Sacramento County Correctional Facility Master Planning Services

Phase I/II Report: Functional Assessment and Projected Needs

Section 2.0 - The Current Sacramento County Adult Correctional System

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OVERVIEW OF THE CURRENT SACRAMENTO COUNTY JAIL SYSTEM

The Sacramento County jail system comprises two adult correctional facilities, the Main Jail and the Rio Cosumnes Correctional Center (RCCC), also known as "the Branch." The Sacramento Sheriff's Office (SSO) operates and manages the jails and is responsible for the care and custody of individuals under the jurisdiction of the Sacramento County Superior Court System. SSO also contracts with the US Bureau of Prisons to house federal inmates and with the State of California to house certain state parole violators and individuals detained for competency restoration treatment.

The combined rated bed capacity of the Main Jail and RCCC, per the Board of State and Community Corrections (BSCC), is 4,005 beds.

In Sacramento County, legally mandated medical and mental health treatment is provided by the County's Adult Correctional Health (ACH) Services, a division of the Sacramento County Department of Health Services. Services provided include intake healthcare screenings, physical health, behavioral health, dental, pharmaceutical services, Medication for Opiate Use Disorder (MOUD), and other ancillary services. ACH contracts with outside hospital systems and other providers for psychiatry, specialty care, and inpatient services. Since 1978, the County has contracted with the University of California, Davis's Department of Psychiatry and Behavioral Sciences to provide mental health services to the inmate population.

Sacramento County is one of only a few detention systems in California that provides acute psychiatric treatment. Services are provided by a multidisciplinary team and include an acute psychiatric unit (APU), Intensive Outpatient Program (step-down/up unit), Outpatient Program/Enhanced Outpatient Program, Jail-Based Competency Treatment (JBCT), and Early Access and Stabilization Services (EASS).

The County's Department of General Services assists with facility construction, remodeling, and maintenance projects at the two jail facilities.

Sacramento County Main Jail



SACRAMENTO COUNTY MAIN JAIL

The Sacramento County Main Jail (MJ) is a type II maximum security facility designed circa 1982, with construction completed in 1989. When the MJ was first completed, its original design capacity was 1,250 beds, with all cells designed for single occupancy. Later, these single cells were converted to double-cell units, increasing the rated capacity to 2,400 beds (current BSCC-rated capacity).

Located at 651 I Street in downtown Sacramento, MJ is the primary intake center for the jail system. Most of the bookings within Sacramento County occur here. It predominantly houses pretrial individuals of varying custody levels awaiting adjudication, as well as individuals transferred from RCCC because of special needs, such as acute and subacute medical and mental health needs, suicidal behavior, disciplinary confinement, administrative segregation, etc.

The MJ is approximately 450,290 square feet. The building comprises two nine-story towers with a vertical spine between them. The second floor of the MJ houses a 17-bed APU and a 10-bed acute medical unit. The 2026 conversion of Unit 200 on the third floor increased the total APU capacity to 41 beds.

The facility also has a dedicated single-level, subacute medical housing unit and dedicated mental health housing units (intensive and enhanced outpatient programs) for individuals diagnosed with serious mental illnesses who cannot be housed in general population because of the severity of their symptoms, potential for victimization, and moderate impairment.

The 10 beds in the original infirmary and the five beds in Unit 100 are acute medical beds. Note that these beds are not part of the rated capacity. In addition, Pods 200 and 300 are single-level, subacute medical and mental health housing under the umbrella of intensive and enhanced outpatient programs. These units each have 16 cells and provide an additional 64 beds when double-celled, with these beds considered part of the rated capacity

Initially designed to operate under remote, indirect supervision, the housing units are operating under a hybrid model. [1] Housing units, composed of several "pods," have staff located inside the units to provide hands-on management of people within each pod, while control stations provide remote surveillance. This approach is a hybrid of direct and indirect supervision and is staff intensive.

