Safety Committee reviews the damaged lock work order log each month. They have also implemented an "Egress Key Exercise for each Division on all shifts by all personnel as reported in the provision 75. Egress key accessibility and process are also included as part of the routine unannounced fire drills as described above.

CCDOC utilizes the work order system to report damaged locks and provided trend analysis showing the time DFM takes to repair the locks. All locks for all cells and door are checked on each shift by the tier officer.

Monitor's Assessment:

CCDOC provided the "Damaged Lock Work Order Log" for June-November, 2016. The fire safety committee produced a trend report showing a 47% reduction in damaged locks over that period. CCDOC reported only one monthly increase in the incidents of damaged locks and that was in October, 2016 (77 damaged locks) primarily because of excessive inmate damage in Division 11. Another trend report was provided demonstrating a 73% reduction in the average number of days from submission to closure of work order repairs for damaged locks from 15 days in February to four days in October, 2016.

CCDOC provided copies of fire drill reports for all division on all shifts documenting that emergency keys were accessed and used during those drills. On this site visit the Monitor noted only one incident in Division VI where a secondary emergency evacuation exterior door could not be opened using the key. The provision remains substantially compliant.

Monitor's Recommendations:

1. No further recommendations.

77. DFM shall develop and implement an annual preventative maintenance program concerning security devices such as doors locks, fire and smoke barrier doors, and manual unlocking mechanisms to ensure these devices function properly in the event of an emergency.

6/22/15 Concluded by Order of Judge Kendall

78. CCDOC shall implement competency-based testing for staff regarding fire and emergency procedures.

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

Revised CCDOC Policy 402, Fire Safety, Fire Emergency, And Fire Evacuation replaced Interagency Directive 64.35.30.0 Fire Safety, Fire Emergency, and Fire Evacuation. The new policy establishes that the Training Academy is responsible for fire safety training for the Department of Corrections recruits and for sworn members during the annual in-service training. At a minimum the training shall include fire extinguisher usage, egress box familiarization, review of emergency routes, fire suppression, and divisional fire and evacuation plans. Designated safety officers (FSSOs) shall receive training semi-annually and become well versed in the fire safety, emergency and evacuation plans for the Department. The training

shall include report writing, conducting a fire inspection, and overview of policy and procedures in addition to the training for sworn members. Safety Officers (SSOs) are assigned on all shifts in all divisions including weekends and holidays. Employees of both DFM and Cermak are required to be trained by the respective agencies in accordance with their fire safety and evacuation plans.

CCDOC created an interactive Fire Safety Training PowerPoint presentation. It follows the procedures specified in the Fire Safety Policy. It is interactive in that officers are required to answer questions about a topic before being permitted to move forward to the following module. Additionally the Safety Officers must successfully complete a written proficiency exam for fire safety with a minimum passing score of 80%.

Monitor's Assessment:

The competency based fire and emergency evacuation safety officer proficiency exam was initiated in August, 2011. For this site visit CCDOC provided sign-in logs for Safety Officer training held August 18 (2 classes) August 19, and November 23. Training for 2016 was also conducted in April as stated in the previous report and it demonstrates that there is a minimum of one trained safety/sanitation officer on every shift for each occupied Division. In most, there are several on each shift. CCDOC provided the Monitor with Power Point presentations for "Fire Safety Training for Supervisors", and "Fire Safety Training" for staff. The presentations are thorough, well organized, and follow the provisions of the General Order for Fire Safety. The provision remains substantially compliant.

Monitor's Recommendations:

1. No further recommendations

79. CCDOC shall promptly notify DFM of all electrical hazards, including maintenance and repair of electrical outlets, devices, and exposed electrical wires.

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

CCDOC maintains written procedures requiring prompt submittal for all work order requests when maintenance issues are identified including electrical hazards. Specifically for electrical hazards, both DFM management and the CCDOC work order coordinator monitor work order backlog weekly. CCDOC is fully integrated with the new DFM "FAMIS" cloud based work order system.

Monitor's Assessment:

CCDOC provided a log of all work order requests for electrical repairs from April through November, 2016. In the eight months there were 52 work orders filed with an average of 6.5 per month. Of those approximately 26 were in inmate accessible areas. Repairs were made on a range of 1-15 days depending on parts and priority. During this site visit, the Monitor toured the Central Kitchen, laundries, housing units in Divisions 3 annex, Cermak, 4, 6, 9 and 10. Only one missing cover plate was observed in Division 4 Tier P. Since the replacement lighting project, the number of work orders for exposed wires and broken fixtures has dropped significantly primarily because inmates no longer have access the wires in the fixtures. As reported in the previous recent fire investigations identified inmates are now using the aluminum foil lids from applesauce containers to create a spark from outlets for televisions in the housing units. Applesauce has been removed from the menu. DFM continues to encase the televisions, electrical cord and the outlet to prevent inmates from being able to access them to create a spark. The Monitor observed the new encasements in Division 9 and 10 on this tour. The provision remains substantially compliant.

Monitor's Recommendations:

1. No further recommendations.

80. DFM shall promptly repair all known electrical hazards, including maintenance and repair of electrical outlets, devices, and exposed electrical wires and will document repairs by the Work Order System.

6/22/15 Concluded by Order of Judge Kendall

81. CCDOC shall ensure that combustibles are controlled and eliminate highly flammable materials throughout the facility and inmate living areas (e.g., inmates' use of paper bags as trash receptacles, ripped fire-retardant mattress covers, improvised cell light covers, blankets on cell floors, and improperly stored and labeled flammable liquids and other chemicals

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

General Order 24.11.1.1 "Sanitation, Fire Health and Life Safety Plans and Reporting" is the CCDOC Master Sanitation Plan. Division specific sanitation plans are revised as appropriate to

the General Order. The replacement program for new lighting fixtures has also eliminated the incandescent bulbs inmates used to block light.

Inmates are required to maintain all personal belongings and commissary in their personal property bags. Inmates housed in cells are permitted one paper bag per person for trash from commissary that is required to be emptied daily. CCDOC has developed a "Combustible Material Awareness" PowerPoint presentation to train correction officers that includes photographs of combustibles found during fire investigations.

DFM controls the storage of flammables in their shops by maintaining them in designated secure fire resistant cabinets. Additionally Chair of the Fire Safety Committee sends a fire safety bulletin to all divisional superintendents and their respective Assistant Executive Directors regarding wick ignition and sources to make them aware of recent incidents and also know what officers need to observe during cell inspections.

DFM has completed the color-coded map and inventory of all flammable and hazardous chemicals and provided it to CCDOC division safety officers and Safety Administrator. So within each division, there is an up-to-date inventory of all flammables being stored in that specific division. The inventory is maintained by DFM and is readily available to first responders in case of an emergency.

