



CALIFORNIA CORRECTIONAL
HEALTH CARE SERVICES

MEMORANDUM

Date: October 27, 2020

To: California Department of Corrections and Rehabilitation All Staff
California Correctional Health Care Services All Staff
Division of Juvenile Justice All Staff

From:

Handwritten signature of Kathleen Allison in blue ink.

KATHLEEN ALLISON

Secretary

California Department of Corrections and Rehabilitation

Handwritten signature of J. Clark Kelso in black ink.

J. CLARK KELSO

Receiver

Subject: STAFF WEARING FACIAL COVERINGS AND PHYSICAL DISTANCING
REQUIREMENTS IN INSTITUTIONS AND FACILITIES

This memorandum updates expectations and requirements outlined in the June 11, 2020, and July 1, 2020, memoranda regarding the wearing of facial coverings and practicing physical distancing at California Department of Corrections and Rehabilitation (CDCR) and Division of Juvenile Justice (DJJ) institutions and facilities. The Department takes the health and safety of all those who live and work in our state prisons very seriously and remains dedicated to enforcing protocols in response to the novel Coronavirus disease (COVID-19) pandemic.

All staff working or performing duties on CDCR or DJJ grounds, indoors and outdoors, shall correctly wear approved face coverings at all times. Properly worn face coverings shall cover the nose, mouth, and chin. The exceptions to this requirement are (1) when a staff member is alone in a hard-walled office, tower, or control booth or (2) when a staff member in the performance of their duties is actively responding to an incident. In this instance, the staff member is permitted to remove their face covering while jogging/running. However, immediately upon arrival to the incident, the face covering shall be replaced properly over the nose, mouth, and chin.

Staff unable to wear an approved face covering due to a medical, mental health, or developmental disability shall notify their supervisor and Return-to-Work Coordinator to engage

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in the interactive Reasonable Accommodation process. Staff requesting a religious accommodation shall contact their local Equal Employment Opportunity Coordinator.

Requirements for Supervisors and Managers and Employee Relations Officers/Health Care Employee Relations Officers

All departmental supervisors and managers are responsible for ensuring subordinate staff consistently wear approved face coverings correctly and practice physical distancing. Whenever managers or supervisors observe a subordinate employee fail to adhere to face covering or physical distancing directives, corrective action shall be taken in accordance with Department Operations Manual, Article 22, Employee Discipline, section 33030.8, Causes for Corrective Action. Additionally, supervisors and managers shall document each instance of non-compliance with any directives contained within this memorandum on face coverings and physical distancing to track repeat offenses and take corrective and adverse actions, as appropriate. With information provided by each supervisor and manager, the attached Non-Compliance Tracking log shall be maintained by the Employee Relations Officers/Health Care Employee Relations Officers until further notice and will be requested for unannounced as well as regularly scheduled audits or reviews.

Any supervisors and managers who fail to enforce these directives shall be subject to progressive discipline including:

- Verbal Counseling
- Employee Counseling Record (CDC Form 1123)
- Letter of Instruction
- Adverse Action or Rejection During Probation, dependent on the employee's tenure

As a reminder, your assigned Employee Relations Officer/Health Care Employee Relations Officer is available to provide assistance throughout the progressive discipline process.

Requirements for Associate Directors and Regional Health Care Executives

Associate Directors and Regional Health Care Executives, CDCR, or designees, shall prepare a schedule to conduct unannounced compliance visits to each assigned institution within 30 days of issuance of this memorandum and shall establish a regular, ongoing schedule on a 120-day interval thereafter. Compliance or non-compliance shall be recorded on the attached Facial Coverings Compliance Checklist and shall be maintained until further notice and will be requested for unannounced as well as regularly scheduled audits or reviews.

Non-Compliance Tracking for Staff Failure to Wear Face Covering or Not Properly Worn Face Covering
(Insert Name of Institution)

Institution	Unit	Employee's Name (Last, First Name)	Classification	Date of Failure (Face Covering Mandate)	Repeat Offense (Yes/No)	Type of Corrective Action Taken (Verbal Counseling; ECR, LOI)	Corrective Action Issuance Date	ECR/LOI Date of 30-Day Follow-up Discussion with Employee	Date 989 Request Submitted to Hiring Authority (if applicable)	Comments

FACE COVERING COMPLIANCE CHECKLIST

The following checklist shall be completed to verify compliance related to the October 27, 2020, memorandum entitled Staff Wearing Facial Coverings and Physical Distancing Requirements in Institutions and Facilities. Regional Health Care Executives and Associate Directors, or designees, shall conduct compliance visits at their respective sites within 30-days of issuance of the October 27, 2020, memo and on a 120-day interval thereafter. Compliance Checklists shall be maintained until further notice and will be requested for audit or review purposes.

Recreational Yard	Compliance	Non-compliance	Comments
Staff Mask			
Inmate Mask			
Social Distancing			

Program Office	Compliance	Non-compliance	Comments
Staff Mask			
Inmate Mask			
Social Distancing			

Clinic	Compliance	Non-compliance	Comments
Staff Mask			
Inmate Mask			
Social Distancing			

Laundry	Compliance	Non-compliance	Comments
Staff Mask			
Inmate Mask			
Social Distancing			

Canteen	Compliance	Non-compliance	Comments
Staff Mask			
Inmate Mask			
Social Distancing			

Dining Hall	Compliance	Non-compliance	Comments
Staff Mask			
Inmate Mask			
Social Distancing			

Housing Units/Dorms	Compliance	Non-compliance	Comments
Staff Mask			
Inmate Mask			
Social Distancing			

Work Change	Compliance	Non-compliance	Comments
Staff Mask			
Inmate Mask			
Social Distancing			

Gym	Compliance	Non-compliance	Comments
Staff Mask			
Inmate Mask			
Social Distancing			

Dayroom	Compliance	Non-compliance	Comments
Staff Mask			
Inmate Mask			
Social Distancing			

Institution: _____

Print Name and Title: _____

Signature/Date: _____/_____