In addition, the MJ is the Central Intake/Transportation/Release center for the Sacramento County jail system. As with housing, this area was initially designed for a much smaller volume of people, with a differing intake process than is in place today, with severe space constraints for all aspects of the process, from initial police reception and medical/mental health screening to secondary screening, to processing, holding, and classification.

Current Rated Capacity and Housing Utilization Plan

Table 2.1 summarizes the housing plan, BSCC-rated capacity and a snapshot of beds occupied as of January 27, 2026. Note that assigned utilization varies almost daily based on the demands of classification and the needs of the population. Subsequent to this survey, a renovation project was authorized to convert Housing Unit 200 West on the third floor to APU (increase in total capacity to 41 beds) and step-down housing,[2] and to renovate 200 East for Suicidal Inmate

[1] *The three major types of supervision are: 1) Intermittent Supervision: Periodic surveillance of housing areas by roving custodial staff; 2) Podular Remote: Surveillance and observation by custody staff from a secure control room; and 3) Direct Supervision: Custody staff located in the housing unit in direct contact with the inmate population. Direct Supervision is generally considered the most effective management approach for safety, security and incident prevention.*

[2] *Temporary housing for observation for inmate-patients transitioning from APU to another level of care.*

Temporary Housing (SITHU). These and other adjustments subsequent to the survey date are not reflected in the table.

Table 2.1. Main Jail Housing Utilization Plan (as of January 27, 2026)

Pod # 2 PSY	Use	Design Cap*	# of Cells*	Avail Beds*	BSCC Cap*	Beds Occup* 1/27/26
2 PSY	Acute Psychiatric (Non-Rated)	17	17	17	17	17
Total		**17**	**17**	**17**	**17**	**17**
Pod # 2 East	**Use**	**Design Cap***	**# of Cells***	**Avail Beds***	**BSCC Cap***	**Beds Occup* 1/27/26**
2 East	Infirmary	10	10	10	10	10
100	Acute Medical, Americans with Disabilities Act (ADA) (Non-Rated)	5	5	5	5	5
200	ADA, Subacute Medical, Detox	16	16	32	32	21
300	Subacute Medical	16	16	32	32	20
Total	(Excludes 2E 100)	**32**	**32**	**64**	**64**	**41**
Pod # 3 East	**Use**	**Design Cap***	**# of Cells***	**Avail Beds***	**BSCC Cap***	**Beds Occup* 1/27/26**
100	OPP Max/Med (Solo), Civil	30	30	60	60	27
200	Vacated for Renovation	32	32	64	64	0
300	OPP Max/Med	32	32	64	64	54
Total		**94**	**94**	**188**	**188**	**81**
Pod # 3 West	**Use**	**Design Cap***	**# of Cells***	**Avail Beds***	**BSCC Cap***	**Beds Occup* 1/27/26**
100		32	32	64	64	35

	Female: SITHU					
	Female: CNAP	Distribution among classification varies				
	Female: IOP	Total capacity for unit indicated				
	Female: Workers					
200		32	32	64	64	22
	SITHU					
	CNAP	Distribution among classifications varies				
	Gravely Disabled	Total capacity for unit indicated				
	Workers					
300		40	40	80	80	30
	SITHU/CNAP	Distribution among classifications varies				
	IOP Step-Down	Total capacity for unit indicated				
Total		**104**	**104**	**208**	**208**	**87**

Pod # 4 East	Use	Design Cap*	# of Cells*	Avail Beds*	BSCC Cap*	Beds Occup* 1/27/26
100	OPP Max/Med & Civil	30	30	60	60	45
200	PC Med/Min & Civil	32	32	64	64	63
300	OPP Max/Med, ADSP1, ADSP2	32	32	64	64	45
Total		**94**	**94**	**188**	**188**	**153**

Pod # 4 West	Use	Design Cap*	# of Cells*	Avail Beds*	BSCC Cap*	Beds Occup* 1/27/26
100	OPP Max/Med & Civil	32	32	60	60	49
200	OPP Max/Med	32	32	64	64	63