Monitor's Assessment:

The Monitor toured housing units in Divisions Cermak, 3-Annex, 4, 6, 9, and 10. In all instances housekeeping continues to improve and inmates are maintaining commissary in their assigned personal property bags. The amount of flammable material exposed in the cells is significantly reduced. None of the fire investigations provided prior to this tour involved the use of paper bags as fuel. In all Divisions visited, the Monitor did not observe any torn or damaged mattresses. Consistent enforcement from tier officers and supervisors to limit the amount of flammable materials within the cells continues to be a key to assure the expectations are met. Additionally Superintendents and Assistant Executive Directors need to be more vigilant when touring housing units.

The provision remains substantially compliant.

Monitor's Recommendations:

1. No further recommendations.

82. CCDOC shall ensure that fire safety officers are trained in fire safety and have knowledge in basic housekeeping, emergency preparedness, basic applicable codes, and use of fire extinguishers and other emergency equipment.

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

Revised CCDOC Policy 402, Fire Safety, Fire Emergency, And Fire Evacuation replaced Interagency Directive 64.35.30.0 Fire Safety, Fire Emergency, and Fire Evacuation. The policy establishes that all CCDOC employees must receive training and become well-versed in the fire safety, emergency, and evacuation plans of the department and its divisions. This includes safety officers. (Note: In the divisions there are designated and trained "Safety/Sanitation Officers" that are equivalent to the term "safety officers" identified in the provision requirement above.) Further, the policy explains that "Communication among and between CCDOC, Cermak, and CCDFM employees is key in assuring a safe facility, and all shall work together to implement this directive."

The revised policy 402 establishes semi-annual training of safety officers as described in the narrative of Provision 78 above. It includes training on basic housekeeping emergency preparedness, applicable fire codes and the use of fire extinguishers and other emergency equipment. The Safety Officers are trained to complete and submit a weekly fire safety inspections report for all housing, administrative areas, medical areas, storerooms, maintenance rooms, classrooms and common areas within their respective divisions. Monthly the second shift safety officer is required to review the weekly fire safety inspection reports noting all uncorrected deficiencies and submit it to the Superintendent with a copy to the Fire Safety Coordinator. Any fire safety deficiencies not corrected within 30 days are submitted to the DFM coordinator. CCDOC maintains an active list of all designated safety officers showing at least one on duty on all shifts including weekends and holidays for all divisions.

The training of safety/sanitation officers is currently provided by the CCDOC designated Safety Administrator, using the video of one of the courses previously conducted by the Chicago Fire Department. Following the training, safety officers are required to pass a written proficiency examination. CCDOC has also developed a "Fire Extinguisher Training" PowerPoint that is thorough tutorial on the types of extinguishers, operation, and firefighting rules.

Monitor's Assessment:

As stated in Provision 78 CCDOC provided sign-in logs for Safety Officer training held August 18 (2 classes) August 19, and November 23. Training for 2016 was also completed in April as

stated in the previous report and it demonstrates that there is a minimum of one trained safety/sanitation officer on every shift for each occupied Division. In most cases there are several on each shift. CCDOC provided copies of sign-in sheets, along with a list demonstrating that there are safety officers on every shift in every Division housing inmates. The list also shows assigned safety officers for the laundry, kitchen, DFM, and Cermak infirmary. CCDOC provided a copy of the Power Point training program used for Safety/Sanitation Officers and Supervisor assigned to each Division. This is in addition to their divisional safety manuals that were issued prior to the previous tour. This provision continues to be in substantial compliance.

Monitor's Recommendations:

1. No further recommendations

PROVISION: G. SANITATION AND ENVIRONMENTAL CONDITIONS

83. Sanitation and Maintenance of Facilities

a. DFM shall maintain an adequate written staffing plan and sufficient staffing levels to provide for adequate maintenance of the Facility.

6/22/15 Concluded by Order of Judge Kendall

83. Sanitation and Maintenance of Facilities

b. CCDOC shall revise and implement written housekeeping and sanitation plans to ensure the proper routine cleaning of housing, shower, and medical areas, in accordance with generally accepted correctional standards. Such policies should include oversight and supervision, including meaningful inspection processes and documentation, as well as establish routine cleaning requirements for toilets, showers, and housing units.

June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

CCDOC General Order 24.11.1.0, and division specific Sanitation Plans have been recently revised. The revisions reflect improved practice and include specific sanitation plan and schedules for all housing and common areas of the divisions and require documented housekeeping completion logs signed by the sanitation officer, inspection reports, a deficiency plan for corrective actions and requisition procedures for cleaning supplies.

Division designated safety/sanitation officer for each division is trained by the CCDOC Sanitarians on safe and effective cleaning and disinfecting procedures. In the General Order Watch Commanders are responsible for reviewing the completed Daily Inspection Completion Forms from each of the living units and submitting a weekly summary report. The Support Services Superintendent and Sanitarians receive and review the weekly summary of the sanitation log from each of the divisions. The divisional sanitation plans mandate that safety/sanitation officers observe the cleaning and disinfection of cells, dayrooms, toilets and shower facilities. Since the divisional sanitation plans became effective, the Sanitarians continue to conduct unannounced inspections of living units within all divisions.

CCDOC recently implemented a toll free 24-hour inmate telephone line for inmates to submit living unit issues. It is currently operating in Division 2 dorm 4, and Divisions 4, 6, 10 and 11. The plan is to expand it to Division 4, 9, 14 and the remaining dorms in Division 2. The purposed is to improve overall living conditions for detainees, reduce lag time for submission of work orders, and reduce the number of livening condition grievances. It is another opportunity for detainees to get issues remediated.

CCDOC implemented an incentive for housing unit cleanliness and order by providing microwave ovens to those living units where the rules are being followed. This process established accountability from both inmates and officers to improve and maintain the level of cleanliness and order of the living units as well as common areas including classrooms, maintenance closets, and tunnels. Improvement in cleanliness in those housing units where microwaves had been provided is generally significant when compared to those units where they are not available.

Cermak Environmental Services has developed a written policy and a new electronic sanitation schedule that establishes procedures for cleaning and disinfection of all areas for medical and mental health inmates and each of the division specific dispensaries. Its purpose as stated is to, "To ensure through collaborative departmental efforts of sanitation, prevention, maintenance, and education that all areas under Cermak Health Services" (CHS) authority shall be maintained clean, disinfected, well organized, and in good repair." It establishes formal housekeeping procedures, schedule, and expectations for the building service workers responsible for completing the all cleaning and disinfection. It includes a daily "monitoring" program conducted by building services supervisors to be submitted to the Environmental Services Director on an electronic database. Environmental Services has provided training of the building service workers and supervisors.

Cermak has also instituted "environmental rounds" done weekly and over the course of a month assess all divisional clinics, the infirmary and emergency room.

The housekeeping policy requires daily inspections completed by the tier officer on each shift. The form requires the deputy to note any issues including the need for work orders, cleanliness issues, etc.

Monitor's Assessment:

For this tour the Monitor assessed housing units in Divisions 3-Annex 4, 6, 9, 10, and Cermak. Cleanliness was much improved since the previous tour.

