Disability and Effective Communication System (DECS)
Step-by-Step Guide for Inmate Attorneys and MDO Independent Evaluators
Last Updated: September 12, 2016

DECS Website for an External User:
✓ Website: https://decexternal.cdcr.ca.gov

Obtaining User Name and Password and Technical Support
✓ DECs Technical Support: To request a user name and password for DECS, contact CDCRBPHDECSE externalSupport@cdcr.ca.gov or follow the “CDCR” link for technical support on the DECS login screen as shown below. Use these contacts for any technical support issues, including when have forgotten your user name and password or when you have questions about using DECS.

DECS Login Screen:
✓ DECS Login: Enter your user name and password and click “Logon” button.

California Department of Corrections & Rehabilitation
Attorney Web Site

Login

User Name: 
Password: 

Logon

Please email CDCR for technical support.
Terms & Conditions Statement:
✓ Security Agreement: Affirm that you have signed the CDCR Information Access and Security Agreement form by clicking “I Agree”.

Main Menu Screen:
✓ Multiple Links: Upon logging in, the page displays four links: “Change Password,” “View an Offender’s ADA/EC* History,” “Enter Accommodations Provided,” and “Log Out.”
  o “View an Offender’s ADA/EC* History” shows the inmate’s current disability status, the accommodations provided at prior BPH proceedings, and any accommodations planned for the current proceeding.
  o “Enter Accommodations Provided” enables the user to enter accommodations planned for and provided at the inmate interview.
✓ Reviewing the Inmate’s Disability Status: The first step in reviewing DECS should be to review the inmate’s current disability status. Click on “View an Offender’s ADA/EC* History.”
View an Offender’s ADA/EC*History link:

- Multiple Tabs: Upon clicking “View an Offender’s ADA/EC* History,” the user will see three tabs under the DECS logo: “View ADA/EC History,” “Enter Source Documents,” and “DAI Summary.”
  - “View ADA/EC History” shows the user the accommodations provided at prior BPH proceedings, and any accommodations planned for the current proceeding.
  - “DAI Summary” shows the user the inmate’s current disability status. (Note: the disability status is current as of when the inmate was last housed at a CDCR institution.)

DECS – DAI Summary:

- Begin with “DAI Summary”: Best practice is to begin with the “DAI Summary” tab as this will give the user a good overview of the inmate’s disability status. Click on the “DAI Summary” tab, then enter the CDC # and click on “Search.” The “DAI Summary” screen will display as shown.
DEC Codes: Use your DECS Codes reference sheet to interpret the various codes and notations listed on the screen. Pay particular attention to the following entries:

- **“Housing Pgm (Program)”** – This indicates in which type of housing the inmate is located (e.g. medical beds, mental health beds, segregated housing, general population, SNY, etc.). Notably, because there are no DECS codes associated with medical needs, placement in a medical bed may be the only indication the user has that an inmate is medically disabled.

- **“Housing Restrictions”** – This indicates any considerations CDCR must keep in mind when housing an inmate. “Housing Restrictions” may provide insight into the inmate’s mobility limitations.

- **“Physical Limitations to Job/Other”** – This indicates any considerations CDCR must keep in mind when assigning an inmate to a program. “Physical Limitations” may provide the user with insight into the inmate’s physical disabilities.
o “DDP Code” – These are the codes associated with the Developmental Disability Program. A code of NCF or NDD means the inmate is not included in the Developmental Disability Program. A code of DD1, DD2, or DD3 means the inmate is included in the Developmental Disability Program. The “Effective Date” below the “DDP Code” is the date of the most recent assessment of the inmate for developmental disabilities.

o “DPP Codes” – These are the codes associated with the Disability Placement Program, which is the broad program term used for all mobility, vision, hearing, and speech disabilities. The “1845 Date” is the date of the most recent “CDCR Form 1845, Disability Placement Program Verification,” which is a verified identification of the inmate’s disabilities by a health care practitioner. Many of the entries made into DECS on the “DAI Summary” screen are items identified by a health care practitioner on the CDCR Form 1845.

o “MHSDS Code” – This space will be left blank unless the inmate has a mental health code, indicating the inmate is currently treated as part of the in the Mental Health Services Delivery System.

o “SLI” – A yes or no will indicate whether a Sign Language Interpreter is needed for communication with the inmate. Remember that a Sign Language Interpreter is mandatory for communication with the inmate if indicated in DECS.

o “Primary Method” – This is the primary method of communication, or how to best communicate with the inmate. “Alternate Method” is an alternate method of communication. It is important to try to use the primary method of communication before resorting to use of the alternate method.