300	PC Max/Med	40	40	80	80	80
Total		**104**	**104**	**208**	**208**	**160**
Pod # 5 East	**Use**	**Design Cap***	**# of Cells***	**Avail Beds***	**BSCC Cap***	**Beds Occup* 1/27/26**
100	GP Med/Min (Programs)	30	30	60	60	52
200	GP Med/Min	32	32	64	64	63
300	GP Max/Med	32	32	64	64	61
Total		**94**	**94**	**188**	**188**	**176**
Pod # 5 West	**Use**	**Design Cap***	**# of Cells***	**Avail Beds***	**BSCC Cap***	**Beds Occup* 1/27/26**
100	GP Med/Min	32	32	64	64	61
200	GP Med/Min	32	32	64	64	63
300	GP Max/Med	40	40	80	80	77
Total		**104**	**104**	**208**	**208**	**201**
Pod # 6 East	**Use**	**Design Cap***	**# of Cells***	**Avail Beds***	**BSCC Cap***	**Beds Occup* 1/27/26**
100	Female Detox/MAT; GP/OPP/PC/CIVIL/ADS1/ADS2	30	30	60	60	17
200	Male Detox/MAT	32	32	64	64	22
300	Male Detox/MAT	32	32	64	64	11
Total		**94**	**94**	**188**	**188**	**50**
Pod # 6 West	**Use**	**Design Cap***	**# of Cells***	**Avail Beds***	**BSCC Cap***	**Beds Occup* 1/27/26**

100	GP Med/Min (Programs)	32	32	64	64	61
200	GP Med/Min	32	32	64	64	59
300	GP Max/Med	40	40	80	80	73
Total		**104**	**104**	**208**	**208**	**193**
Pod # 7 East	**Use**	**Design Cap***	**# of Cells***	**Avail Beds***	**BSCC Cap***	**Beds Occup* 1/27/26**
100	Inmate Workers	30	30	60	60	55
200	Inmate Workers	32	32	64	64	60
300	PC Med/Min	32	32	64	64	64
Total		**94**	**94**	**188**	**188**	**179**
Pod # 7 West	**Use**	**Design Cap***	**# of Cells***	**Avail Beds***	**BSCC Cap***	**Beds Occup* 1/27/26**
100	Female GP/OPP – Max/Med/Min	32	32	64	64	44
200	Female GP/PC – Max/Med/Min (Programs)	32	32	64	64	52
300	Female GP/OPP – Max/Med/Min/ADS1/ADS2	20	20	40	40	22
400	Female GP/OPP/Med/ADS1/ADS2 (Discipline)	20	20	20	20	15
Total		**104**	**104**	**188**	**188**	**133**
Pod # 8 East	**Use**	**Design Cap***	**# of Cells***	**Avail Beds***	**BSCC Cap***	**Beds Occup* 1/27/26**
100	Overflow/GP/OPP/PC/CIVIL	30	30	60	60	26
200	OPP/PC Min/Med/Max/ADSP1/ADSP2	32	32	64	64	51

300	GP Min/Med/Max/ADSP1/ADSP2	32	32	64	64	61
Total		**94**	**94**	**188**	**188**	**138**

Pod # 8 West	**Use**	**Design Cap***	**# of Cells***	**Avail Beds***	**BSCC Cap***	**Beds Occup* 1/27/26**
100	GP Min/Med/Max/ADSP1/ADSP2	32	32	64	64	48
200	GP Min/Med/Max/ADSP1/ADSP2	32	32	64	64	51
300	ADSP1/ADSP2	20	20	40	40	17
400	ADSP1/ADSP2	10	10	20	20	12
Total		**94**	**94**	**188**	**188**	**128**