The inmate showers in all Divisions visited were clean; clearly the frequent use of the power washing equipment that was purchased for each division has had a positive outcome. In Division 3-Annex the Monitor observed excess peeling paint on the shower walls and floors of virtually every shower in both pods visited. DEM is in the process of scraping and repainting all showers. The Monitor suggests DFM and CCDOC set up models of shower wall surfaces using various paints and/or sealers. The models would be washed using different pressures to determine the most effective pressure that is able to clean soiled surfaces and not damage the paint. Repainting in #-Annex is needed at least annually. This is disruptive to housing units as inmate need to be relocated for several days for the paint to seal and for odors to dissipate.

The provision is substantially compliant.

Monitor's Recommendations:

1. Continue to enforce sanitary housekeeping practices in the housing units. Assure supervisors are requiring compliance from the officers. To expect inmates to comply with inmate rules when enforcement by deputies, supervisors, commanders, superintendents, and Assistant Executive Directors is not practical and fair for all.
2. Assess the need for additional bags for inmates to store shower towels, shoes, shampoo etc. and assure that whatever you choose is consistent within all Divisions. The type, number and use of personal property bags should be consistent throughout all Divisions.
3. Review the need for providing additional drinking water sources within the housing units, and if provided assure there is a process for rotating dispensing coolers that include a process to clean and disinfect between uses.

83. Sanitation and Maintenance of Facilities

c. DFM shall implement a preventive maintenance plan to respond to routine and emergency maintenance needs, including ensuring that shower, toilet and sink units are adequately maintained and installed.

6/22/15 Concluded by Order Judge

83. Sanitation and Maintenance of Facilities

d. CCDOC shall notify DFM, in a timely manner, of routine and emergency maintenance needs, including plumbing, lighting, and ventilation problems.

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update: As stated earlier in this report DFM replaced the “Facility Wizard” work order tracking system with a cloud-based system “FAMIS”. Just like the former system, it too interfaces with both CCDOC and Cermak. It has been operational since mid-November, 2016.

General Order 24.9.9.0 established an inspection protocol for designated officers in each Division to initiate work order requests. The food service contractor also has access to submit work order requests through Support Services staff. The CCDOC Sanitarians can also submit work order requests. The Sanitarians have created a Power Point presentation for training living unit officers demonstrating what constitutes a needed plumbing, electrical and emergency issues.

As a result, work orders from CCDOC staff can be submitted as soon as any issue is identified. The use of the 24 hour hotline for emergency repairs assures that emergency maintenance repairs are forwarded to appropriate DFM trades to quickly respond to these typically within minutes.

Monitor’s Assessment:

Other than the new system, there are no changes since the previous report. The Monitor noted that when plumbing issues were observed during the tour, in virtually every case, the safety officer or Commander was able to demonstrate that a work order had been previously submitted to DFM. Each division maintains a spreadsheet listing the outstanding work orders. The spreadsheet is updated at least weekly. Universally, housing officers and supervisors stated they are pleased with the timely response from DFM to complete repairs. DFM also provided a trending chart demonstrating that the number of work orders not completed within

30 days continues to be very low. As of December 5, 2016 the number of open work orders for plumbing was 47 and 8 electric. They are due to primarily to parts procurement.

The provision continues to be in substantial compliance.

Monitor's Recommendations:

1. No further recommendations.

83. Sanitation and Maintenance of Facilities

e. DFM shall ensure adequate ventilation throughout the Facility to ensure that inmates receive an adequate supply of air flow and reasonable levels of heating and cooling. DFM staff shall review and assess compliance with this requirement on a daily basis for automated systems and on an annual basis for non-automated systems.

6/22/15 Concluded by Order Judge Kendall

83. Sanitation and Maintenance of Facilities

f. CCDOC shall notify DFM of any visible obstructions to the ventilation system.

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

DFM staff clean and/or replace blocked or dirty vents based on work orders entered by CCDOC or Cermak.

Monitor's Assessment:

CCDOC provided a log of 36 work orders entered for the months of July through November, 2016. The Monitor observed one dirty vent in Division 4, Tier P and one blocked vent in Division 6 cell 2117 where the inmate blocked the vent to reduce cold air. Correction officers generally seem to be effective in not permitting inmates to block air flow in the cells. The number of blocked vents went down significantly once CCDOC eliminated use of Styrofoam trays from meals that were being used to block air movement in the cells. Blocked vents are no longer a significant systemic issue within any CCDOC division. This provision remains in substantial compliance.

Monitor's Recommendations:

1. No further recommendations.

83. Sanitation and Maintenance of Facilities

g. Cook County shall ensure adequate lighting in all inmate housing and work areas.

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

DFM maintains responsibility for assuring adequate lighting throughout the CCDOC complex. They completed the capital project to replace or retrofit all lighting with secure fixtures that would prevent inmate abuse and improve energy efficiency within the living units within all divisions in 2013. Lack of adequate and secure lighting in housing and work areas continues not to an issue within any inmate housing units within CCDOC. Fixtures requiring the use of unprotected Incandescent bulbs are no longer used in inmate cells, dayrooms or showers.

Monitor's Assessment:

Adequate and secure lighting is not a systemic issue in any division visited on this tour. That said, burned out lights will always continue to occur. However they are replaced by DFM using the work order system. CCDOC provided a list of work orders entered for light bulb replacement from July through October. DFM completed most within a few days. Because of the sheer number of fluorescent tubes throughout the campus, many work orders are entered each month. CCDOC is vigilant in filing the work orders. The provision remains substantially compliant.

Monitor's Recommendation:

1. No further recommendations.

83. Sanitation and Maintenance of Facilities

h. CCDOC shall ensure adequate pest control throughout the housing units, medical units, RCDC, RTU, and food storage areas. CCDOC shall maintain a contract for professional exterminator services for each division, food services areas, and the Cermak hospital. Services should provide for routine pest control spraying and additional spraying as needed.

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

CCDOC maintains a contract for pest control services for all facilities with the exception of Cermak. Cermak maintains a separate contract their facility. The CCDOC contract requires the

pest control technician be onsite 5.5 hours per day. The current contractor provides CCDOC a map showing the location of all traps, and completes comprehensive inspection following an “Integrated Pest Management” approach. The contractor is required to complete a floor drain cleaning procedure a minimum of twice per year to prevent insect eggs and larvae from developing, and provide a 24 hour response time for complaint response. They provide a quarterly trend reports, tracking insect and rodent activity for all divisions, along with electronic reports of their inspections and any recommendations for improved sanitation and/or maintenance repairs.

CCDOC maintains a “pest control hotline” for officers to report any pest activity. Steps to prevent pest issues and infestations are reinforced at the training academy for all correction officers.