o “Learning Disability” – A yes or no will indicate whether the inmate has been identified as having a learning disability. CDCR does not test for learning disabilities so this field may be underreporting the inmate’s needs.

o “TABE Score” – All inmates undergo the Test of Adult Basic Education (TABE), and receive a score between 0 and 12.9, representing a grade level of education. All inmates receiving a score of 4.0 or less are presumed to have a learning disability and cannot waive their attorney at hearings. The “TABE Date” is the date of the most recent test.

o “Durable Medical Equipment” – This shows any healthcare equipment prescribed by a health care practitioner (e.g. glasses, hearing aid, cane).

o “Dialysis” – A yes or no will indicate whether the inmate is receiving dialysis treatment. Because of their medical needs, CDCR can only house dialysis patients at specified facilities.

o “Last Accommodation” – CDCR ensures ADA accommodations are provided at various important events (e.g. classification committees, 115 hearings). This lists what accommodations were entered into DECS during the inmate’s last such event.

o “Spoken Languages” – If an entry is made, this means the inmate does not speak English as his primary language. The inmate’s preferred language is identified.
DECS – View ADA/EC History:

✓ “View ADA/EC History” Tab: After reviewing the inmate’s current status, review the plans for the upcoming parole proceeding by clicking the “View ADA/EC History” tab and you will see a page that resembles the following.

### Offender Information

<table>
<thead>
<tr>
<th>Offender’s Name</th>
<th>Sex</th>
<th>Location</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>Male</td>
<td>Correctional Training Facility</td>
</tr>
</tbody>
</table>

### 1073 / 2271 Forms

<table>
<thead>
<tr>
<th>Form</th>
<th>File Review</th>
<th>Service of Rights</th>
<th>Proceeding Type</th>
<th>Hearing Date</th>
<th>2271</th>
</tr>
</thead>
<tbody>
<tr>
<td>BPH 1073</td>
<td>08/20/2014</td>
<td>08/20/2014</td>
<td>Suitability</td>
<td>11/12/2014</td>
<td></td>
</tr>
<tr>
<td>BPH 1073</td>
<td>03/06/2012</td>
<td>03/06/2012</td>
<td>Suitability</td>
<td>09/12/2012</td>
<td></td>
</tr>
<tr>
<td>BPH 1073</td>
<td>03/06/2012</td>
<td>03/06/2012</td>
<td>Suitability</td>
<td>03/09/2013</td>
<td></td>
</tr>
<tr>
<td>BPH 1073</td>
<td>04/19/2009</td>
<td>04/19/2009</td>
<td>Suitability</td>
<td>10/05/2009</td>
<td></td>
</tr>
<tr>
<td>BPH 1073</td>
<td>04/19/2009</td>
<td>04/19/2009</td>
<td>Suitability</td>
<td>10/28/2008</td>
<td></td>
</tr>
</tbody>
</table>

### Source Documents

<table>
<thead>
<tr>
<th>Document</th>
<th>Description</th>
<th>Location</th>
<th>Form Date</th>
</tr>
</thead>
<tbody>
<tr>
<td>BPH Accom</td>
<td>Parole Proceeding Accommodation Provided</td>
<td>Correctional Training Facility</td>
<td>02/22/2010</td>
</tr>
</tbody>
</table>

✓ Review the BPH Form 1073: Under the section titled “1073/2271 Forms,” identify the document that is associated with the current hearing proceeding. Click on either of the blue links under Form or Proceeding Type. This will open a copy of the BPH Form 1073. The BPH Form 1073 provides documentation of the ADA planning for a BPH hearing, and the actual accommodations provided at the hearing.

- The BPH Form 1073 consists of five parts:
  - Section I – File Review – Institution staff review the inmate’s c-file and DECS and document any identified disabilities.
  - Section II - Inmate/Parolee Rights & Self-Identification – Institution staff meet with the inmate to review the inmate’s disabilities. The inmate describes (self-identifies) any disabilities he or she needs accommodated for the hearing and signs a hardcopy of the form. (This is done several weeks before the scheduled hearing date.)
  - Section III – Initial Service of Rights – Institution staff document what accommodations were provided to the inmate to ensure effective communication when meeting with the inmate pursuant to Section II. The institutional staff document whether the inmate appeared to understand or appeared to have difficulty understanding.
  - Section IV – Accommodations Planned – At BPH headquarters, the ADA Compliance Unit completes a thorough review of DECs, SOMs, and the
electronic c-file (ERMS) and makes an entry into Section IV documenting what accommodations are recommended for the hearing. These plans are sent to the institution for preparation of the hearing.