Pod #		**Design Cap***	**# of Cells***	**Avail Beds***	**BSCC Cap***	**Beds Occup* 1/27/26**
Total Rated Beds		**1,210**	**1,210**	**2,400**	**2,400**	**1,720**
Non-Rated Beds						
Intake Holding						
Male	Intake process, sober, detox	95	13	95		
Female	Intake process, sober, detox	20	4	20		
2 Medical & Psychiatric Units						
2 MED	Acute Medical	15	15	15		6
2 PSY	Acute Psych (Non-Rated)	17	17	17		17
TOTAL NON-RATED BEDS		147	49	147		23

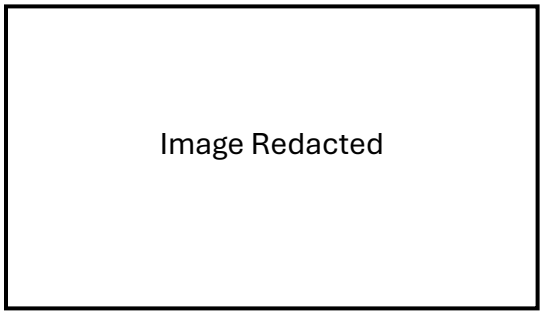
APU Conversion 3rd Floor 200 (not in total at time of survey)	24	24	24		24
TOTALS NON-RATED BEDS	**1,357**	**1,259**	**2,547**	**2,400**	**1,743**

General Issues

- Construction of the building predates the Americans with Disabilities Act (ADA) and the 1982 UBC Building Code. Additionally, Title 24 State Building Standards were less prescriptive about accessibility requirements for detention facilities at that time. As a result, the facility does not meet current requirements for accessibility – minimum 3% of cells, all housing, program and support components, and accessible routes of travel. Note that best practices suggest that every housing unit incorporate at least one accessible cell, shower, and related support facilities to not limit placement based on classification.
- Increased bed space capacity and shifts in the jail population profile have severely taxed facility resources, resulting in significant operational challenges and impacting daily access to necessary programs and services.
    - More than 60% of the population detained in the County jail system has a mental health diagnosis and approximately two out of every three people require some level of mental health services. Thus, behavioral health is not only a significant driver of the need for services but also a determinant of the need for specialized, purpose-built mental health housing.
    - With approximately one-third of the population requiring specialized housing, neither of the two facilities has enough specialized beds and housing accommodations (single story; single cells; or double occupancy with side-by-side beds) to safely satisfy the needs of a population requiring intensive clinical support.
    - Similarly, increases in demand for programs and services have exacerbated space needs.
- The increased jail population has necessitated more custody staff and healthcare personnel for the provision of care and services, while the existing facility lacks the office space and support components to house these additional employees. As a result, portions of the support staff are housed in off-site locations, which hinders efficiency and can lead to service delays.
- Elevator capacity, including the number and speed of current elevators, affects staff operational efficiency and the timely delivery of programs and services.
- The existing housing units, with 64- and 80-bed capacities, fail to address the complexity of today's separation requirements and classification categories based on gender, risk, and needs.

RIO COSUMNES CORRECTIONAL CENTER

Sacramento County - Rio Cosumnes Correctional Center



The RCCC is a type II medium-security facility originally constructed as an Air Force base, which was transferred to the County in 1947 for use as County jail farm. It was converted into a jail around 1960. RCCC has a BSCC-rated capacity of 1,625 beds.

The SSO operational capacity significantly exceeds the BSCC-rated capacity at 2,224 beds based on the actual number of bunks in the Honor Barracks and the 448 dorms and 100% double celling of the Chris Boone Facility and Stewart Baird Facilities, which are limited to partial double celling by BSCC standards because the housing units have a single shower, resulting in a capacity limitation.

Located at 12500 Bruceville Road in Elk Grove, CA, the facility serves as the County's branch jail facility providing an important relief valve for the MJ as well as flexibility for meeting the requirements of the Consent Decree. It houses overflow pretrial detainees to comply with the population cap in the MJ, as well as sentenced individuals by the Sacramento County Courts of all custody classifications. Following the implementation of AB 109 in 2011, individuals may be sentenced to California jails for years at a time.