Monitor’s Assessment:

CCDOC provided a copy of Pest Identification summary for the third quarter of 2016, along with the trend analysis completed by the CCDOC Sanitarian. The report includes a monthly list and a quarterly summary spreadsheets showing by division the number of pest catches including mice, three types of cockroaches, ants, fruit flies, drain flies, gnats and silverfish. They also provided pie charts showing both interior and exterior catches for rodents. For example the most recent report noted that of the 97 mice caught 64% were caught in external traps a 7% increase from the first quarter report. The areas that have the most significant rodent activity are Divisions 4, 6, and 11. Ants appear to be an isolated issue in Division 2 dorm 2 and Division 9. German cockroaches are a problem in Division 10. Both are significantly improved from the previous report. The Monitor continues to suggest that the trend analysis and summary should be expanded to 12 to 18 months to provide CCDOC management with seasonal data over a period. That information would be far more useful to demonstrate improvement or identify areas where modifications to the pest plan are needed. Also the reports need to be tier and dorm specific to identify specifically where within a division pest issues are prevalent including the floor and the specific tour. This will be valuable when measuring improvement or identifying specific problematic areas.

On this tour the isolated pest issues identified in the previous report continued in Division 4 tiers P and Q and in Division 6 C and D. The Monitor suggested a comprehensive assessment be made to identify internal building penetrations and assure that they are sealed. In Division 4 the mice may be in the wall supports and the only way to contain them will be to seal all penetrations. In Division 6, the problem appears to be a non-functioning door threshold in the doors that lead to the staircase. The pest control contractor should be identifying problem areas and providing recommendations to prevent access. This will provide the Sanitarians with

much better data to conduct comprehensive inspections to identify both the access points and the cause of the problem such as excess exposed food, poor housekeeping and allow for effective corrective action. This same enhanced reporting should also be used where excessive insects are used.

In summary the provision remains “substantially compliant.” The two areas identified are isolated and are not representative of the entire complex, which have only limited trappings both for insects and rodents. That stated, the Monitor suggests that CCDOC address specific areas where several complaints from either inmates or staff are received. It would be helpful if supervisors, commanders, superintendents, assistant executive directors would ask inmates about pest activity when visiting tiers. The Monitor also suggests that CCDOC Sanitarians obtain an aerosol “flushing agent” such as “Mr. Inspector” to be able to quickly respond and verify insect activity such as ants or cockroaches.

CCDOC should track and document inmate complaints from the hot line to monitor trend activity and make sure areas of concern are quickly and effectively treated.

Monitor’s Recommendations:

1. Document the pest control summary and trend analysis over a longer period such as 12-18 months to provide useful data to measure performance by Divisions/floors, and tiers for both insects and rodents.
2. Document and track pest complaints from the hotline by Division and tier.
3. Review with the pest control contractor the need for a more comprehensive report identifying the specific areas within Divisions where pest activity is increasing.
4. Obtain and use pest flushing aerosol to be able to quickly verify insect activity in housing units so the contractor can more effectively treat as needed.

83. Sanitation and Maintenance of Facilities

- i. CCDOC shall ensure that all inmates have access to needed hygiene supplies.

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

CCDOC implemented General Order 24.11.6 with an effective date of March, 2014. It requires that upon intake, employees shall issue inmate basic hygiene supplies including soap, toothpaste, toothbrushes, and as appropriate sanitary pads. Weekly, the safety/sanitation

officer makes rounds to each housing unit to replenish inmate supplies of tooth brushes, toothpaste, and toilet paper as needed. Detainees needing additional supplies during the week only need to notify the housing unit officer on any shift. CCDOC tier officers maintain logs that record the inmate's name, date of request, type of hygiene item requested, and a box to check when the requested item was provided. CCDOC is in the process of creating the tracking to an electronic format rather than a manual log. The current logs demonstrate that the detainee received needed supplies.

Monitor's Assessment:

CCDOC Compliance Team has completed a formal audit of the Inmate Hygiene Policy. The audit revealed that the officers were distributing hygiene supplies (toilet paper, soap, and toothpaste) every week to all detainees whether or not the inmate needed them. The inmate can still request additional supplies as needed. However, there are some delays apparently because the sanitation officer may not replenish the supplies to the tiers promptly. As a result, the Divisions were not able to maintain an adequate supply of replacement items as specified in the policy (One and one half times the number of inmates housed there.) Questioning detainees, the Monitor heard a few isolated complaints from detainees, but clearly not enough to be a systemic issue. As a result, the provision remains substantially compliant. However, CCDOC needs to clarify the procedure to assure adequate replacement supplies are available on the tiers.

Monitor's Recommendations:

1. Modify the procedures to assure sanitation officers provide timely replenishment of hygiene supplies to the tiers.

83. Sanitation and Maintenance of Facilities

j. CCDOC shall develop and implement policies and procedures for cleaning, handling, storing, and disposing of biohazardous materials, in accordance with generally accepted correction standards. CCDOC shall ensure that any inmate or staff utilized to clean a biohazardous area are properly trained in universal precautions, are outfitted with protective materials, and receive proper supervision when cleaning a biohazardous area.

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

Biohazardous waste from Cermak's medical facility and the medical and/or dental clinics in the divisions is the responsibility of Cermak, not CCDOC. Biohazardous waste in Cermak is securely stored and placed in red bags for daily pick up by designated Cermak staff. Cermak maintains a contract for collection and final disposal of the waste.

For biohazardous waste from living units or laundry, the supply room in each division maintains a supply of biohazardous spill kits. They are replaced as needed through Support Services. CCDOC policy does not permit inmates to clean bio-hazardous spills. The blood-borne Pathogen Decontamination General Order was authorized in January, 2013. Support Services Sanitarians use a Power Point training presentation for biohazardous waste handling and cleanup that is now provided to all sanitation officers. There is a written syllabus for blood-borne Pathogen clean-up training. Cermak teaches the blood-borne pathogen training at the Academy and during in-service.

Monitor's Assessment:

There is no change from the previous report. The kits include personal protective equipment (PPE) for response staff as well as clean-up supplies. The warehouse maintains a supplemental supply to replenish the divisional supplies. CCDOC staff has trained all safety/sanitation officers on all shifts the safe response procedures. The provision remains substantially compliant.

Monitor's Recommendations:

1. No further recommendations.

83. Sanitation and Maintenance of Facilities

k. DFM shall develop a policy on hazardous materials, in accordance with generally accepted correctional standards, and insure that all DFM staff is properly trained on the procedure.

6/22/15 Concluded by Order of Judge Kendall

83. Sanitation and Maintenance of Facilities

l. CCDOC shall provide and ensure the use of cleaning chemicals that sufficiently destroy the pathogens and organisms in biohazard spills.

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

CCDOC dilutes concentrated chemicals following the chemical manufacturer's specifications from the central supply room located in Division 5 and distributes them daily to the Divisions as requested. By centrally controlling the dilution and following the chemical manufacturer's directions, the Divisions only receive properly diluted cleaning and disinfecting chemicals needed for routine cleaning and sanitizing of floors, toilets, lavatories, showers, etc. and effective cleaning and sanitizing surfaces from biohazard spills.

The chemicals include a general purpose cleaner, disinfectant, glass cleaner; stainless-steel cleaner, deodorizer, and bleach along with a supply of labeled spray bottles and labels. Only the designated floor care team has access to the cleaning chemicals used for floor care including floor stripper, floor wax, floor cleaner, and floor sanitizer Mop heads, mop sticks, vacuum, power washer brooms, dust pans and squeegees, along with buckets brushes, Tyvec suits, vinyl gloves, garbage bags and eyewash stations are all available through the warehouse.