- Section V – Accommodations Provided – The hearing panel documents what accommodations were provided during the hearing. This includes if the inmate brings his own healthcare equipment to the hearing.
  
  - Best practice is to review the 1073 for the upcoming hearing and the most recent hearing. The following is a sample of Sections III through V of a 1073.
III. INITIAL SERVICE OF RIGHTS (STAFF ONLY)

☐ I have requested the following accommodation(s) from county/jail staff on behalf of the parolee:

Healthcare Appliance Requested:

Housing Restriction Requested:

Communication Method Requested:

Medical/Mental Health Requested:

☐ Medical Evaluation ☐ Mental Health Evaluation ☐ Medication - Psychotropic ☐ Medication - Pain management

County Jail: ___________________________ Date Jail Staff Notified: ___________________________

I have informed inmate/parolee of his/her rights and charges, if any, and have determined that he/she:

☐ Appears to understand ☐ Appears to have difficulty understanding

Effective Communication Method Used: "Read/Speak Slowly/Use Simple Language"

Staff Name and Title (please print) ___________________________ Staff Signature ___________________________ Date ___________________________

IV. ACCOMMODATIONS PLANNED

☐ I have requested the following accommodation(s) from county/jail staff on behalf of the parolee:

Healthcare Appliance(s): ___________________________

Housing Restriction(s): ___________________________

County Jail: ___________________________ Date Jail Staff Notified: ___________________________

Accommodation(s)/Assistance to be provided at hearing(s): "Attorney"

Summary: Accommodations Planned

Comment: EOP/DD2. HAS WHEELCHAIR

BPH Staff ___________________________ Staff Signature ___________________________ Date ___________________________

V. SUMMARY OF ACCOMMODATIONS

Accommodation(s)/Assistance provided at hearing(s): "Attorney" "Read/Speak Slowly/Use Simple Language" "Wheelchair"

Private Health Care Appliance (inmate/Parolee Provided):

Comment: Inmate is designated EOP, and attorney is provided as an accommodation.

Commissioner ___________________________ Staff Signature ___________________________ Date ___________________________

Name: ___________________________ CDC Number: ___________________________

Proceeding: Lifer ___________________________ Type of Hearing: Suitability ___________________________

Location: ___________________________
Enter Accommodations Provided:

- Enter Accommodations Provided: At some point prior to or after meeting with the inmate, document any accommodations planned for or provided during the inmate interview. To add accommodations provided during the interview, from the Main Menu Screen click on the second link below, titled “Enter Accommodations provided” as shown below.

![Disability and Effective Communication System](image)

- Accommodations Provided document: Complete the accommodations provided document and click on “Submit form.” This is also known as a source document and, once entered, will appear in the “View ADA/EC History” tab under Source Documents. The following is a sample of the form to be entered into DECS by the user.

- Timing of Documentation: It is mandatory that attorneys enter a source document into DECS to document any accommodations provided for the attorney-client interview. This can be done prior to or after the interview.
### PAROLE-PROCEEDING ACCOMMODATION(S) PROVIDED CHRONO

<table>
<thead>
<tr>
<th>CDC Number</th>
<th>Parole/Inmate</th>
<th>Hearing Type</th>
<th>Scheduled Date</th>
<th>Institution</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

#### Parole Proceeding
- [ ] Attorney Consult
- [ ] Psychologist Evaluation Interview
- [ ] Central File Review
- [ ] Review of Letter of Support
- [ ] Other
- [ ] Review of Parole Plans

#### Accommodation(s) Provided
- [ ] No Accommodation
- [ ] Accessible Transportation
- [ ] Assistive Hearing Devices
- [ ] Attorney
- [ ] Braille
- [ ] Cane
- [ ] Communication Books or Boards
- [ ] Computer Aided Transcription Services
- [ ] Computer Terminals
- [ ] Foreign Language Interpreter
- [ ] Highlighter Pens and Markers
- [ ] Large Print Material
- [ ] Level Terrain/Path of Travel
- [ ] Magnifying Device
- [ ] Materials on Videotape
- [ ] Note Taker
- [ ] Telephone Handset Amplifiers
- [ ] Qualified Readers
- [ ] Reading
- [ ] Reading Machines
- [ ] Reading Windows
- [ ] Regional Center Advocates
- [ ] Sign Language Interpreter
- [ ] Speech Synthesizers
- [ ] Staff Assistance
- [ ] Wheelchair
- [ ] Written Materials
- [ ] Other

#### Additional Comments

#### Parole Proceeding Conducted By

#### Date

[Submit Form]