Some limited bookings are conducted at the RCCC (2–3 a day), primarily from outlying jurisdictions, the California Highway Patrol (CHP), US Marshals, and self-reporting/weekenders (intermittent sentences). The Galt Police Department, Isleton Police, CHP, and Sheriff's Department book most South area arrests into RCCC. RCCC also houses individuals en route to other jurisdictions, federal inmates under contract with the US Bureau of Prisons, and reciprocal inmates from other counties. RCCC is also the reception point for parole violators held in detention pending revocation hearings and is the central transportation point for all defendants sentenced to State Prison by Sacramento County Courts.

A variety of trailers and modular buildings have been added over time to meet increasing program demands, with today's infrastructure involving more than 20 permanent and temporary buildings of various vintages and uses. The RCCC campus has a total gross square footage of approximately 323,310 square feet.

RCCC follows a campus-like configuration and is divided into three separate compounds for high-security males, low-security males, and females. The female side of the compound is known as the Sandra Larsen Facility (SLF), built in 1973. This facility is entirely self-contained and at the time of the facility survey was reported to have no interaction with the male side.

Current Rated Capacity and Housing Utilization Plan

Table 2.2 summarizes the housing plan, the BSCC-rated capacity, and a snapshot of beds occupied as of January 27, 2026. Note that assigned housing utilization varies almost daily due to classification demands and population needs. After collecting the housing utilization data, the County renovated the Sarah Larson Facility for Women, resulting in a temporary adjustment to the housing plan.

Table 2.2. Rio Cosumnes Correctional Center Housing Utilization Plan (as of January 27, 2026)

Male Housing Barracks	Use	Avail Beds	BSCC Cap	Beds Occup 1/27/26
A – Dorm	GP Minimum, Reentry Program	76	50	76
B – Dorm	OPP Medium	80	50	50
Total		**156**	**100**	**126**
Male Housing Barracks	**Use**	**Avail Beds**	**BSCC Cap**	**Beds Occup 1/27/26**
J – Dorm	GP Medium	104	37*	85
K – Dorm	GP Medium	104	37*	85
Total		**208**	**74**	**170**
Male Housing Barracks	**Use**	**Avail Beds**	**BSCC Cap**	**Beds Occup 1/27/26**
C – Dorm	GP Minimum/AM Kitchen Workers	116	82	86
D – Dorm	GP Minimum/PM Kitchen Workers	116	82	87
Total		**232**	**164**	**173**

Male Housing Barracks Honor Facility (HF)	Use	Avail Beds	BSCC Cap	Beds Occup 1/27/26
G – Dorm	GP Minimum	116	82	99
H – Dorm	GP Minimum	116	82	95
Total		**232**	**164**	**194**
Male Housing CBF	**Use**	**Avail Beds**	**BSCC Cap**	**Beds Occup 1/27/26**
CBF	Note BSCC limits capacity of each pod to 20 as there is only 1 shower (1:20 ratio); actual bed count reflects double ceiling in excess of rated capacity; SSO operating capacity 100% double-celled, 192 beds			
	Mental Health Housing			
100	EASS (All Classifications)	20	20	32
200	Vacant (Pending IOP Post-Construction)	20	20	32
300	IOP (All Classifications)	20	20	24
400	IOP (All Classifications)	20	20	32
500	IOP (All Classifications)	20	20	32
600	JBCT (All Classifications)	20	20	32
Total		**120**	**120**	**184**

Male Housing SBF	Use	Avail Beds	BSCC Cap	Beds Occup 1/27/26
SBF	Note BSCC limits capacity of each pod to 20 as there is only 1 shower (1:20 ratio); actual bed count reflects double ceiling in excess of rated capacity; SSO operating capacity 100% double-celled, 192 beds			
100	GP Med, Max	22	22	24
200	Intake, En Route (All Class)	28	28	28
300	OPP (Med/Max)	24	24	24
400	PC Med/Max	24	24	24
500	GP Med, Max	28	28	28
600	PC, Reentry Med/Max	22	22	22
Total		**148**	**148**	**150**