Training for inmate workers and CCDOC sanitation officers on the safe and effective use of cleaning is taught by the Sanitarians. Training is provided to inmate workers assigned the responsibility of cleaning cells, showers, toilet facilities, dayrooms, classrooms, tunnels, and all administrative areas. These are two-hour classes daily, for one week. Each person that takes the class and successfully passes a written test is presented with a certificate of completion.

Tier officers provide Inmates with diluted chemicals to clean their respective cell sinks, toilets, and floors. "Sanitation kits" (plastic crates) have been distributed to each living unit to be used for inmate mattress cleaning and daily cleaning done by inmates. The crates include one spray bottle of general purpose cleaner, a spray bottle of disinfectant, two brushes (one for touch surfaces and one for toilets), four rags and an instruction card. Kits are now included in the count clearing process and the tier officer is responsible to assure inmates do not misuse the chemicals. The sanitation officer assigned to the 11pm to 7am shift is responsible to collect and restock the kits to the tiers.

Monitor's Assessment:

There has been no change since the previous report. This provision continues to be substantially compliant.

Monitor's Recommendations:

1. No further recommendations.

83. Sanitation and Maintenance of Facilities

m. CCDOC shall inspect and replace as often as needed all frayed and cracked mattresses. CCDOC shall destroy any mattress that cannot be sanitized sufficiently to kill any possible bacteria. CCDOC shall ensure that mattresses are properly sanitized between uses.

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

Mattresses are replaced as needed throughout the divisions when they become no longer cleanable or beyond repair. Each division maintains a small surplus of mattresses and more are available from Central Supply, if needed. When medically ordered, detainees assigned to Cermak are provided pillows and pillowcases or an extra mattress. Each division has a designated clothing and bedding supply room and maintains written procedures to inspect, clean, disinfect, and repair or replace mattresses before they are provided to incoming inmates. The room has designated areas for separate storage of clean and soiled mattresses. The soiled mattress is removed from the cell when an inmate is moved or discharged and taken to the designated storeroom within the respective division, inspected for damage, and if not damaged it is cleaned, disinfected, and safely stored. A trained inmate worker supervised by the supply room deputy is used. The mattress is allowed air-dry and returned to the cell or dormitory for use or stored until needed by the tier. Detainees are also permitted clean their mattress during scheduled daily cleaning utilizing the sanitation kits described above.

Hospital mattresses within Cermak are cleaned and disinfected within the cell or dormitory anytime an inmate is transferred or discharged. Cermak's sanitation policy, formally establishes the procedure for cleaning and disinfecting them.

Monitor's Assessment:

On this tour, as in recent past tours, the Monitor did not identify any mattresses in need of repair or replacement. All mattresses observed were well maintained with no tears or excessive wear. The Monitor did not receive any complaints from inmates regarding mattress issues. Staff reported the warehouse maintains an adequate supply of replacement mattresses.

Monitor's Recommendations:

1. No further recommendations.

83. Sanitation and Maintenance of Facilities

n. CCDOC shall ensure adequate control and observation of all housing units, including distribution and collection of razors and cleaning supplies. All cleaning tools and hazardous chemical shall be removed from housing areas after use.

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

CCDOC established General Order 24.11.7.0, Inmate Razor Distribution Effective March, 2014. Razors used throughout CCDOC are color coded by division. The CCDOC Assistant Executive Director (AED) of Special Projects is responsible for maintaining inventory of disposable razors and assigning designated staff to issue razors to each division. Each division's Watch Commander is required to assure accuracy of the inventory and designate employees on each shift to verify the number of disposable razors on hand before distribution and upon their return from the inmates. Divisions are issued two biohazard waste containers with disposable plastic liners; one used to transport unused razors and one for collecting and returning used razors. The date and amount of razors are tracked in a "Disposable Razor Logbook" signed by the officer accepting the razors. Used razors are placed in the red biohazard container designated for "used" razors and returned to the AED for Special Projects' office for safe disposal. No razors are maintained in the housing tiers or dormitories. All razors, used and unused, are audited daily to assure complete retrieval. If a discrepancy is identified, an incident report is generated. Razors are available for use by inmates on the 11pm to 7am shift Monday through Friday with the exception of holidays.

General Order 2.4.11.11.1, Sanitation, Fire and Life Safety Plan and Reporting Part D, addresses chemical distribution and return. Part E requires chemicals to be inventoried at the beginning and end of each shift.

Monitor's Assessment:

For this tour CCDOC provided copies of the missing razor blades report and copies of all ten incidents that occurred from July-November, 2016. There were ten incidents nine of which involved one blade and one involving ten blades. The ten blade incident and two of the one blade incidents were miscounts in the razor supply rooms and the blades never involved detainees. The six of the seven blades were flushed down the inmate's toilet and one was a missing blade that was never recovered. Incident reports were prepared for each and searches were conducted. For the missing 10 blade incident, CCDOC conducted a formal case review

that resulted in an incident summary report describing how the ten blades were identified and located.

During the tour, the Monitor observed several daily distribution and return logs for chemicals as well as the daily/shift chemical inventories at two divisions. In all cases the inventories matched the actual counts and logs demonstrated no missing chemicals. Staff interviewed stated the correct process for investigating missing chemicals. Sanitation tools are returned to the janitorial supply closets at the end of each shift at all facilities.

The provision remains in substantial compliance.

Monitor's Recommendations:

1. No further recommendations.

83. Sanitation and Maintenance of Facilities

- o. CCDOC shall ensure that Facility Sanitarians receive training from a relevant state, national, or professional association with emphasis on assessment of environmental health practices and emerging environmental issues in correctional settings. Facility Sanitarians should also have training on and access to testing equipment to ensure sanitary conditions.

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

CCDOC employs two full time Registered Sanitarians, who report to the Superintendent of Support Services. Both Sanitarians are active participants for all areas of the consent agreement involving environmental and safety issues including chemical control, sanitation, laundry, food service, and fire and life safety including training of both deputies and inmate workers, inspections, investigations and special projects. They actively participate in the review and revision of General Orders for these areas, along with developing and providing specific training programs to correction and civilian staff, and detainees. CCDOC provides them with and they regularly use measuring and testing equipment to monitor sanitation, temperatures, etc. They continue to research specific environmental issues such as pest control trends, food service, laundry, sanitation, maintenance, biohazardous materials, etc. They conduct independent sanitation audits, both for corrections and Cermak which has resulted in modification and improvements to training programs, enhanced follow up work and objective counsel with both corrections and coordinating efforts with Department of Facilities Management.

They meet regularly with the contractor for food service, pest control, division superintendents, CCDOC management, Cermak, and DFM to assess and resolve issues. As part of their inspections, they regularly speak with both inmates and staff to identify issues that need resolution. They have an integral role in the implementation and monitoring of several CCDOC policies relative to sanitation and provide direction to the divisional sanitation officers. They have trained all divisional sanitation officers on correct cleaning procedures to assure continuing effective cleaning and sanitation. CCDOC is fortunate to have selected two outstanding Sanitarians who understand institutional environmental health, along with unique correctional issues and that are able to interpret and find solutions to protect the safety and health of both inmates and fellow employees.