Male/Female Housing KBF	Use	Avail Beds	BSCC Cap	Beds Occup 1/27/26
KBF	Females temporarily housed in KBF to allow for renovations to SLF; beds categorized as male for housing utilization plan as that is the normal utilization			
100	Female JBCT/EASS Min/Med/Max	36	24	32
200	Female OPP Med/Max	68	40	32
300	Female GP Medium	68	40	32
400	Female GP, Reentry Minimum	52	40	32
500	Female GP Minimum	52	40	32
600	Male PC Minimum	68	40	32

Total		**344**	**224**	**192**
Male Housing JKF	**Use**	**Avail Beds**	**BSCC Cap**	**Beds Occup 1/27/26**
100	GP Medium/ADA Assisted	36	24	32
200	PC Medium	68	40	32
300	PC Medium	68	40	32
400	OPP Medium	52	40	40
500	PC Medium	52	40	32
600	PC Medium	68	40	32
Total		**344**	**224**	**200**
Male Housing M - Dorm	**Use**	**Avail Beds**	**BSCC Cap**	**Beds Occup 1/27/26**
M – Dorm	GP Minimum/Laundry Workers	106	59	85
Total		**106**	**59**	**85**
TOTAL MALES (Female Housing KBF Temporary)		**1,890**	**1,277**	**1,474**
Female Housing (SLF) Facility	**Use**	**Avail Beds**	**BSCC Cap**	**Beds Occup 1/27/26**
Kinya – A Dorm	GP Minimum	92	32	78
Golden Poppy – B Dorm	GP, Reentry, Workers, Min	66	32	0
Camilla – C DORM	GP Medium	70	32	56

Ramona Hall	JBCT, IOP, Restriction, GP (Min/Med)	40	24	19
Total	160 beds temporarily occupied by females KBF	**268**	**120**	**153**
TOTAL FEMALES		**268**	**120**	**153**

Temporary Housing (RBF) Facility	Use	Avail Beds	BSCC Cap	Beds Occup 1/27/26
West Wing Dorm	Temporary Housing		80	0
Core	Temporary Housing		5	0
East Wing	Temporary Housing		115	0
North Wing	Temporary Housing		28	0
Total Temporary Housing			228	0
TOTALS NON-RATED BEDS		**2,158**	**1,625**	**1,627**
Male: Intake Holding	Booking	25		
Female: Intake Holding	Booking	20		
MHU – Medical	Medical	21		21
TOTAL NON-RATED BEDS		**66**		**21**
Facility Total Rates & Non-Rated		**2,224**	**1,625**	**1,648**

General Issues

- The campus is located adjacent to flood plains with only one available route in and out that becomes impassable during flood events.
- RCCC originally housed a low-security county sentenced population—the facility now houses a primarily higher security pretrial population.
- Overall the campus has grown organically and does not have a clear organizational diagram.
- Numerous buildings at RCCC will reach physical obsolescence over the next 3–10 years.
- Many buildings also have functional deficiencies such as lack of necessary support space, accessibility, and Prison Rape Elimination Act (PREA) compliance.

Acronyms	
ADP1	Administrative Segregation Phase 1 (highest risk)
ADP2	Administrative Segregation Phase 2 (moderate risk)
APU	Acute Psychiatric
CNAP	Critical Needs Assessment Program
CRM	Chronic Medical
EASS	Early Access and Stabilization Services
EOP	Enhanced Outpatient Program
IOP	Intensive Outpatient Program
IST	Incompetent to Stand Trial
JBCT	Jail-Based Competency Treatment
OPP	Outpatient Psychiatric Program
RH	Restricted Housing
SITHU	Suicidal Inmate Temporary Housing Unit