Monitor's Assessment:

CCDOC continues to maintain two environmental health positions who work may work on different shifts due to a wide variety of issues and services. Both Sanitarians participated in the tour. They regularly speak with detainees and assist correction officers helping both to understand the public health significance for specific policies and procedures, along with the impact of not following them correctly. Their commitment and their technical and communication skills have added considerable value to solve sanitation and safety issues in the divisions. Considering the increasing responsibilities and assignments, CCDOC needs to assess the need to provide one additional Sanitarian that may be assigned to a separate shift. This provision remains in substantial compliance.

Monitor's Recommendations:

1. No further recommendations.

PROVISION: G. SANITATION AND ENVIRONMENTAL CONDITIONS

84. Sanitary Laundry Procedures

a. CCDOC shall develop and implement policies and procedures for laundry procedures to protect inmates from risk of exposure to communicable disease, in accordance with generally accepted correctional standards. To limit the spread of communicable disease, CCDOC shall ensure that clothing and linens returned from off-site laundry facility are clean, sanitized, and dry.

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

CCDOC operates laundries in Division 4, 5, and 9. The Division 5 laundry is the central laundry for the complex and operates on three shifts daily. The Division 4 laundry handles the female detainees housed there and the female laundry from Cermak and Division 8 (RCDC). The Division 9 laundry is used for additional capacity as a back-up in case of equipment breakdowns in Divisions 4 and 5 facilities. The food service contractor operates a separate laundry to clean inmate worker uniforms and kitchen laundry. No laundry is transported to an off-site laundry.

CCDOC authorized General Order 24.11.3.0 effective March 7, 2014. It establishes the responsibilities assigned to the Laundry Unit Watch Commander and outlines the necessary training requirements for both employees and inmates assigned to the laundry units addressing safe sorting, washing, drying, and folding procedures and appropriate sanitation precautions necessary to be taken to assure that clean laundry is never cross-contaminated with soiled laundry. The Laundry Watch Commander, in turn, is responsible to train inmate workers on the procedure, sanitation, and the use of personal protective equipment (PPE).

The General Order requires all inmates to exchange soiled uniforms, towels and bed linen according to the posted schedule and strictly prohibits inmates from washing and drying clothing or linen. Personal laundry is collected from inmates twice each week on a schedule posted in each housing unit. Once cleaned, it is returned typically within the same shift from when it was collected. Living unit officers who observe clothing and linen being washed by inmates are expected to confiscate all such items and issue clean, dry clothing and linens and initiate an Inmate Disciplinary Report.

The Central laundry in Division 5 consists of five 150-lb Unimac washers and five 170-lb Unimac dryers. The Division 4 laundry consists of one Speed Queen 40 lb. washer and one 40 lb. dryers. The kitchen has one washer and one dryer.

Laundry chemicals used in all washers, including bleach, detergent and sour, are electronically dispensed. Laundry chemicals used are currently purchased from Ecolab. They include Ecostar Builder C detergent, Ecostar Destainer (Bleach), and Ecostar Sour (a pH adjusting chemical) to prevent skin irritation and fabric browning. Safety Data Sheets (SDSs) for all laundry chemicals are posted, maintained up-to-date and readily available. At all laundries bins used to transport uniforms, linens, blankets and personal laundry to and the divisions are cleaned and disinfected with Clorox disinfecting wipes before the cleaned laundry is placed in them.

Weekly, CCDOC tracks the amount of personal clothing sent to the laundry. The reports are provided at each Superintendent's accountability meeting each week. The laundry supervisor

records the amount by weight of laundry received from each division including linens, uniforms, and personal laundry.

CCDOC's Inmate Information Handbook explains how laundry is handled and that the reasons detainees are not permitted to wash any clothing, towels and linens in the housing tiers. Additionally the Sanitarian developed and implemented the Laundry Detainee Worker Rules that establish accepted practices that must be followed.

CCDOC has issued a Divisional Orientation Handbook for the Laundry Unit. It is an orientation of the laundry procedures, assigned staff positions and responsibilities and procedures for fire safety, inmate count etc. After training laundry staff must take and successfully pass a written laundry orientation examination. There are written duties/responsibilities for laundry officers and supervisors for each shift.

Monitor's Assessment:

The Monitor toured the laundries in Division 4 and 5. The Division 4 washer and dryers have been replaced and the ventilation modified to meet specifications. Both laundries were clean, and well organized. Inmate workers have specific assignments and were well supervised.

Monitor's Recommendations:

1. No further recommendations.

84. Sanitary Laundry Procedures

b. CCDOC shall ensure that inmates are provided adequate clean clothing, underclothing and bedding, consistent with generally accepted correctional standards, and that the laundry exchange schedule provides consistent distribution and pickup service to all housing areas

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

CCDOC General Order 24.11.3.0 prohibits inmates from washing and drying uniforms, towels personal clothing or bed linens other than through the CCDOC's laundries. It requires Living Unit Officers to confiscate clothing or linens being washed by inmates and issuance of clean, dry clothing and/or linen and issuance of an Inmate Disciplinary Report.

The policy and practice require uniform, and towel be exchanged twice each week, sheets once per week and blankets exchanged once per month. Personal clothing is collected twice per week from all housing units utilizing laundry loops to assure the detainee receives back what he/she sent. It is returned the same day and typically on the shift from which it was collected.

A laundry schedule is posted in each living unit, and each division is required to include in its weekly Summary Report specifically which living units did not receive linen exchange as required by the policy. All laundry is washed using electronically dispensed detergent. White clothing also is washed with bleach. All clothing, linens and blankets are thoroughly dried at a high temperature. The laundry maintains weekly logs that track daily of the amount of personal laundry cleaned from each division and have established benchmarking metrics based on weight of personal items and population data. The data is used to create trend reports by divisions that are shared with division superintendents and management. Weekly, CCDOC cleans between four and six thousand pounds of personal laundry in addition to uniforms, towels, sheets, and blankets.

Monitor's Assessment:

During the tour CCDOC provided the laundry reports from June through November, 2016 along with the trending reports. The Monitor observed the posted laundry schedule in each housing unit of each division toured. The laundry operates three shifts daily to assure timely return of clean laundry. CCDOC has created posters explaining why all clothing needs to be cleaned and disinfected through the laundry, developed videos for the inmate televisions, and have taken designated inmates to visit the laundry to see firsthand the laundry process. Prior to this visit, the Laundry Commander noted that the amount of detainee personal laundry being sent for cleaning was decreasing in divisions 6 11 and the north tower of Division 9. . A laundry officer visited each of the tiers to meet with tier officers and detainees to take complaints and observe the laundry collection process. As a result inmate personal laundry in those divisions increased significantly. The provision remains substantially compliant.

Monitor's Recommendations:

1. No further recommendations.

84. Sanitary Laundry Procedures

- c. CCDOC shall train staff and educate inmates regarding laundry sanitation policies.

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

Inmate laundry workers assigned to the laundry are trained as to their responsibilities by officers in accordance with General Order 24.11.3.0. The Order states the training includes both classroom and hands-on instruction as to the responsibilities, acceptable laundry sanitation practices and the use of laundry equipment, chemicals and the use personal

protective equipment (PPE). Staff assigned to the laundry is required to successfully pass a written examination following the orientation training. Inmate workers are trained by staff supervisors and the laundry commander.

Monitor's Assessment:

There is no change from the previous report. The Monitor toured the laundry in both Division 4 and 5. The laundry in Division 5 utilizes veterans serving time to work there. There is little turnover, but new inmates are trained as needed.

This provision continues to be substantial compliance.

Monitor's Recommendations:

1. No further recommendations.

84. Sanitary Laundry Procedures

d. CCDOC shall ensure that laundry delivery procedures protect inmates from exposure to communicable diseases by preventing clean laundry from coming into contact with dirty laundry or contaminated surfaces.

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

Clean laundry is returned to the division from which it came in designated and marked "clean bins" that are sanitized with a disinfecting bleach wipe before clean uniforms, towels, bed linens and personal clothing are placed in the carts. All carts are thoroughly wiped by laundry workers and allowed to air dry. There are designated storage areas within each laundry that separate dirty laundry bins from those that have been cleaned and sanitized. Designated tables in each laundry are only used to sort and fold clean laundry. The tables are cleaned and disinfected at the beginning and at the end of each shift.

Monitor's Assessment:

The Monitor observed the inmate workers folding clean clothing and linens. Staff adequately explained the process of cleaning and disinfecting laundry bins and tables.

The provision continues to be substantially compliant.

Monitor's Recommendations:

1. No further recommendations.

84. Sanitary Laundry Procedures

- e. CCDOC shall require inmates to provide all clothing and linens for laundering and prohibit inmates from washing and drying laundry outside the formal procedures.

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

General Order 24.11.3.0 specifically prohibits inmates from washing and drying clothing, towels, or linen except through the designated CCDOC laundry. Living unit officers are required to confiscate any clothing or linen items being washed and replace them with clean dry clothing and/or linen. Inmate's uniform, personal clothing, linens and blankets are collected in accordance with the schedule posted in each housing unit.

CCDOC provides laundry loops for inmate personal clothing and assists inmates in their correct use to help assure that their clothing will not get lost and can be adequately cleaned and dried. Personal laundry is returned to the inmate typically on the same shift of the same day it was collected. CCDOC has also removed laundry soap from the commissary order form to dissuade inmates from doing their own laundry. As discussed in 84.b, CCDOC continues to track by weight the amount of personal clothing submitted.

Monitor's Assessment:

Use of the CCDOC laundry system for uniforms, towels, linens, and blankets is for the most part universally accepted and practiced. A review of the laundry trend reports demonstrates that the inmate culture to not use the laundry is clearly changing. CCDOC has posted easy to understand posters, schedules, and shown videos on televisions. Again on this tour the Monitor observed very little personal clothing drying in cells or dayrooms. However, on this tour the Monitor noted numerous ropes in Division 6 and 10 indicative of them being used to dry towels and more than likely personal clothing. Because this was only observed in isolated areas, the provision continues to be substantially compliant.

Monitor's Recommendations:

1. Continue to regularly monitor and track the use of the laundry and as discussed above include a discussion and expectations as regular agenda topic at Divisional Superintendent's accountability meetings.

2. Supervisors need to enforce tier officers to collect ropes whenever they see them. The ropes can also be used as weapons against inmates and staff.

85. Food Service

- a. CCDOC shall ensure that all food service at the Facility is operated in a safe and hygienic manner and that foods are served and maintained at safe temperatures.

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

CCDOC contracts the food service operation, currently CBM Premier Management to provide meals to all inmates. CBM utilizes the central kitchen for all food preparation. The Division 11 kitchen is only utilized to tray and then dispenses the hot meal for inmates housed there. Equipment and areas in both kitchens continues to be well maintained and clean.

CBM maintains responsibility for sanitation and maintenance of all equipment. They have two maintenance technicians who work on a schedule that allows for weekend coverage as needed. Area and equipment cleaning and sanitation are done by inmate workers who are trained and supervised by CBM employees. CCDOC officers assigned to the kitchen provide security.

Together CCDOC, and CBM have improved the process to assure that inmates receive the hot meals are received hot by significantly reducing the delivery time for transporting the food from the Central Kitchen to all divisions. CCDOC Sanitarians regularly monitor and record food temperatures at the time of delivery to compare it with recorded temperatures taken as the food is placed in trays in the kitchens. CCDOC Sanitarians, kitchen security officers and Support Services Superintendent meet weekly with CBM to review grievances and address both operational and logistic issues. A meeting summary is produced following each meeting. It includes a running list of outstanding issues including resolutions.

CBM regularly measures and records food temperatures as food is placed in trays and as it leaves the kitchen to the divisions. CCDOC Sanitarians conduct unannounced inspections of both food service kitchens to assure that meals prepared are safe and that kitchens operate in accordance with Illinois Food Code regulations. They also review the regulatory inspections of both kitchens completed by the City of Chicago Health Department and meet with CBM to assure any violations are corrected.

Monitor's Assessment:

CBM has and continues to work closely with CCDOC Support Services staff to identify and resolve issues related to food service. CBM and CCDOC staff conduct "town hall" meetings with groups of inmates to understand foods that inmates enjoy and foods they would like to see eliminated. It has resulted in several changes such as offering bagels and honey buns, breakfast bars, etc. As a result of the analysis of the transportation and food temperature study, the Monitor did not receive any complaints about hot meals not being warm or hot. Further CBM is well along in considering purchasing some new insulated carts small enough to fit into the elevators of Division 10 (currently the only Division where the existing carts are not able to be used because of size.) The Monitor continues to suggest that CBM regularly receive feedback from inmates to improved processes.

Food is no longer prepared at Division 11 kitchen. It is transported there in bulk and is put in the inmate service trays and distributed. All food is prepared at the Central Kitchen. This was done to shorten delivery time and assure hot meals are served hot to inmates.

CBM continues to provide cold meals on reusable trays or in sealed packaging that does not require a tray. On this visit, CCDOC is in the process of replacing both warewashers. As a result, during installation, Styrofoam trays will be used for all meals.

CBM has developed and implemented documented employee and inmate worker training programs, an internal inspection program, temperature monitoring program, formal staffing plans for employees and detainee workers, weekly cleaning schedules, a number of Standard Operating Procedures (SOPs), security standard and procedures, inmate kitchen worker orientation checklist, health screening, emergency evacuation plan in compliance with the fire safety committee, and an emergency food service contingency plan.

On this tour the Monitor the Central Kitchen, reviewed temperature logs, area housekeeping instructions, storage rooms, sanitizer concentration refrigerators, and freezers and observed the process of filling the trays. CBM effectively uses inmate workers to fill the trays and to clean under direct supervision of both CBM staff and CCDOC staff. The operation is efficient and well organized. The kitchen is maintained clean. CCDOC provided the most recent inspections of both kitchens by the local health department in September, 2016 with outstanding scores of 97 and 99% respectively. For the three total violations identified, CBM provided written evidence of that the corrections had been completed or work orders submitted. There were no critical violations identified. The violations included floor repairs in both kitchens and refrigerator wall needing repair in the central kitchen. This provision continues to be in substantial compliance.

Monitor's Recommendations:

1. No further recommendations.

85. Food Service

- b.** CCDOC shall ensure that all food service staff, including inmate staff, must be trained in food service operations, safe food handling procedures, and appropriate sanitation.

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

CBM management employees are Certified Food Safety Managers through the accredited Serv-Safe program and documentation is maintained showing that "Food Manager Certification" certificates that are current. CBM also provided copies of State of Illinois licenses for those that have completed a State recognized Food Training Program. CBM has established written job descriptions for all employee positions that include responsibilities and tasks. CBM provides orientation training to inmates daily. Inmates are required to sign an attendance sheet that is maintained by CBM management. A check list is used to assure inmates understand the food safety requirements pertaining to their assigned responsibilities. CCDOC Sanitarians developed an inmate training video that addresses health issues and personal hygiene that is shown to all potential inmate workers before they are assigned to work in the kitchens.

Monitor's Assessment:

There is no change since the previous report. The State of Illinois requires food service managers to successfully complete a "State" approved food manager certification program. CCDOC provided certificates for three CBM management employees are currently certified by the State of Illinois. Eleven CBM employees have successfully completed the Serv-Safe Food Manager Certification. Certificates for those employees are posted in the employee break room.

This provision remains in substantial compliance.

Monitor's Recommendations:

1. No further recommendations.

85. Food Service

c. CCDOC shall ensure that the Central Kitchen and Division 11 kitchen are staffed with a sufficient number of appropriately supervised and trained personnel.

June, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

CBM maintains a staff of 59 full or part time employees with schedules to assure adequate coverage for all meals daily and including weekdays. They have a written food service staffing guide that outlines the starting and ending times for all employees. The kitchen operates two shifts, as cold meals are prepared in advance of their serving, and maintained refrigerated as necessary. Additionally they utilize approximately 220 detainees scheduled over three, six or eight hour shifts just in the central kitchen to work in a variety of food service operations including preparation, filling meal trays, cleaning, warewashing, etc. Inmates from Division XI are assigned to work in that Division's kitchen to prepare and tray the dinner hot meal. At both kitchens the contractor is responsible for providing training and supervision their employees and the inmate workers assigned to the kitchen. CCDOC staff only provides security services.

CCDOC provides inmate workers as needed. They also provide security officers for safety supervision of inmates and for tool control and staff to transport and serve meals to the divisions. CCDOC provides the security training of kitchen staff.

Monitor's Assessment:

There is no change from the previous report. CBM provided a copy of its 2016 staffing guide for 59 full and part time positions. Support Services staff stated that CBM continues to maintain adequate number of qualified, trained and workforce at all times to assure timely preparation and service of meals to detainees. The regular weekly meetings between CCDOC Support Division including the staff sanitarians, security staff, CCDOC management and CBM leadership have been reduced to quarterly meetings and as needed because of the excellent relationship and the demonstrated cooperation of the contractor.

The provision remains in substantial compliance.

Monitor's Recommendations:

1. No further recommendations.

85. Food Service

D. CCDOC shall ensure that dishes and utensils, food preparation and storage areas, and vehicles and containers used to transport food are appropriately cleaned and sanitized.

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

Equipment, utensils, and food preparation areas including floors, walls, and facilities are maintained clean through shift and daily cleaning schedules established by CBM. They have created and posted written cleaning procedures for all equipment and areas in accordance with the equipment manufacturer's specifications and a cleaning checklist/log for both kitchens along with a daily and weekly cleaning schedule for each room and the equipment in the kitchens such as the meat/packing room, wet room, bakery/packing room, dock, dry storage areas. It identifies what is to be cleaned, the frequency for cleaning and who is responsible for the cleaning. CBM trains, uses, and supervises inmate workers to clean and sanitize all areas identified on the cleaning schedule. Once completed, the supervisor initials the log and the records are maintained and are available for the Sanitarians to review during their inspections. The trays used for all meals are washed and sanitized after each meal and the cleaned trays are stored on appropriately designed racks that allow water to drain and the trays to dry between uses. CCDOC has two operating warewashers that are capable of cleaning and sanitizing equipment and utensils.

Monitor's Assessment:

CBM continues to maintain all food service areas, equipment and utensils exceptionally clean. The kitchens are maintained as a model for institutional food service facilities. This includes walk-in refrigerators, freezers, dry storage areas, food preparation and assembly rooms, warewashing, carts used to transport food to the divisions, offices and laundry. Both inmate workers and employees understand the expectation for cleanliness and disinfection of surfaces. Management and supervisors expect and demand excellence from employees and inmate workers. Inmate workers are quickly replaced when they do not perform.

CBM provided copies of cleaning procedures and cleaning schedules for the central kitchen, along with examples of cleaning logs documenting that assigned cleaning tasks were completed and approved by a supervisor. As reported earlier, CCDOC is installing two new Hobart flight type conveyor warewasher to replace the both Stero warewashers due to age and frequent repairs issues.

This provision remains in substantial compliance.

Monitor's Recommendations:

1. No further recommendations.

85. Food Service

e. CCDOC shall check and record, on a regular basis, the temperatures in the refrigerators, coolers, walk-in-refrigerators, the dishwasher water, and all other kitchen equipment with temperature monitors to ensure proper maintenance of food service equipment.

December, 2016 COMPLIANCE STATUS: SUBSTANTIAL COMPLIANCE

Status Update:

There is no change from the previous report. The temperature monitoring and recording program implemented by CBM and monitored regularly by CCDOC Sanitarians demonstrates that this provision remains in substantial compliance. CBM has implemented an appropriate monitoring program to measure, record, and maintains logs for all refrigerators, freezers, and warewasher equipment. Logs of the temperature measurements are not only reviewed by CBM management, but also provided to the CCDOC Sanitarians weekly. Any required maintenance deemed necessary as a result of monitoring is completed by trained CBM maintenance workers. CCDOC Support Services Sanitarians, as well as regulatory inspectors continue to do independent monitoring of temperatures during their routine during unannounced inspections of both kitchens.

Monitor's Assessment:

For this tour CBM provided example temperature logs for the vegetable refrigerator, breakfast cooler, dairy cooler, meat cooler, diet cooler, freezers, and warewasher wash and final rinse temperatures for both Stero machines. The Monitor again reviewed temperature logs onsite and those submitted at the tour. The monitoring logs were current, legible and reviewed by management

This provision remains in substantial compliance.

Monitor's Recommendations:

1. No further recommendations.

